

Form 990

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047

2001

Open to Public Inspection

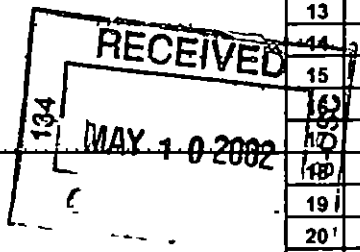
The organization may have to use a copy of this return to satisfy state reporting requirements

Form header section A-F: For the 2001 calendar year, or tax year beginning, and ending; Check if applicable; Name of organization: FLORIDA LEGAL SERVICES, INC.; Employer ID number: 59-1436126; Telephone number: 850-385-7900; Accounting method: Accrual.

Form header section G-M: Web site; Organization type: 501(c)(3); Check here if gross receipts normally not more than \$25,000; Gross receipts: 2,563,781; Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

Table with 21 rows: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6a Gross rents; 6b Less rental expenses; 6c Net rental income or (loss); 7 Other investment income; 8a Gross amount from sales of assets other than inventory; 8b Less cost or other basis and sales expenses; 8c Gain or (loss); 8d Net gain or (loss); 9 Special events and activities; 9a Gross revenue; 9b Less direct expenses; 9c Net income or (loss); 10a Gross sales of inventory; 10b Less cost of goods sold; 10c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.



REVENUE

EXPENSES

NET ASSETS

23

Part II Statement of Functional Expenses All organizations must complete column (A). Columns (B), (C) and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) Stmt 1 (cash \$ <u>390,974</u> non-cash \$ _____)	390,974	390,974		
23	Specific assistance to individuals				
24	Benefits paid to or for members				
25	Compensation of officers, directors, etc				
26	Other salaries and wages	1,306,169	769,312	536,857	
27	Pension plan contributions	62,412	35,819	26,593	
28	Other employee benefits	179,985	103,295	76,690	
29	Payroll taxes	99,130	58,600	40,530	
30	Professional fundraising fees				
31	Accounting fees	6,000	2,500	3,500	
32	Legal fees				
33	Supplies	47,903	32,608	15,295	
34	Telephone	62,965	45,612	17,353	
35	Postage and shipping	15,578	12,139	3,439	
36	Occupancy	99,820	61,597	38,223	
37	Equipment rental and maintenance	46,709	26,298	20,411	
38	Printing and publications	26,646	11,954	14,692	
39	Travel	48,762	36,556	12,206	
40	Conferences, conventions, and meetings				
41	Interest				
42	Depreciation, depletion, etc (att sch)	15,383		15,383	
43	Other expenses not covered above (itemize) a				
	b See Statement 2	366,243	226,161	140,082	
	c				
	d				
	e				
44	Total functional expenses (add lines 22 - 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	2,774,679	1,813,425	961,254	0

Joint Costs Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services?

Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____ (ii) the amount allocated to Program services \$ _____
(iii) the amount allocated to Management and general \$ _____ and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)

What is the organization's primary exempt purpose?	Program Service Expenses (Required for 501(c)(3) and (4) orgs and 4947(a)(1) trusts but optional for others.)
<p>► SUPPORT LEGAL SERVICES FOR THE POOR</p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p> <p>a PROVIDE ASSISTANCE, SUPPORT, AND TRAINING TO LEGAL SERVICE CORPORATIONS IN FLORIDA TO ENCOURGE THE PROVISION OF HIGH QUALITY LEGAL SERVICE TO THE POOR.</p> <p>(Grants and allocations \$ <u>390,974</u>)</p>	1,813,425
<p>b</p> <p>(Grants and allocations \$ _____)</p>	
<p>c</p> <p>(Grants and allocations \$ _____)</p>	
<p>d</p> <p>(Grants and allocations \$ _____)</p>	
e Other program services (attach schedule)	(Grants and allocations \$ _____)
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,813,425

Part IV Balance Sheets (See Specific Instructions on page 24)

Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only	(A) Beginning of year	(B) End of year
45	Cash-non-interest-bearing		45
46	Savings and temporary cash investments	931,180	46 769,783
47a	Accounts receivable	47a 195	
b	Less allowance for doubtful accounts	47b	47c 195
48a	Pledges receivable	48a	
b	Less allowance for doubtful accounts	48b	48c
49	Grants receivable	32,991	49 15,604
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50
51a	Other notes and loans receivable (attach schedule)	51a	
b	Less allowance for doubtful accounts	51b	51c
52	Inventories for sale or use		52
53	Prepaid expenses and deferred charges	33,904	53 23,744
54	Investments-securities		54
55a	Investments-land, buildings, and equipment basis	55a	
b	Less accumulated depreciation (attach schedule)	55b	55c
56	Investments-other (attach schedule)		56
57a	Land, buildings, and equipment basis	57a 249,569	
b	Less accumulated depreciation (attach schedule)	57b 213,391	57c 36,178
58	Other assets (describe ▶ See Stmt 3)	358,515	58 303,426
59	Total assets (add lines 45 through 58) (must equal line 74)	1,405,564	59 1,148,930
60	Accounts payable and accrued expenses	153,502	60 185,199
61	Grants payable		61
62	Deferred revenue		62
63	Loans from officers, directors trustees, and key employees (attach schedule)		63
64a	Tax-exempt bond liabilities (attach schedule)		64a
b	Mortgages and other notes payable (attach schedule)		64b
65	Other liabilities (describe ▶ See Stmt 4)	373,295	65 295,862
66	Total liabilities (add lines 60 through 65)	526,797	66 481,061
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
67	Unrestricted	850,683	67 650,993
68	Temporarily restricted	28,084	68 16,876
69	Permanently restricted		69
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
70	Capital stock, trust principal, or current funds		70
71	Paid-in or capital surplus, or land, building, and equipment fund		71
72	Retained earnings, endowment, accumulated income, or other funds		72
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	878,767	73 667,869
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	1,405,564	74 1,148,930

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

DAA

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)

Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

a Total revenue, gains, and other support per audited financial statements ▶	a	2,574,989	a Total expenses and losses per audited financial statements ▶	a	2,774,679
b Amounts included on line a but not on line 12, Form 990			b Amounts included on line a but not on line 17, Form 990		
(1) Net unrealized gains on investments \$			(1) Donated services and use of facilities \$		
(2) Donated services and use of facilities \$			(2) Prior year adjustments reported on line 20, Form 990 \$		
(3) Recoveries of prior year grants \$ 11,208			(3) Losses reported on line 20, Form 990 \$		
(4) Other (specify)			(4) Other (specify)		
\$			\$		
Add amounts on lines (1) through (4) ▶	b	11,208	Add amounts on lines (1) through (4) ▶	b	
c Line a minus line b ▶	c	2,563,781	c Line a minus line b ▶	c	2,774,679
d Amounts included on line 12, Form 990 but not on line a			d Amounts included on line 17, Form 990 but not on line a		
(1) Investment expenses not included on line 6b, Form 990 \$			(1) Investment expenses not included on line 6b, Form 990 \$		
(2) Other (specify)			(2) Other (specify)		
\$			\$		
Add amounts on lines (1) and (2) ▶	d		Add amounts on lines (1) and (2) ▶	d	
e Total revenue per line 12, Form 990 (line c plus line d) ▶	e	2,563,781	e Total expenses per line 17, Form 990 (line c plus line d) ▶	e	2,774,679

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contrib to employee benefit plans & deferred compensation	(E) Expense account and other allowances
KENT SPUHLER 2121 DELTA BLVD, TALLAHASSEE, FL SEE ATTACHED LISTING	EXEC. DIR. 40	90,061	16,886	0
	DIRECTORS PART-TIME	0	0	0

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ▶ Yes No
 If "Yes," attach schedule-see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27.)

		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a	Did the organization have unrelated business gross inc of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b	If "Yes," enter the name of the organization <input type="checkbox"/> and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt.		
81a	Enter direct or indirect political expenditures See line 81 instr	81a	64,818
b	Did the organization file Form 1120-POL for this year?	81b	X
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	N/A	
b	If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III)	82b	
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	N/A	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	N/A	
85	501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	N/A	
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	N/A	
c	Dues, assessments, and similar amounts from members	85c	
d	Section 162(e) lobbying and political expenditures	85d	
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	
g	Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	N/A	
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	N/A	
86	501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	
b	Gross receipts, included on line 12, for public use of club facilities	86b	
87	501(c)(12) orgs Enter a Gross income from members or shareholders	87a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	
88	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	X
89a	501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <input type="checkbox"/> 0, section 4912 <input type="checkbox"/> 0, section 4955 <input type="checkbox"/> 0		
b	501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0
d	Enter Amount of tax on line 89c, above, reimbursed by the organization		0
90a	List the states with which a copy of this return is filed <input type="checkbox"/> None		
b	Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	32
91	The books are in care of <input type="checkbox"/> BONI GREGORY Located at <input type="checkbox"/> 2121 DELTA BLVD. TALLAHASSEE, FL	Telephone no <input type="checkbox"/> 850-385-7900 ZIP + 4 <input type="checkbox"/> 32303	
92	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year	<input type="checkbox"/> 92	

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

Note	Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by sec 512 513, or 514		(E) Related or exempt function Income
		(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93	Program service revenue					
a	ATTORNEY FEES					230,216
b						
c						
d						
e						
f	Medicare/Medicaid payments					
g	Fees and contracts from government agencies					
94	Membership dues and assessments					
95	Interest on savings and temporary cash investments			14	33,361	
96	Dividends and interest from securities					
97	Net rental income or (loss) from real estate					
a	debt-financed property					
b	not debt-financed property					
98	Net rental income or (loss) from personal property					
99	Other investment income					
100	Gain or (loss) from sales of assets other than inventory					
101	Net income or (loss) from special events					
102	Gross profit or (loss) from sales of inventory					
103	Other revenue					
a						
b						
c						
d						
e						
104	Subtotal (add columns (B), (D), and (E))		0		33,361	230,216
105	Total (add line 104, columns (B), (D), and (E))					263,577

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
93a	LITIGATION AWARDS OFFSETTING LITIGATION EXPENSES ON MIGRANT WORKERS AND OTHER ISSUES

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on pg 33)

(a) Did the organization during the year receive any funds directly or indirectly to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

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, the information furnished is true, correct, and complete. I am a duly licensed professional preparer (other than officer) is based on all information of which preparer has any knowledge.

Date 5/8/02

I President

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information-(See separate instructions.)

OMB No 1545-0047

2001

Department of the Treasury
Internal Revenue Service

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

Employer identification number

FLORIDA LEGAL SERVICES, INC.

59-1436126

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee ben plans & deferred compensation	(e) Expense account and other allowances
CHARLES ELSSESSER 2121 DELTA BLVD, TALLAHASSEE, FL	ATTORNEY 40	75,615	9,283	0
ARTHUR J. ROSENBERG 2121 DELTA BLVD, TALLAHASSEE, FL	ATTORNEY 40	70,595	9,231	0
ROBERT W. WILLIAMS 2121 DELTA BLVD, TALLAHASSEE, FL	ATTORNEY 40	69,453	15,740	0
VALORY GREENFIELD 2121 DELTA BLVD, TALLAHASSEE, FL	ATTORNEY 40	68,793	11,266	0
GREGORY SCHELL 2121 DELTA BLVD, TALLAHASSEE, FL	ATTORNEY 40	63,758	12,850	0
Total number of other employees paid over \$50,000 ▶	5			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instr List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$ 50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services ▶		

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

Schedule A (Form 990 or 990-EZ) 2001

Part III Statements About Activities (See page 2 of the instructions)

		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities \$ 64,818 (Must equal amount on line 38, Part VI-A, or line I of Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities	X	
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)		
a	Sale, exchange, or leasing of property?		X
b	Lending of money or other extension of credit?		X
c	Furnishing of goods, services, or facilities?		X
d	Payment of compensation (or payment or reimbursement of exp. if more than \$1 000)? See Part V, Form 990	X	
e	Transfer of any part of its income or assets?		X
3	Does the organization make grants for scholarships, fellowships, student loans etc ? (See Note below)		X
4	Do you have a section 403(b) annuity plan for your employees?		X

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5 A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 11b A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 12 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 charitable, etc., 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) (Also complete the Support Schedule in Part IV-A)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11 or 12) Use cash method of accounting

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	2,709,471	2,356,702	2,981,031	1,858,011	9,905,215
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	64,795	496,274	86,571	30,707	678,347
18 Gross inc. from int., dividends, amounts received from pymt. on securities loans (section 512(a)(5)) rents royalties & unrelated busn taxable inc. (less sec 511 taxes) from businesses acquired by the organization after June 30, 1975	52,873	33,918	30,881	35,266	152,938
19 Net income from unrelated business activities not included in line 18					
20 Tax revn levied for the organization's ben & either paid to it or expended on its behalf					
21 The value of serv or fac furnished to the org by a governmental unit without charge Do not incl the value of serv or fac generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of cap assets				3,800	3,800
23 Total of lines 15 through 22	2,827,139	2,886,894	3,098,483	1,927,784	10,740,300
24 Line 23 minus line 17	2,762,344	2,390,620	3,011,912	1,897,077	10,061,953
25 Enter 1% of line 23	28,271	28,869	30,985	19,278	

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	26a	201,239
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a Do not file this list with your return Enter the total of all these excess amounts		26b	
c Total support for section 509(a)(1) test Enter line 24, column (e)		26c	10,061,953
d Add Amounts from column (e) for lines 18 <u>152,938</u> 19 _____ 22 <u>3,800</u> 26b _____		26d	156,738
e Public support (line 26c minus line 26d total)		26e	9,905,215
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))		26f	98.4423%

27 Organizations described on line 12 a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return Enter the sum of such amounts for each year N/A

(2000) (1999) (1998) (1997)

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals) Do not file this list with your return After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year N/A

(2000) (1999) (1998) (1997)			
c Add Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____		27c	
d Add Line 27a total _____ and line 27b total _____		27d	
e Public support (line 27c total minus line 27d total)		27e	
f Total support for section 509(a)(2) test Enter amount on line 23, column (e) 27f		27f	
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27g	%
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		27h	%

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return Do not include these grants in line 15

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	N/A	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?			
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?			
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe. If "No," please explain (If you need more space, attach a separate statement.)			
32 Does the organization maintain the following			
a Records indicating the racial composition of the student body, faculty, and administrative staff?			
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?			
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?			
d Copies of all material used by the organization or on its behalf to solicit contributions?			
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33 Does the organization discriminate by race in any way with respect to			
a Students' rights or privileges?			
b Admissions policies?			
c Employment of faculty or administrative staff?			
d Scholarships or other financial assistance?			
e Educational policies?			
f Use of facilities?			
g Athletic programs?			
h Other extracurricular activities?			
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a Does the organization receive any financial aid or assistance from a governmental agency?			
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement			
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation			

Federal Statements

Statement 1 - Form 990, Part II, Line 22 - Grants, Allocations, and Contributions

Description	Cash Contribution	Noncash Contribution
1000 FRIENDS OF FLORIDA, INC	\$ 65,000	\$
FLORIDA STATE UNIVERSITY	18,667	
LEGAL SERVICES OF BROWARD COUNTY	121,700	
SECOND JUDICAL CIRCUIT	32,143	
LEGAL SERVICES OF NORTH FLORIDA	88,464	
LEAF	65,000	
Total	<u>\$ 390,974</u>	<u>\$ 0</u>

Statement 2 - Form 990, Part II, Line 43 - Other Functional Expenses

Description	Total Expenses	Program Service	Mgt & General	Fund- Raising
	\$	\$	\$	\$
Expenses				
INSURANCE	20,517	1,076	19,441	
DUES & FEES	26,234	10,878	15,356	
PROGRAM SUPPORT	169,451	69,019	100,432	
LITIGATION COSTS	127,120	123,458	3,662	
CONTRACT SERVICES	17,300	17,300		
OTHER EXPENSES	5,621	4,430	1,191	
Total	<u>\$ 366,243</u>	<u>\$ 226,161</u>	<u>\$ 140,082</u>	<u>\$ 0</u>

Federal Statements**Statement 3 - Form 990, Part IV, Line 58 - Other Assets**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
TRUST FUNDS	\$ 353,845	\$ 295,862
DEPOSITS	4,670	7,564
Total	<u>\$ 358,515</u>	<u>\$ 303,426</u>

Statement 4 - Form 990, Part IV, Line 65 - Other Liabilities

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
TRUST FUNDS	\$ 353,845	\$ 295,862
CONTRACT ADVANCES	19,450	
Total	<u>\$ 373,295</u>	<u>\$ 295,862</u>

FLORIDA LEGAL SERVICES, INC.
BOARD OF DIRECTORS
2001 - 2002

PRESIDENT

Stephen C. Emmanuel
AUSLEY & McMULLEN
227 South Calhoun St
Tallahassee FL 32301
(850)224-9115 (W)
(850)222-7560 (FAX) AB 34
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/02

SECRETARY

Noel G. Lawrence
100 Riverside Avenue
Jacksonville, FL 32202
(904) 356-9928 (W)
(904) 356-6762 FAX AB 53
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/03

VICE PRESIDENT

Gloria Sanders
100 E. Dade Avenue
MID-FLORIDA COMMUNITY SERVICES
Bushnell FL 33513
(352)793-3114 (W)
(352)793-6879 (H)
(352)568-0446 FAX AB 76
APPOINTING BODY:
FLORIDA CLIENT'S COUNCIL
Term Expires 6/96
(continues pending appointment)

TREASURER

Lynn E. Wagner
RUMRELL, WAGNER & COSTABELL
2180 Park Avenue North, Ste 318
Winter Park, FL 32789
(407) 875-0922 (W)
(407) 875-1303 FAX AB 57
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/03

PRESIDENT ELECT

Warren T. LaFray
615 Turner St
Clearwater, FL 33756
(727) 461-3195 (W)
(727) 461-2567 (FAX) AB 35
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/02

Executive Committee Members:
Larry Colleton and Mary Anne
DePetrillo

Board of Directors

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Derotha Baker-Jones
1010 N. Macomb Street
Tallahassee, FL 32303
(850) 514-1148 (H)
(850) 224-1381 (W)
(850) 224-8671 (FAX) (AB 84)
APPOINTING BODY:
FLORIDA CLIENT'S COUNCIL
TERM EXPIRES: 6/97
(continues pending appointment)

Mr. James L. Bell
The Bell Law Firm, P.A.
184 East Bay Street, Suite 303
Charleston, SC 29402
(843) 723-6141
(843) 722-7028 (FAX) AB 37
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/02

Harriet Brown
EDUCATION LEADERSHIP CENTER.
445 W. Amelia St (32801)
P. O. Box 271
Orlando, FL 32802
(407)317-3312 (W)
(407)317-3310 (FAX) AB 33
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/03

Howard A. Caplan
3900 Atlantic Blvd.
Jacksonville, FL 32207-2035
(904) 346-1670
(904) 346-1671 (AB 41)
APPOINTING BODY:
The Florida Bar
TERM EXPIRES: 6/03

Larry Colleton
SWEETING, HALBERT & COLLETON
23000 E. Concord Street
Orlando FL 32803
10648 Springbuck Trail 32825 (Home)
(407) 896-1125 (W)
(407) 896-0045 (FAX) AB 39
APPOINTING BODY: NAACP
TERM EXPIRES: 6/03

Mary Anne DePetrillo
LEGAL AID SOC. OF ORANGE CTY
100 E Robinson St
Orlando FL 32801-1602
(407) 841-8310 (PH)
(407) 648-9240 (FAX) 30
APPOINTING BODY:
PROJECT DIRECTORS ASSOCIATION
TERM EXPIRES: 6/03

Janet Findling
LONG-TERM CARE OMBUDSMAN
600 S Calhoun St., Suite 270
Tallahassee, FL 32301
(850) 488-6190 (W)
(850) 488-5657 FAX AB 44
APPOINTING BODY:
FLORIDA LONG-TERM CARE OMBUDSMAN
TERM EXPIRES: 6/03

Legislative Coordinator
FLORIDA IMPACT
345 S Magnolia, Suite E-17
Tallahassee, FL 32301
(850)309-1488 (W)
(850)309-1489 FAX AB 42
APPOINTING BODY:
FLORIDA IMPACT
TERM EXPIRES: 6/02 (VACANT)

Board of Directors

Page -3- (September 5, 2001)

Ms. Nkwanda Jah
1112 NE 2nd Street
Gainesville, FL 32601
(352) 372-0216 (W)
(352) 375-7366 (H)
(352) 372-0876 FAX
APPOINTING BODY:

Project Directors Association
TERM EXPIRES: 6/03

Anthony Karrat
LEGAL AID BROWARD COUNTY
609 SW First Avenue
Ft. Lauderdale, FL 33301
(954) 765-8957 Ext. 224
(954) 765-5149 (FAX) 27
APPOINTING BODY:
PROJECT DIRECTORS ASSOCIATION
TERM EXPIRES: 6/02

Sally D.M. Kest
1115 E. Concord St.
Orlando, FL 32803
(407) 423-1472 (W)
(407) 839-1540 (FAX) **AB 45**
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/02

Donna Krusbe
Fourth DCA
P.O. Box 3315
West Palm Beach, FL 33402
(561) 242-2062
(561) 242-2100 (FAX)
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/03

James Tucker
P. O. Box 188
Hastings, FL 32145
(904) 825-6850 (W)
(904) 692-1004 (H)
(904) 692-2808 FAX (H) **AB 52**
APPOINTING BODY:
FLORIDA CLIENT'S COUNCIL
TERM EXPIRES: 6/97
(continues pending appointment)

Daniel F. Wilensky
1916 Atlantic Blvd.
Jacksonville, FL 32207
(904) 398-9889 (W)
(904) 398-5272 FAX **AB 28**
APPOINTING BODY:
THE FLORIDA BAR
TERM EXPIRES: 6/02

(Currently one vacancy to be appointed
by The Florida Bar.)

F.\barbara\mail.lst\board.lst
REVISED September 5, 2001