Extended to November 16, 2020

Form **99** (Rev. January 2020) Department of the Treasury

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning D Employer identification number C Name of organization Check if applicable Neighborhood Legal Services Address change of Los Angeles County Name change 95-2408642 Doing business as Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ (800)433-62511102 E. Chevy Chase Drive termin-ated 19,408,289. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended Glendale, CA 91205 H(a) Is this a group return Applica-F Name and address of principal officer: Yvonne Mariajimenez for subordinates? Yes X No pending same as C above H(b) Are all subordinates included? Yes No I Tax-exempt status: X 501(c)(3) ____ 501(c) ()◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) Website: ➤ www.nlsla.org H(c) Group exemption number ▶ K Form of organization: X Corporation Association Other > Year of formation: 1965 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: Neighborhood Legal Services of Activities & Governance Los Angeles County (NLSLA) is a multi-lingual, public interest law Check this box Fig. 1 if the organization discontinued its operations or disposed of more than 25% of its net assets 27 Number of voting members of the governing body (Part VI, line 1a) 27 Number of independent voting members of the governing body (Part VI, line 1b) 176 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 500 6 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 39 Prior Year **Current Year** 15,779,579. 16,867,769. Contributions and grants (Part VIII, line 1h) Revenue 344,833. 423,325. Program service revenue (Part VIII, line 2g) 52,339. 56,681. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -6,962. -3,049 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 16,256,536. 17,257,979. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 3,077,245. 2,803,091 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 10,957,092. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 2,394,915. 2,550,700. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 16,155,098. 17,894,766. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 101,438. 636,787. 19 Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year** End of Year 9,628,968. 10,807,846. 20 Total assets (Part X, line 16) 2,758,802. 4,565,739. 21 Total liabilities (Part X, line 26) 6,242,107. 6,870,166. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of prepare (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Bryan King Sheldon, Treasurer Here Type or print name and title Date Preparer's signature Print/Type preparer's name ₽01775198 Paid Tonetta L. Conner, CPA Firm's EIN > 95-4557617 Firm's name Harrington Group, CPAs, LLP Preparer Firm's address 234 East Colorado Blvd., Suite M150 Use Only Pasadena, CA 91101 Phone no. (626) 403-6801 X Yes May the IRS discuss this return with the preparer shown above? (see instructions)

Form	of Los Angeles County	95-2408642 Pag	ıе 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	As a national leader in innovative legal services,	NLSLA changes lives	
	and transforms communities. Through a combination	of compassionate	
	individual representation, high impact litigation,		
	advocacy, community education, and collaborative p		
2	Did the organization undertake any significant program services during the year which were not lister	d on the	
	prior Form 990 or 990-EZ?	Yes X	No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	n services? Yes X	No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program s	services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocati	ions to others, the total expenses, and	
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$15 , 176 , 616 • including grants of \$3 , 077 , 245	•) (Revenue \$ 344,833	•)
	NLSLA provides free legal assistance to low-income		
	in Los Angeles County on civil matters that partic		
	poor including housing, family and domestic violen	ce, public benefits,	
	health, immigration, employment, workforce develop	ment, education,	
	community economic development and consumer rights		
	In 2019, NLSLA provided assistance to 104,307 indi		
	comprised of representation on 8,839 cases, help t		.t
	self-help centers and clinics, 9,442 through outre		
	presentations. NLSLA also assisted hundreds of tho	usands of people	
	through impact litigation.		
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$	
	(Codd)		— ′
4d	Other program services (Describe on Schedule O.)		

) (Revenue \$

including grants of \$15,176,616.

Total program service expenses ▶

Neighborhood Legal Services Form 990 (2019) of Los Angeles County 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	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9	Х	
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			l
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
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		Х
14a		14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			l
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			,,
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		37	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_v
00	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		х	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Λ	

Form 990 (2019) of Los Angeles Cou Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
-	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 16			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
			26.5	

Form 990 (2019)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	176			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?		2b	X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other $\frac{1}{2}$	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?	4a		X
b	If "Yes," enter the name of the foreign country					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A					.,,
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction that it was or is a party to a prohibited tax shelter transaction.			5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
ба	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			C -		x
L	any contributions that were not tax deductible as charitable contributions?			6a		
D	If "Yes," did the organization include with every solicitation an express statement that such contribute were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).			OD		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	nrovided to the payor?	7a	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?		· 	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contra	ct?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti	ract?		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file February	orm 8	899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation 1	ile a Form 1098-C?	7h	N/	<u> </u>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th				
	sponsoring organization have excess business holdings at any time during the year?		N/A	8		
9	Sponsoring organizations maintaining donor advised funds.		NT / 7			
	Did the sponsoring organization make any taxable distributions under section 4966?		37/3	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		IN/A	9b		
10	Section 501(c)(7) organizations. Enter:	10a	1			
	Initiation fees and capital contributions included on Part VIII, line 12 N/A Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
11	Section 501(c)(12) organizations. Enter:	100	1			
	Gross income from members or shareholders N/A	11a	1			
	Gross income from other sources (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year $\frac{N}{A}$	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		_			
а	Is the organization licensed to issue qualified health plans in more than one state?		N/A	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	ı	.			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c		4.		v
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule the experient for subject to the explanation of the experience of the			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			45		х
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.			15		-23
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	nt inco	me?	16		Х
	If "Yes," complete Form 4720, Schedule O.	100		.5		==

95-2408642

Form 990 (2019) 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 on Schedule O. See instructions.

	Creck it Scriedule O contains a response or note to any line in this Part VI			21
Sec	tion A. Governing Body and Management			
,	Enter the number of voting members of the governing body at the end of the tax year 27		Yes	No
1a	The same stands of the same governing souly at the same stand, soul			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			77
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			77
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA		_	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s only) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finar	ncial	
_	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Neighborhood Legal Services - Lynne Hiortdahl - (800) 433-6251			
	1102 E. Chevy Chase Drive, Glendale, CA 91205			

Form 990 (2019) of Los Angeles County 95-24 Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

		1 1
Check if Schedule O contains a response or note to any line	a in thic Part \/II	1 1
Officer if deficiency of contains a response of fide to any line	ic iii tiiis i ait vii	

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization (A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	١		Pos	itior			Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	than is bot	h an	compensation	compensation	amount of
	week	-	cer ar	nd a d	irecto	or/trus	tee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	ruste	Institutional trustee		99/	mpen		(***2/1099-101130)		and related
	below	dualt	ntiona	_	Key employee	st co	Je.			organizations
	line)	Indivi	Institi	Officer	Key e	Highest compensated employee	Former			
(1) Paul J. Loh, Esq.	2.00									
President		Х		Х				0.	0.	0.
(2) Esteban Rodriguez, Esq.	2.00									
Vice President		Х		Х				0.	0.	0.
(3) Bryan King Sheldon, Esq.	2.00									
Treasurer		Х		Х				0.	0.	0.
(4) Elizabeth Aparicio	2.00							_	_	_
Secretary		Х		Х				0.	0.	0.
(5) Ana E. De Santiago Ayon, Esq.	1.00								_	
Board Member		Х						0.	0.	0.
(6) Michael H. Bierman, Esq.	1.00	ļ								
Board Member		Х						0.	0.	0.
(7) Saheli Datta, Esq.	1.00	ļ								
Board Member (Start 10/19)	1 00	Х						0.	0.	0.
(8) Jose De Sosa	1.00	١							•	•
Board Member	1 00	Х						0.	0.	0.
(9) Erica Deutsch, Esq.	1.00	١,,							0	•
Board Member	1 00	Х			_			0.	0.	0.
(10) Jeffrey I. Ehrlich, Esq.	1.00	Į.,							0	0
Board Member	1.00	Х						0.	0.	0.
(11) Kathi Frazier Board Member	1.00	x						0.	0.	0.
(12) Silva Garabedian	1.00	^						0.	0.	0.
Board Member	1.00	X						0.	0.	0.
(13) Albert J. Garcia, Esq.	1.00	122						0.	0.	•
Board Member	1.00	x						0.	0.	0.
(14) Jose R. Hernandez	2.00	123							•	•
Executive Committee	2.00	X						0.	0.	0.
(15) Tamila C. Jensen, Esq.	2.00									
Executive Committee		x						0.	0.	0.
(16) Brian Kabateck, Esq.	1.00	T								
Board Member		x						0.	0.	0.
(17) Sharre Lotfollahi	1.00								_	
Board Member (Start 2/19)		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)			((C)			(D)	(E)			(F)	
Name and title	Average	(do		Pos		1 than	one	Reportable	Reportable	,	Es	stimate	ed
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	n	ar	nount	of
	week (list any	_	Cer ai	lu a u	lirecia	or/trus	lee)	from	from related			other	
	hours for	or director				L		the	organization (W-2/1099-MIS		l	pensa om th	
	related	e or d	stee			sated		organization (W-2/1099-MISC)	(88-2/1099-1818	30)		janizat	
	organizations	truste	al trus		/ee	mper		(11 27 1000 111100)				d relat	
	below	Individual trustee	Institutional trustee	l la	Key employee	est co lo yee	Je.			ļ	org	anizati	ions
	line)	Indiv	Insti	Officer	Key e	Highest compensated employee	Former						
(18) Oscar Madrigal	1.00												
Board Member		X						0.		0.			0 .
(19) John B. Major	1.00							_		_			
Board Member (Start 7/19)		X						0.		0.			0 .
(20) Patricia L. McCabe, Esq.	1.00												
Board Member		X						0.		0.			0 .
(21) Nicolas Orihuela, Esq.	1.00												
Board Member (Start 12/19)		X						0.		0.			0 .
(22) Emily Song	1.00												
Board Member		X						0.		0.			0 .
(23) Luz Elena Tafolla	1.00												
Board Member		X						0.		0.			0 .
(24) Tiffany W. Tai, Esq.	2.00												
Executive Committee		X						0.		0.			0
(25) Richard Tom, Esq.	2.00												
Past President		X						0.		0.			0
(26) Andrea L. Tozer, Esq.	1.00												_
Board Member		Х						0.		0.			0.
1b Subtotal								0.		0.			0
c Total from continuation sheets to Part V								1,296,399.		0.		4,7	
d Total (add lines 1b and 1c)							<u> </u>	1,296,399.		0.	22	4,7	69
2 Total number of individuals (including but r	not limited to th	nose	liste	ed al	bove	e) wł	no r	eceived more than \$100	0,000 of reportab	le			1
compensation from the organization													14
												Yes	No
3 Did the organization list any former officer,			key e	emp	loye	e, o	r hig	ghest compensated emp	oloyee on				37
line 1a? If "Yes," complete Schedule J for s											3		X
4 For any individual listed on line 1a, is the su												37	
and related organizations greater than \$15											4	Х	
5 Did any person listed on line 1a receive or a	•				-			•			_		v
rendered to the organization? If "Yes," com	iplete Schedul	e J i	or s	ucn	pers	son .					5		X
Section B. Independent Contractors									A 100.000 f				
1 Complete this table for your five highest co	•	•							•	npens	sation	rrom	
the organization. Report compensation for	tne calendar y	ear	enai	ng v	vith	or w	rithir		year. I				
(A) Name and business	address							(B) Description of s	services	C) ompe	C) nsatio	n
Environmental Contracting							\dashv	2000p					
800 E. 1st St., Los Ange	-	91	ากา	12			ŀ	Building			79	9,8	13
The best Hob Imge	100, 011						一	Durruring				<i>J</i> , 0	
							_						
							\dashv						
									l				
							\dashv						
2 Total number of independent contractors (includina but r	not li	mite	d to	tho	se li	ster	d above) who received n	nore than				
						۰۰۰ تــ		,					

Form 990 (2019)

Form 990

Form 990 OI LOS AI	ngeres (201	ını	<u>-y</u>					95-240	0042
Part VII Section A. Officers, Directors, Tru	ıstees, Key Eı	nplo	oyee	s, a	nd l	High	est	Compensated Employ	ees (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average			۰، Pos		1		Reportable	Reportable	Estimated
Name and the	hours	(c	heck				olv)	compensation	compensation	amount of
	per	(5)	T				·,,	from	from related	other
	week					ee Ge		the	organizations	compensation
	(list any	ctor				nplo		organization	(W-2/1099-MISC)	from the
	hours for	rdire				ed er		(W-2/1099-MISC)	,	organization
	related	tee o	nstee			ensat				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	/id ua	tution	er	empl	est c	Jer			
	line)	Indi	Insti	Officer	Key	High	Former			
(27) Mandy Wu	2.00									
Executive Committee		Х						0.	0.	0.
(28) Yvonne Mariajimenez(Start 9/19)	50.00									
Deputy Director/Executive Director				Х				203,739.	0.	35,161.
(29) Neal S. Dudovitz (End 9/19)	50.00									-
Executive Director/Special Counsel				x				229,497.	0.	29,285.
(30) Lynne M. Hiortdahl	50.00			-						
Chief Financial Officer	- 33733			x				137,782.	0.	33,573.
(31) David Pallack	50.00							13777021		3373731
Dir. of Litigation & Policy	30.00					x		176,285.	0.	31,795.
(32) Tzung-Lin Fu	50.00					122		170,203.	•	31,733.
Dir. of Litigation & Policy	30.00					X		156,004.	0.	38,313.
(33) Carol Smith	50.00					^		130,004.	0.	30,313.
	30.00					x		124 562	0.	22 400
Director of Programs	<u> </u>					^		134,563.	0.	33,489.
(34) Ana Maria Garcia	50.00					,,		124 200	0	20 157
Dir. of Access to Justice Initiative	F0 00					Х		134,399.	0.	20,157.
(35) Elizabeth Weinberg	50.00					l		104 400		0 006
Development Director						Х		124,130.	0.	2,996.
-										
		ł								
			_			_	<u> </u>			
		ļ								
								1 206 200		004 760
Total to Part VII, Section A, line 1c								1,296,399.		224,769.

Form 990 (2019) Of Los 2
Part VIII Statement of Revenue

		Check if Schedule O	contains	s a response	or note to any lin	e in this Part VIII			
				•		(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue		Revenuè éxcluded from tax under
							Tariotion revenue	Business revenue	sections 512 - 514
nts nts	1 :	Federated campaigns		1a					
ar our	ı	Membership dues		1b					
s, (Am		Fundraising events		1c	44,519.				
la it		d Related organizations		1d					
Contributions, Gifts, Grants and Other Similar Amounts	(e Government grants (conti	ributions	s) 1e	15,224,768.				
tion in	1	F All other contributions, gifts,	grants, a	ınd					
		similar amounts not included	l above .	1f	1,598,482.				
da	,	Noncash contributions included in	lines 1a-1	ıf 1g \$					
<u>8</u> 0		h Total. Add lines 1a-1f				16,867,769.			
					Business Code				
e	2 8	Attorney Fees			541100	184,639.	184,639.		
Program Service Revenue	ı	Fellowship Revenue			541100	142,313.	142,313.		
S c	(Legal Services Exch	anged	for Debt	541100	17,881.	17,881.		
ev ev	(d							
S	(e							
<u>-</u>	1	f All other program service	revenue	e					
\Box	(g Total. Add lines 2a-2f				344,833.			
	3	Investment income (inclu	ding divi	idends, intere	est, and				
		other similar amounts)				52,910.			52,910.
	4	Income from investment of	of tax-ex	empt bond p	oroceeds >				
	5	Royalties							
				(i) Real	(ii) Personal				
	6	a Gross rents	6a	63,009.					
		b Less: rental expenses	6b	69,971.					
		c Rental income or (loss)	6с	-6,962.					
		d Net rental income or (loss				-6,962.			-6,962.
	7 :	a Gross amount from sales of	<u> </u>) Securities	(ii) Other				
		assets other than inventory	7a -	2,015,922.					
	١	b Less: cost or other basis							
ther Revenue		and sales expenses		2,016,493.					
eve		Gain or (loss)		-571.					
<u>ہ</u> ھ		d Net gain or (loss)			······ •	-571.			-571.
ţ.	8 8	a Gross income from fundraisi							
0		including \$							
		contributions reported on			62.046				
		Part IV, line 18			63,846. 63,846.				
		Less: direct expenses				0.			
		Net income or (loss) fromGross income from gamin		_		0.			
	9 (-	I					
		Part IV, line 19							
		Net income or (loss) from							
		a Gross sales of inventory,							
	10 6	and allowances		I					
		b Less: cost of goods sold							
		Net income or (loss) from							
=		- MOT HOOTHE OF (1099) HOHE	Juico Ul	mivoritory	Business Code				
Miscellaneous Revenue	11 :	a							
ne		ab							
ells eve									
lsc Re		d All other revenue							
2		e Total. Add lines 11a-11d							
	12	Total revenue. See instruction				17,257,979.	344,833.	0.	45,377.
						, , ,	, , , ,		,

Form 990 (2019) Part IX | Statement of Functional Expenses

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

	Charlet Schodule O contains a record				
Da	Check if Schedule O contains a respon	nse or note to any line in (A)	this Part IX	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
'	and domestic governments. See Part IV, line 21	3,077,245.	3,077,245.		
0		3,011,243.	3,011,243.		
2	Grants and other assistance to domestic				
•	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	669,037.	70 600	E42 6E6	16 602
	trustees, and key employees	009,037.	79,688.	542,656.	46,693.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0 000 033	7 027 727	050 000	101 074
7	Other salaries and wages	8,909,833.	7,837,737.	950,822.	121,274.
8	Pension plan accruals and contributions (include	AE1 710	200 475	61 502	1 724
	section 401(k) and 403(b) employer contributions)	451,712.	388,475.	61,503.	1,734. 24,946.
9	Other employee benefits	1,544,434.	1,349,257.	170,231.	24,946.
10	Payroll taxes	691,805.	577,212.	102,603.	11,990.
11	Fees for services (nonemployees):				
а	Management	F 040		T 040	
	Legal	7,948.	40.220	7,948.	205
	Accounting	48,500.	40,338.	7,775.	387.
	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	405 000		2 254	000 000
	column (A) amount, list line 11g expenses on Sch 0.)	425,008.	220,984.	3,954.	200,070.
12	Advertising and promotion	28,256.	20,842.	2,679.	4,735.
13	Office expenses	594,387.	526,818.	56,043.	11,526.
14	Information technology	247,809.	88,212.	142,295.	17,302.
15	Royalties				
16	Occupancy	475,138.	390,367.	73,207.	11,564.
17	Travel	129,029.	123,283.	4,790.	956.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	109,160.	81,916.	13,938.	13,306.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	245,395.	166,939.	78,456.	
23	Insurance	50,924.	38,807.	10,502.	1,615.
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	Dues & subscriptions	74,490.	67,020.	7,120.	350.
b	Litigation expenses	48,839.	48,769.	70.	
С	Library maintenance	48,587.	45,266.	3,321.	
d	Miscellaneous	17,230.	7,441.	8,002.	1,787.
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	17,894,766.	15,176,616.	2,247,915.	470,235.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
					C 000 (0010)

Form 990 (2019)
Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	742,003.	1	1,265,095.
	2	Savings and temporary cash investments	532,895.	2	746,659.
	3	Pledges and grants receivable, net	2,891,790.	3	4,150,043.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
Ř	9	Prepaid expenses and deferred charges	72,591.	9	86,885.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 6,488,760.			
	b	Less: accumulated depreciation 10b 3,709,060.	2,079,921.	10c	2,779,700.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	3,277,052.	12	1,744,748.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	32,716.	15	34,716.
	16	Total assets. Add lines 1 through 15 (must equal line 33)	9,628,968.	16	10,807,846.
	17	Accounts payable and accrued expenses	1,979,597.	17	2,342,352.
	18	Grants payable		18	
	19	Deferred revenue	736,163.	19	1,622,456.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	7,300.	21	583,070.
es	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
jab		controlled entity or family member of any of these persons		22	1 - 21
_	23	Secured mortgages and notes payable to unrelated third parties	35,742.	23	17,861.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	2.750.002	25	4 FCF 730
	26	Total liabilities. Add lines 17 through 25	2,758,802.	26	4,565,739.
S		Organizations that follow FASB ASC 958, check here ▶ X			
nce		and complete lines 27, 28, 32, and 33.	E 021 7EE		F 000 010
ala	27	Net assets without donor restrictions	5,831,755.	27	5,890,019. 352,088.
В	28	Net assets with donor restrictions	1,038,411.	28	334,000.
Ë		Organizations that do not follow FASB ASC 958, check here			
ō		and complete lines 29 through 33.		00	
ets.	29	Capital stock or trust principal, or current funds		29	
SS	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	6,870,166.	31	6 2/2 107
ž	32	Total net assets or fund balances		32	6,242,107.
	33	Total liabilities and net assets/fund balances	9,628,968.	33	10,807,846.

Form **990** (2019)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		, 25		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,89		
3	Revenue less expenses. Subtract line 2 from line 1	3		-63		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6	,87		
5	Net unrealized gains (losses) on investments	5			8,7	28.
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 on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	6	,24	<u>2,1</u>	07.
Pa	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					Ш
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			
	consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule (Ο.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	dit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b	X	

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Total

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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Neighborhood Legal Services Name of the organization of Los Angeles County 95-2408642 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Schedule A (Form 990 or 990-EZ) 2019 of Los Angeles County

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2015 (b) 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 15,004,894 15,842,217 13,195,043. 14,660,832 16,867,769 75,570,755. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 13,195,043. 14,660,832 15,004,894 15,842,217 16,867,769 75,570,755. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 75,570,755. 6 Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2015 **(b)** 2016 (c) 2017 (d) 2018 (e) 2019 (f) Total 13,195,043. 14,660,832. 15,004,894, 15,842,217 16,867,769 75,570,755. 7 Amounts from line 4 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties, 21,579. 29,762 34,226. 120,455. 45,377. 251,399. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 72,926. 5,111. 6,880. assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 561,028. 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 99.56 14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 99.56 15 Public support percentage from 2018 Schedule A, Part II, line 14 15 16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization _______ 17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

Schedule A (Form 990 or 990-EZ) 2019

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	qualify under the tests listed be ction A. Public Support	elow, please com	plete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Gifts, grants, contributions, and	(a) 2013	(b) 2010	(6) 2017	(u) 2018	(e) 2019	(i) iotai
•	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
2	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that						
3	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						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 5						<u> </u>
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
r	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	1		1	1
	ndar year (or fiscal year beginning in) 🖊	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for	the organization'	s first, second, thi	rd, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
							<u></u> ▶□
	ction C. Computation of Publi						
15	Public support percentage for 2019 (li	ne 8, column (f), d	divided by line 13,	column (f))		15	%
	Public support percentage from 2018					16	%
Se	ction D. Computation of Inves	tment Incom	e Percentage				
17	Investment income percentage for 20	19 (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
18	Investment income percentage from 2	2018 Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2019. If the					33 1/3%, and line	17 is not
	more than 33 1/3%, check this box ar	nd stop here. The	organization quali	fies as a publicly s	supported organiza	ation	
k	33 1/3% support tests - 2018. If the						and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	-		
		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5с		
	_		
	6		
	7		
	•		
	8		
	_		
	9a		
	9b		
	9с		
	46		
	10a		
	101-		
m ^	10b 90 or 99)O. 57	2010
יווי ש	an or as	,u-EZ	2019

Schedule A (Form 990 or 990-EZ) 2019 of Los Angeles County

Par	t IV	Supporting Organizations _(continued)			
				Yes	No
11	Has the	e organization accepted a gift or contribution from any of the following persons?			
а	A perso	on who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below,	the governing body of a supported organization?	11a		
b	A family	y member of a person described in (a) above?	11b		
С	A 35%	controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	tion B	. Type I Supporting Organizations			
		ŗ		Yes	No
1		directors, trustees, or membership of one or more supported organizations have the power to			
	-	y appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	-	r? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
		led the organization's activities. If the organization had more than one supported organization,			
		e how the powers to appoint and/or remove directors or trustees were allocated among the supported			
		ations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		organization operate for the benefit of any supported organization other than the supported			
	U	ation(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
800		sed, or controlled the supporting organization.	2		
Sec	lion C	. Type II Supporting Organizations		Vaa	Na
	Mora	majority of the avantization's divestors by twistons during the tay year also a majority of the divestors		Yes	No
1		majority of the organization's directors or trustees during the tax year also a majority of the directors			
		ees of each of the organization's supported organization(s)? If "No," describe in Part VI how control agement of the supporting organization was vested in the same persons that controlled or managed			
		ported organization(s).	1		
Sec		. All Type III Supporting Organizations	•		
		The time of the control of the contr		Yes	No
1	Did the	organization provide to each of its supported organizations, by the last day of the fifth month of the			
		ation's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii	a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organiz	ation's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were a	ny of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organiz	ation(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the org	anization maintained a close and continuous working relationship with the supported organization(s).	2		
3	-	son of the relationship described in (2), did the organization's supported organizations have a			
	-	ant voice in the organization's investment policies and in directing the use of the organization's			
		or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	_		
C		ted organizations played in this regard.	3		
-		Type III Functionally Integrated Supporting Organizations			
1 a		the box next to the method that the organization used to satisfy the Integral Part Test during the yea (see instructions) . The organization satisfied the Activities Test. Complete line 2 below.	1		
b		the organization is the parent of each of its supported organizations. Complete line 3 below.			
c		he organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions	:)	
2		es Test. Answer (a) and (b) below.		Yes	No
а		ostantially all of the organization's activities during the tax year directly further the exempt purposes of			
		oported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those s	supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the	e organization was responsive to those supported organizations, and how the organization determined			
	that the	ese activities constituted substantially all of its activities.	2a		
b	Did the	activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the c	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
		s for the organization's position that its supported organization(s) would have engaged in these			
	activitie	s but for the organization's involvement.	2b		
3		of Supported Organizations. Answer (a) and (b) below.			
а		organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		s of each of the supported organizations? Provide details in Part VI.	3a		
b		organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its su	upported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Neighborhood Legal Services Schedule A (Form 990 or 990 EZ) 2019 of Los Angeles County

95-2408642 Page 6

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust on	Nov. 20, 1970 (explain in	Part VI). See instructions. Al
	other Type III non-functionally integrated supporting organizations must co	mplete Se	ections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
_6	Multiply line 5 by .035.	6		
_7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting org	anization (see
	instructions).			

Schedule A (Form 990 or 990-EZ) 2019

Neighborhood Legal Services Schedule A (Form 990 or 990-EZ) 2019 of Los Angeles County

Par	t V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Secti	ion D -	Distributions		,	Current Year
1	Amou				
2	Amou				
	organ				
3	Admir	nistrative expenses paid to accomplish exempt purpose	es of supported organization	IS	
4	Amou	nts paid to acquire exempt-use assets			
5	Qualif	ied set-aside amounts (prior IRS approval required)			
6	Other	distributions (describe in Part VI). See instructions.			
7	Total	annual distributions. Add lines 1 through 6.			
8	Distrib	outions to attentive supported organizations to which the	ne organization is responsive	e	
	(provi	de details in Part VI). See instructions.			
9	Distrib	outable amount for 2019 from Section C, line 6			
10	Line 8	amount divided by line 9 amount			
Secti	ion E -	Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distrib	outable amount for 2019 from Section C, line 6			
2	Unde	rdistributions, if any, for years prior to 2019 (reason-			
	able c	ause required- explain in Part VI). See instructions.			
3	Exces	s distributions carryover, if any, to 2019			
	From				
b	From	2015			
С	From	2016			
d	From	2017			
е	From	2018			
f	Total	of lines 3a through e			
g	Applie	ed to underdistributions of prior years			
h	Applie	ed to 2019 distributable amount			
i	Carry	over from 2014 not applied (see instructions)			
j	Rema	inder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distrib	outions for 2019 from Section D,			
	line 7:	\$			
а	Applie	ed to underdistributions of prior years			
b	Applie	ed to 2019 distributable amount			
С		inder. Subtract lines 4a and 4b from 4.			
5		ining underdistributions for years prior to 2019, if			
		Subtract lines 3g and 4a from line 2. For result greater			
		zero, explain in Part VI. See instructions.			
6		ining underdistributions for 2019. Subtract lines 3h			
		b from line 1. For result greater than zero, explain in			
		/I. See instructions.			
7		ss distributions carryover to 2020. Add lines 3j			
	and 4				
8		down of line 7:			
		ss from 2015			
		ss from 2016			
		ss from 2017			
		ss from 2018			
е	⊏xces	ss from 2019			

Schedule A (Form 990 or 990-EZ) 2019

Neighborhood Legal Services

Schedule A (Form 990 or 990-EZ) 2019 of Los Angeles County 95-2408642 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

•		tions Occasion Book III			
	Section 501(c)(4), (5), or (6) organization Neighbo	rhood Legal Serv	ices	Fm	ployer identification number
INGII		Angeles County	1065	-"	95-2408642
Pa	rt I-A Complete if the ord	ganization is exempt und	er section 501(c)	or is a section 527	
1 2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ation's direct and indirect politications	al campaign activities i	n Part IV.	
Pa	rt I-B Complete if the org	janization is exempt und	er section 501(c)((3).	
1	Enter the amount of any excise tax				\$
	Enter the amount of any excise tax				
	If the organization incurred a sectio				
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.	 			4/_\/6\
Ра	rt I-C Complete if the org	anization is exempt und	er section 501(c),	tion activities	
3	Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organiza contributions received that were propolitical action committee (PAC). If	a. Add lines 1 and 2. Enter here and 1120-POL for this year? Inployer identification number (Ell tion listed, enter the amount paid omptly and directly delivered to a	nd on Form 1120-POL, N) of all section 527 po I from the filing organiz a separate political orga	olitical organizations to wlation's funds. Also enter	\$ No nich the filing organization 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

Neighborhood Legal Services

Schedule C (Form 990 or 990-EZ) 2019 of Los Angeles County 95-2408642 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). A Check ► if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures). B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group **Limits on Lobbying Expenditures** organization's totals (The term "expenditures" means amounts paid or incurred.) totals **1a** Total lobbying expenditures to influence public opinion (grassroots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount. Enter the amount from the following table in both columns. If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e. Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000. Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000. Over \$17,000,000 \$1,000,000. g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a. If zero or less, enter -0i Subtract line 1f from line 1c. If zero or less, enter -0i If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) Total (or fiscal year beginning in) 2a Lobbying nontaxable amount

b Lobbying ceiling amount (150% of line 2a, column(e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e)) f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2019

Schedule C (Form 990 or 990-EZ) 2019 of Los Angeles County 95-240864

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 e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(k	p)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:		37		
	Volunteers?	37	X		
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Х	Х		
	Media advertisements?		X		
	Mailings to members, legislators, or the public?		X		
	Publications, or published or broadcast statements?		X		
	Grants to other organizations for lobbying purposes?	Х		20),221.
g	, , , , , , , , , , , , , , , , , , , ,	- 1	Х	2 (7,221•
n :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
:	Other activities?		21	20	7,221.
J.	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)(5), or se	ction	
	501(c)(6).		<i>,</i> ,,		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	e prior yea	ar? 3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OF	R (b) Part	III-A, lin	e 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
b	Carryover from last year				
С	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	olitical			
_	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures (see instructions)		5		
	t IV Supplemental Information	" " D		10/	
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part i	II-A, IINES I a	and 2 (see	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information.				
Lai	to it b, bine i, bobbying accivities.				
NT.	SLA does not engage in any activities intended to is	nfluei	nce pu	blic	
	Juli does not engage in any doervrotes intended to i		nce pu		
op:	inion with respect to any political or legislative	propo	sals o	r	
act	civity, or to influence legislative bodies generally	y. NL	SLA ex	pends	
no	staff time or funds on media advertisements, maili	ngs, j	public	ations	5,
bro	padcasts, rallies, seminars, or any other types of	grass	roots		

Part IV Supplemental Information (continued)
organizing or efforts designed to influence public opinion or
legislators with respect to any political or legislative proposals.
Occasionally, NLSLA engages in a very limited amount of lobbying
activities usually in response to requests from elected officials such
as written letters, testimony and/or participating in meetings. In
2019, NLSLA estimates it expended \$20,221 on staff allocated time
engaged in those limited lobbying efforts.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

Neighborhood Legal Services

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

of Los Angeles County

Employer identification number 95-2408642

Pai			imilar Funds or <i>F</i>	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. (a) Donor advised	I funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	vriting that the assets he	ld in donor advised fur	nds
	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 ad			
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for an	y other purpose confe	rring
	impermissible private benefit?			Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes	" on Form 990, Part IV	/, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a hist	orically important land area
	Protection of natural habitat		Preservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribu	ution in the form of a c	onservation 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			2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)		2c
d	Number of conservation easements included in (c) acquired a	ifter 7/25/06, and not on	a historic structure	
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or t	erminated by the orga	nization during the tax
	year ▶			
4	Number of states where property subject to conservation eas	sement is located		
5	Does the organization have a written policy regarding the peri	odic monitoring, inspect	ion, handling of	
	violations, and enforcement of the conservation easements it	holds?		Yes
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, an	d enforcing conservat	ion easements during the year
	>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and ent	forcing conservation e	asements during the year
	▶ \$			
8	Does each conservation easement reported on line 2(d) above	•		
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		•	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial statements t	hat describes the
Da	organization's accounting for conservation easements.	· Aut Iliatavia al Tua	OH	Oinsilan Assata
Pai	t III Organizations Maintaining Collections of	•	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form			dan an alamah wasalar
па	If the organization elected, as permitted under FASB ASC 956	,		
	of art, historical treasures, or other similar assets held for pub	,		ance of public
	service, provide in Part XIII the text of the footnote to its finan			an abandonada af
D	If the organization elected, as permitted under FASB ASC 956	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtherand	ce of public service,
	provide the following amounts relating to these items:			▶ ¢
	(i) Revenue included on Form 990, Part VIII, line 1			
•	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical trea			, provide
_	the following amounts required to be reported under FASB AS			• •
a	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			🗩 🖇

Pai	rt III Organizations Maintaining C	ollections of A	rt, Hist	torical Tr	easures, c	r Other	Similar A	<u>Assets</u>	(continu	ued)
3	Using the organization's acquisition, accession	on, and other record	ls, checl	k any of the	following that	t make siç	nificant use	of its		
	collection items (check all that apply):									
а	Public exhibition	d		Loan or exc	hange progra	ım				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	n how th	ney further t	he organizatio	on's exem	pt purpose	in Part X	KIII.	
5	During the year, did the organization solicit o	r receive donations	of art, hi	storical trea	sures, or othe	er similar a	assets			
	to be sold to raise funds rather than to be ma	aintained as part of t	he orga	nization's co	ollection?				Yes	☐ No
Pai	rt IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered "	Yes" on F	orm 990, Pa	art IV, lir	ne 9, or	
	reported an amount on Form 990, Par	t X, line 21.								
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not ir	ncluded			
	on Form 990, Part X?							L	Yes	X No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	table:						
								Α	Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for 6	escrow or co	ustodial acco	unt liabilit	y?	X	Yes	L No
	If "Yes," explain the arrangement in Part XIII.									X
Pai	rt V Endowment Funds. Complete it	f the organization an	swered	"Yes" on Fo	orm 990, Part	IV, line 10).			
		(a) Current year	(b) P	rior year	(c) Two year	s back (c	1) Three years	back ((e) Four <u>y</u>	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment	%								
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.								
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	at are held a	ınd administe	red for the	e organizatio	on	_	
	by:									Yes No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza								3b	
4	Describe in Part XIII the intended uses of the		wment	funds.						
Pai	rt VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990), Part I\		1					
	Description of property	(a) Cost or o		` ,	or other		cumulated	(4	d) Book	value
		basis (investr	nent)		(other)	depr	eciation	—		010
	Land				9,813.	2 0	C2 1 C1	4		,813.
	Buildings			5,59	7,852.	3,2	63,161	$\frac{1}{2}$	<u>, 334</u>	,691.
	Leasehold improvements			4.5	4 004		04 064		150	4.60
d	Equipment				4,824.		24,364			,460.
	Other				6,271.	1	21,535			736.
Tota	Add lines to through to (Column (d) must be	aual Form QQA Dart	Y colun	nn (D) lina 1	1(10.)		_	. 12	. , , ,	. / UU .

Schedule D (Form 990) 2019

	d Legal Servi		
Schedule D (Form 990) 2019 of Los Ange	les County	95	5-2408642 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) Certificates of deposit	1,744,748.	End-of-Year Market	: Value
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1,744,748.		
Part VIII Investments - Program Related.	· ·		
Complete if the organization answered "Yes"	on Form 990. Part IV. line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	nd-of-year market value
(1)		. ,	<u> </u>
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 000 Part IV line	11d Soc Form 990 Part V line 15	
	Description	Tru. See Form 330, Fart X, line 13.	(b) Book value
	Becomption		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	451		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	9 15.)	_	•
	5 000 B 1 N/ I	11 11 0 E 000 B 1 V II 0	-
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

(8) (9)

of Los Angeles County

Revenue per Audited Financial States

Pai	Reconciliation of Revenue per Audited Financial Stateme		ıtın kevenue per k	eturi	1.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				10 200 522
1	Total revenue, gains, and other support per audited financial statements			1	19,300,523.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما	8,728.		
a	Net unrealized gains (losses) on investments		1,899,999.		
b	Donated services and use of facilities		1,099,999.		
C	Recoveries of prior year grants		133,817.		
d	Other (Describe in Part XIII.)			0-	2,042,544.
_	Add lines 2a through 2d			2e 3	17,257,979.
3	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	11,231,313
4	Investment expenses not included on Form 990, Part VIII, line 7b	1 40 1			
a h					
b	Other (Describe in Part XIII.) Add lines 4a and 4b			40	0.
_	Add lines 4a and 4b Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			4c 5	17,257,979.
5 Pai	t XII Reconciliation of Expenses per Audited Financial Statem	ents W	/ith Expenses per		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		TAPONOGO PO		
1	Total expenses and losses per audited financial statements			1	19,928,582.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			•	
a	Donated services and use of facilities	2a	1,899,999.		
b	Prior year adjustments	-			
C	Other losses				
d	Other (Describe in Part XIII.)		133,817.		
	, , , , , , , , , , , , , , , , , , , ,		-	200	2,033,816.
_	Add lines 2a through 2d			2e 3	17,894,766.
3	Subtract line 2e from line 1			3	11,094,100.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIII.)	4b			•
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	17,894,766.
	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			4; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	itional in	formation.		
Das	rt IV, line 2b:				
Pai	t IV, IIIle ZD:				
C1 -	ont Thurst Funds.				
<u>C1</u>	ent Trust Funds:				
NTT.	LA is a legal aid organization that at ti	mag 1	holde client	or	+hird
1111	our is a legal and organization that at the	ilies .	noids citent	- 01	CIIII G
nai	ty funds in a client trust account.				
pai	cy lands in a cilent clast account.				
-					
Pai	t X, Line 2:				
- 41	The first section of the section of				
NT.S	SLA is exempt from taxation under Internal	Reve	enue Code Se	cti	on
	2211 15 CHOMPS 110M CANACION ANGCI 111CCINAL	110 7	ende edde be	<u> </u>	<u> </u>
501	(c)(3) and California Revenue and Taxatio	n Coo	de Section 2	370	1(d). In
	. (o) (b) and carriernia nevenue and randere		ac beceron 2	3,0	1(4) 111
add	lition, NLSLA has been determined by the I	nter	nal Revenue	Ser	vice and
the	Franchise Tax Board not to be a "private	four	ndation" wit	hin	the
mea	ning of Section 509(a) of the Internal Re	venue	e Code and S	ect	ion 23709

Part XIII | Supplemental Information (continued)

of the Taxation Code.

Generally accepted accounting principles provide accounting and disclosure guidance about positions taken by an organization in its tax returns that might be uncertain. Management has considered its tax positions and believes that all of the positions taken by NLSLA in its federal and state exempt organization tax returns are more likely than not to be sustained upon examination. NLSLA's returns are subject to examination by federal and state taxing authorities, generally for three and four years, respectively, after they are filed.

Part XI, Line 2d - Other Adjustment:	S	: 5	. 5	. ;		-	-	:	-	-	J	t	1		l)	ľ	1	!	2	ε	(1	ľ	I		C	t	,	5	S		L	1	Ľ	ι	1	j	j	_		L	Į	2		((Ų	١	١	٩	ľ	Z	Z	1	4					•	•	r	ľ)	3	E	L	1	1	1	t,	ľ	J		-	=		t	t	1) .)))	_		((-					-	-	-	-	-					L	l	t			C	((•	2		2	2	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	•
--------------------------------------	---	-----	-----	-----	--	---	---	---	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	--	---	---	---	---	---	--	---	---	---	---	---	---	---	---	--	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	--	--	--	--	---	---	---	---	---	---	---	---	---	---	---	----	---	---	--	---	---	--	---	---	---	-----	---	---	---	---	--	---	---	---	--	--	--	--	---	---	---	---	---	--	--	--	--	---	---	---	--	--	---	---	---	---	---	--	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---

Special Event Expense	63,846.
Rental Income Expense	69,971.
Total to Schedule D, Part XI, Line 2d	133,817.

Part XII, Line 2d - Other Adjustments:

Special Event Expense	63,846.
Rental Income Expense	69,971.
Total to Schedule D, Part XII, Line 2d	133,817.

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Ne:

Neighborhood Legal Services of Los Angeles County

Employer identification number 95-2408642

required to complete this par	 Complete if the organization answe t. 	red "Y	'es" oı	n Form 990, Part IV,	line 17. Form 990-E2	Z filers are not
 1 Indicate whether the organization raise a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, F b If "Yes," list the 10 highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual Part VII) or entity in connection with p viduals or entities (fundraisers) pursu	ion of ion of fundra (includerofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees, orYes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have con or con contrib	itrol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total						
3 List all states in which the organization or licensing.	on is registered or licensed to solicit o	contrib	outions	s or has been notified	d it is exempt from re	egistration

Schedule G (Form 990 or 990-EZ) 2019 of Los Angeles County

Sch Pa		He G (Form 990 or 990-EZ) 2019 OI LOS				-2400042 Page 2
F	וונו	Fundraising Events. Complete if the of fundraising event contributions and gr				
		or iuridialsing event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events None	(d) Total events (add col. (a) through
			See Part IV			col. (c))
Θ			(event type)	(event type)	(total number)	001. (0))
Revenue	1	Gross receipts	108,365.			108,365.
	2	Less: Contributions	44,519.			44,519.
	3	Gross income (line 1 minus line 2)	63,846.			63,846.
		Cash prizes				
õ	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs	10,280.			10,280.
irect E	7	Food and beverages	20,726.			20,726.
	8	Entertainment	3,000.			3,000.
	9	Other direct expenses	22.212			29,840.
	10				>	63,846.
		Net income summary. Subtract line 10 from li	ine 3, column (d)		>	0.
Pa	ırt		answered "Yes" on Form	n 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	1	(b) Pull tabs/instant		(d) Total gaming (add
Jue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						.,, 6 .,,
ď	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses	Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
	En	ter the state(s) in which the organization conducted the organization licensed to conduct gaming a No," explain:	ucts gaming activities:			Yes No
					-	
		ere any of the organization's gaming licenses re	evoked, suspended, or te	erminated during the tax	year?	Yes No
b	IT "	Yes," explain:				

Neighborhood Legal Services Schedule G (Form 990 or 990-EZ) 2019 of Los Angeles County

Sch	nedule G (Form 990 or 990-EZ) 2019 of Los Angeles County 95-	-2408	642	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	No
	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?	\square	Yes	└── No
	Indicate the percentage of gaming activity conducted in:			
	a The organization's facility			<u>%</u>
	o An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
k	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party >\$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address ►			
16	Gaming manager information:			
	Name >			
	Gaming manager compensation ▶ \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
k	n 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 ▶ \$			
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Part III, li	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
Pa	rt II, Event 1			
Ju	st Neighbors Gala Dinner			

Neighborhood Legal Services of Los Angeles County 95-2408642 Page 4

SCHEDULE I (Form 990)

Department of the Treasury

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

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

► Attach to Form 990.

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

OMB No. 1545-0047 **2019**

Open to Public Inspection

Name of the organization Neighborhood Legal Services

Name of the organization Neighborhood Legal Services

Name of the organization Neighborhood Legal Services of Los Angeles County Services 95-2408642

Part I General Information on Grants and Assistance

1 Does the organization maintain records to							
criteria used to award the grants or assis	stance?						X Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I	=				anization answered "	Yes" on Form 990, Part	t IV, line 21, for any
recipient that received more than \$	55,000. Part II car	be duplicated if addi	tional space is need	led.	(6) Madhaadas	i	1
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							Subcontractor on Shriver
Inner City Law Center							Housing Project-LA joint
1309 E. Seventh St.							advocacy efforts and
Los Angeles, CA 90021	95-3697572	501(c)(3)	657,824.	0.			strategy to provide legal
							Subcontractor on Self
Legal Aid Foundation of Los							Help Legal Access Center
Angeles - 1550 W. 8th St Los							Grant to operate a center
Angeles, CA 90017	95-1684067	501(c)(3)	695,964.	0.			in the Superior
							Subcontractor on Shriver
Legal Aid Foundation of Los							Housing Project-LA joint
Angeles - 1550 W. 8th St Los							advocacy efforts and
Angeles, CA 90017	95-1684067	501(c)(3)	602,361.	0.			strategy to provide legal
							Subcontractor on the
Legal Aid Foundation of Los							Medical Legal Services
Angeles - 1550 W. 8th St Los							Whole Person Care grant
Angeles, CA 90017	95-1684067	501(c)(3)	165,305.	0.			to provide assistance to
Legal Aid Society of Orange County							Subcontractor on Self
Community Legal Services - 2101							Help Legal Access Center
N. Tustin Ave Santa Ana, CA							Grant to operate a center
92705	95-1994337	501(c)(3)	152,619.	0.			in the Superior
							Subcontractor on The
Legal Aid Society of San Diego							Department of Managed
110 S. Euclid Ave.							Health Care Consumer
San Diego, CA 92114	95-1869806	501(c)(3)	18,000.	0.			Assistance Program (CAP)

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

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

See Part IV for Column (h) descriptions

Schedule I (Form 990) (2019)

Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant valuation non-cash assistance or assistance organization or government if applicable cash grant non-cash (book, FMV, assistance appraisal, other) Subcontractor on the Mental Health Advocacy Services. Medical Legal Services Inc. - 3255 Wilshire Blvd., Suite Whole Person Care grant 902 - Los Angeles, CA 90010 95-3371166 501(c)(3) 147,544. 0 to provide assistance to Subcontractor on The National Health Law Program, Inc. Department of Managed 3701 Wilshire Blvd., Suite 750 Health Care Consumer Los Angeles, CA 90010 95-3080947 501(c)(3) 29,035 0 Assistance Program (CAP) Subcontractor on Shriver Public Counsel Law Center Housing Project-LA joint 610 S. Ardmore Ave. advocacy efforts and Los Angeles, CA 90005 23-7105149 501(c)(3) 578,593. 0 strategy to provide legal Subcontractor on The Department of Managed Western Center on Law and Poverty 3701 Wilshire Blvd., Suite 208 Health Care Consumer Los Angeles, CA 90010 95-2897721 501(c)(3) 30,000 0 Assistance Program (CAP)

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
Part I, Line 2:					
NLSLA maintains records to substan	tiate gr	ant awards	, grantee'	s eligibility	
and selection criteria.					
NLSLA contracts with legal aid and	communi	ty based p	artners to	provide	
legal services. Prior to contracti	ng with	grant reci	pients, NL	SLA and the	
grantee agree to terms and conditi	ons in a	detailed	contract o	r Memorandum	
of Understanding (MOU) which refle	cts the	contract a	mount, per	iod of	
service, scope of work, and the bi	lling, r	eview and	payment pr	ocess. NLSLA	
<u> </u>			_		0 1 1 1 1/2 000 /00 /

Part IV | Supplemental Information

obtains and approves a project budget and generally requests detailed invoices with supporting service and expenditure documentation prior to reimbursing grantees for services rendered in accordance with the terms and period specified in the MOU.

Part II, line 1, Column (h):

Name of Organization or Government: Inner City Law Center

(h) Purpose of Grant or Assistance: Subcontractor on Shriver Housing

Project-LA joint advocacy efforts and strategy to provide legal

assistance to eligible low-income parties in civil cases and increase

access to justice for unrepresented parties.

Name of Organization or Government: Legal Aid Foundation of Los Angeles

(h) Purpose of Grant or Assistance: Subcontractor on Self Help Legal

Access Center Grant to operate a center in the Superior Courthouses of

Long Beach, Torrance, Santa Monica and Inglewood.

Name of Organization or Government: Legal Aid Foundation of Los Angeles

(h) Purpose of Grant or Assistance: Subcontractor on Shriver Housing

Project-LA joint advocacy efforts and strategy to provide legal

assistance to eligible low-income parties in civil cases and increase

access to justice for unrepresented parties.

Name of Organization or Government: Legal Aid Foundation of Los Angeles

(h) Purpose of Grant or Assistance: Subcontractor on the Medical Legal

Services Whole Person Care grant to provide assistance to participants in
the following area of legal expertise: housing-related matters,
immigration matters, general law-enforcement related matters, benefits

advocacy, conservatorship, educational services and consumer law matters.

Name of Organization or Government:

Legal Aid Society of Orange County -- Community Legal Services

(h) Purpose of Grant or Assistance: Subcontractor on Self Help Legal

Access Center Grant to operate a center in the Superior Courthouse in

Compton.

Name of Organization or Government: Legal Aid Society of San Diego

(h) Purpose of Grant or Assistance: Subcontractor on The Department of

Managed Health Care Consumer Assistance Program (CAP) grant to provide

outreach and assistance to California's insured and uninsured health care

consumers.

Name of Organization or Government: Mental Health Advocacy Services, Inc.

(h) Purpose of Grant or Assistance: Subcontractor on the Medical Legal

Services Whole Person Care grant to provide assistance to participants in
the following area of legal expertise: housing-related matters,
immigration matters, general law-enforcement related matters, benefits
advocacy, conservatorship, educational services and consumer law matters.

Name of Organization or Government: National Health Law Program, Inc.

(h) Purpose of Grant or Assistance: Subcontractor on The Department of

Managed Health Care Consumer Assistance Program (CAP) grant to provide

outreach and assistance to California's insured and uninsured health care

consumers.

Name of Organization or Government: Public Counsel Law Center

Part IV Supplemental information
(h) Purpose of Grant or Assistance: Subcontractor on Shriver Housing
Project-LA joint advocacy efforts and strategy to provide legal
assistance to eligible low-income parties in civil cases and increase
access to justice for unrepresented parties.
Name of Organization or Government: Western Center on Law and Poverty
(h) Purpose of Grant or Assistance: Subcontractor on The Department of
Managed Health Care Consumer Assistance Program (CAP) grant to provide
outreach and assistance to California's insured and uninsured health care
consumers.

SCHEDULE J (Form 990)

Compensation Information

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

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

► Attach to Form 990.

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

Open to Public

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

Part I

Neighborhood Legal Services of Los Angeles County

Questions Regarding Compensation

Employer identification number 95-2408642

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			37
	Receive a severance payment or change-of-control payment?	4a		X
	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
J	contingent on the revenues of:			
а	The organization?	5a		Х
	Any related organization?	5b		X
~	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
_	contingent on the net earnings of:			
а	The organization?	6a		Х
	Any related organization?	6b		Х
-	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9		

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

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

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

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
(1) Yvonne Mariajimenez(Start 9/19)	(i)	203,387.	100.	252.	18,600.	16,561.	238,900.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Neal S. Dudovitz (End 9/19)	(i)	229,133.	100.	264.	20,847.	8,438.	258,782.	0.
Executive Director/Special Counsel	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Lynne M. Hiortdahl	(i)	137,530.	100.	152.	12,486.	21,087.	171,355.	0.
Chief Financial Officer	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) David Pallack	(i)	175,968.	100.	217.	15,918.	15,877.	208,080.	0.
Dir. of Litigation & Policy	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Tzung-Lin Fu	(i)	155,710.	100.	194.	16,188.	22,125.	194,317.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	134,311.	100.	152.	12,421.	21,068.	·	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	134,158.	100.	141.	11,885.	8,272.		
Dir. of Access to Justice Initiative	` _	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (i)							
	(') (ii)							
	(i) (i)							
	\"\ /::\							
	(יי)						I .	

Schedule J (Form 990) 2019

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Neighborhood Legal Services of Los Angeles County

Employer identification number 95-2408642

Form 990, Part I, Line 1, Description of Organization Mission: firm that has been at the forefront of the issues facing low-income residents of Los Angeles County since 1965. Through litigation, advocacy, collaboration, outreach, education and representation, NLSLA effectively helps individuals and families gain the basic needs and opportunities necessary to secure a better life. Our advocates work with clients, community groups, government agencies and non-profit organizations to secure equal justice and opportunity for low-income residents. We are agents of change, working collaboratively to provide high-quality legal aid to those in need; connecting people with essential support for their physical, social and economic well-being; and, playing a key role in the development of policy that empowers low-income families and communities.

Form 990, Part III, Line 1, Description of Organization Mission: combats the immediate and long-lasting effects of poverty and expands access to health, opportunity, and justice in the diverse neighborhoods of Los Angeles.

Form 990, Part III, Line 4a, Program Service Accomplishments: NLSLA partners with private lawyers and volunteers within the community to assist with the delivery of legal services to the poor throughout Los Angeles County. In 2019, NLSLA recorded \$1.9 million in donated services comprised of 500 volunteers providing 39,091 donated service hours. Donated services may include a range of assistance from direct representation, co-counsel, research or expert advice assistance, legal

Name of the organization Neighborhood Legal Services of Los Angeles County

Employer identification number 95-2408642

clinic participation and/or administrative support.

Form 990, Part VI, Section B, line 11b:

A draft of the proposed Form 990 is fully reviewed by the NLSLA Board of Directors Finance Committee, chaired by the Board Treasurer. Once approved, the Board Treasurer provides a copy of the proposed Form 990 to the NLSLA Board of Directors Executive Committee for review and approval. The Executive Committee reviews and approves the Form 990 for filing.

Form 990, Part VI, Section B, Line 12c:

At least annually, the Board of Directors, Officers and Key Employees of NLSLA are required to review NLSLA's Conflict of Interest policy and complete an annual statement affirming that they have (1) received a copy of the Conflict of Interest policy, (2) read and understood the policy, and (3) agree to comply with the policy including disclosing any interest that could give rise to conflicts.

Form 990, Part VI, Section B, Line 15:

Approximately every two years, the Board of Directors, under the direction of the Board President, conducts a study of the Executive Director salaries at comparable legal services programs and other regional non-profits. Based on the comparability study, the Board President recommends an appropriate Executive Director compensation level to the Board of Directors. The Board of Directors' discussion and decision is recorded in the Executive Session minutes.

Approximately every two years, the Executive Director conducts a salary comparability study of the Directors, and Chief Financial Officer (CFO)

Schedule O (Form 990 or 990-EZ) (2019) Page 2 Name of the organization Neighborhood Legal Services **Employer identification number** 95-2408642 of Los Angeles County salaries at comparable legal services programs and other regional non-profits. Based on the salary comparability study, the Executive Director sets appropriate compensation levels for the Directors and CFO, which are included in the program's annual budget. The annual budget is approved by the Board of Directors. Form 990, Part VI, Section C, Line 19: It is NLSLA's policy that if the governing documents, conflict of interest policy and/or financial statements of the Organization are subject to Federal or State public disclosure rules, these documents will be made publicly available as applicable law may require. Otherwise, the governing documents, conflict of interest policy and financial statements of the Organization will be provided to the public at the discretion of management. The Form 990 is also available on Guidestar.org. Form 990, Part VII, Executive Director changeover After 26 years of dedicated leadership in legal aid advocacy, Neal S. Dudovitz stepped down as Executive Director of NLSLA as of September 1st, 2019, and retired form the program effective December 31st, 2019. The NLSLA Board of Directors appointed Yvonne Mariajimenez as NLSLA's new Executive Director effective September 1st, 2019. Yvonne Mariajimenez began her career at NLSLA in 1978, and for the past 20 years has served as NLSLA's Deputy Director.