Form CHAR500

This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497,

Annual Filing for Charitable Organizations

New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271

2012

Open to Public Inspection

CHAR 010 and CHAR 006)	http://www.charitiesnys.com		inopeodion.
1. General Information			
a. For the fiscal year beginn	(mm/dd/yyyy) 07/01/2012 and ending $(mm/dd/yyyy)$	06/30/20	013
b. Check if applicable for NYS: Address change	c. Name of organization		d. Fed. employer ID no. (EIN) 13-5562202
Name change Initial filing	COMMUNITY SERVICE SOCIETY OF NEW	YORK	e. NY State registration no. $00-40-48$
Final filing Amended filing	Number and street (or P.O. box if mail not delivered to street address) 105 EAST 22ND STREET	Room/suite 301	f. Telephone number 212 614-5334 334
NY registration pending	City or town, state or country and ZIP + 4 NEW YORK, NY 10010-5413		g. Email

	NEW YORK,	NY 100	10-5413		
27					
2. Certification - T	wo Signatures Required			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
			ort, including all attachments, and to the b State of New York applicable to this repo	rt.	=11114
a. President or Autho	orized Officer Signature	Jee	DAVID R. JONES Printed Name	PRESID	ENT Date
. 0.1 (5) 110"	92	Ray	JEFFREY F. RIZZO	CFO 5	1/24/14
b. Chief Financial Off	icer or Treas. Signature		Printed Name	Title	Date
3. Annual Report I	Exemption Information				
a. Article 7-A ann Check ≱	\$25,000 and the organization contributions during this fish	Y State (includence) on did not engaged cal year.	s and dual registrants) Jing residents, foundations, corporations, age a professional fund raiser (PFR) or fu	nd raising counsel (FR	C) to solicit
	federated fund, United Way	or incorporate or substantial	ed community appeal <u>and</u> contributions f ly all of its contributions from one govern	rom other sources did	not exceed
b. EPTL annual re Check ▶	eport exemption (EPTL registra if gross receipts did not exc		registrants) a <u>nd</u> assets (market value) di <mark>d</mark> not exceed	\$25,000 at any time d	uring this fiscal year.
ACTUAL STREET, SECURISH STREET, SECURISH SECURIS	s under both laws, simply comple	te part 1 (Genera	on under the one law under which they are reg al Information), part 2 (Certification) and part 3 ollowing schedules and <u>do not</u> submit an	(Annual Report Exemptio	n Information) above.
4. Article 7-A Sch	edules				
a. Did the organizati			pove, complete the following for this fisca unsel or commercial co-venturer for fund raisi	50	X Yes* No
	ion receive government contributi lete Schedule 4b.	ions (grants)?			X Yes* No

5. Fee Submitted: See last page for summary of fee requirements.			
Indicate the filing fee(s) you are submitting along with this form: a. Article 7-A filing fee b. EPTL filing fee c. Total fee	\$ _ \$ _ \$ _	25. 1,500. 1,525.	Submit only one check or money order for the total fee, payable to "NYS Department of Law"

6. Attachments - For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments



Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)
If you checked the box in question 4.a. on page 1, complete the following schedule for each PFR, FRC or CCV that the organization engaged for fund raising activity in NY State:
1. Type of fund raising professional (FRP):
Professional fund raiser
Fund raising counsel
Commercial co-venturer 2. Name of FRP:
MARIO OI FINE.
SANKY COMMUNICATIONS, INC. HARRY LYNCH, CEO
Number and street (or P.O. box if mail is not delivered to street address):
589 8TH AVENUE 10TH FLOOR
City or town, state or country and ZIP + 4:
NEW YORK, NY 10018
3. FRP telephone number:
212-868-4300
4. Services provided by FRP (provide description):
DESIGNS AND SUPERVISES DIRECT MAIL PROGRAM.
5. Compensation arrangement with FRP (provide description): PRE-AGREED UPON MONTHLY FEE AS STATED IN CONTRACT BETWEEN THE AGENCY
AND FUNDRAISER.
6. Dates of contract 07/01/2012 through 06/30/2013
(rnm/dd/yyyy) (mm/dd/yyyy)
7. Amount paid to FRP \$ 84,366.
0 0x,300s
8. If services were provided by a CCV, did the CCV provide the charitable organization with the interim report(s) required by §§ 173-a. 3 of the
Executive Law?

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2 268461 01-21-13 **CHAR500 - 2012**

Sc	hedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)
If yo	ou checked the box in question 4.a. on page 1, complete the following schedule for each PFR, FRC or CCV that the organization engaged for d raising activity in NY State:
1.	Type of fund raising professional (FRP):
	Professional fund raiser
	Fund raising counsel
	Commercial co-venturer
2.	Name of FRP:
	PROJECTS PLUS, INC
	Number and street (or P.O. box if mail is not delivered to street address):
	145 WEST 45TH STREET
	City or town, state or country and ZIP + 4:
	NEW YORK, NY 10036
3.	FRP telephone number:
	2129970100
4.	Services provided by FRP (provide description): SPECIAL FUNDRAISING EVENT
	Compensation arrangement with FRP (provide description):
	PRE-AGREED UPON FEE SCHEDULE AS STATED IN CONTRACT BETWEEN THE AGENCY
	AND FUNDRAISER.
6.	Dates of contract 07/01/2012 through 06/30/2013
	(mm/dd/yyyy) (mm/dd/yyyy)
7.	Amount paid to FRP \$ 61,085.
	If services were provided by a CCV, did the CCV provide the charitable organization with the interim report(s) required by §§ 173-a. 3 of the
Exe	cutive Law?

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^{2 268461 01-21-13} **CHAR500 - 2012**

Schedule 4b: Government Contributions (Grants)

If you checked the box in question 4.b. on page 1, complete the following schedule for each government contribution (grant). Use additional copies of this page if necessary to list each government contribution (grant) separately.

Government Agency Name	Grant Amount
CORPORATION FOR NATIONAL AND COMMUNITY SERVICE	\$ 672,337.
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES	\$ 6,909,688.
U.S. DEPARTMENT OF JUSTICE	\$ 6,909,688. \$ 65,610.
NEW YORK STATE OFFICE FOR THE AGING (SOFA)	\$ 137,698.
NEW YORK CITY BOARD OF EDUCATION	\$ 220,000.
NEW YORK CITY COUNCIL	\$ 47,209.
NEW YORK CITY DEPARTMENT FOR THE AGING (DFTA)	\$ 15,500.
NEW YORK CITY DEPARTMENT OF PROBATION	\$ 119,000.
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T	\$ 0.107.040
Total Government Contributions (Grants)	\$ 8,187,042.

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^{3 268471 01-21-13} **CHAR500 - 2012**

5. Fee Instructions

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

Organization's Registration Type		Fee Instructions		
0	Article 7-A	Calculate the Article 7-A filing fee using the table in part a below. The EPTL filing fee is \$0.		
8	EPTL.	Calculate the EPTL filling fee using the table in part b below. The Article 7-A filling fee is \$0.		
•	Dual	Calculate both the Article 7-A and EPTL filing fees using the tables in parts a and b below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a single check or money order for the total fee.		

a) Article 7-A filing fee

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

b) EPTL filing fee

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

6. Attachments - Document Attachment Check-List

Check the boxes for the documents you are a	ittaoning.		
For All Filers			
Filling Fee X Single check or money order payable	sta "NVC Department of Levil		
Copies of Internal Revenue Service Forms X IRS Form 990	IRS Form 990-EZ	IRS Form 990-PF	
X All required schedules (including Schedule B) X IRS Form 990-T	All required schedules (including Schedule B) IRS Form 990-T	All required schedules (including Schedule B) IRS Form 990-T	
Additional Article 7-A Document Attachr	nent Requirement		
Independent Accountant's Report			
X Audit Report (total support & revenue more than \$250,000)			
Review Report (total support & reven			
No Accountant's Report Required (to	tal support & revenue not more than \$100,000)		

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4 268481 01-21-13 CHAR500 - 2012

Tax Dept

From:

Iris M. Bonilla [Iris.Bonilla@ag.ny.gov] on behalf of Charities Extensions

[Charities.Extensions@ag.ny.gov]

Sent:

Thursday, January 30, 2014 5:05 PM

To:

Tax Dept

Subject:

Community Service Society of New York Regis #00-40-48 EIN: 13-5562202

We have received and are granting your request for an extension of time to file an annual financial report. If upon further review your organization is found to be delinquent in filing an annual report for any year prior to that for which the extension is requested, you will be contacted under separate cover.

Please make sure your organization is properly registered and up to date with filings by using our searchable registry at www.CharitiesNYS.com. Allow time for your extension request to be posted.

<u>File Online</u>: Visit <u>Form990.org</u> to learn how to file your IRS Form 990 and New York Form CHAR500 together electronically.

<u>Proposed Rule Change</u>: On January 8, 2014, the Office of the Attorney General proposed <u>new rules</u> for submitting a request for an extension of time to file a CHAR500 Annual Filing. The new rule will provide for the submission of electronic or email requests only, requests by mail and IRS Form 8868 will no longer be required. Additionally, organizations may request an extension of time to file of up to 180 days. Two separate 90 extensions will no longer be required. It is anticipated that the rules will be in effect late February. New instructions will be posted on online at www.charitiesNYS.com at that time.

Thank you,

Charities Bureau Registration Section

From: Tax Dept [mailto:TaxDept@loebandtroper.com]

Sent: Thursday, January 30, 2014 2:19 PM

To: Charities Extensions

Subject: Community Service Society of New York Regis #00-40-48 EIN: 13-5562202

State of New York Charities Bureau 120 Broadway New York, NY 10271 Charities.extensions@ag.ny.gov

Dear Sir/Madame:

As the auditors for the above-referenced June 30 2013 organization, we respectfully request an extension of time to file the New York State CHAR500. We are requesting an additional three-month extension to May 15, 2014. Attached is a copy of Part II of Federal Form 8868 in which an additional 3-Month Extension was also requested.

As the audit of the organization's books and records was not completed in time to file a complete and accurate return, it is anticipated data will be available prior to the return's final due date.

Thank you for your help in this matter.

Sincerely,

Loeb & Troper LLP

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service The organization may have to use a copy of this return to satisfy state reporting requirements. Open to Public Inspection

A	For t	he 2012 calendar year, or tax year beginning $$	ending J	UN 30, 2013	3
В	Check applica	if C Name of organization		D Employer identif	ication number
	Add	ress COMMUNITY SERVICE SOCIETY OF NEW YORK			
	Nar	ne Doing Business As	***************************************	13-5	5562202
	Initi		Room/suite	E Telephone numbe	
	Ten	Pin 105 EAST 22ND STREET	301		614-5334
	Ame	City, town, or post office, state, and ZIP code		G Gross receipts \$	46,285,852.
L		Ilca- ding NEW YORK, NY 10010-5413		H(a) is this a group r	etum
	Pull	F Name and address of principal officer. DAVLD R. JUNES		for affiliates?	Yes X No
		SAME AS C ABOVE	 1	H(b) Are all affiliates in	cluded? Yes No
		xempt status: X 501(c)(3)	or 527	1	ı list. (see instructions)
		site: ► WWW.CSSNY.ORG		H(c) Group exemption	
		of organization: X Corporation Trust Association Other ► Summary	L Year	of formation: 1939	M State of legal domicile; NY
_	T 4	· · · · · · · · · · · · · · · · · · ·	CURINI	TRO	
Activities & Governance	1	Briefly describe the organization's mission or most significant activities:	SCREDU	LE O	
Ĕ	2	Check this box 🕨 🛄 if the organization discontinued its operations or dispos	sed of more	than 25% of its net a	ssets.
Š	3			з	34
৵	4	Number of independent voting members of the governing body (Part VI, line 1b)	************	4	34
es Se	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	140
Ĭξ	6	Total number of volunteers (estimate if necessary)		6	3035
Ą	7 :	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34	*********		-250.
	_			Prior Year	Current Year
활	В	Contributions and grants (Part VIII, line 1h)		11,244,184.	13,817,729.
Revenue	9	Program service revenue (Part VIII, line 2g)		178,668.	157,705.
ä	10	Investment Income (Part VIII, column (A), lines 3, 4, and 7d)		5,689,633.	7,060,797.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		165,615.	369,844.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		17,278,100. 242,415.	21,406,075.
	14	Grants and similar amounts paid (Part IX, column (A), lines 1-3) Benefits paid to or for members (Part IX, column (A), line 4)		242,413.	422,499.
w		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	······	13,416,312.	13,378,590.
Expenses	16:	Professional fundraising fees (Part IX, column (A), line 11e)		80,496.	84,366.
ě,		Total fundraising expenses (Part IX, column (D), line 25) 950, 20	18. H	0072301	0 1 7 5 0 0 1
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		8,841,369.	10,655,224.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	******	22,580,592.	24,540,679.
	19	Revenue less expenses. Subtract line 18 from line 12		-5,302,492.	
58	20 21 22			ginning of Current Year	End of Year
State	20	Total assets (Part X, line 16)	1 1	58,753,030.	164,364,997.
A P	21	Total liabilities (Part X, line 26)		16,001,534.	11,444,451.
		Net assets or fund balances. Subtract line 21 from line 20	1	42,751,496.	152,920,546.
<u></u>	art II				
		natties of perjury, I declare that I have examined this return, including accompanying schedules			y knowledge and belief, it is
true	, corre	ect, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.	
~.		Signature of officer	<u> </u>	Date 4/1	18/14
Sig		DAVID R. JONES, PRESIDENT		Date P	/
He	16	Type or print name and title	***************************************		
			1	ate Check	PTIN
Pai	ď	Print/Type preparer's name FREDERICK H. ROTHMAN Preparer's signature		4/19/14	D0107F077
	parer	Firm's name LOEB & TROPER LLP			P01275277 13-1517563
	Only	Firm's address 655 THIRD AVENUE, 12TH FLOOR		(-) THITE SERV	TO TOTIOO
	•	NEW YORK, NY 10017		Phone ло. (212) 867-4000
Ma	y the	IRS discuss this return with the preparer shown above? (see instructions)		1. 1010 10. 1	X Yes No
	001 12		ons.		Form 990 (2012)

Pa	n 990 (2012) COMMUNITY SERVICE SOCIETY OF NEW YORK 13-5562202 Page rt III Statement of Program Service Accomplishments
4	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990 EZ? 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?
	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 conice reported
4a	(Code:) (Expenses \$ 7,502,357. Including grants of \$ 34,688.) (Revenue \$ SEE SCHEDULE O
	DEE SCHEDOLE O
4b	(Code:) (Expenses \$ 2,347,541. including grants of \$ 168,521.) (Revenue \$ SEE SCHEDULE O
	DIE DUMBOUS O
łc	(Code:) (Expenses \$ 1,105,522. Including grants of \$) (Revenue \$
4d	Other program services (Describe in Schedule O.) (Expenses \$ 7,404,773 \cdot including grants of \$ 219,290 \cdot) (Revenue \$ 158,669 \cdot)
le	Total program service expenses \(\begin{array}{c} 18,360,193. \\\ \end{array}
2002	Form 990 (201
?- 10-	
	4

COMMUNITY SERVICE SOCIETY OF NEW YORK 13-5562202 Page 2

Form 990 (2012) COMMUNITY SE 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)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4	<u> X</u>	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3		
~	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
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?	9		X
10	If "Yes," complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		·V-	
100	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	X	
(∠a	Schedule D, Parts XI and XII	12a		x
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	4.5		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	15		Δ.
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	<u>'`</u>		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	<u> </u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		[

| COMMUNITY | SERVICE | Part IV | Checklist of Required Schedules (continued)

21 Old the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, commin (A), lies 17 If "Yes," complete Schedule (, Parts and II) 22 If X 23 Old the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), lies 21 If "Yes," complete Schedule (, Parts I and II) 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 componisated unphysioses? If "Yes," complete Schedule Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and complete Schedule IX II "Yes," asswer lines 24 th through 24 and 14 and				Yes	No
column (A), line 27 if "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization asswer "Yes" to Part VI, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, tusteos, key employees, and highest compensated employees? If "Yes," complete Schedule I, Part II in III in	21		21	X	
23 Did the organization answer "Yes" to Part Vii, Section A, Inc 3, 4, or 8 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes, complete Schedule I and the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. If "Yes", go to line 25 24a	22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	22	Х	
Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 5 Did the organization maintain an escrow account other than a refunding eacrow at any time during the year to defease any tax-exempt bonds? 4 Did the organization maintain an escrow account other than a refunding eacrow at any time during the year to defease any tax-exempt bonds? 4 Did the organization maintain an escrow account other than a refunding eacrow at any time during the year to defease any tax-exempt bonds? 4 Did the organization and as an "on behalf of" issuer for bonds outstanding at any time during the year? If "executed the complete Schedule person of the organization engage in an excess benefit transaction with a disqualified person during the year? If "executed the Legal If the organization aware that it engaged in an excess benefit transaction with a disqualified person or a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 e527 If "Yes," complete Schedule L, Part II	23				
stated day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 b Did the organization maintain an essrow account other than a refunding secrow at any time during the year to defease any tax-exempt bonds? d Did the organization maintain an essrow account other than a refunding secrow 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? d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I., Part II 25a Is the organization aware that it engaged in an excess benefit transaction with a disqualified person outstanding as of the end of the organization 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 erz? If "Yes," complete Schedule I., Part III 25b X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key omployee, substantial contributor or employee thereof, a grant selection committee ember, or to a 5% controlled entity or family member of any of these persons? If "Yes," complete Schedule I., Part III 28 Was the organization a party to a business transaction with one of the following parties (see Schedule I., Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule I., Part IV 28b X 29 Did the organization aparty to a business transaction with one of the following parties (see Schedule I., Part IV 29 Did the organization receive rore than 25% of our parties expended in the party in the party in member of a curr		Cabachile I	23	x	•
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		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37)	X
	30		38	Х	

Form 990 (2012)

Form 990 (2012) COMMUNITY SERVICE SOCIETY OF NEW YORK

[Part V] Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V					
*****			***************************************		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	69	3,840,84		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0	North Section 1		
¢	Did the organization comply with backup withholding rules for reportable payments to vendors and r		ble gaming			
	(gambling) winnings to prize winners?			1c	2011/2012/2015	A STATE OF
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				A43558	
	filed for the calendar year ending with or within the year covered by this return	2a	140			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	·		2b	Х	Sections.
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		***************************************	1910 (S)		Ve 9/55
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За	Х	Paris Proces
	16 IV/no II had it filled a fines COO T footbill and C II Male II amended as a conferential in Contract to C		***************************************	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other		***************************************			
	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		Х
b	If "Yes," enter the name of the foreign country: ▶			3543	ASSES.	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nts.			
5a	When the property of the control of			5a	25,1523,67	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					
	any contributions that were not tax deductible as charitable contributions?	_		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribute					
	were not tax deductible?		3	6b		
7	Organizations that may receive deductible contributions under section 170(c).		,,,		4334	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	rovided to the payor?	7a	Х	1.7.5474
b	16 IIV II did Reconser 5-6-2 and 56 the decons of Provider 6 th 18 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2			7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?	,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	ontrac	:t?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file February	orm 88	199 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz	ation fi	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.				330	
а	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations, Enter:				\$ 1	
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:	1				Mill.
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				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	?	12a		
	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.			20193	्रेक्ष	
a	Is the organization licensed to issue qualified health plans in more than one state?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1				
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
			*************************	14a		X
a	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	e O		14b	000	(00:0:
				rorm	990	(2012)

Form 990 (2012) 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 to any question in this Part VI	***************************************			X
Sec	tion 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	34	10.44	ARAM
	If there are material differences in voting rights among members of the governing body, or if the governing		1000		
	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	34		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship				
	•	•	193,830	対象的性	Х
3			2		
3	Did the organization delegate control over management duties customarily performed by or under the				۹,,
4	of officers, directors, or trustees, or key employees to a management company or other person?		3	ļ	X
4	Did the organization make any significant changes to its governing documents since the prior Form 9			<u> </u>	X
5	Did the organization become aware during the year of a significant diversion of the organization's ass				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 ap	point 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, si	tockholders, or			
	persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the yea	r by the following:		NAM.	
a	The governing body?		8a	Х	
b	Each committee with authority to act on behalf of the governing body?			Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read	ched at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue Code.)	<u></u>		
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	163	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	antere affiliatee			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	aprois, aimates,	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body			Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	/ before filling the form	? 11a	A.	
12a			Y 3	Ţ	WHI.
b	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
-	, and the state of	to conflicts?	12b	X	~~~~~
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Ye				
40	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 approva	I 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	Х	
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).				ijele.
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	nent with a			
	taxable entity during the year?		16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	e its participation	485		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ				
	exempt status with respect to such arrangements?		16b	1,5 N 1,	Sign No. 14
Sec	tion C. Disclosure		100		·····
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/a)/3\e an	ha availab	Io	
	for public inspection. Indicate how you made these available. Check all that apply.	(00011011 001 (0)(0)3 011	iy) avallal	16	
	X Own website Another's website X Upon request Other (explain)	in Schodula Ol			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, coil				
10		innet of interest policy	and finar	icial	
20	statements available to the public during the tax year.	al or or or or death			
20	State the name, physical address, and telephone number of the person who possesses the books an ${\tt JEFFREY}$ F. ${\tt RIZZO}$, ${\tt CFO}$ - ${\tt 212-254-8900}$	a records of the orgar	nzation:	·	
	105 EAST 22ND STREET, NEW YORK, NY 10010				
232000 12-10-	TOO DAOL AAND OLKEDL, NEW YORK, NY LUULU	· · · · · · · · · · · · · · · · · · ·			
12-10-	12		Form	990	2012)

Form 990 (2012) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question 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 organizatio		org.	aniza			mpe	nsat			
(A)	(B)	(C) Position			,		(D)	(E)	(F)	
Name and Title	Average		not c	check	more	than		Reportable	Reportable	Estimated
	hours per week		t, unfe icer ar					compensation from	compensation	amount of
	(list any	ğ	Π	Π			<u> </u>	the	from related organizations	other compensation
	hours for	trustee or director				- 22		organization	(W-2/1099-MISC)	from the
	related	tee or	stee			nsak		(W-2/1099-MISC)	(organization
	organizations	trus	nai tre		оуче	e .		,		and related
	below	Individual 1	institutional trustee	 	кеу етрюуее	loyee	ueć			organizations
	line)	In di	lest	Officer	Key	Highest compensated employee	'n			
(1) JOSEPH R. HARBERT, PH.D	1.00]		1						
CHAIRPERSON		X		X				0.	0.	0.
(2) DEBORAH M. SALE	1.00									
VICE CHAIRPERSON		X		Х				0.	0.	0.
(3) RALPH DACOSTA-NUNEZ	1.00						·			
TREASURER		X		X				0.	0.	0.
(4) DONALD W. SAVELSON, ESQ.	1.00									·····
SECRETARY		X		Х				0.	0.	0.
(5) TERRY AGRISS	1.00					 				
TRUSTEE		X						0.	0.	0.
(6) SYLVIA E. DI PIETRO, ESQ.	1.00	<u> </u>				†				
TRUSTEE		X				-		0.	0.	0.
(7) JOSEPH J. HASLIP	1.00	İ				1				
TRUSTEE		x						0.	0.	0.
(8) NICHOLAS A. GRAVANTE JR	1.00			 		 				
TRUSTEE	***************************************	X						0.	0.	0.
(9) REGAN KELLEY ORILLAC	1.00	!								
TRUSTEE		X						0.	0.	0.
(10) KEN SUNSHINE	1.00	 		_						
TRUSTEE		X						0.	0.	0.
(11) JUDY CHAMBERS	1.00	-		 	******	 	~			V 8
TRUSTEE		Х						0.	0.	0.
(12) LEISLE LIN	1.00				*********					U a
TRUSTEE		X						0.	0.	0.
(13) MICHAEL HORODNICEANU, PH.D.	1.00					-				V .
TRUSTEE		x						0.	0.	0.
(14) JOYCE L. MILLER	1.00					ļ	Patrick States	· · · · · · · · · · · · · · · · · · ·	V •	V »
TRUSTEE		x						0.	0.	0.
(15) KELLY O'NEILL LEVY, ESQ.	1.00		-	-		\vdash		0 •	0.	U•
TRUSTEE		x						0.	0.	0
(16) FLORENCE H. FRUCHER	1.00	 	-					V+	U •]	0.
TRUSTEE		х						0.	0.	^
(17) MELISSA CURTIN	1.00	 	\vdash	 		 		V •	V •	0.
TRUSTEE	2.00	Х						0.	0.	0
232007 12-10-12			L	L		L	J	V • I	V •]	0.

232007 12-10-12

Form 990 (2012) COMMUNI Part VII Section A. Officers, Directors, Ti								NEW YORK	13-5562	202	Page
(A)	(B)	,	,003	, <u>a, , ,</u>		9110	310	(D)	(E)	()	:1
Name and title	Average hours per week	box	not c t, unle cer an	Pos heck ss pe	ition more rson	s bot	h an	Reportable compensation from	Reportable compensation from related	Estin amou oti	nated int of
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу етріоуев	Highest compensated amployea	former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compe from organi and re organia	the zation elated
(18) MARGARITA ROSA ESQ. TRUSTEE	1.00	x						0.	0.		0
(19) MARLENE SANDERS TRUSTEE	1.00										
(20) CAROL SHERMAN ESQ.	1.00	X						0.	0.		0
TRUSTEE		Х						0.	0.		0
(21) BARBARA NEVINS TAYLOR TRUSTEE	1.00	х						0.	0.		0
(22) DAVID POLLAK TRUSTEE	1.00	X						0.	0.		0
(23) MARLA EISLAND SPRIE TRUSTEE	1.00	x						0.	0.		0
(24) STEVEN BROWN	1.00						_				U
TRUSTEE	1 00	X						0.	0.		0
(25) MAGDA JIMENEZ TRAIN, ESQ. TRUSTEE	1.00	x						0.	0.		0
(26) MARK LIEBERMAN TRUSTEE	1.00	X						0.	0,		^
1b Sub-total		<u>. </u>	Щ,	L				0.	0.		$\frac{0}{0}$
 Total from continuation sheets to Part 	VII, Section A							2,159,767. 2,159,767.	0. 0.	264,	705
d Total (add lines 1b and 1c) 2 Total number of individuals (including but compensation from the organization	t not limited to th						no re			264,	705 1
3 Did the organization list any former offic		icto	o ko		anla	Voo	24	nisheat componented o		Ye	
line 1a? If "Yes," complete Schedule J fo								ilgnest compensated e		3	Х
4 For any individual listed on line 1a, is the and related organizations greater than \$	sum of reportab	le co	omp	ensa	ition	and	doth	er compensation from	the organization	4 X	
5 Did any person listed on line 1a receive of rendered to the organization? If "Yes," c	or accrue compe	nsat	íon f	rom	any	unr	elate	ed organization or indivi	dual for services	5	T _x
Section B. Independent Contractors					***********	nar-vrances	**********			<u> </u>	
Complete this table for your five highest the organization. Report compensation f										ation fron	1

(A) Name and business address	(B) Description of services	(C) Compensation
COLAZO FLORENTINO & KELL, LP		
747 3RD AVENUE, NEW YORK, NY 10017	LEGAL ADVISOR	332,060.
BANK OF NEW YORK MELLON ASSET SERVICING		
P.O. BOX 371791, PITTSBURGH, NY 15251	INVESTMENT ADVISOR	255,520.
METIS ASSOCIATES INC.	CHA WEBSITE	***************************************
	CONSULTAND AND MAINT	164,170.
LOEB & TROPER LLP		
	AUDITING	143,308.
PATTON BOGGS, LLP, 2550 M. STREET, NW,		
WASHINGTON, DC 20037-1350	LOBBYIST	118,521.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization > 7		
SEE PART VII, SECTION A CONTINUATION SH	EETS	Form 990 (2012)
12-10-12		,

Part VII Section A. Officers, Directo	ors, Trustees, Key E	mplo	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A)	(B)			(C)			(D)	(E)	(F)
Name and title	Average	/.		Posi			. I. A	Reportable	Reportable	Estimated
	hours per	(C.	heck	all	tnat	app	iy) r	compensation	compensation	amount of
	week					20		from the	from related organizations	other compensation
	(list any	į				yoldr		organization	(W-2/1099-MISC)	from the
	hours for	Girec				ed en		(W·2/1099-MISC)	(1, 2, 1000 111100)	organization
	related	tee o	ustee			erisat				and related
	organizations	atte	nat te		loyee	comp				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Юттег			
	line)	F	ě.	E G	32	풀	Œ			***************************************
(27) CAROL L. O'NEALE	1.00	١							_	_
TRUSTEE		Х				<u> </u>		0.	0.	0
(28) RICHE T. MCKNIGHT	1.00	ļ								
TRUSTEE		X				<u>L</u>		0.	0.	0
(29) MICHELE WEBB	1.00					•			_	
TRUSTEE		X						0.	0.	0
(30) MICAH C. LASHER	1.00	ļ <u>.</u> _	,					_	_	
TRUSTEE		X			_			0.	0.	0.
(31) ABBY M. WENZEL	1.00									
TRUSTEE		X						0.	0.	0 .
(32) JEFFREY J. WEAVER	1.00								_	
TRUSTEE		X						0.	0.	0 .
(33) BETSY GOTBAUM	1.00	ا ۔۔ ا						_		_
TRUSTEE	1 00	Х						0.	0.	0.
(34) MARK WILLIS	1.00	٠,,								_
TRUSTEE		X				ļ		0.	0.	0.
(35) DAVID R. JONES, ESQ.	35.00	_							_	
PRESIDENT/CEO		↓		Х				639,299.	0.	77,944.
(36) STEVEN L. KRAUSE	35.00	-						540 400		
EXECUTIVE V.P./COO	2 00	↓		X				512,432.	0.	74,117
(37) JEFFREY F. RIZZO	35.00	-		,,				107 014	•	
CHIEF FINANCIAL OFFICER	25 00	<u> </u>		X				187,014.	0.	37,885
(38) ELISABETH BENJAMIN	35.00	-						100 004		
VP HEALTH INITIATIVES	3= 00	ļ				X		198,604.	0.	18,365
(39) ALINA MOLINA	35.00	-						460 505	^	
DIR VOL INITIATIVES		₩.	_			X		163,587.	0.	43,560
(40) NANCY RANKIN	35.00	-				,,		164 500	•	
VP POLICY	25 00	┼	_			X		164,592.	0.	4,858
(41) JUDITH WHITING GENERAL COUNSEL	35.00	-				۷,,		161 176	0	
(42) MELISSA KOSTOVSKI	35 00					X	_	161,176.	0.	5,346
(42) MELISSA KOSTOVSKI DIR DEVELOPMENT	35.00	-				x		122 062	^	0 600
DIK DEARDONEME		 				Δ.		133,063.	0.	2,630.
	****	-								
						ļ				
		1								
	***************************************					ļ			****	***************************************
	FF824AAA 1514A F-4	-								
		┼	ļ			ļ				
		-								
		Щ	L	L		L	L			
Cotol to Dout VIII. Continue A. Kennya								2 150 767		264 225
otal to Part VII, Section A, line 1c								2,159,767.		264,705

Form 990 (2012) COMMUNI
Part VIII Statement of Revenue

		Check if Schedule O cont	tains a response	to any question	in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a	1,277,283.				SATERIAL
Sra Tou	b	Membership dues	1b					
S, (С	Fundraising events	1c	305,850.				
Giff			1d					
ž.	e	Government grants (contribut		8,187,042.				
tion S. S.	f	All other contributions, gifts, gran	ts, and					
ig #		similar amounts not included abo	ve 1f	4,047,554.				
g g	g	Noncash contributions included in lines	1a-1f: \$					
<u>0 8</u>	h	Total. Add lines 1a-1f		>	13,817,729.			
				Business Code				
e .	2 a	PROGRAM SERVICE FEES O	THER	900099	97,701.	97,701.		
er.	b	PROGRAM SERVICE FEES C	BS	900099	60,004.	60,004.		
Program Service Revenue	C							
ran Rev	d							
rog	е							
D.	f	All other program service reve	nue					
	9	Total. Add lines 2a-2f		>	157,705.			SEED AND SEC
	3	Investment income (including						
		other similar amounts)			3,710,007.			3,710,007.
	4	Income from investment of ta	,					
	5	Royalties		<u>,</u>				
			(i) Real	(ii) Personal				
	6 a							
		1						
	d	Net rental income or (loss)		>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	28,016,148.					
	b	Less: cost or other basis						
		and sales expenses	24,665,358.					
	C	Gain or (loss)	3 350 790.					
		Net gain or (loss)		<u>,</u>	3,350,790.			3,350,790.
e l	8 a	Gross income from fundraising						
venue		including \$ 305						
Re		contributions reported on line	1c). See					
Other Re		Part IV, line 18		478,350.				
ਰੋ		Less: direct expenses		214,419.				
		Net income or (loss) from fund	-	<u></u>	263,931.			263,931.
	9 a	Gross income from gaming ac						
		Part IV, line 19						
İ			b	L				
		Net income or (loss) from gam		·····				
	io a	Gross sales of inventory, less						
ļ		and allowances	a					
		Less: cost of goods sold						
ŀ	С	Net income or (loss) from sale		(**************************************		***************************************	***************************************	
}	44 -	Miscellaneous Revenu ADVERTISEMENT INCOME	<u>e</u>	Business Code	The second second second second			
	11 a			541800	104,949.		104,949.	
	b	SUBSCRIPTION INCOME	·	541800	964.	964.		
	C	A H. a. Ela annual		***************************************				
		All other revenue		L	105.012			
		Total. Add lines 11a-11d Total revenue. See instructions.			105,913.			
232009	12	rotalitaring. See hist acaons.			21,406,075.	158,669.	104,949.	7,324,728.

Sect	ion 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. All oti	ner organizations must co	omplete column (A).	
	Check if Schedule O contains a respo	nse to any question in th			
	not include amounts reported on lines 6b, 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 governments and				
	organizations in the United States. See Part IV, line 21	61,273.	61,273.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22	361,226.	361,226.		
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,481,375.	302,168.	1,118,773.	60,434.
6	Compensation not included above, to disqualified			······································	······································
	persons (as defined under section 4958(f)(1)) and		:		
	persons described in section 4958(c)(3)(8)				
7	Other salaries and wages	7,519,298.	5,989,690.	1,139,342.	390,266.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	88,987.	55,279.	31,808.	1,900.
9	Other employee benefits	3,715,372.	2,659,554.	874,566.	181,252.
10	Payroll taxes	573,558.	476,507.	63,537.	33,514.
11	Fees for services (non-employees):				33,34.4
	Management				
b	Legal	494,295.		494,295.	······································
	Accounting	154,000.	4,000.	150,000.	
		237,177.	$\frac{1}{237,177}$	130,000.	
u 0	Lobbying Professional fundraising services. See Part IV, line 17	84,366.	reconstitution	and the second of the second of the second	94 366
f	Investment management fees	316,555.		316,555.	84,366.
g	ere in the contract of the con	320,333.		310,333.	
9		6,329,141.	6 100 no4	150 050	42 050
	column (A) amount, list line 11g expenses on Sch O.)	0,343,141.	6,128,024.	158,058.	43,059.
12	Advertising and promotion	819,639.	400 400		
13	Office expenses	40,005.	480,482.	274,879.	64,278.
14	Information technology	40,005.	16,002.	16,002.	8,001.
15	Royalties	1 050 017		104 5561	
16	Occupancy	1,058,817.	808,220.	194,761.	55,836.
17	Travel	321,025.	210,525.	109,696.	804.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	480,093.	344,402.	121,238.	14,453.
20	Interest				
21	Payments to affiliates	<u> </u>			
22	Depreciation, depletion, and amortization	256,026.	189,888.	54,093.	12,045.
23	Insurance	141,874.	29,205.	112,669.	
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 0.)				
a	BAD DEBT	6,577.	6,571.	6.	
b		-/~//			
c		**************************************			
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	24,540,679.	18,360,193.	5,230,278.	050 000
26	Joint costs. Complete this line only if the organization	43,330,017.	**************************************	3,430,4/0.	950,208.
40					
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720) 12-10-12				Form 990 (2012)

Form 990 (2012)
Part X Balance Sheet

Fa	ILA	Balance Sheet					
		Check if Schedule O contains a response to any	quest	ion in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,688,329.	1	788,790.
	2	Savings and temporary cash investments			2,565,265.	2	2,610,972.
	3	Pledges and grants receivable, net			2,201,279.	3	3,063,253.
	4	Accounts receivable, net		162,362.	4	178,476.	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa	ited en	nployees. Complete			
		Part II of Schedule L		***************************************		5	
	6	Loans and other receivables from other disqualit				210-22 X X X X X X X X X X X X X X X X X X	
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sect					
Ø		employees' beneficiary organizations (see instr).				6	
Assets	7	Notes and loans receivable, net	21,639.	7	30,305.		
As	8	Inventories for sale or use	************************	3,945.	8	3,956.	
	9	Prepaid expenses and deferred charges		59,483.	9	61,878.	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D		3,725,340.			
	b	Less: accumulated depreciation		1,693,918.	2,108,839.	10c	2,031,422.
	11	Investments - publicly traded securities			109,198,283.	11	113,553,102.
	12	Investments - other securities. See Part IV, line 1			7,925,913.	12	7,216,820.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets	220,000.	14			
	15	Other assets. See Part IV, line 11			31,597,693.	15	34,826,023.
	16	Total assets. Add lines 1 through 15 (must equa			158,753,030.	16	164,364,997.
	17	Accounts payable and accrued expenses	3,659,892.	17	3,724,433.		
	18	Grants payable		*******************************		18	
	19	Deferred revenue		***************************************	******	19	
	20	Tax-exempt bond liabilities				20	
Liabilities	21	Escrow or custodial account liability. Complete F		,	No. 2 to the second second second second second second second second second second second second second second	21	
Đị	22	Loans and other payables to current and former					
<u>E</u> .		key employees, highest compensated employee				1. 1. 10	
	00	Complete Part II of Schedule L		4		22	
	23 24	Secured mortgages and notes payable to unrela				23	
	25	Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, pay				24	
	2.0	parties, and other liabilities not included on lines					
			,		12,341,642.		7,720,018.
	26	Schedule D Total liabilities. Add lines 17 through 25			16,001,534.	25 26	11,444,451.
**********		Organizations that follow SFAS 117 (ASC 958)			20,002,004.	-20	TI, AAA, ADI.
ý		complete lines 27 through 29, and lines 33 and		Kilole per Larra Allu			
o C G	27	Unrestricted net assets			60,532,895.	27	66,689,128.
<u>a</u>	28	Temporarily restricted net assets	23,453,249.	28	25,800,917.		
d B	29	D II III I I I I I I I I I I I I I I I		58,765,352,	29	60,430,501.	
or Fund Balances		Organizations that do not follow SFAS 117 (AS				E.A	
or f		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds			e, es e e televis vertigis her his her e	30	
SS	31	Paid-in or capital surplus, or land, building, or eq	uipmer	nt fund		31	
Net Assets	32	Retained earnings, endowment, accumulated inc				32	
ž	33	Total net assets or fund balances			142,751,496.	33	152,920,546.
	34	Total liabilities and net assets/fund balances			158,753,030.	34	164,364,997.
	. <u></u>	dealiance and not deep termination				J4	

Form **990** (2012)

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	21,40		
2	Total expenses (must equal Part IX, column (A), line 25)	2	24,54	0,6	79.
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,13	4,6	04.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	142,75	1,4	96.
5	Net unrealized gains (losses) on investments	5	6,23	9,5	25.
6	Donated services and use of facilities	6		•	
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	7,06	4,1	29.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	152,92	0,5	46.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			9.4604	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				
2a	Commence of the contract of th		2a	<u> </u>	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a	41)4	25.1	N. San
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
þ	Were the organization's financial statements audited by an independent accountant?	, , ,	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,		1965	
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	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 Scho				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir	ngle Aud	it 🦠		
	Act and OMB Circular A-133?		3a	X	L
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audi			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	X	}

Form **990** (2012)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Employer identification number 12 5560000

David C		COMMUNI	TY SERVICE S	OCIET	Y OF	NEW Y	ORK		1	3-5562202	
Part I	Heason	for Public Char	ity Status (All organiz	ations mu	st complet	e this par	t.) See inst	tructions.			
			because it is: (For lines	-		-					
1			s, or association of chur			ction 170	(b)(1)(A)(i)).			
2 🖳	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)										
3 🖳	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4 📖			operated in conjunction	with a hos	spital desci	ribed in se	ction 170	(b)(1)(A)(ii	i). Enter	the hospital's name	e,
_ [city, and sta							·······		· · · · · · · · · · · · · · · · · · ·	
5 📖			benefit of a college or ur	niversity o	wned or op	perated by	a govern	mental uni	t describ	ed in	
[section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
6 🖳											
7 [X]			eives a substantial part	of its supp	oort from a	governme	ental unit c	or from the	general	public described ir	п
_ [(b)(1)(A)(vi). (Comple									
8			ection 170(b)(1)(A)(vi).								
9			eives: (1) more than 33								
			nctions - subject to certa								
			axable income (less sect	tion 511 ta	ix) from bu	sinesses a	acquired b	y the orga	nization	after June 30, 197	5.
40		509(a)(2). (Complete					5004 W				
10			perated exclusively to te								
II			perated exclusively for the)r
			ations described in section				2). See se c	ction 509(a	a)(3). Ch	eck the box that	
	a Type		organization and complete		ne inrougr nctionally i		_		_ 151	- 6 (1)	
е 🗔			it the organization is not			-				n-functionally integ	
لبسبا			han one or more publicly								ה
f			ten determination from t						n(a)(T) Of	section 509(a)(2).	
•		rganization, check th			-						
g	=	-	nis box organization accepted ar								iJ
9			irectly controls, either al							, Yes	No
			upported organization?								110
	(ii) A family	member of a persor	n described in (i) above?		**************					11g(ii)	
	(iii) A 35%	controlled entity of a	person described in (i) of	or (ii) abov	e?			**************		11g(iii)	
h			about the supported or				• • • • • • • • • • • • • • • • • • • •			[1.18(/)	
				V	\- /-						
(i) Name	of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Did vo	u notify the	(vi) ls	the	(vii) Amount of mon-	
	anization	(11) 2.11	(described on lines 1-9	in col. (I) li	sted in your	organizat	ion in col.	organizátio (i) organiz	ın in col.	support	etai y
			above or IRC section	governing	document?	(i) of you	r support?	Ü.S.	?	oopport	
			(see instructions))	Yes	No	Yes	No	Yes	No		

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	·		***************************************								

		British Common	g, na giaj jakaj Asso			langa S		N. C. A.	, 1 ₁ , 1 ₄ , 1 ₄		
Total											
LHA For F	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedule	e A (Fori	n 990 or 990-EZ) :	2012

232021 12-04-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2012 COMMUNITY SERVICE SOCIETY OF NEW YORK 13-55622 Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) 13-5562202 Page 2

(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.)

Se	ction A. Public Support						
Cal	endar year (or fiscal year beginning in) ➤	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and			.	<u> </u>	λ-/	(7 . 4 . 4
	membership fees received. (Do not						
	include any "unusual grants.")	11,177,805.	10,806,560.	7,797,096.	11,244,184.	13,817,729.	54,843,374.
2	Tax revenues levied for the organ-						*****
	ization'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	11,177,805.	10,806,560.	7,797,096.	11,244,184.	13,817,729.	54,843,374.
5	The portion of total contributions					81.58 (41.	
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1,222,059.
	Public support. Subtract line 5 from line 4.	WAS TELEVISION OF A STATE			THE PROPERTY OF THE PARTY OF TH		53,621,315.
	ction B. Total Support						
	endar year (or fiscal year beginning in) 📂		(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	Amounts from line 4	11,177,805.	10,806,560.	7,797,096.	11,244,184.	13,817,729.	54,843,374.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	4,712,636.	4,773,077.	3,996,930.	3,790,383.	3,710,007.	20,983,033.
9							
	activities, whether or not the	•					
	business is regularly carried on					263,931.	263,931.
10	Other income. Do not include gain						
	or loss from the sale of capital			10 (42	10 506	0.54	00 400
	assets (Explain in Part IV.)			18,643.	12,586.	964.	32,193.
	Total support. Add lines 7 through 10	Balance Colors					76,122,531.
	Gross receipts from related activities,					12 .	716,627.
13	First five years. If the Form 990 is for				•	. ,, ,	. [
Sec	organization, check this box and stop ction C. Computation of Publ	p nere lic Sunnort Pe	rcentage				>
	Public support percentage for 2012 ((0)		14	70.44 %
15	Public support percentage for 2012 (t Cobodulo A. Doct	ivided by line 11, c	column (t))	,,	14	
160	Public support percentage from 2011 33 1/3% support test - 2012. If the o	r ochedule A, mart organization did no	t check the have	n line 10 and line	14 in 22 1/20/	10	
I OL	stop here. The organization qualifies						. 1371
h	33 1/3% support test - 2011. If the					/	
	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
,,,	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
h	10% -facts-and-circumstances tes						
_	more, and if the organization meets the						
	organization meets the "facts-and-cire						
18	Private foundation. If the organization						
						dule A (Form 990	

232022 12-04-12

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

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

Sec	otion A. Public Support	elow, please com	piete i ac ii.j		***************************************		· · · · · · · · · · · · · · · · · · ·
Cale	ndar year (or fiscal year beginning in) 📂	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 per-	:					
	formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities			İ			
	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						
	Add lines 7a and 7b			State of the state			
Sec	Public support (Subtract line 7c from line 6.)	D. D. S. S. S. S. S. S. S. S. S. S. S. S. S.		READ DESCRIPTION			
*****	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(-) 0010	(A) T-1-1
	Amounts from line 6	(8) 2000	(0) 2009	(6) 2010	(4) 2011	(e) 2012	(f) Total
	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			***************************************		***************************************	
	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 IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is fo	r the organization	's first, second, thi	rd, fourth, or fifth t	ax year as a secti	on 501(c)(3) organiz	ation,
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	check this box and stop here						>
	ction C. Computation of Publ						
15	Public support percentage for 2012 (line 8, column (f) d	divided by line 13,	column (f))		15	%
	Public support percentage from 201					16	%
	ction D. Computation of Inve			·····			
	Investment income percentage for 20			ne 13, column (f))		17	<u>%</u>
	Investment income percentage from	·					%
19a	33 1/3% support tests - 2012. If the						
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2011. If the					,	
	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	on did not check a	a box on line 14, 19	ea, or 19b, check t			
2320	23 12-04-12				Sc	hedule A (Form 99	0 or 990-EZ) 2012

Part IV	Supple	emental	Inform	ation. C	omplete	this part	to provide t	he explana	ations require e instruction	d by Part II, line	13-55 10; Part II, I	b 2 2 0 2 Pag ine 17a or 17b;
SCHEDU	LE A,	PART	II,	LINE	10,	EXPL	ANATIC	N FOR	OTHER	INCOME:		
SUBSCR	IPTIC	N INC	OME			***************************************						

				-								
				***************************************								······································
			,					····	***************************************			***************************************

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									-		T COTTONIA TO A POST COST AND A SOCIAL AND A SOCIAL AND A SOCIAL AND A SOCIAL AND A SOCIAL AND A SOCIAL AND A	
		Processor Sanda Decressor S	***************************************					***************************************		and the second s		
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						~	***************************************				×	
								·····	***************************************			
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### SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

See separate instructions.

If the organization answered "Yes," to 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," to 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," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

<ul> <li>Section 5</li> </ul>	01(c)(4), (5), or (6) organiza	tions: Complete Part III.			
Name of orga	nization			Em	ployer identification number
		TY SERVICE SOCI			13-5562202
Part I-A	Complete if the org	janization is exempt un	der section 501(c	or is a section 527	organization.
2 Political 3 Voluntee	expenditures pr hours	ration's direct and indirect politi			\$
Part I-B		janization is exempt un	·······	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	····
		incurred by the organization ur			
2 Enter the	amount of any excise tax	incurred by organization manage	gers under section 495	5	\$
3 If the org	janization incurred a sectio	n 4955 tax, did it file Form 4720	ofor this year?		Yes No
4a Wasa c	orrection made?				Yes No
b if "Yes,"	describe in Part IV.	janization is exempt un	-1		
					······································
		by the filing organization for s			\$
		ization's funds contributed to o	•		
					\$
	•	. Add lines 1 and 2. Enter here		-,	
Ine 170	91	1100 001 7 77	***************************************	······	\$
4 Dig trie i	lling organization file Form	1120-POL for this year?	**************************************		Yes No
made pa contribu	yments. For each organiza tions received that were pr	nployer identification number (E tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	ild from the filing organi a separate political org	ization's funds. Also enter ganization, such as a sepa	the amount of political
	(a) Name	(b) Address	(c) EiN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and
<del></del>					
***************************************					
***************************************					
For Danage	by Doduction Ast Nati-	god the instructions for F	000 000 =-*		
i or Laberno	ik neduction Act Notice,	see the Instructions for Form	99U OF 99U-EZ.	Schedule (	C (Form 990 or 990-EZ) 2012

232041 01-07-13

LHA

Schedule C (Form 990 or 990-EZ) 2012	COMMUNITY S	ERVICE SOCI	ETY OF NEW	YORK 13-5	562202 Page 2
Part II-A Complete if the org		npt under section	n 501(c)(3) and fil	ed Form 5768	
expenses, and sha	ntion belongs to an affi re of excess lobbying	flated group (and list in expenditures). nd "limited control" pro		group member's nam	e, address, EIN,
Limi	its on Lobbying Expe	A December of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the control of the con		(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to infl     Total lobbying expenditures to infl     Total lobbying expenditures (add I	0. 237,177. 237,177. 24,303,502.				
d Other exempt purpose expenditure  Total exempt purpose expenditure	es (add lines 1c and 1c			24,540,679. 1,000,000.	
f Lobbying nontaxable amount. Ent If the amount on line 1e, column (a) of Not over \$500,000 Over \$500,000 but not over \$1,00	1,000,000.				
Over \$1,000,000 but not over \$1,500,000 but not over \$17 Over \$17,000,000					
g Grassroots nontaxable amount (er h Subtract line 1g from line 1a. If zer	7 17			250,000. 0.	
i Subtract line 1f from line 1c. If zero				Ö.	
j If there is an amount other than ze reporting section 4911 tax for this	ero on either line 1h or		ation file Form 4720		Yes No
(Some organia	4-Year Ave zations that made a s olumns below. See th	eraging Period Under ection 501(h) election e instructions for line	Section 501(h) I do not have to com Is 2a through 2f on pa	plete all of the five	
	Lobbying Exper	nditures During 4-Yea	r Averaging Period	<b>r</b>	
Calendar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(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	296,953.	311,794.	218,386.	237,177.	1,064,310.
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.

Schedule C (Form 990 or 990-EZ) 2012

f Grassroots lobbying expenditures

## Schedule C (Form 990 or 990-EZ) 2012 COMMUNITY SERVICE SOCIETY OF NEW YORK 13-556220 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For $\epsilon$	ach "Yes	"Yes," response to lines 1a through 1I below, provide in Part IV a detailed description (a)				(b)	
of th	e lobbyin	g activity.	Yes	No	,	Amount	
1	During t	he year, did the filing organization attempt to influence foreign, national, state or					
	-	islation, including any attempt to influence public opinion on a legislative matter					
		endum, through the use of:	SERVICE				
	Volunte	ers?					
b c	Media a	If or management (include compensation in expenses reported on lines 1c through 1i)? dvertisements?					
d	Mailings	to members, legislators, or the public?					
		ions, or published or broadcast statements?					
		o other organizations for lobbying purposes?					
		ontact with legislators, their staffs, government officials, or a legislative body?					
h		demonstrations, seminars, conventions, speeches, lectures, or any similar means?	<b></b>				
ĺ	Other a	***************************************					
		dd lines 1c through 1i					
		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			1		
C	If "Yes,"	enter the amount of any tax incurred by organization managers under section 4912				<del></del>	
Dak	If the fill	ng organization incurred a section 4912 tax, did it file Form 4720 for this year?  Complete if the organization is exempt under section 501(c)(4), secti	DD E01(a)	(E) 0% c	Assault.		
ı aı	CHI, A	501(c)(6).	on sorte,	i(o), or s	section		
		30 (6)(0).	······		Yes	No	
1	Mora e	bstantially all (90% or more) dues received nondeductible by members?		J	163	110	
2	Did the	organization make only in-house lobbying expenditures of \$2,000 or less?		1	<del> </del>		
3		organization agree to carry over lobbying and political expenditures from the prior year?					
	t III-B	Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or s	section		
	<del></del>	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered					
		answered "Yes,"	,	()		, 0, .0	
1	Dues, a	ssessments and similar amounts from members		1	7		
2	Section	162(e) nondeductible lobbying and political expenditures (do not include amounts of political	cal				
		es for which the section 527(f) tax was paid).			\$   3		
a	Current	year		2a	••		
		er from last year					
С							
3	Aggreg	tte amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4		s were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex		(A)	3		
		organization agree to carryover to the reasonable estimate of nondeductible lobbying and			ål –		
		ture next year?		4			
5		amount of lobbying and political expenditures (see instructions)		5		****	
Par	t IV	Supplemental Information		***************************************		***************************************	
Com	plete this	part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P.	art II-A (affili	ated grou	ip list): Pa	ırt II-A. line 2:	
		ine 1. Also, complete this part for any additional information.	,	V	. ,,	,	
		,					
			***************************************	******************	***************************************	***********************************	
				····		***************************************	
				~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		**************************************	
	·						
22204			Schedu	le C (For	m 990 or	990-EZ) 2012	

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	COMMUNITY SERVICE SOCIETY OF NEW YORK	13-5562202
Pai	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or	Accounts.Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate 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 fu	ınds
	are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used	
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conf	erring
r- <u></u>	impermissible private benefit?	
Pa	rt II : Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
	Preservation of land for public use (e.g., recreation or education)	ally important land area
	Protection of natural habitat Preservation of a certified	historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held 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
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	
С	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	anization 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	
c	violations, and enforcement of the conservation easements it holds?	
6 7	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	
Ü	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense stat	oment and brigger sheet and
~	include, if applicable, the text of the footnote to the organization's financial statements that describes the	
	conservation easements.	signification s accounting to
Pai	rt III Organizations Maintaining Collections of Art, Historical Treasures, or Other	r Similar Assets.
<u> </u>	Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
ia	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	
	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 s	
	relating to these items:	.,
	(i) Revenues included in 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	
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items;	
а	Revenues included in Form 990, Part VIII, line 1	> \$
b	Assets included in Form 990, Part X	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUSTS	31,335,966.
(2) INVESTMENT IN THE UNITED CHARITIES	2,090,057.
(3) SECURITIES SOLD RECEIVABLES	1,400,000.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total, (Column (b) must equal Form 990, Part X, col. (B) line 15.)	34 826 023

Part X Other Liabilities. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	POST-EMPLOYMENT BENEFITS	7,720,018.	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
(11)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	7,720,018.	

^{2.} FIN 48 (ASC 740) Footnote. 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

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012

SUBJECT TO EXAMINATION BY APPLICABLE TAXING AUTHORITIES.

Part XIII Supplemental Information (continued)	13-5562202	Page 5
PART XI, LINE 2D - OTHER ADJUSTMENTS:	Valla de la constanta de la co	***************************************
FRIENDS OF RSVP, INC - INTEREST INCOME		166.
CHANGE IN FAIR VALUE OF BENEFICIAL INTEREST IN PERPETUAL		
TRUSTS	1,665,	149.
CHANGE IN INVESTMENT IN THE UNITED CHARITIES	184,	029.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	1,849,	344.

	······································	
		
	·	***************************************

SCHEDULE G

Department of the Treasury

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No. 1545-0047

4U 14

Open To Public Inspection

Internal Revenue Service Atta

Name of the organization	TY SERVICE SOCIET					ntification number 202
······································	· Complete if the organization answ					
 1 Indicate whether the organization rais a X Mail solicitations b X Internet and email solicitations c X Phone solicitations d X In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e X Solicita f X Solicita g X Specia or oral agreement with any individua art VII) or entity in connection with viduals or entities (fundralsers) pur	ation of ation of Il fundra al (includ profess	non-govern govern dising of ding of ional f	overnment grants nment grants events (fficers, directors, true undraising services?	stees or	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have d or con contrib	Did aiser ustody trol of utlons?	(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
SANKY COMMUNICATIONS, INC 589 8TH AVENUE 10TH FLOOR.	DESIGNS AND SUPERVISES DIRECT MAIL PROGRAM	Yes	No x	118,335.	84,366.	33,969.
Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit			118,335. s or has been notified	84,366. d it is exempt from re	·
NY,CT,FL,NJ						

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2012

01-07-13

Schedule G (Form 990 or 990 EZ) 2012 COMMUNITY SERVICE SOCIETY OF NEW YORK 13-5562202 Page 2 Fundraising Events. Complete if the organization answered "Yes" to 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 STEP-UP NEW NONE (add col. (a) through YORK GALA col. (c)) (event type) (event type) (total number) 784,200. 784,200. 1 Gross receipts 2 Less: Contributions 305,850. 305,850. 478,350. Gross income (line 1 minus line 2) 478,350. 4 Cash prizes 5 Noncash prizes Direct Expenses 17,975. 6 Rent/facility costs 17,975. 57,165. 7 Food and beverages 57,165. 20,723. 20,723. 8 Entertainment 118,556. 118,556. 9 Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) 214,419 90 11 Net income summary. Combine line 3, column (d), and line 10. 263,931. Part III | Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add Revenue (a) Bingo (c) Other gaming bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes 7 Direct expense summary, Add lines 2 through 5 in column (d) 8 Net gaming income summary. Combine line 1, column d, and line 7 9 Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? b If "No," explain:

Schedule G (Form 990 or 990-EZ) 2012

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

232082 01-07-13

b If "Yes," explain:

	56220	02 _{Page 3}
11 Does the organization operate gaming activities with nonmembers?	Ye	s 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? 13 Indicate the percentage of gaming activity operated in:	└── Ye	s No
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?	Ye:	s 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	s 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. Complete this part to provide the explanations required by Part I, line 2b, columns (iii)	and (v) a	nd Part III
lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information		,
COMEDINE O DADE I LIME OD LIGE OF MEN UTOUEGE DAID HUNDDAIGED	α.	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISER	<u>5:</u>	***
(I) NAME OF FUNDRAISER: SANKY COMMUNICATIONS, INC.		

(I) ADDRESS OF FUNDRAISER: 589 8TH AVENUE 10TH FLOOR, NEW YORK,	NY 1	10018
SCHEDULE G, PART I, LINE 2B, COLUMN (V): PRE-AGREED UPON MONTHLY	יסוס ס	አወ
	r mm	<u> </u>
STATED IN CONTRACT BETWEEN THE AGENCY AND FUNDRAISER.		PARTIE AND ADDRESS OF THE PARTIES OF
	····	
232083 01-07-13 Schedule G (Form	990 or 9	90-EZ) 2012

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public

Inspection

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. ▶ Attach to Form 990.

ž Employer identification number SMMA HARTLEY DODGE FUNDS. 13-5562202 ALLOCATION OF INVESTMENT HARTLEY STOKES AND THE INCOME BARNED BY EMMA (h) Purpose of grant SANDY RELIEF FUNDS or assistance X Yes -OFFICE REPAIRS Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any 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 (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö ं (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of 10,193 18,785 OF NEW YORK cash grant (c) IRC section if applicable SOCIETY 501(C)(3) 501(C)(3) COMMUNITY SERVICE 13-1656652 14-1997299 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization URBAN NEIGHBORHOOD SERVICES or government Name of the organization 1718 MERMAID AVENUE NEW YORK, NY 10036 BROOKLYN, NY 11224 413 WEST 46TH ST HARTLEY HOUSE Parti Part II

232101

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2012)

Page 2

13-5562202

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2012)

Part III

Schedule I (Form 990) (2012) (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) GUIDELINES THAT THE ELIGIBLE TO THE FINANCIAL GUIDELINES THOSE GRANTS WILL THE WITH FINANCE DEPARTMENT AUDITS REQUESTS FOR GRANTS AND VERIFIES THAT ALL 田田田 CASE MANAGERS WHO WORK DIRECTLY DOCUMENTATION AND ENSURE THAT GRANT FUNDS ARE APPROPRIATELY USED. SUPPORTING FILE WITH ALL REQUIRED TO (d) Amount of non-cash assistance 0 0 Ö ٥. 2: THE AGENCY MAINITAINS FINANCIAL ORDER GRANT AND WHAT THE AMOUNTS OF O A POTENTIAL GRANTEE NEEDS TO PROVIDE IN 255 159,251, 22 044 15,665 (c) Amount of cash grant THE KIND m DOCUMENTS SUBMITTED ARE SUBSTANTIAL AND ADHERE 162 239 in " (b) Number of GUIDELINES ALSO DICTATE THEIR NEEDS AND MAINTAIN A recipients GRANT. Þ ď (a) Type of grant or assistance LINE DICTATE WHO MAY RECEIVE PAYMENT FOR , H FINANCIAL PART CLIENTS ASSESS DENTAL & MEDICAL FEES EDUCATION - TRAINING DOCUMENTATION INDIVIDUAL SUPPORT VACATION - CAMPING H AND RECEIVE TRANSPORTAION SCHEDULE THE 232102 12-18-12 **国**国

Schedule I (Form 990) COMMUNITY SERVICE SOCIETY OF NEW YORK Part III Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III	CE SOCIETY	TY OF NEW YORK ed States (Schedule Form	YORK		13-5562202 Page 2
(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	-	161	0	The Department of the Control of the	
9		783.	0		
UTILITIES/UTILITIES IN ARREARS	20.	4,843,	0		
RENT OR RENT IN ARREARS OR SECURITY DEPOSIT	103.	87,158.	O		
RENT	1.	2,400	Ö		
EMPLOYMENT - RELATED EXPENSES	.08	. 3 13 146	0		
RENT SUBSIDY - OTHER	vel	.009	o		
				THE PROPERTY OF THE PROPERTY O	Schedule I (Form 990)

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" to Form 990, Part IV, line 23.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

COMMUNITY SERVICE SOCIETY OF NEW YORK

Employer identification number 13-5562202

Schedule J (Form 990) 2012

P	Part I Questions Regarding Compensation				
			<u></u>	/es	No
1a	a Check the appropriate box(es) if the organization provided any of the following to or for a perso				
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these	1.04.004			
	First-class or charter travel				
	Travel for companions Payments for business us				
	Tax indemnification and gross-up payments K Health or social club dues	or initiation fees			
	Discretionary spending account Personal services (e.g., m	aid, chauffeur, chef)			
		- 1			
b	$oldsymbol{b}$ If any of the boxes on line 1a are checked, did the organization follow a written policy regarding				
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to	o explain 1b	,	X	
2	and the second of the second o				
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation	n of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a re	elated organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.	13.00 8.00 8.00			
	Compensation committee X Written employment contri	ract			
	Independent compensation consultant X Compensation survey or s	study			
	Form 990 of other organizations				
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the	he filing			
	organization or a related organization:			3.5	
a	a Receive a severance payment or change-of-control payment?	4a			Х
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		٠,	x	
С	4c	;		Х	
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in		3 S		y in a
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.				
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue a	ny compensation			
	contingent on the revenues of:				
а	a The organization?	5a			Х
b	b Any related organization?		,	$\neg \dagger$	Х
	If "Yes" to line 5a or 5b, describe in Part III.	. STATE		333	
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue a	ny compensation			
	contingent on the net earnings of:				
a	a The organization?	6a			Х
b	b Any related organization?	6b			X
	If "Yes" to line 6a or 6b, describe in Part III.	30 A 20 A 20 A 20 A 20 A 20 A 20 A 20 A			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any nor				2.545
	not described in lines 5 and 6? If "Yes," describe in Part III		:	$_{\rm X}$	
8			1	-	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in				Х
9			十		
	Regulations section 53.4958-6(c)?				

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

13-5562202

Page 2

Schedule J (Form 990) 2012

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 in 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 are not 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.

And the state of t		(B) Breakdown of W		-2 and/or 1099-MISC compensation	(C) Retirement and	aple	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(a)-(i)(a)	in prior Form 990
(1) DAVID R. JONES, ESQ.	8	526,087.	101,508.	11,704.	38,500.	39,444.	717,243.	0
PRESIDENT/CEO	<u> </u>	0	0	0	0.	0.	0	0
(2) STEVEN L. KRAUSE	E	411,728.	88,505.	12,199.	35,000.	39,117.	586,549.	0
EXECUTIVE V.P./COO) E	0	0	0		1	0	
(3) JEFFREY F. RIZZO	8	162,418.	24,080.	516.	5,000.	32,885.	224,899.	
CHIEF FINANCIAL OFFICER	<u> </u>	0		0	0	0.		
(4) ELISABETH BENJAMIN	S	172,624.	25,800.	180.	5,00	13,365.	216,969.	
VP HEALTH INITIATIVES	E	0	ı	0				
(5) ALINA MOLINA	0	144,221.	18,850.	516.	7,350.	39,210.	207,147.	
DIR VOL INITIATIVES	Ξ	0	l	.0				
(6) NANCY RANKIN	E	144,200.	19,600.	792.	3,60	1,258.	169,450.	
VP POLICY	E	0		0	0	0.		
(7) JUDITH WHITING	9	142,700.	18,200.	276.	4,088.	1,258.	166,522.	
GENERAL COUNSEL	E	0	0	0	0	.0	0	
	18							
	(ii)							
	Θ							Total Management of the Control of t
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232112				C			Sched	Schedule J (Form 990) 2012

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Page 3

Part III | Supplemental Information

Schedule J (Form 990) 2012

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

卫用区 PART I, LINE 1A: THE CEO/PRESIDENT, DAVID R. JONES RECEIVED

FOLLOWING BENEFIT DURING THE CALENDAR YEAR 2012:

MEMBERSHIP FEES TO VARIOUS ORGANIZATIONS

LONGTERM DISABLITY AND LIFE INSURANCE PREMIUMS

PERSONAL USE OF VEHICLE

TAXABLE COMPENSATION. THESE BENEFIT WERE TREATED AS

PLAN: LINE 4B: SECTION 457F Н PART

JONES: \$13,772 **~** DAVID STEVEN L. KRAUSE: \$8,260

CURRENT BONUS STRUCTURE FOR CSS NON-BARGAINING 7: THE LINE PART IS BASED UPON A COMPENSATION PROGRAM DEVELOPED IN CONJUNCTION STAFF UNIT

IN ESSENCE IT PROVIDES FOR BONUSES TO BE PAID TO HAY GROUP. WITH THE MANAGEMENT STAFF BASED UPON TOTAL PERFORMANCE AND THE MEETING OF INDIVIDUAL

ス AND ORGANIZATIONAL GOALS. THE HIGHER THE LEVEL OF THE POSITION HELD BY

STAFF MEMBER THE GREATER THE EMPHASIS ON ORGANIZATIONAL GOALS VERSUS

HIGHER THE POTENTIAL PERCENTAGE BONUS INDIVIDUAL GOALS AND THE Schedule J (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury

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.

OMB No. 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number COMMUNITY SERVICE SOCIETY OF NEW YORK 13-5562202 FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE MISSION OF THE COMMUNITY SERVICE SOCIETY 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 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: THE MISSION OF THE COMMUNITY SERVICE SOCIETY 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 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 4A, PROGRAM SERVICE ACCOMPLISHMENTS: COMMUNITY HEALTH ADVOCATES (CHA) PROVIDES HEALTH CARE ACCESS AND INSURANCE INFORMATION, ADVICE, AND NAVIGATIONAL ASSISTANCE TO NEW YORKERS IN THEIR OWN COMMUNITIES THROUGH A NETWORK OF TRAINED AND TRUSTED HEALTH ADVOCATES. SINCE NOVEMBER 2010, IT HAS SERVED AS THE NEW YORK STATE DEPARTMENT OF HEALTH'S DESIGNATED CONSUMER ASSISTANCE

232211 01-04-13

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

Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012) Page 2 Name of the organization Employer identification number COMMUNITY SERVICE SOCIETY OF NEW YORK 13-5562202 PROGRAM. CHA'S ACCOMPLISHMENTS DURING FY 2013 (JULY 1, 2012 - JUNE 30, 2013) INCLUDE: SERVED 51,006 CONSUMERS THROUGH INDIVIDUAL COUNSELING AND TRAINING SESSIONS; PROVIDED INDIVIDUAL CASE ASSISTANCE TO 19,241 CONSUMERS, HELPING THEM TO ENROLL IN OR RETAIN COVERAGE, USE COVERAGE. AND ACCESS THE HEALTH CARE SYSTEM; CONDUCTED 1,287 TRAININGS FOR 31,765 CONSUMERS AND ADVOCATES; AND PARTNERED WITH 43 ORGANIZATIONS THROUGHOUT NEW YORK STATE. CHA HAS 35 TRAINED AND ACTIVE VOLUNTEERS. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: RETIRED & SENIOR VOLUNTEER PROGRAM (RSVP) THE RSVP PROGRAM RECRUITS, TRAINS, PLACES, AND RECOGNIZES ABOUT 3,000 OLDER ADULT VOLUNTEERS THROUGHOUT THE FIVE BOROUGHS WHO SERVE AT OVER 300 NONPROFIT AGENCIES AND PROPRIETARY HEALTH CARE FACILITIES. RSVP CONDUCTS ITS OWN PROGRAMS IN THE AREAS OF FINANCIAL COUNSELING AND COACHING, MENTORING TROUBLED YOUTH AND CHILDREN OF INCARCERATED PARENTS, BENEFIT COUNSELING, AND DISASTER PREPAREDNESS. RSVP ALSO RECRUITS AND PLACES VOLUNTEERS AT PARTNERING AGENCIES. AMONG THE SERVICES THEY PROVIDE ARE SERVING AS DOCENTS AT MUSEUMS, PARKS, BOTANICAL GARDENS AND ZOOS, PREPARING AND SERVING MEALS AT SOUP KITCHENS, FOOD PANTRIES AND SENIOR CENTERS, SERVING AS CONVERSATION PARTNERS IN ENGLISH AS A SECOND LANGUAGE PROGRAMS, TUTORING IN ADULT LITERACY PROGRAMS, SERVING AS OMBUDSMEN TO ENSURE THE RIGHTS OF NURSING HOME AND LONG TERM CARE FACILITY RESIDENTS AND SERVING AS FRIENDLY VISITORS TO NURSING HOME RESIDENTS, HOSPITAL PATIENTS AND HOMEBOUND OLDER ADULTS. RSVP HOLDS SEVERAL RECOGNITION EVENTS HONORING VOLUNTEER

232212

ACHIEVEMENTS EACH YEAR.

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

THE EXPERIENCE CORPS PROGRAM MOBILIZES OLDER ADULTS WITHIN THE COMMUNITY TO PROVIDE TUTORIAL SERVICES TO CHILDREN WHO ARE IN DANGER OF ACADEMIC FAILURE. DURING THE 2012-2013 SCHOOL THE OBJECTIVE AND GOALS OF THE PROGRAM WAS TO CREATE TEN TEAMS OF OLDER ADULT VOLUNTEERS AND PLACE THEM IN TEN SCHOOLS TO PROVIDE A MINIMUM OF THE 35 TUTORIAL SESSIONS TO OUR ONE-ON-ONE STUDENTS AND PROVIDE IN CLASS ASSISTANCE TO 17 CLASSROOMS ACROSS THE CITY.

EXPERIENCE CORPS RECRUITED, TRAINED, PLACED, AND RECOGNIZED 93 OLDER ADULT VOLUNTEERS THROUGHOUT THREE BOROUGHS. IN FISCAL 2013 VOLUNTEERS SCHOOL YEAR PROVIDED 20,702 HOURS OF TUTORING TO 863 CHILDREN IN TEN SCHOOLS IN THE BRONX, QUEENS AND HARLEM. EC VOLUNTEERS WORK 16 HOURS A WEEK FOR 4 DAYS A WEEK FROM OCTOBER TO JUNE. VOLUNTEERS RECEIVED 32 HOURS OF PRE-SERVICE AND ONGOING TRAINING FOR THE YEAR VOLUNTEERS WERE TRAINED USING THE TUTORING CURRICULUM BOOK BUDDIES. STUDENTS RECEIVED INDIVIDUALIZED LESSON PLANS AND THIS YEAR THEY RECEIVED 17,831 LESSONS/SESSIONS OF TUTORING FOR FISCAL YEAR 2013. STUDENT ASSESSMENTS REVEALED THAT CHILDREN AT EACH SCHOOL MADE SIGNIFICANT ACADEMIC STRIDES AND 100% PERCENT OF THOSE SERVED THROUGH ONE-ON-ONE TUTORING IMPROVED THEIR PALS SCORES - THE MAJORITY OF WHOM JUMPED AT LEAST ONE READING LEVEL. OVERALL PERCENTAGE CHANGE IN PRE- AND POST-SCORES BY BOROUGH WAS AS FOLLOWS: 68.93% IN THE BRONX, 54.98% IN HARLEM, AND 37.53% IN QUEENS. TEACHER SURVEY OUTCOMES WERE ALSO INCREDIBLY POSITIVE, AS 98% OF RESPONDENTS REPORTED THAT VOLUNTEERS HELPED STUDENTS IMPROVE THEIR LITERACY SKILL AND 96% REPORTED THAT EXPERIENCE CORPS ENHANCED

Schedule O (Form 990 or 990-EZ) (2012)

Name of the organization COMMUNIT	ry service	SOCIETY	OF NEW	YORK	Employer identification number 13-5562202
STUDENTS' PARTICIPATION	ON/CONCENT	RATION.			
FORM 990, PART III, LI	INE 4D, OT	HER PROG	RAM SERV	ICES:	***************************************
LEGAL COUNSEL			······································		
EXPENSES \$ 818,600.	INCLUDING	GRANTS	OF \$ 2,2	92. REVE	NUE \$ 0.
PUBLIC POLICY					
EXPENSES \$ 204,395.	INCLUDING	GRANTS	OF \$ 0.	REVENUE	\$ 0.
LABOR MARKET STUDIES					
EXPENSES \$ 86,497.	INCLUDING (GRANTS C	F \$ 0.	REVENUE \$	0.
HOUSING RESEARCH					
EXPENSES \$ 221,690.	INCLUDING	GRANTS	OF \$ 0.	REVENUE	\$ 0.
YOUTH POLICY					
EXPENSES \$ 189,958.	INCLUDING	GRANTS	OF \$ 0.	REVENUE	\$ 0.
UNHEARD THIRD					
EXPENSES \$ 487,770.	INCLUDING	GRANTS	OF \$ 0.	REVENUE	\$ 0.
PUBLIC INTEREST					
EXPENSES \$ 1,075,898.	INCLUDII	NG GRANT	S OF \$ 1	50. REVE	NUE \$ 964.
GOVERNMENT RELATIONS					
EXPENSES \$ 760,575.	INCLUDING	GRANTS	OF \$ 0.	REVENUE	\$ 0.
BENEFITS PLUS (FORMERI	LY CBS)				
32212 11-04-13			43	Sched	lule O (Form 990 or 990-EZ) (201

Schedule O (Form 990 or 990-EZ) (2012)	Page :
Name of the organization COMMUNITY SERVICE SOCIETY OF NEW YORK	Employer identification number 13-5562202
EXPENSES \$ 427,735. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 60,003.
OTHER: DEPRECIATION EXPENSE FOR PROGRAM SERVICES	
EXPENSES \$ 189,888. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
OTHER: SUPPORT TO OTHERS	
EXPENSES \$ 60,923. INCLUDING GRANTS OF \$ 60,923. REVE	ENUE \$ 0.
OTHER: CEO, EX. V.P., FINANCE & MANAGEMENT, AND LEGAL	
EXPENSES \$ 393,856. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 97,702.
COMMUNICATIONS	
EXPENSES \$ 401,208. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
HEALTH INITIATIVES	
EXPENSES \$ 1,224,971. INCLUDING GRANTS OF \$ 3,600. RE	EVENUE \$ 0.
SANDY RELIEF	
EXPENSES \$ 152,342. INCLUDING GRANTS OF \$ 152,325. RE	EVENUE \$ 0.
OTHER: PENSION COST	
EXPENSES \$ 708,467. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0,
FORM 990, PART VI, SECTION B, LINE 11: ELECTRONICALLY DIS	TRIBUTE THE 990
TO ALL BOARD OF TRUSTEE MEMBERS FOR INFORMATION, REVIEW,	AND FEEDBACK.
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTER	EST FORMS ARE
DISTRIBUTED AND SIGNED ANNUALLY AT THE JUNE BOARD MEETING 232212 01-04-13 Schee	1. ALL dule O (Form 990 or 990-EZ) (2012
44 300414 733030 2583 2012 05030 COMMINITUR GERVICUE	, , , ,

Employer identification number 13-5562202

TRUSTEES/OFFICERS/BOARD MEMBERS HAVE ONGOING DUTY TO DISCLOSE ANY CONFLICTS ARISING THROUGOUT 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. 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 LAST TIME A COMPENSATION STUDY WAS DONE WAS MARCH 2013.

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; 105 EAST 22ND STREET, NEW YORK NY

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

CHANGE IN UNITED CHARITIES FY 2012

184,029.

CHANGE IN FAIR VALUE OF BENEFICIAL INTEREST IN PERPETUAL

1,665,149.

PENSION ADJUSTMENT

5,434,951.

IMPAIRMENT LOSS

TRUSTS

-220,000.

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Schedule O (Form 990 or 990-EZ) (2012)

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization COMMUNITY SERVICE SOCIETY OF NEW YORK	Employer identification number 13-5562202
TOTAL TO FORM 990, PART XI, LINE 9	7,064,129.
FORM 990. PART XII, LINE 2C	
ANNUALLY THE AUDIT COMMITTEE MEETS WITH AUDITORS TO REVIE	W DRAFT
FINANCIAL STATEMENTS. THIS PROCESS HAS NOT CHANGED SINCE	PRIOR YEARS.
330313	

SCHEDULE R (Form 990)

Parti

Related Organizations and Unrelated Partnerships

2012 Open to Public Inspection OMB No. 1545-6047

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

Employer identification number 13-5562202

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) COMMUNITY SERVICE SOCIETY OF NEW YORK

See separate instructions. ➤ Attach to Form 990. Name of the organization Department of the Treasury Internal Revenue Service

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets (e) Total income Legal domicile (state or foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity Part II

digalitzations duling the tax year.	**************************************			Sandara Control			1
(a)	(q)	(0)	(g)	(e)	()	(g)	¥13)
Name, address, and EIN	Primary activity	Legal domicile (state or	Exempt Code		Direc	controlled	<u> </u>
of related organization		foreign country)	section	status (if section	entity	entity?	
				501(c)(3))		Yes	No
FRIENDS OF RSVP, INC 13-3335293							İ
C/O CSS NY 105 E 22ND STREET	FUNDRAISING FOR RSVP						
NEW YORK, NY 10010	PROGRAM	NEW YORK	501 (C)(3)	in Cu	css	×	
INSTITUTE FOR COMMUNITY EMPOWERMENT -	PERFORM CERTAIN ELECTORAL						
3-3473143, C/O CSS NY 105 E 22ND STREET,	ADVOCACY, RESEARCH AND						
NEW YORK, NY 10010	LOBBYING ACTIVITIES	NEW YORK	501 (C)(4)		SSS	×	
	T						

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

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Schedule R (Form 990) 2012

13-5562202

Page 2

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

organizations treated as a partnership during the tax year.)	artnersnip during the ta	x year.)									
(a)	(q)	(၁)	(d	(e)		(t)	(6)	(u)	(1)	6	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (felated, unrelated, excluded from tax under sections 512-514)		Share of total income	Share of end-of-year assets	Disproportion- ate allocations?	Cod amou 20 of \$ K-1 (Fo		General or Percentage managing ownership partner?
		- Parkananan are property and the second are property as a second are property as a secon									
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	ganizations Taxable a rporation or trust durin	is a Corpo	oration or Trust (Cc year.)	emplete if the	organization a	inswered "Yes	to Form 990,	Part IV, line 3	4 because it had	one or mo	re related
(a) Name, address, and EIN of related organization	N. C	Prim	(b) Primary activity	(c) Legal domicite D (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp., S corp. or trust)		(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Section 512(b)(13) controlled entity?
	The state of the s										
	REPORT OF THE PROPERTY OF THE	ALCO ALCO ALCO ALCO ALCO ALCO ALCO ALCO			Na correction de la constanta della constanta de la constanta de la constanta de la constanta						
232162 12-10-12			***************************************	48				~	Schedi	ule R (Form	Schedule R (Form 990) 2012

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36.)

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		And the second s			9)
	***************************************	TOO POOR THE PROPERTY OF THE P			(5)
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					(3)
ļ	:	THE PROPERTY OF THE PROPERTY O		And the second s	(2)
					(1)
	p g	Method of determining amount involved	Amount involved	Transaction type (a-s)	Name of other organization
		information on who must complete this line, including covered relationships and transaction thresholds.	this line, including covered	ho must complete	2 If the answer to any of the above is "Yes," see the instructions for information on w
×	1s	L :			- 1
M	<u> </u>				r Other transfer of cash or property to related organization(s)
×	49				q Reimbursement paid by related organization(s) for expenses
×	1p				p Reimbursement paid to related organization(s) for expenses
4 🖂	를 은	related organization(s)		on(s)	 Sharing of facilities, equipment, mailing lists, or other assets with related organization Sharing of paid employees with related organization(s)
×	Ę,			nization(s)	m Performance of services or membership or fundraising solicitations by related organization(s)
×	7			nization(s)	l Performance of services or membership or fundraising solicitations for related organization(s)
×	¥	*			K Lease of facilities, equipment, or other assers from related organization(s)
×	1;				j Lease of facilities, equipment, or other assets to related organization(s)
×	=				i Exchange of assets with related organization(s)
×	‡				h Purchase of assets from related organization(s)
X	1g				g Sale of assets to related organization(s)
×	11				f Dividends from related organization(s)
					,
×	1e				
×	1d			1	d Loans or loan guarantees to or for related organization(s)
X	10				c Gift, grant, or capital contribution from related organization(s)
×	45				b Gift, grant, or capital contribution to related organization(s)
×	1a		,		a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
1111	153 153	in Parts II-IV?	related organizations listed	s with one or more	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?
Yes					Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Part Vi Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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 instanctions reparding exclusion for certain investment partnerships.

8.3	(x) ercentage wnership					90) 2012
5	General or Permanaging partner?					(Form 9
107	(1)					Schedule R (Form 990) 2012
19	Dispropertionate a	***************************************			en en en en en en en en en en en en en e	
(2)	(9) Share of end-of-year assets					
	(f) Share of total income					
3	(e) Are all partners sec. 501(e)(3) orgs.? Yes No					
estment partnerships.	Predominant income partners se. (related, unrelated, 501(c)(3) excluded from tax under section 512-514) Ves No					
sion for certain inve	(c) Legal domicile (state or foreign country)					
ructions regarding exclu	(b) Primary activity					
that was not a related organization. See instructions regarding exclusion for certain investment partnerships.	(a) Name, address, and EiN of entity					

Schedule R	(Form 990) 2012 Supplemental Info	COMMUNITY	SERVICE	SOCIETY	OF NEW	YORK	13-5562202	Page 5
Part VII	Supplemental Info	rmation						
	Complete this part to pro	ovide additional inforn	nation for respor	ises to question	s on Schedule	R (see instru	ictions).	
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2012 DEPRECIATION AND AMORTIZATION REPORT FORM 990 PAGE 10

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Year	680 89) (H ←	026.				
Current Year Deduction	64	#	, . , . , .	256,(
#55		4.553 • 44.553 Pr	· •					
Current Sec 179								
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Accumulated Depreciation	44 <	4, U	023,321	1,437,				
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. For dation	764	Φ 4		15,340				
Basis For Depreciation	80 0 00 0 80 0	0000,7	The second second second	3,725.				
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Reduction In Basis								
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Asset No.								
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228102 05-01-12

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

Department of the Treasury Internal Revenue Service (and proxy tax under section 6033(e)) For calendar year 2012 or other tax year beginning JUL 1, 2012, and ending JUN 30, 2013 Organization	
A Check box if address changed Name of organization (Check box if name changed and see instructions.) Description number of control of the changed and see instructions.	ber
B Exempt under section Print COMMUNITY SERVICE SOCIETY OF NEW YORK 13-556220	2
X 501(c)(3) Or Number, street, and room or suite no. If a P.O. box, see instructions.	
408(e) 220(e) Type 105 EAST 22ND STREET, NO. 301	
408A 530(a) City or town, state, and ZIP code	
529(a) NEW YORK, NY 10010-5413 541800	
C Book value of all assets F Group exemption number (see instructions)	
at end of year G Check organization type X 501(c) corporation 501(c) trust 401(a) trust Other trust	
H Describe the organization's primary unrelated business activity. ► ADVERTISEMENT INCOME	
During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes X No	-
If "Yes," enter the name and identifying number of the parent corporation.	
J The books are in care of ► JEFFREY F. RIZZO, CFO Telephone number ► 212-254-8900	
Part I Unrelated Trade or Business Income (A) Income (B) Expenses (C) Net	
1 a Gross receipts or sales	
b Less returns and allowances c Balance 1c	
2 Cost of goods sold (Schedule A, line 7)	
3 Gross profit. Subtract line 2 from line 1c 3	
4 a Capital gain net income (attach Schedule D) 4a	
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	
c Capital loss deduction for trusts 4c	
5 Income (loss) from partnerships and S corporations (attach statement) 5 6 Rent income (Schedule C) 6	
1 managaman managaman managaman V	
7 Unrelated debt-financed income (Schedule E) 7 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) 8	
9 Investment income of a section 501(c)(7), (9), or (17) organization	
(Schedule G) 10 Exploited exempt activity income (Schedule I) 10 10	
11 Advertising income (Schedule J) 11 104,949. 7,671. 97,2	1Ω
12 Other income (see instructions; attach statement) 12 12	0.
13 Total. Combine lines 3 through 12	7.8
Part II Deductions Not Taken Elsewhere (see instructions for limitations on deductions)	0.
(except for contributions, deductions must be directly connected with the unrelated business income)	
14 Compensation of officers, directors, and trustees (Schedule K) 14	
15 Salaries and wages 15	
16 Repairs and maintenance 16	
17 Bad debts 17	
18 Interest (attach statement) 18	
19 Taxes and licenses 19 2	0.
20 Charitable contributions (see instructions for limitation rules) 20	
21 Depreciation (attach Form 4562) 21	
22 Less depreciation claimed on Schedule A and elsewhere on return 22a 22b	
23 Depletion 23	
24 Contributions to deferred compensation plans 24	
25 Employee benefit programs 25	
26 Excess exempt expenses (Schedule I) 26	10
27 Excess readership costs (Schedule J) 27 97, 2	8.
28 Other deductions (attach statement) 28 29 Total deductions, Add lines 14 through 28 29 97.5	0
30 Unrelated business taxable income before net operating loss deduction, Subtract line 29 from line 13 30 -2. 31 Net operating loss deduction (limited to the amount on line 30) 31	0.
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30 32 -2	
33 Specific deduction (generally \$1,000, but see instructions for exceptions) 33 1,00	
34 Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller	
of zero or line 32	0
223701 01-11-13 LHA For Paperwork Reduction Act Notice, see instructions. Form 990-T	Name and Address of the Owner, where the Person of the Owner, where the Person of the Owner, where the Owner, which is the Owner, wh

		t		0 00 1111	14100 01 000	MON 20071 (Mail 10	opout to			103	1 14
b Other cos	ets (attach statement)	4b		ргоре	ty produced	or acquired for re	esale) apply to			52453	
5 Total, Ad	d lines 1 through 4b	5		the or	ganization?					337 V. W	33.55
Sign	nder penalties of perjury, I declare the priect, and complete. Declaration of	iat I have exa preparer (oth	mined this return, including than taxpayer) is based	ig accompany on all Informat	ng schedules ion of which p	and statements, and reparer has any know	to the best of my ledge.				
Here	Signature of officer	glino C	Date 5	1114	PRESI	DENT		the p	the IRS discuss thi reparer shown belo uctions)? X Yo	w (see	
Paid Preparer	Print/Type preparer's name FREDERICK H. ROTHMAN Firm's name LOEB	s. mp.o	Preparer's sign	iture /		Date 4//5/14	Check self- employ	if eđ	PTIN P01275	277	,
Use Only				4.05		<u>/</u>	Firm's EIN	<u> </u>	13-151	756	3
	655	THIR	D AVENUE.	$_{\rm LZTH}$	FLOOR	/	1				

223711 01-11-13

Form 990-T (2012)

(212) 867-4000

Firm's address NEW YORK, NY 10017

Phone no.

Schedule C - Rent Inc	ome (From Real	Proper	ty and	l Personal	Propert	y Lease	d With I	Real Prop	erty) ^{(see}	instructions)
1. Description of property											
(1)	····										
(2)		····						······			
(3)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			***************************************	~~~~~~~~~~	***************************************			***************************************
(4)					***************************************					···································	····
		2. Rent receiv	ed or accrue	d					~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
(a) From personal property rent for personal proper 10% but not more	ty is more:	than	(b) F	frent for pe	nd personal propert ersonal property ex t is based on profit	ceeds 50% o	ntage ' if	3(a) Dedu c	ictions directly olumns 2(a) and	connected with 2(b) (attach st	the income in atement)
(1)											
(2)											
(3)			ļ								
(4)											
Total		0.	Total	······································		·····	0.	/h) Total d	n din nët n m n		
(c) Total income. Add totals of c	olumns 2	(a) and 2(b). En	iter				0	(b) Total de Enter here an	d on page 1,		0
here and on page 1, Part I, line 6 Schedule E - Unrelate	, column	(A)	🔊	 ()			0.	Part I, Ilne 6,	column (B)	<u> </u>	0.
Schedule E - Unrelate	a Deb	t-rinancec	ıncom	e (see	nstructions)			0 0 1 1			
					2. Gross inc			3. Deduction	ns directly conn to debt-finance	ected with or a d property	llocable
1. Description	of debt-fine	anced properly			or allocable financed p	e to debt-	(a)	Straight line de (attach state		(b) Ott	her deductions sh statement)
(4)						~~~~				<u> </u>	
(1)								·····		 	
(2)			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	·····						 	
(3)										 	
(4) 4. Amount of average acquisiti		E Average	adjusted be		C 0.1			7		0	
debt on or allocable to debt-finar property (attach statement)	sced	on 5. Average adjusted basis of or allocable to debt-financed property (attach statement)			6. Column 4 divided by column 5			7. Gross income reportable (column 2 x column 6)		(column t	cable deductions 3 x total of columns (a) and 3(b))
(1)						%					
(2)						%		·····			
(3)				******************		%	~		• •		
(4)						%					
								nter here and o art I, line 7, co			e and on page 1, se 7, column (B).
Totals									0.		0.
Total dividends-received dedu	ctions inc	luded in columi	18						<u></u>	<u> </u>	0.
Schedule F - Interest,	Annui	ties, Roya	ities, ar	id Rer	its From C	ontrolle	d Orgai	nizations	see instr	uctions)	
				Exemp	t Controlled O	rganizatio	าร				
 Name of controlled organiz 	ation	Employer id num	entification	Net ur (loss) (s	3. related income see instructions)		4. f specified ints made	Incidad	of column 4 that In the controlling Ion's gross inco	ig į conne	ductions directly sted with income n column 5
(1)											
(2)			~!		······································						
(3)									Amriana		
(4)	//////////////////////////////////////		***************************************		******************************				massania sania di pining mining m		~~~~~
Nonexempt Controlled Organ	nizations		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			······································		***********	~~~		
7. Taxable Income	8. 1	let unrelated incom (see instructions		9 , To	tal of specified pay made	ments .	in the cont	column 9 that i trolling organiz ross income	s included 1 atlon's	Deductions with income	directly connected in column 10
(1)	 			 	······				-		
(2)	1	· · · · · · · · · · · · · · · · · · ·		····	*.			······································			
(3)											
(4)				 	······································						
A.7.	1			I			Enter here	olumns 5 and and on page 1 8, column (A)	, Part I,	Enter here and	ins 6 and 11. on page 1, Part I, olumn (B).
Totals						>			0.		0,
Totals			***************************************	***************************************		<u>»</u>			V 4 J		orm 990-T (2012
ACCIDE OF HEID										r	011H 220-1 (20 JS

Schedule G - Investme		Section 5	i01(c)(7	7), (9), or (17) Oı	rganizat	on	***************************************	***************************************	· ago
1. Desc	ription of Income	***************************************		2. Amount of Income	3. Dedu directly co (attach st	onnected	4. Set	asides tatement)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)					(**********				(coi. o pius coi. 4)
(2)			,					******************	
(3)						w			
(4)								***************************************	
				Enter here and on page 1, Part I, line 9, column (A).					Enter here and on page 1 Part I, line 9, column (8).
Totals			▶	0.	10.000				0.
Schedule I - Exploited (see instru	Exempt Activit	y Income,	Other	Than Advertis	ing Inco	me			
	0 :	3. Expen	292	4. Net income (loss)	F		·····		7. Excess exempt
1. Description of exploited activity	2. Gross unrelated business income from trade or business	directly coni with produ of unrela business in	nected Iction ted	from unrelated trade or business (column 2 minus column 3), if a gain, compute cols. 5 through 7.	5. Gross from acti is not un business	/lty that related	attribu	benses table to mn 5	expenses (column 6 minus column 5, but not more than column 4).
(1)		 							
(2)							•		
(3)									
(4)				***************************************				,	
	Enter here and on page 1, Part I, line 10, col. (A).	Enter here a page 1, P line 10, co	art I, 1, (8).		J				Enter here and on page 1, Part II, line 26.
Totals	0.		0.						0.
Schedule J - Advertisi	ng Income (see	instructions)							
Part I Income From	Periodicals Rep	orted on	a Con	solidated Basis	}				
									
1. Name of periodical			Olrect sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compu cols. 5 through 7.		culation ome	6. Readership costs		7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)									
(2)				-	Ni				
(2)									
(4)			***************************************				***************************************		
Totals (carry to Part II, line (5))	🏲	0.	0	•					0.
Part II Income From	Periodicals Rep	orted on	a Sepa	arate Basis (For	each perio	dical listed	l in Part II	, fill in	*****
columns 2 through	7 on a line-by-line b	asis.)	_	·	,				
1. Name of periodical	2. Gross advertising income		Olrect sing costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, conpu		culation ome			7. Excess readership costs (column 6 minus column 5, but not more
/4\ (\(\tau\)\(\tau\)\(\tau\)\(\tau\)	104 04	<u></u>	<u> </u>	cols. 5 through 7.		064	167	300	than column 4).
(1) CITY LIMITS	104,94	: . /	,671	97,278	•	964.	167,	300.	97,278.
(2)							***************************************		
(3) (4)									
		0.	0	Carte de la companya del companya de la companya de la companya del companya de la companya de l			entaliana viita	ing appearance	
Totals from Part I	Enter here and		ere and on						0 . Enter here and
	page 1, Part line 11, col. (/	I, page	1, Part I, 1, col. (B).						on page 1, Part II, line 27.
Takala Bart II (liana 1 5)	1 4 6 4 6 1	·	,671						
Totals, Part II (lines 1-5)			ore a	nd Trustees (see	instructio	nel	1114 (1114) (1114 (1114 (1114) (1114 (1114) (114)		97,278.
Concade it Compen	oanon or omoc	710, 011000	, ui	ia mastees (see	i isductio	3, Percer	it of	4 0	
1. 1	Vame			2. Title		time devot	ed to		ensation attributable elated business
(1)			····				%		
(2)			 				% %		
							%		····
(3)						***************************************	% %		
(4) Total. Enter here and on page 1, F	Part II line 14		I				- ⁷ 0 →		0.
var. contor more and on page 1, 1	G1 C 33 1100 5 7								Form 990-T (2012
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Department of Treasury Internal Revenue Service Ogden UT 84201

Notice	CP211A
Tax period	June 30, 2013
Notice date	March 10, 2014
Employer ID number	13-5562202
To contact us	Phone 1-877-829-5500
	FAX 801-620-5670

Page 1 of 1

COMMUNITY SERVICE SOCIETY OF NEW YORK 105 EAST 22ND STREET NEW YORK NY 10010-5413



061967

Important information about your June 30, 2013 Form 990

We approved your Form 8868, Application for Extension of Time To File an Exempt Organization Return

We approved the Form 8868 for your June 30, 2013 Form 990.

Your new due date is May 15, 2014.

What you need to do

File your June 30, 2013 Form 990 by May 15, 2014. We encourage you to use electronic filing—the fastest and easiest way to file.

Visit www.irs.gov/charities to learn about approved e-File providers, what types of returns can be filed electronically, and whether you are required to file electronically.

Additional information

- Visit www.irs.gov/cp211a.
- For tax forms, instructions, and publications, visit www.irs.gov or call 1-800-TAX-FORM (1-800-829-3676).
- · Keep this notice for your records.

If you need assistance, please don't hesitate to contact us.

CONSOLIDATED FINANCIAL STATEMENTS AND AUDITOR'S REPORT

JUNE 30, 2013

TABLE OF CONTENTS

Exhibit

- A Consolidated Statement of Financial Position
- B Consolidated Statement of Activities
- C Consolidated Statement of Cash Flows

Notes to Consolidated Financial Statements

Schedule

1 - Consolidated Schedule of Functional Expenses



Independent Auditor's Report

Board of Trustees
Community Service Society of New York
and Affiliates

Report on the Consolidated Financial Statements

We have audited the accompanying consolidated financial statements of Community Service Society of New York and Affiliates (the "Society"), which comprise the consolidated statement of financial position as of June 30, 2013 and the related consolidated statements of activities and cash flows for the year then ended, and the related notes to the consolidated 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these consolidated financial statements based on our audit. We conducted our audit 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 auditor's 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 financial position of Community Service Society of New York and Affiliates as of June 30, 2013 and the changes in their net assets and their cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Opinion on Supplementary Information

Our audit was conducted for the purpose of forming an opinion on the consolidated financial statements as a whole. The information for the year ended June 30, 2013 included in Schedule 1 - consolidated schedule of functional expenses is presented for purposes of additional analysis and is not a required part of the consolidated financial statements. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the consolidated financial statements. The information has been subjected to the auditing procedures applied in the audit of the consolidated financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the consolidated financial statements or to the consolidated financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information for the year ended June 30, 2013 is fairly stated in all material respects in relation to the consolidated financial statements taken as a whole.

Report on Summarized Comparative Information

We have previously audited Community Service Society of New York and Affiliates' June 30, 2012 consolidated financial statements, and we expressed an unmodified audit opinion on those audited consolidated financial statements in our report dated October 19, 2012. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2012 is consistent, in all material respects, with the audited consolidated financial statements from which it has been derived.

We had also expressed an unmodified opinion on the supplementary information included in Schedule 1 for the year ended June 30, 2012 in relation to those financial statements as a whole. In our opinion, the supplementary information for the year ended June 30, 2012 in Schedule 1 is consistent, in all material respects, with the audited supplementary information from which it has been derived.

October 24, 2013

CONSOLIDATED STATEMENT OF FINANCIAL POSITION

JUNE 30, 2013 (With Summarized Financial Information for June 30, 2012)

		2013	_	2012
ASSETS				
Cash and cash equivalents Investments (Note 2) Accounts receivable (Note 4)	\$	3,472,981 120,769,922	\$	4,738,244 117,712,599
Government agencies Other - net (Note 2) Securities sold receivable		3,063,253 211,116 1,400,000		2,201,279 186,336
Prepaid expenses and other assets Intangible asset - City Limits (Note 15) Beneficial interest in perpetual trusts (Note 2) Investment in The United Charities (Note 5)		65,834 31,335,966 2,090,057		84,276 220,000 29,670,817 1,906,028
Fixed assets - net (Note 6) Total assets	\$_	2,031,422 164,440,551	\$_	2,108,839 158,828,418
LIABILITIES AND NET ASSETS				
Liabilities Accounts payable and accrued expenses Accrued vacations payable Securities purchased payable Liability for postemployment and postretirement benefits (Note 9)	\$	1,538,624 785,809 1,400,000 7,720,018	\$	2,816,077 843,815 12,341,642
Total liabilities	_	11,444,451	. <u>-</u>	16,001,534
Net assets (Exhibit B) Unrestricted Temporarily restricted (Note 7) Permanently restricted (Note 8)		66,691,463 25,874,136 60,430,501		60,535,230 23,526,302 58,765,352
Total net assets		152,996,100		142,826,884
Total liabilities and net assets	\$	164,440,551	\$	158,828,418

See independent auditor's report.

The accompanying notes are an integral part of these statements.

CONSOLIDATED STATEMENT OF ACTIVITIES

YEAR ENDED JUNE 30, 2013 (With Summarized Financial Information for the Year Ended June 30, 2012)

al 2012	394,336 3,508,962 63,690 1,084,957 5,943,660	165,615	2,762,494	(1,598,324) 582,530	178,668	1,925,368	13,335,167
Total 2013	618,885 \$ 3,663,598 70,921 30,332 1,246,951 8,187,042	105,913	12,983,933	1,665,149 184,029	263,931 157,705	15,254,747	29,178,389
Permanently Restricted	69			1,665,149		1,665,149	1,665,149
Temporarily Restricted	3338,306 3,338,308 29,400 1,246,951 8,187,042	12,834,767	3,493,543	↔		3,493,543 (13,980,476)	2,347,834
Unrestricted	585,819 \$ 325,290 70,921 932	105,913	9,490,390	184,029	263,931	10,096,055	25,165,406
,	69			\$ 478,350	(214,419)	, ,	ş
	Public support and revenues Public support Contributions Foundations Bequests Greater New York Fund/United Way New York Times Neediest Cases Fund Government grants	Contracts Subscription and advertisement income Total public support and revenues	Revenues Investment income - net (Note 3) Change in fair value of beneficial	interest in perpetual trusts Change in investment in The United Charities (Note 5) Special events	Less direct cost of special events Net revenue from special events Program service fees	Total revenues Net assets released from restrictions (Note 7)	Total public support, revenues, and other support

-continued-

COMMUNITY SERVICE SOCIETY OF NEW YORK AND AFFILIATES

CONSOLIDATED STATEMENT OF ACTIVITIES

YEAR ENDED JUNE 30, 2013 (With Summarized Financial Information for the Year Ended June 30, 2012)

	Unrestricted	Temporarily Restricted	Permanently Restricted	To 2013	Total 2012
Expenses Program services Direct service program (includes \$51,584 of interest expense in 2012) Policy research and advocacy Public interest	\$ 13,188,297 4,084,754 1,087,142		·	\$ 13,188,297 94,084,754 1,087,142	\$ 11,752,564 3,537,621 1,266,006
Total program services	18,360,193			18,360,193	16,556,191
Supporting services Management and general Fund raising	4,913,726 950,208			4,913,726 950,208	4,769,158
Total supporting services	5,863,934			5,863,934	5,743,617
Total expenses	24,224,127			24,224,127	22,299,808
Change in net assets before other changes	941,279 \$	2,347,834 \$	1,665,149	4,954,262	(8,964,641)
Pension and other postretirement benefits adjustment (Note 9) Impairment loss - City Limits (Note 15)	5,434,954 (220,000)			5,434,954 (220,000)	(6,967,496)
Change in net assets (Exhibit C)	6,156,233	2,347,834	1,665,149	10,169,216	(15,932,137)
Net assets - beginning of year	60,535,230	23,526,302	58,765,352	142,826,884	158,759,021
Net assets - end of year (Exhibit A)	\$ 66,691,463 \$	25,874,136 \$	60,430,501	\$ 152,996,100 \$ 142,826,884	142,826,884

See independent auditor's report.

The accompanying notes are an integral part of these statements.

CONSOLIDATED STATEMENT OF CASH FLOWS

YEARS ENDED JUNE 30, 2013 AND 2012

		2013		2012
Cash flows from operating activities				
Change in net assets (Exhibit B) Adjustments to reconcile change in net assets to net cash used by operating activities	\$	10,169,216	\$	(15,932,137)
Net unrealized and realized loss (gain) on investments Depreciation and amortization Decrease (increase) in beneficial interest in perpetual trusts Change in investment in The United Charities Impairment loss Decrease (increase) in assets Accounts receivable - government agencies Accounts receivable - other		(9,590,315) 256,026 (1,665,149) (184,029) 220,000 (861,974) (24,780)		747,297 288,027 1,598,324 (582,530) (564,247) 97,526
Prepaid expenses and other assets Increase (decrease) in liabilities		18,442		37,102
Accounts payable and accrued expenses Accrued vacation payable Liability for postretirement and postemployment benefits	Winter	(1,277,453) (58,006) (4,621,624)		801,708 157,756 6,655,979
Net cash used by operating activities		(7,619,646)	_	(6,695,195)
Cash flows from investing activities Purchase of investments Proceeds from maturity and sales of investments Fixed asset acquisitions		(21,483,155) 28,016,147 (178,609)		(29,899,427) 37,106,223 (149,615)
Net cash provided by investing activities		6,354,383		7,057,181
Cash flows from financing activities Payments to City Futures, Inc. Repayment of loan Net cash used by financing activities			_	(50,000) (1,453,445) (1,503,445)
·				
Net change in cash and cash equivalents		(1,265,263)		(1,141,459)
Cash and cash equivalents - beginning of year	hme	4,738,244		5,879,703
Cash and cash equivalents - end of year	\$	3,472,981	\$	4,738,244
Supplemental disclosure of cash flow information Cash paid during the year for interest	\$		\$	51,584

See independent auditor's report.

The accompanying notes are an integral part of these statements.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 1 - ORGANIZATION SUMMARY

The consolidated financial statements include Community Service Society of New York ("CSS") and two affiliated organizations, Institute for Community Empowerment ("Institute") and Friends of R.S.V.P., Inc. (collectively, the "Society"). 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 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' goals are to enable, empower, and promote opportunities for poor families and individuals to develop their full potential to contribute to society, and to realize social, economic and political opportunities. CSS' primary focus is currently on the value of good-wage jobs and work supports to stimulate social and economic mobility among the working poor. In addition, City Limits Magazine and CityLimits.Org (collectively referred to as City Limits) were acquired with the authorization of the Board. A high-quality print magazine is distributed through subscription and newsstand sales pending achievement of the goal of transitioning City Limits Magazine and CityLimits.Org to an independent 501(c)(3) entity. 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. Friends of R.S.V.P., Inc. is a 501(c)(3) not-for-profit corporation created in 1986 as a fund-raising vehicle for the Retired and Senior Volunteer Program administered by CSS.

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

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES

Basis of accounting - The financial statements are prepared on the accrual basis of accounting.

Basis of consolidation - All material intercompany balances and transactions have been eliminated in the consolidation.

Use of estimates - The preparation of 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, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Cash and cash equivalents - The Society considers all highly liquid financial instruments with maturities of three months or less when acquired to be cash equivalents.

Investments - Investments are recorded at fair value. 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 financial statements.

Accounts receivable - Accounts receivable are recorded when billed.

Allowance for doubtful accounts - 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. Interest is not accrued or recorded on outstanding accounts receivable. As of June 30, 2013, the allowance for doubtful accounts is \$6,800.

Investment in The United Charities - Investment in The United Charities is recorded on the equity method.

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 recorded as revenue adjusting permanently restricted net assets.

Fixed assets - Fixed assets are stated at cost. Items costing in excess of \$2,500 and having an estimated useful life of at least one year are subject to capitalization. Expenditures for equipment and leasehold improvements are capitalized in the property fund as part of unrestricted net assets. Depreciation and amortization are provided on equipment and improvements using the straight-line method over the shorter of their estimated useful lives or the terms of the leases:

Computer equipment3 yearsOffice equipment7 yearsLeasehold improvements15 years

-continued-

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Net assets - Unrestricted net assets are those whose use by the Society has not been restricted by donors. Included in unrestricted net assets are board-designated funds of \$2,549,392 as of June 30, 2013. Temporarily restricted net assets are those whose use by the Society has been limited by donors or grantors to a specific time period or purpose. Permanently restricted net assets have been restricted by donors to be maintained by the Society in perpetuity.

Contributions - Unconditional contributions, including promises to give cash and other assets, are reported at fair value at the date the contribution is received. The gifts are reported as temporarily restricted or permanently restricted support if they are received with donor stipulations that limit the use of the donated assets. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified as unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

Government grants - Government grants are recorded as revenues to the extent that expenses have been incurred for the purposes specified by the grantors. Revenues from government contracts are subject to audit and negotiations between the Society and the government agencies. All government grants received are restricted for specific purposes.

Donated services - The Society does not record as contributions 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 fund-raising activities.

Functional expenses - The costs of providing the Society's programs and other activities have been summarized on a functional basis. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Operating leases - Rent expense is recognized on the first day of each month for the current month. Operating leases have been recorded on the straight-line basis over the life of each lease.

Summarized financial information - The financial statements include certain prior-year summarized comparative information in total but not by net asset class. Such information does not include sufficient detail to constitute a presentation in conformity with generally accepted accounting principles. Accordingly, such information should be read in conjunction with the organization's financial statements for the year ended June 30, 2012, from which the summarized information was derived.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements

Fair Value Measurements establishes a framework for measuring fair value. The framework provides 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 or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below. Level 1 inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Society has the ability to access. Level 2 inputs to the valuation methodology include:

- · Quoted prices for similar assets or liabilities in active markets;
- · Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability. Level 3 inputs to the valuation methodology are unobservable and significant to the fair value measurement. The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2013, as compared to those used at June 30, 2012.

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

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.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements (continued)

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.

Investments for 2012 have been restated from within Level 1 to Level 3 to more accurately disclose the fair value hierarchy. In addition, the descriptions of the investments have also been restated.

The following table sets forth by level, within the fair value hierarchy, the assets at fair value as of June 30, 2013 with comparative summarized information for June 30, 2012:

	2013	2012
	Level 3	Level 3
Commingled Funds	\$ 113,553,102	\$ 109,786,686
Structured Debt Fund	1,371,391	2,120,737
Real Estate Fund	5,845,429	5,805,176
	120,769,922	117,712,599
Beneficial interest in perpetual trusts	31,335,966	29,670,817
	\$ <u>152,105,888</u>	\$ <u>147,383,416</u>

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements (continued)

Level 3 Gains and Losses

The table below sets forth a summary of changes in the fair value of the Level 3 assets for the year ended June 30, 2013:

	Commingled Funds		tructured Debt Fund	F	keal Estate Fund	Beneficial Interest in Perpetual Trusts	Total
Balance, beginning							
of year	\$ 109,786,686	\$	2,120 , 737	\$	5,805,176	\$ 29,670,817	\$ 147,383,416
Purchases	18,838,468				300,000		19,138,468
Sales	(25,936,534)		(797,992)		(965,066)		(27,699,592)
Fees	(284,976)		(31,579)				(316,555)
Interest income	2,169,045		10,586		165,056		2,344,687
Unrealized gains	, ,		,		,		, r 1,00 <i>7</i>
(losses)	6,187,033		(296,765)		349,257	1,665,149	7,904,674
Realized gain	2,793,380		366,404		191,006	, , -	3,350,790
Balance, end of							310001100
year	\$ <u>113,553,102</u>	\$	<u>1,371,391</u>	\$	5,845,429	\$ <u>31,335,966</u>	\$ <u>152,105,888</u>
* The amount of ne	t gain for the peri	od at	tributable to t	he o	hange in unre	ealized gain	

^{*} The amount of net gain for the period attributable to the change in unrealized gain relating to assets still held at the report date.

\$_7,904,674

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements (continued)

Level 3 Investments

Fund Name	Redemption Period	Notice Period	Description of Fund	Amount
CF Charitable Temporary Investment Fund	None	None ,	The assets of the Fund shall be invested primarily in instruments issued by the U.S. Government, Federal agencies, sponsored agencies or sponsored corporations; short-term corporate obligations maturing in 397 days or less. The Fund's maximum average maturity will be 60 days and the Fund's maximum weighted average life will be 120 days.	\$ 716,734
CF DV Aggregate Bond Index Fund	None	None	The objective of the Fund is to track the performance of the Barclays U.S. Aggregate Index. In meeting this objective, the Fund may invest in securities (including those issued through private placements) and a combination of other collective funds (each an affiliate of the Fund and collectively referred to herein as the "CF Collective Investment Funds").	35,061,638
CF DV International Stock Index Fund	None	None	The objective of the Fund is to track the performance of the MSCI EAFE Index. In meeting this objective, the assets of the Fund may be invested in securities and a combination of other CF Collective Investment Funds that together are designed to track the MSCI EAFE Index.	11,713,847

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements (continued)

Level 3 Investments

Fund Name	Redemption Period	Notice Period	Description of Fund	Amount
CF DV Large Cap Stock Index Fund	None	None	The objective of the Fund is to track the performance of the Russell 1000 Index. In meeting this objective, the assets of the Fund may be invested in securities and a combination of other CF Collective Investment Funds that together are designed to track the performance of the Russell 1000 Index.	\$ 35,844,012
CF DV Small Cap Stock Index Fund	None	None	The objective of the Fund is to track the performance of the Russell 1000 Index. In meeting this objective, the assets of the Fund may be invested in securities and a combination of other CF collective Investment Funds that together are designed to track the performance of the Russell 1000 Index.	12,015,503
CF U.S. TIPS 1- 10 Year Fund	None	None	The investment objective of the Fund is to maximize portfolio real return and outperform the index, over a full market cycle, on an absolute risk-adjusted basis. The Fund seeks consistent outperformance in both rising and falling interest rate environments. The Fund invests in US TIPS and Treasuries.	3,259,704

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements (continued)

Level 3 Investments

Fund Name	Redemption Period	Notice Period	Description of Fund	Amount
CF DV Global Alpha II Fund	None	None	The objective of the Fund is to exceed the performance of the Citigroup One-Month U.S. Treasury Bill Index. In meeting this objective, the assets of the Fund may be invested in securities and a combination of other CF Collective Investment Funds.	\$ 3,009,086
CF Equity Market Neutral Fund	None	None	The objective of the Fund is to exceed the performance of the 30-day United States Treasury Bill while maintaining a net market exposure of zero. The objective may be achieved by investing up to 100% of the value of assets of the Fund in long positions and up to 100% of the value of the assets of the Fund in short positions.	3,117,724
CF Emerging Markets Value Equity Fund	None	None	The Fund will be invested primarily in common stocks and other equity securities of issuers organized or conducting business in countries other than the United States.	8,814,854
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.	1,371,391

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (continued)

Fair Value Measurements (continued)

Level 3 Investments

Fund Name	Redemption Period	Notice Period	Description of Fund	Amount
CF Global Real Estate Securities Fund	None	None	The primary investment objective of the Fund is to maximize total return. The assets of the Fund shall be invested primarily in a diversified portfolio of listed properties companies around the world whose principal business is the ownership, management and/or development of income-producing and for-sale real estate properties.	\$5,845,429
				\$ <u>120,769,922</u>

Uncertainty in income taxes - The Society has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements. Periods ending June 30, 2010 and subsequent remain subject to examination by applicable taxing authorities.

Subsequent events - Subsequent events have been evaluated through October 24, 2013, which is the date the financial statements were available to be issued.

NOTE 3 - INVESTMENT INCOME

Investment income for the years ended June 30, 2013 and 2012 consists of the following:

	2013	2012
Interest and dividends	\$ 2,350,923	\$ 2,549,186
Net realized gain Net unrealized gain (loss)	3,350,790 6,239,525	1,899,250 (2,646,547)
Perpetual trust investment income	1,359,250	1,241,389
Less investment management fees	(316,555)	(280.784)
	\$ <u>12,983,933</u>	\$ <u>2,762,494</u>

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 3 - INVESTMENT INCOME (continued)

State law allows the Board of Trustees (Board) to appropriate as much of the net appreciation as is prudent considering the Society's long- and short-term needs, present and anticipated financial requirements, expected total return on its investment, price level trends, and general economic conditions. Consistent with the Society's spending policy for the year ended June 30, 2013, \$7,714,000 was appropriated, of which \$7,714,000 was spent. For the year ended June 30, 2012, \$7,879,000 was appropriated, of which \$7,879,000 was spent.

NOTE 4 - ACCOUNTS RECEIVABLE

Receivables from government agencies primarily represent amounts owed by the U.S. Department of Health and Human Services for the New York State Establishment Exchange Grant, Consumer Assistance Program and Children's Health Insurance Program Reauthorization Act, from Corporation for National and Community Service for the RSVP Program, and from the NYC Department of Education for the Experience Corps Program.

Other receivables primarily represents amounts owed by private foundations for Healthcare Campaign Programs.

NOTE 5 - INVESTMENT IN THE UNITED CHARITIES

The Society has a 50% undivided interest in The United Charities, a not-for-profit corporation organized to provide a center in which benevolent institutions can have their headquarters. At December 31, 2012 and 2011, the net assets of The United Charities aggregated \$4,180,114 and \$3,812,056, respectively. The Society's investment in The United Charities is carried at \$2,090,057 and \$1,906,028 at June 30, 2013 and 2012, respectively. The United Charities is obligated under various lease agreements to provide office facilities to the Society and other tenants (see Note 11).

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 6 - FIXED ASSETS

Fixed assets at June 30, 2013 and 2012 consisted of the following:

	2013	2012
Computer and office equipment Leasehold improvements	\$ 808,764 2,916,577	\$ 633,802 2,912,930
Less accumulated depreciation and amortization	3,725,341 (1,693,919)	3,546,732 (1,437,893)
	\$ <u>2,031,422</u>	\$ <u>2,108,839</u>

The accumulated amortization was \$1,214,668 and \$1,023,322 as of June 30, 2013 and 2012, respectively.

NOTE 7 - TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets as of June 30, 2013 and 2012 include the following amounts that are restricted for the following program or activities by donor specifications:

	2013	2012
Direct service program Policy research and advocacy	\$ 21,815,219 1,393,102	\$ 20,392,271 718,037
Public interest Program administration	357,062	20,000 338,550
Unappropriated investment income from endowments	2,308,753	2,057,444
	\$ <u>25,874,136</u>	\$ <u>23,526,302</u>

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 7 - TEMPORARILY RESTRICTED NET ASSETS (continued)

Net assets were released from donor restrictions by incurring expenses satisfying the restricted purposes specified by donors as follows:

Direct service program	\$ 11,441,833
Policy research and advocacy	2,056,175
Public interest	191,800
Program administration	290,668
	\$ <u>13,980,476</u>

NOTE 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.

Permanently restricted net assets consist of the following:

	2013	2012
Endowment		
Direct service program		
Income restricted for specific purposes	\$ 4,741,097	\$ 4,741,097
Income restricted for program administration	454,414	454,414
Income available for general purposes	23,899,024	23,899,024
Total endowment	29.094,535	29,094,535
Beneficial interest in perpetual trusts - income		
restricted	11,509,999	11,038,740
Beneficial interest in perpetual trusts - income	, .	. ,
unrestricted	19,825,967	18,632,077
Total beneficial interest in perpetual trusts	31,335,966	29,670,817
	\$ <u>60,430,501</u>	\$ <u>58,765,352</u>

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 8 - PERMANENTLY RESTRICTED NET ASSETS (continued)

Interpretation of Relevant Law

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.

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.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 8 - PERMANENTLY RESTRICTED NET ASSETS (continued)

Changes in Endowment Net Assets for the Year Ended June 30, 2013

	Un	restricted	emporarily Restricted	Permanently Restricted	Total
Endowment net assets, beginning of year Interest and dividend	\$		\$ 2,781,980	\$ 29,094,535	\$ 31,876,515
income Realized gain Unrealized gain Appropriation for		485,238 693,242 1,290,889	94,466 134,959 251,309		579,704 828,201 1,542,198
expenditures		(2,469,369)	 (229,425)		(2,698,794)
Endowment net assets, end of year	· \$	~	\$ 3,033,289	\$ <u>29,094,535</u>	\$ <u>32,127,824</u>

NOTE 9 - PENSION PLAN AND OTHER POSTRETIREMENT BENEFITS

The Society has a noncontributory defined benefit pension 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 retire 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 postretirement benefits as incurred.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 9 - PENSION PLAN AND OTHER POSTRETIREMENT BENEFITS (continued)

The tables below set forth each plan's funded status and amounts recognized in the Society's financial statements at June 30, 2013 and 2012 as follows:

	Pension	Benefits	Other Benefits		
	2013	2012	2013	2012	
Projected benefit obligation Fair value of plan assets	\$ (34,019,053) 27,478,752	\$ (35,005,576) 24,070,206	\$ (1,179,717)	\$ (1,406,272)	
Funded status	\$ <u>(6,540,301)</u>	\$ <u>(10,935,370</u>)	\$ <u>(1,179,717</u>)	\$ <u>(1,406,272</u>)	
Society's contributions Employees'	\$ 900,000	\$ 1,500,000	\$ 181,056	\$ 193,483	
contributions Benefits paid Accrued benefit cost recognized in the	828,090	763,492	2,789 183,845	11,728 205,211	
statement of financial position Net periodic pension	(6,540,301)	(10,935,370)	(1,179,717)	(1,406,272)	
cost	1,852,903	1,320,195			
Other postemployment benefit cost			41,483	61,771	

The future expected benefits to be paid for the postretirement plans are as follows:

Years Beginning July 1	
2014	\$ 1,245,178
2015	1,333,154
2016	1,539,233
2017	1,686,667
2018	1,733,208
2019-2023	10,361,170

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 9 - PENSION PLAN AND OTHER POSTRETIREMENT BENEFITS (continued)

The accumulated benefit obligation for the defined benefit pension plan was \$30,809,004 and \$30,598,989 at June 30, 2013 and 2012, respectively.

	Pension Benefits		Other	Benefits	
	2013	2012	2013	2012	
Weighted-average assumptions as of June 30:					
Discount rate	4.75%	4.25%	4.75%	4.25%	
Expected return on plan assets	8.00%	8.00%	N/A	N/A	
Rate of compensation increase	4.50	4.50	4.50	4.50	

Mortality table: Combined RP 2000 Annuitant and Non-Annuitant table updated for 2012 used for pension benefits. 1994 Group Annuity Mortality Table for 2011 used for other benefits.

For 2013 and 2012, an assumed long-term rate of return of 8.0% 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, a 7.6% health care cost trend rate was assumed for 2013 and 2012. The rate is expected to decrease to 5.9% after 2023-2033.

The components of net pension cost and net postretirement benefit cost for the years ended June 30, 2013 and 2012 are as follows:

	Pension Benefits			Other Benefits				
	2013	2012		2013	2012			
Service costs	\$ 1,228,695	\$ 1,007,223						
Interest cost	1,445,525	1,492,570	\$	53,531	\$	72,859		
Expected return on assets	(1,894,054)	(1,773,615)						
Net amortization and deferral	1,000,784	463,294		19,932		20,892		
Amortization of prior service cost	71.953	130,723	**	(31,980)		(31,980)		
Net cost	\$ <u>1,852,903</u>	\$ <u>1,320,195</u>	\$	41,483	\$	61,771		

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 9 - PENSION PLAN AND OTHER POSTRETTREMENT BENEFITS (continued)

Unallocated insurance contract - The Community Service Society of New York Retirement Plan's investment contract with Metropolitan Life Insurance Company is valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations, considering the creditworthiness of the issuer. Funds under the investment contract that have been allocated and applied to purchase annuities (that is, Metropolitan is obligated to pay the related pension benefits) are excluded from the Society's assets.

Pooled separate accounts - The pooled separate accounts are valued at the net asset value ("NAV") of shares held by The Community Service Society of New York Retirement Plan at year end.

		2013		2012					
Level 1		Level 2	Total	Level 1	Level 2	Total			
Unallocated insurance contract Pooled separate accounts Metropolitan	\$ -	\$11,133,007	\$11,133,007	\$ -	\$10,613,938	\$10,613,938			
Life Insurance Company Index Fund II Metropolitan Life Insurance Company Small Cap	13,398,500	~	13,398,500	11,124,203	-	11,124,203			
Fund	<u>2,947,245</u>	Pi	2,947,245	2,332,065		2,332,065			
	\$ <u>16,345,745</u>	\$ <u>11,133,007</u>	\$ <u>27,478,752</u>	\$ <u>13,456,268</u>	\$ <u>10,613,938</u>	\$ <u>24,070,206</u>			

The Society's pension investment policy recognizes the long-term nature of pension liabilities, the benefits of diversification across asset classes and the effects of inflation. The diversified portfolio is designed to maximize returns consistent with levels of liquidity and investment risk that are prudent and reasonable. All assets are managed externally according to guidelines established individually with investment managers. Portfolio risk is controlled by having managers comply with guidelines, establishing the maximum size of any single holding in their portfolios and by using managers with different investment styles. The target asset allocation of the pension fund is approximately 50%, S&P 500 equities, 10% small-cap managers, and 40% fixed income.

The Society expects to contribute at least \$900,000 to its pension plan during fiscal year 2014.

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 10 - LEASES

Community Service Society leases office space under operating leases which expire at various dates through December 31, 2013, and is obligated to pay annual rentals plus an additional amount based upon increases in real estate taxes, maintenance, and utility costs. Rental expense was \$1,034,340 in 2013 and 2012.

The related future minimum lease payments as of June 30, 2013 are \$504,792 through December 31, 2013 (Note 11).

NOTE 11 - RELATED-PARTY TRANSACTIONS

The United Charities, a charitable corporation, leases office space to the Society, which has a 50% undivided interest in the ownership of the building since 1939. The United Charities was organized to provide a center in which certain benevolent institutions maintain their headquarters. The lease expired December 31, 2012, and was renewed until December 31, 2013. Rent expenses paid by the Society for the year ended June 30, 2013 was \$1,009,584. Management fees received from The United Charities were \$84,000 and \$78,000 in 2013 and 2012, respectively.

NOTE 12 - CONCENTRATIONS

Financial instruments which potentially subject the Society to a concentration of credit risk are cash accounts with financial institutions in excess of FDIC insurance limits.

NOTE 13 - FAIR VALUE OF FINANCIAL INSTRUMENTS

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

NOTES TO CONSOLIDATED FINANCIAL STATEMENTS

JUNE 30, 2013

NOTE 14 - EXPENSES

	2013	2012		
Program services	\$ 18,360,193	\$ 16,556,191		
Management and general	5,230,281	5,049,942		
Fund raising	950,208	974,459		
Direct cost of special event	214,419			
Total	\$ <u>24,755,101</u>	\$ <u>22,580,592</u>		

NOTE 15 - INTANGIBLE ASSET - CITY LIMITS

In 2011, the Society recorded intangible assets totaling \$220,000, which include: twelve years' digitized archives, photo library, subscriber list, donor list and seven computers in connection with its acquisition of City Limits.

At June 30, 2013, management has determined that the carrying value has been impaired and recorded an impairment loss of \$220,000 for City Limits.

CONSOLIDATED SCHEDULE OF FUNCTIONAL EXPENSES

YEAR ENDED JUNE 30, 2013 (With Summarized Financial Information for the Year Ended June 30, 2012)

	Program Services			Supporting Services						
	Direct Service	Policy Research and	Public		Management and	Fund		Direct Cost of Special	Tot	
,	Program	Advocacy	Interest	Total	and General	Raising	Total	ot Speciai Event	2013	2012
Salaries Fringe benefits and payroli taxes		\$ 1,619,620 \$			S 1,918,348 S				\$ 8,585,286 \$	
rringe benefits and payron laxes	2,154,863	845,901	253,592	3,254,356	1,309,681	229,270	1,538,951		4,793,307	4,191,763
Total salaries and related expenses	6,279,514	2,465,521	738,163	9,483,198	3,228,029	667,366	3,895,395		13,378,593	13,416,312
Professional fees	5,003,328	1,196,777	185,098	6,385,203	818,355	135,426	953,781		7,338,984	5,380,049
Supplies	202,206	22,146	13,534	237,886	27,856	7,124	34,980		272,866	259,838
Telephone	60,588	23,697	10,613	94,898	63,326	18,025	81,351		176,249	149,324
Postage and shipping	26,964	3,473	1,950	32,387	10,367	2,291	12,658		45,045	83,409
Occupancy Insurance	525,858	206,662	75,700	808,220	194,761	55,836	250,597		1,058,817	1,065,808
Printing	10,005 L2,913	14,484 6.908	4,716 1,567	29,205 21,388	112,669 243	27.242	112,669		141,874 48,973	131,716 93,319
Transportation	192,114	16,768	1,307	21,566	109,696	27,342 804	27,585 110,500		321,025	322,493
Conferences, conventions and meetings	261,990	54,325	28,087	344,402	121,238	14,453	135,691		480,093	471,413
Subscriptions and reference publications	19,891	14,221	3,661	37,773	10,617	1.854	12,471		50,244	48,008
Catering and entertainment	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,,221	2,001	3.,3	10,01.	×200 .		\$ 214,419	214,419	10,000
Direct assistance	355,534	5,692		361,226				,	361,226	191,397
Support payments	60,923	200	150	61,273					61,273	51,018
Equipment rentals and expenses	39,179	11,634	5,337	56,150	162,470	7,642	170,112		226,262	225,950
Interest										51,584
Bad debt	892		5,679	6,571	6		6		6,577	70,143
Investment management fees	***************************************				316,555		316,555		316,555	280,784
Total other than personnel costs	6,772,385	1,576,987	337,735	8,687,107	1,948,159	270,797	2,218,956	214,419	11,120,482	8,876,253
Total expenses before depreciation and amortization	13,051,899	4,042,508	1,075,898	18,170,305	5,176,188	938,163	6,114,351	214,419	24,499,075	22,292,565
Depreciation and amortization	136,398	42,246	11,244	189,888	54,093	12,045	66,138		256,026	288,027
Total expenses	13,188,297	4,084,754	1,087,142	18,360,193	5,230,281	950,208	6,180,489	214,419	24,755,101	22,580,592
Less direct cost of special event								(214,419)	(214,419)	
Less investment management fees deducted from investment income on the statement of activities					(316,555)		(316.555)	• • •	(316,555)	(280,784)
around on the statement of averages				_	(210,233)		(210,233)		(310,333)	(200,704)
Total expenses reported by function on the statement of activities (Exhibit B)	S 13,188,297	\$ 4,084,754 \$	1,087,142	\$ 18,360,193	\$ 4,913,726 5	950,208	§ 5,863,934	\$ -	\$ 24,224,127	\$ 22,299,808
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See independent auditor's report.