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)

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

For the 2012 calendar year, or tax year beginning 02/01/2012, and ending 01/31/2013

C Name of organization
THE ALS ASSOCIATION GREATER NY CHAPTER

D Employer identification number
13-3616680

E Telephone number
(212) 619-1400

F Name and address of principal officer
DORINE GORDON
42 BROADWAY, SUITE 1724, NEW YORK, NY 10004

G Gross receipts
$ 4,002,197.

H(a) Is this a group return for affiliates?
Yes ☑ No ☐

H(b) Are all affiliates included?
Yes ☑ No ☐

J Website: WWW.ALS-NY.ORG

K Form of organization
X Corporation ☑ Trust ☐ Association ☐ Other ☐

L Year of formation
1990 ☑ State of legal domicile
NY ☑

Part I

Summary
1 Briefly describe the organization's mission or most significant activities:
TO LEAD THE FIGHT TO CURE & TREAT ALS THROUGH GLOBAL, CUTTING EDGE RESEARCH, & TO EMPOWER PEOPLE WITH LOU GEHRIG'S DISEASE & THEIR FAMILIES TO LIVE FULLER LIVES BY PROVIDING THEM WITH CARE & SUPPORT.

2 Check this box ☑ if the organization discontinued its operations or disposed of more than 25% of its net assets
3 Number of voting members of the governing body (Part VI, line 1a) .................. 3 18.

4 Number of independent voting members of the governing body (Part VI, line 1b) .... 4 17.

5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) ...... 5 26.

6 Total number of volunteers (estimate if necessary) .................................. 6 200.

7a Total unrelated business revenue from Form 990-T, column (C), line 12 .......... 7a 0

7b Net unrelated business taxable income from Form 990-T, line 34 ............... 7b 0

8 Contributions and grants (Part VIII, line 1h) ........................................... 8 3,162,631.

9 Program service revenue (Part VIII, line 2g) ........................................... 9 0

10 Revenue income (Part VIII, column (A), lines 3, 4, and 7d) ......................... 10 1,535.

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) ........ 11 736,751.

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 2,427,415.

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) ................. 13 0

14 Benefits paid to or for members (Part IX, column (A), line 4) ..................... 14 0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 1,036,435.

16a Professional fundraising fees (Part IX, column (A), line 11e) ................... 16a 0

16b Total fundraising expenses (Part IX, column (D), line 25) ....................... 16b 333,619.

17 Other expenses (Part IX, column (A), lines 11a-11d, 11l-24e) ................... 17 1,571,496.

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .... 18 2,607,931.

19 Revenue less expenses. Subtract line 18 from line 12 .......................... 19 1,819,484.

20 Total assets (Part X, line 16) .................................................................. 20 2,003,851.

21 Total liabilities (Part X, line 26) ............................................................... 21 75,374.

22 Net assets or fund balances. Subtract line 21 from line 20 ........................ 22 1,928,477.

Part II

Signature Block

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

Print/Type preparer's name
JAMES J. REILLY
Preparer's signature
Preparer's date 8/15/13

Check if self-employed ☑ ☐

PTIN P00183769

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ ☐

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2012)
### Part III Statement of Program Service Accomplishments

#### 1 Briefly describe the organization's mission

**TO LEAD THE FIGHT TO CURE & TREAT ALS THROUGH GLOBAL, CUTTING EDGE RESEARCH, & TO EMPOWER PEOPLE WITH LOU GEHRIG'S DISEASE & THEIR FAMILIES TO LIVE FULLER LIVES BY PROVIDING THEM WITH CARE & SUPPORT.**

#### 2 Did the organization undertake any significant program services during the year which were not listed 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 services? 

- [ ] Yes (X) No

If “Yes,” describe these changes on Schedule O

#### 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

<table>
<thead>
<tr>
<th>Code</th>
<th>Expenses</th>
<th>Revenue</th>
</tr>
</thead>
<tbody>
<tr>
<td>4a</td>
<td>(Code)</td>
<td>(1,401,937, including grants of $)</td>
</tr>
<tr>
<td></td>
<td>PATIENT SERVICES: THE ALS ASSOCIATION GREATER NEW YORK CHAPTER PROVIDES A WIDE RANGE OF SERVICES, INCLUDING SPONSORSHIP OF FOUR MULTIDISCIPLINARY ALS CENTERS IN THE GREATER NEW YORK AREA. IT ALSO MAKES LOANS OF MEDICAL EQUIPMENT AND ASSISTIVE COMMUNICATION DEVICES FROM ITS THREE LOAN CLOSETS ON LONG ISLAND, IN NEW JERSEY, AND IN THE HUDSON VALLEY, AS WELL AS HOLDS PATIENT EDUCATIONAL SYMPOSIA AND MONTHLY SUPPORT GROUPS, CONDUCTS HOME VISITS, PROVIDES TRANSPORTATION TO CLINIC APPOINTMENTS AND OFFERS SOCIAL WORK AND REFERRAL SERVICES.</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>(Code)</td>
<td>(637,279, including grants of $)</td>
</tr>
<tr>
<td>4c</td>
<td>(Code)</td>
<td>(320,608, including grants of $)</td>
</tr>
<tr>
<td></td>
<td>PUBLIC AWARENESS AND EDUCATION: THROUGH PUBLIC OUTREACH, MEDIA RELATIONS AND THE INTERNET, THE ALS ASSOCIATION CONTINUALLY RAISES AWARENESS ABOUT ALS AND THE SEARCH FOR A CURE. ON AVERAGE, EACH MONTH 5,000 VIEWERS VISIT OUR WEBSITE, A VITAL SOURCE OF INFORMATION FOR THOSE BATTLING ALS AND FOR PEOPLE LOOKING FOR THE LATEST NEWS AND INFORMATION ABOUT THE DISEASE. WE ALSO HAVE EXPANDED ALS AWARENESS BY ESTABLISHING SUPPORT NETWORKS ON POPULAR SOCIAL NETWORKING WEBSITES, SUCH AS FACEBOOK AND TWITTER.</td>
<td></td>
</tr>
<tr>
<td>4d Other program services (Describe in Schedule O)</td>
<td>(Expenses $133,386, including grants of $)</td>
<td></td>
</tr>
<tr>
<td>4e Total program service expenses</td>
<td>$2,293,210</td>
<td></td>
</tr>
<tr>
<td>Number</td>
<td>Question</td>
<td>Yes</td>
</tr>
<tr>
<td>--------</td>
<td>---------------------------------------------------------------------------</td>
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</tr>
<tr>
<td>1</td>
<td>Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If &quot;Yes,&quot; complete Schedule A</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If &quot;Yes,&quot; complete Schedule C, Part I</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td><strong>Section 501(c)(3) organizations:</strong> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If &quot;Yes,&quot; complete Schedule C, Part II</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>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 &quot;Yes,&quot; complete Schedule C, Part III</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part I</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If &quot;Yes,&quot; complete Schedule D, Part II</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>Did the organization maintain collections of works of art, historical treasures, or other similar assets? If &quot;Yes,&quot; complete Schedule D, Part III</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IV</td>
<td>9</td>
</tr>
<tr>
<td>10</td>
<td>Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If &quot;Yes,&quot; complete Schedule D, Part V</td>
<td>10</td>
</tr>
<tr>
<td>11</td>
<td>If the organization’s answer to any of the following questions is &quot;Yes,&quot; then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If &quot;Yes,&quot; complete Schedule D, Part VI</td>
<td>11a</td>
</tr>
<tr>
<td></td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part VII</td>
<td>11b</td>
</tr>
<tr>
<td></td>
<td>c Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If &quot;Yes,&quot; complete Schedule D, Part VIII</td>
<td>11c</td>
</tr>
<tr>
<td></td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part IX</td>
<td>11d</td>
</tr>
<tr>
<td></td>
<td>e Did the organization report an amount for other liabilities in Part X, line 25? If &quot;Yes,&quot; complete Schedule D, Part X</td>
<td>11e</td>
</tr>
<tr>
<td></td>
<td>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 &quot;Yes,&quot; complete Schedule D, Part X</td>
<td>11f</td>
</tr>
<tr>
<td>12a</td>
<td>Did the organization obtain separate, independent audited financial statements for the tax year? If &quot;Yes,&quot; complete Schedule D, Parts XI and XII</td>
<td>12a</td>
</tr>
<tr>
<td></td>
<td>b Was the organization included in consolidated, independent audited financial statements for the tax year? If &quot;Yes,&quot; and if the organization answered &quot;No&quot; to line 12a, then completing Schedule D, Parts XI and XII is optional</td>
<td>12b</td>
</tr>
<tr>
<td>13</td>
<td>Is the organization a school described in section 170(b)(1)(A)(ii)? If &quot;Yes,&quot; complete Schedule E</td>
<td>13</td>
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<td>14a</td>
<td>Did the organization maintain an office, employees, or agents outside of the United States?</td>
<td>14a</td>
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<tr>
<td>b</td>
<td>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 &quot;Yes,&quot; complete Schedule F, Parts I and IV</td>
<td>14b</td>
</tr>
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<td>15</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? If &quot;Yes,&quot; complete Schedule F, Parts II and IV</td>
<td>15</td>
</tr>
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<td>16</td>
<td>Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? If &quot;Yes,&quot; complete Schedule F, Parts III and IV</td>
<td>16</td>
</tr>
<tr>
<td>17</td>
<td>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 &quot;Yes,&quot; complete Schedule G, Part I (see instructions)</td>
<td>17</td>
</tr>
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<td>18</td>
<td>Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If &quot;Yes,&quot; complete Schedule G, Part II</td>
<td>18</td>
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<td>19</td>
<td>Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? If &quot;Yes,&quot; complete Schedule G, Part III</td>
<td>19</td>
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<td>20a</td>
<td>Did the organization operate one or more hospital facilities? If &quot;Yes,&quot; complete Schedule H</td>
<td>20a</td>
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<td>b</td>
<td>If &quot;Yes&quot; to line 20a, did the organization attach a copy of its audited financial statements to this return?</td>
<td>20b</td>
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<td>Yes</td>
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<td>35a</td>
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<td>36</td>
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<td>37</td>
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<tr>
<td>38</td>
<td></td>
<td>X</td>
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</tbody>
</table>

Section 501(c)(3) and 501(c)(4) organizations:

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.

Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

- A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.
- A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.
- An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.

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

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.

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

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.

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.

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.

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

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.

Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.

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.

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 192? Note. All Form 990 filers are required to complete Schedule O.
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable.
1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable.
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?
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.
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).
3a Did the organization have unrelated business gross income of $1,000 or more during the year?
3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?
4b If "Yes," enter the name of the foreign country:
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?
5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?
5c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?
6a Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?
6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?
7 Organizations that may receive deductible contributions under section 170(c).
7a Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?
7b If "Yes," did the organization notify the donor of the value of the goods or services provided?
7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?
7d If "Yes," indicate the number of Forms 8282 filed during the year.
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?
9 Sponsoring organizations maintaining donor advised funds.
a Did the organization make any taxable distributions under section 4966?
b Did the organization make a distribution to a donor, donor advisor, or related person?
10 Section 501(c)(7) organizations. Enter:
a Initiation fees and capital contributions included on Part VIII, line 12.
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.
11 Section 501(c)(12) organizations. Enter:
a Gross income from members or shareholders.
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.
13a Is the organization licensed to issue qualified health plans in more than one state?
 Note. See the instructions for additional information the organization must report on Schedule O.
13b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.
13c Enter the amount of reserves on hand.
14a Did the organization receive any payments for indoor tanning services during the tax year?
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.
## Part VI: Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI.

### Section A: Governing Body and Management

1a. Enter the number of voting members of the governing body at the end of the tax year. 

<table>
<thead>
<tr>
<th>1a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

b. Enter the number of voting members included in line 1a, above, who are independent.

<table>
<thead>
<tr>
<th>1b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

2. Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?

<table>
<thead>
<tr>
<th>2</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

3. Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?

<table>
<thead>
<tr>
<th>3</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?

<table>
<thead>
<tr>
<th>4</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

5. Did the organization become aware during the year of a significant diversion of the organization's assets?

<table>
<thead>
<tr>
<th>5</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

6. Did the organization have members or stockholders?

<table>
<thead>
<tr>
<th>6</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

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?

<table>
<thead>
<tr>
<th>7a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?

<table>
<thead>
<tr>
<th>7b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following?

a. The governing body?

<table>
<thead>
<tr>
<th>8a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

b. Each committee with authority to act on behalf of the governing body?

<table>
<thead>
<tr>
<th>8b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

9. Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

<table>
<thead>
<tr>
<th>9</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

### Section B: Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

10a. Did the organization have local chapters, branches, or affiliates?

<table>
<thead>
<tr>
<th>10a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

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?

<table>
<thead>
<tr>
<th>10b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

11a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?

<table>
<thead>
<tr>
<th>11a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

b. Describe in Schedule O the process, if any, used by the organization to review this Form 990.

<table>
<thead>
<tr>
<th>11b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

12a. Did the organization have a written conflict of interest policy? If "No," go to line 13.

<table>
<thead>
<tr>
<th>12a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?

<table>
<thead>
<tr>
<th>12b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

c. Describe the mechanism by which and how this was done.

<table>
<thead>
<tr>
<th>12c</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

13. Did the organization have a written whistleblower policy?

<table>
<thead>
<tr>
<th>13</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

14. Did the organization have a written document retention and destruction policy?

<table>
<thead>
<tr>
<th>14</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

15. Did the organization have a written document retention and destruction policy?

<table>
<thead>
<tr>
<th>15</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

b. If "Yes" to line 15a or 15b, describe the process in Schedule O.

<table>
<thead>
<tr>
<th>15b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

16a. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?

<table>
<thead>
<tr>
<th>16a</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

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 laws, and take steps to safeguard the organization's exempt status with respect to such arrangements?

<table>
<thead>
<tr>
<th>16b</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

### Section C: Disclosure

17. List the states with which a copy of this Form 990 is required to be filed. 

| NJ, NY |

18. Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3) only) available for public inspection. Indicate how you made these available. Check all that apply.

- [ ] Own website
- [ ] Another's website
- [X] Upon request
- [ ] Other (explain in Schedule O)

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

20. State the name, physical address, and telephone number of the person who possesses the books and records of the organization.

**THE ASSOCIATION, 42 BROADWAY, 1724, NEW YORK, NY 10004**

(212) 619-1400

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**Form 990 (2012)**

**JSA**

**73519X M261**

**PAGE 6**
## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

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

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (list any hours for related organizations below dotted line)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) RICHARD ROSE CHAIRMAN</td>
<td>2.00</td>
<td>X X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(2) WENDY J. SCHRIER, ESQ. VICE CHAIRMAN</td>
<td>2.00</td>
<td>X X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(3) W. MARC LANE TREASURER</td>
<td>2.00</td>
<td>X X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(4) ALLEN J. POPowitz, ESQ. SECRETARY</td>
<td>2.00</td>
<td>X X</td>
<td>162,748</td>
<td>0</td>
<td>17,604</td>
</tr>
<tr>
<td>(5) DORINE GORDON PRESIDENT &amp; CEO</td>
<td>40.00</td>
<td>X X</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) ALICE CLAAR DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(7) KEN DASHOW DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(8) DAVID LUBARS DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(9) JASON PERLINE DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(10) RAY ROBINSON DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(11) PETER ROSENBERGER DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(12) MARILYN SAFENOWITZ DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(13) GLENISS SMITH SCHONHOLZ DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>(14) ROBERT TUCHMAN DIRECTOR</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Part VII
Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

<table>
<thead>
<tr>
<th>(A) Name and title</th>
<th>(B) Average hours per week</th>
<th>(C) Position</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>15) LEE BRODSKY</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16) KEVIN GLASSMAN, MD</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17) LENNARD KATZ</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18) TOM CARROLL</td>
<td>1.00</td>
<td>X</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>DIRECTOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1b Sub-total: 162,748.00 0 17,604.

c Total from continuation sheets to Part VII, Section A: 162,748.00 0 17,604.

d Total (add lines 1b and 1c): 162,748.00 0 17,604.

### Section B. Independent Contractors

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

Yes | No
---|---
3   | X
4   | X
5   | X
## Statement of Revenue

*Check if Schedule O contains a response to any question in this Part VIII.

### Contributions, Gifts, Grants, and Other Similar Amounts

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Federated campaigns</td>
<td></td>
</tr>
<tr>
<td>1b Membership dues</td>
<td></td>
</tr>
<tr>
<td>1c Fundraising events</td>
<td>2,936,621</td>
</tr>
<tr>
<td>1d Related organizations</td>
<td></td>
</tr>
<tr>
<td>1e Government grants (contributions)</td>
<td>975,328.</td>
</tr>
<tr>
<td>1f All other contributions, gifts, grants, and similar amounts</td>
<td>126,500.</td>
</tr>
<tr>
<td>1g Noncash contributions included in lines 1a-1f</td>
<td>3,911,949.</td>
</tr>
</tbody>
</table>

### Program Service Revenue

#### Business Code

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td></td>
</tr>
<tr>
<td>2d</td>
<td></td>
</tr>
<tr>
<td>2e</td>
<td></td>
</tr>
<tr>
<td>2f All other program service revenue</td>
<td>0</td>
</tr>
<tr>
<td>2g Total, Add lines 2a-2f</td>
<td></td>
</tr>
</tbody>
</table>

### Other Revenue

#### Business Code

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Investment income (including dividends, interest, and other similar amounts)</td>
<td></td>
</tr>
<tr>
<td>4 Income from investment of tax-exempt bond proceeds</td>
<td></td>
</tr>
<tr>
<td>5 Royalties</td>
<td></td>
</tr>
<tr>
<td>6a Gross rents</td>
<td></td>
</tr>
<tr>
<td>6b Less rental expenses</td>
<td></td>
</tr>
<tr>
<td>6c Rental income or (loss)</td>
<td></td>
</tr>
<tr>
<td>6d Net rental income or (loss)</td>
<td></td>
</tr>
<tr>
<td>7a Gross amount from sales of assets other than inventory</td>
<td></td>
</tr>
<tr>
<td>7b Less, cost or other basis and sales expenses</td>
<td></td>
</tr>
<tr>
<td>7c Gain or (loss)</td>
<td></td>
</tr>
<tr>
<td>7d Net gain or (loss)</td>
<td></td>
</tr>
<tr>
<td>8a Gross income from fundraising events (not including $2,936,121 of contributions reported on line 1c)</td>
<td>86,795.</td>
</tr>
<tr>
<td>8b See Part IV, line 18</td>
<td>860,654.</td>
</tr>
<tr>
<td>8c Total, Add lines 8a-8c</td>
<td>-771,859.</td>
</tr>
<tr>
<td>8d Net income or (loss) from fundraising events</td>
<td>-771,859.</td>
</tr>
<tr>
<td>9a Gross income from gaming activities</td>
<td></td>
</tr>
<tr>
<td>9b See Part IV, line 19</td>
<td></td>
</tr>
<tr>
<td>9c Total, Add lines 9a-9c</td>
<td></td>
</tr>
</tbody>
</table>

### Miscellaneous Revenue

#### Business Code

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>10a Gross sales of inventory, less returns and allowances</td>
<td></td>
</tr>
<tr>
<td>10b Less cost of goods sold</td>
<td></td>
</tr>
<tr>
<td>10c Net income or (loss) from sales of inventory</td>
<td>0</td>
</tr>
<tr>
<td>11a All other revenue</td>
<td></td>
</tr>
<tr>
<td>11b Total, Add lines 11a-11d</td>
<td>3,141,543.</td>
</tr>
</tbody>
</table>

Form 990 (2012)
## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response to any question in this Part IX.

<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to governments and organizations in the United States See Part IV, line 21</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to individuals in the United States See Part IV, line 22</td>
<td>11,842</td>
<td>11,842</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td>180,352</td>
<td>134,873</td>
<td>16,232</td>
<td>29,247</td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td>754,837</td>
<td>564,431</td>
<td>67,995</td>
<td>122,411</td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)</td>
<td>13,078</td>
<td>9,780</td>
<td>1,177</td>
<td>2,121</td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>71,234</td>
<td>53,271</td>
<td>6,411</td>
<td>11,552</td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td>87,250</td>
<td>65,248</td>
<td>7,853</td>
<td>14,149</td>
</tr>
<tr>
<td>11 Fees for services (non-employees)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td>30,537</td>
<td>30,537</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>d Lobbying</td>
<td>36,161</td>
<td>36,161</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>e Professional fundraising services See Part IV, line 17</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>f Investment management fees</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>g Other (if line 11g amount exceeds 10% of line 12. (A) amount, list line 11g expenses on Schedule O)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td>66,707</td>
<td>3,093</td>
<td>41,759</td>
<td>21,855</td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>14 Information technology</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>15 Royalties</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>139,723</td>
<td>104,481</td>
<td>12,583</td>
<td>22,659</td>
</tr>
<tr>
<td>17 Travel</td>
<td>307</td>
<td>307</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>8,223</td>
<td>8,223</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>20 Interest</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td>344,978</td>
<td>197,431</td>
<td>52,920</td>
<td>94,627</td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>132,102</td>
<td>125,620</td>
<td>6,482</td>
<td></td>
</tr>
<tr>
<td>23 Insurance</td>
<td>9,191</td>
<td>9,191</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 12, (A) amount, list line 24e expenses on Schedule O)</td>
<td>585,239</td>
<td>585,239</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>a PATIENT &amp; CLINIC SUPPORT</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>b RESEARCH</td>
<td>350,000</td>
<td>350,000</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>c PUBLIC AWARENESS &amp; EDUCATION</td>
<td>43,517</td>
<td>43,517</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>d OTHER FUNDRAISING COSTS</td>
<td>14,998</td>
<td>14,998</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>e All other expenses</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>2,880,276</td>
<td>2,293,210</td>
<td>253,447</td>
<td>333,619</td>
</tr>
<tr>
<td>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)</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
### Balance Sheet

#### Assets

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Savings and temporary cash investments</td>
<td>1,206,267.</td>
<td>1,002,069.</td>
</tr>
<tr>
<td>3. Pledges and grants receivable, net</td>
<td>120,694.</td>
<td>146,719.</td>
</tr>
<tr>
<td>4. Accounts receivable, net</td>
<td>0.4</td>
<td>0</td>
</tr>
<tr>
<td>5. Loans and other receivables from current and former officers, directors,</td>
<td></td>
<td></td>
</tr>
<tr>
<td>trustees, key employees, and highest compensated employees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complete Part II of Schedule L</td>
<td>0.5</td>
<td>0</td>
</tr>
<tr>
<td>6. Loans and other receivables from other disqualified persons (as defined</td>
<td>0.6</td>
<td>0</td>
</tr>
<tr>
<td>under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>contributing employers and sponsoring organizations of section 501(c)(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>voluntary employees’ beneficiary organizations’ (see instructions) Complete</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Notes and loans receivable, net</td>
<td>0.7</td>
<td>0</td>
</tr>
<tr>
<td>8. Inventories for sale or use</td>
<td>0.8</td>
<td>0</td>
</tr>
<tr>
<td>9. Prepaid expenses and deferred charges</td>
<td>0.9</td>
<td>0</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis Complete Part VI of</td>
<td>1,284,639.</td>
<td></td>
</tr>
<tr>
<td>Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Less accumulated depreciation</td>
<td>1,128,844.</td>
<td></td>
</tr>
<tr>
<td>Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>2,003,851.</td>
<td>2,257,691.</td>
</tr>
</tbody>
</table>

#### Liabilities

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>17. Accounts payable and accrued expenses</td>
<td>50,307.</td>
<td>7,165</td>
</tr>
<tr>
<td>18. Grants payable</td>
<td>0.18</td>
<td>0</td>
</tr>
<tr>
<td>19. Deferred revenue</td>
<td>0.19</td>
<td>0</td>
</tr>
<tr>
<td>20. Tax-exempt bond liabilities</td>
<td>0.14</td>
<td>0</td>
</tr>
<tr>
<td>21. Escrow or custodial account liability Complete Part IV of Schedule D</td>
<td>0.21</td>
<td>0</td>
</tr>
<tr>
<td>22. Loans and other payables to current and former officers, directors,</td>
<td>0.22</td>
<td>0</td>
</tr>
<tr>
<td>trustees, key employees, highest compensated employees, and disqualified</td>
<td></td>
<td></td>
</tr>
<tr>
<td>persons Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Secured mortgages and notes payable to unrelated third parties</td>
<td>0.23</td>
<td>0</td>
</tr>
<tr>
<td>24. Unsecured notes and loans payable to unrelated third parties</td>
<td>0.24</td>
<td>0</td>
</tr>
<tr>
<td>25. Other liabilities (including federal income tax, payables to related</td>
<td>25,067.</td>
<td>60,782.</td>
</tr>
<tr>
<td>third parties, and other liabilities not included on lines 17-24) Complete</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Part X of Schedule D</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning of year</th>
<th>End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>27. Unrestricted net assets</td>
<td>1,785,554.</td>
<td>1,963,090.</td>
</tr>
<tr>
<td>29. Permanently restricted net assets</td>
<td>0.28</td>
<td>0</td>
</tr>
<tr>
<td>Organizations that do not follow SFAS 117 (ASC 958), check here X and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Capital stock or trust principal, or current funds</td>
<td>30.</td>
<td></td>
</tr>
<tr>
<td>31. Paid-in or capital surplus, or land, building, or equipment fund</td>
<td>31.</td>
<td></td>
</tr>
<tr>
<td>32. Retained earnings, endowment, accumulated income, or other funds</td>
<td>32.</td>
<td></td>
</tr>
<tr>
<td>33. Total net assets or fund balances</td>
<td>1,928,477.</td>
<td>2,189,744.</td>
</tr>
<tr>
<td>34. Total liabilities and net assets/fund balances</td>
<td>2,003,851.</td>
<td>2,257,691.</td>
</tr>
</tbody>
</table>
### Part XI  Reconciliation of Net Assets
Check if Schedule O contains a response to any question in this Part XI.

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses Subtract line 2 from line 1</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
</tr>
<tr>
<td>5</td>
<td>Net unrealized gains (losses) on investments</td>
</tr>
<tr>
<td>6</td>
<td>Donated services and use of facilities</td>
</tr>
<tr>
<td>7</td>
<td>Investment expenses</td>
</tr>
<tr>
<td>8</td>
<td>Prior period adjustments</td>
</tr>
<tr>
<td>9</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
</tr>
<tr>
<td>10</td>
<td>Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))</td>
</tr>
</tbody>
</table>

### Part XII  Financial Statements and Reporting
Check if Schedule O contains a response to any question in this Part XII.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Accounting method used to prepare the Form 990</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cash</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Accrual</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Separate basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Consolidated basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If &quot;Yes,&quot; check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Separate basis</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Consolidated basis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Both consolidated and separate basis</td>
<td></td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits</td>
<td></td>
</tr>
</tbody>
</table>
Public Charity Status and Public Support

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

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

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 11, 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)
3. A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4. 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.
5. 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)
6. A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7. 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)(vii). (Complete Part II)
9. 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 II)
10. An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
11. 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 that describes the type of supporting organization and complete lines 11e through 11h.
   a. Type I
   b. Type II
   c. Type III-Functionally integrated
   d. Type III-Non-functionally integrated
   e. By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
   f. If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box.
   g. Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
      (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization.
      (ii) A family member of a person described in (i) above.
      (iii) A 35% controlled entity of a person described in (i) or (ii) above.
   h. Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
</tr>
<tr>
<td>(D)</td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
</tr>
</tbody>
</table>

Total

For Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.
Schedule A (Form 990 or 990-EZ) 2012

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**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;) . . . .</td>
<td>1,190,103</td>
<td>1,011,923</td>
<td>3,451,643</td>
<td>3,162,631</td>
<td>3,911,949</td>
<td>12,728,249</td>
</tr>
<tr>
<td>2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>3 The value of services or facilities furnished by a governmental unit to the organization without charge . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>4 Total. Add lines 1 through 3 . . . .</td>
<td>1,190,103</td>
<td>1,011,923</td>
<td>3,451,643</td>
<td>3,162,631</td>
<td>3,911,949</td>
<td>12,728,249</td>
</tr>
</tbody>
</table>

**Section B. Total Support**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7 Amounts from line 4 . . . .</td>
<td>1,190,103</td>
<td>1,011,923</td>
<td>3,451,643</td>
<td>3,162,631</td>
<td>3,911,949</td>
<td>12,728,249</td>
</tr>
<tr>
<td>8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .</td>
<td>22,966</td>
<td>3,199</td>
<td>3,471</td>
<td>1,535</td>
<td>1,453</td>
<td>32,624</td>
</tr>
<tr>
<td>9 Net income from unrelated business activities, whether or not the business is regularly carried on . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td>11 Total support. Add lines 7 through 10 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12,760,873</td>
</tr>
<tr>
<td>12 Gross receipts from related activities, etc. (see instructions) . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>5,076,494</td>
</tr>
<tr>
<td>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 . . . .</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section C. Computation of Public Support Percentage**

| Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | 96.72 % |
| Public support percentage from 2011 Schedule A, Part II, line 14 | 15 | 96.72 % |

| 16a 33 1/3% support test - 2012. | If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. | X |
| 16b 33 1/3% support test - 2011. | 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 - 2012. | 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 IV how the organization meets the "facts-and-circumstances" test.** The organization qualifies as a publicly supported organization. | |
| 17b 10%-facts-and-circumstances test - 2011. | 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 IV how the organization meets the "facts-and-circumstances" test.** The organization qualifies as a publicly supported organization. | |
| 18 Private foundation. | If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. | |

Schedule A (Form 990 or 990-EZ) 2012
### Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

#### Section A. Public Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gifts, grants, contributions, and membership fees received (Do not include any &quot;unusual grants&quot;)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization’s tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Total. Add lines 1 through 5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b 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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Public support (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th>(a) 2008</th>
<th>(b) 2009</th>
<th>(c) 2010</th>
<th>(d) 2011</th>
<th>(e) 2012</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9 Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Other income <strong>Do not include gain or loss from the sale of capital assets (Explain in Part IV)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Total support. (Add lines 9, 10c, 11, and 12)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

#### Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))

| 15 | % |

16 Public support percentage from 2011 Schedule A, Part III, line 15

| 16 | % |

#### Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))

| 17 | % |

18 Investment income percentage from 2011 Schedule A, Part III, line 17

| 18 | % |

19a 33 1/3% support tests - 2012. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

*Box checked: 0*

19b 33 1/3% support tests - 2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

*Box checked: 0*

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

*Box checked: 0*
Part IV  Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
**Political Campaign and Lobbying Activities**

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

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

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

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

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

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

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

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

---

**Name of organization:** THE ALS ASSOCIATION GREATER NY CHAPTER

**Employer Identification number:** 13-3616680

---

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

1. Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2. Political expenditures .................................................. $
3. Volunteer hours ........................................................... 

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

1. Enter the amount of any excise tax incurred by the organization under section 4955. ................ $
2. Enter the amount of any excise tax incurred by organization managers under section 4955 . ................ $
3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year?   
   - Yes
   - No
4a. Was a correction made? ............................................ Yes
   b. If "Yes," describe in Part IV

### Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities .................................................. $
2. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .................................................. $
3. Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b .................................................. $
4. Did the filing organization file Form 1120-POL for this year?   
   - Yes
   - No
5. Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

---

<table>
<thead>
<tr>
<th>(a) Name</th>
<th>(b) Address</th>
<th>(c) EIN</th>
<th>(d) Amount paid from filing organization's funds</th>
<th>(e) Amount of political contributions received and promptly and directly delivered to a separate political organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

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

---

Schedule C (Form 990 or 990-EZ) 2012
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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

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

<table>
<thead>
<tr>
<th>Limits on Lobbying Expenditures</th>
<th>(a) Filing organization's totals</th>
<th>(b) Affiliated group totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Total lobbying expenditures</td>
<td>36,161.</td>
<td></td>
</tr>
<tr>
<td>to influence public opinion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(grass roots lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Total lobbying expenditures</td>
<td>36,161.</td>
<td></td>
</tr>
<tr>
<td>to influence a legislative</td>
<td></td>
<td></td>
</tr>
<tr>
<td>body (direct lobbying)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Total exempt lobbying</td>
<td></td>
<td></td>
</tr>
<tr>
<td>purpose expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(add lines 1a and 1b)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d Other exempt purpose</td>
<td>2,844,115.</td>
<td></td>
</tr>
<tr>
<td>expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(add lines 1c and 1d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1e Total exempt purpose</td>
<td>2,880,276.</td>
<td></td>
</tr>
<tr>
<td>expenditures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(add lines 1c and 1d)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1f Lobbying nontaxable amount</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to the extent permitted</td>
<td>294,014.</td>
<td></td>
</tr>
<tr>
<td>by the limitations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>in column 2 of the form</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If the amount on line 1e, column (a) or (b) is:

<table>
<thead>
<tr>
<th>The lobbying nontaxable amount is:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not over $500,000</td>
</tr>
<tr>
<td>Over $500,000 but not over $1,000,000</td>
</tr>
<tr>
<td>Over $1,000,000 but not over $1,500,000</td>
</tr>
<tr>
<td>Over $1,500,000 but not over $17,000,000</td>
</tr>
<tr>
<td>Over $17,000,000</td>
</tr>
</tbody>
</table>

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 instructions for lines 2a through 2f on page 4.)

<table>
<thead>
<tr>
<th>Lobbying Expenditures During 4-Year Averaging Period</th>
</tr>
</thead>
<tbody>
<tr>
<td>Calendar year (or fiscal year beginning in)</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>(a) 2009</td>
</tr>
<tr>
<td>(b) 2010</td>
</tr>
<tr>
<td>(c) 2011</td>
</tr>
<tr>
<td>(d) 2012</td>
</tr>
<tr>
<td>(e) Total</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>2a Lobbying nontaxable amount</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>287,823.</td>
</tr>
<tr>
<td>282,933.</td>
</tr>
<tr>
<td>280,397.</td>
</tr>
<tr>
<td>294,014.</td>
</tr>
<tr>
<td>1,130,167.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>b Lobbying ceiling amount (150% of line 2a, column (e))</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>1,695,251.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>c Total lobbying expenditures</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>37,100.</td>
</tr>
<tr>
<td>36,390.</td>
</tr>
<tr>
<td>36,136.</td>
</tr>
<tr>
<td>36,161.</td>
</tr>
<tr>
<td>145,787.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>d Grassroots nontaxable amount</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>68,206.</td>
</tr>
<tr>
<td>70,733.</td>
</tr>
<tr>
<td>70,099.</td>
</tr>
<tr>
<td>73,504.</td>
</tr>
<tr>
<td>282,542.</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>e Grassroots ceiling amount (150% of line 2d, column (e))</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>423,813.</td>
</tr>
</tbody>
</table>

Schedule C (Form 990 or 990-EZ) 2012
### 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 each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>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</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Volunteers?</td>
<td></td>
</tr>
<tr>
<td>b</td>
<td>Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?</td>
<td></td>
</tr>
<tr>
<td>c</td>
<td>Media advertisements?</td>
<td></td>
</tr>
<tr>
<td>d</td>
<td>Mailings to members, legislators, or the public?</td>
<td></td>
</tr>
<tr>
<td>e</td>
<td>Publications, or published or broadcast statements?</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>Grants to other organizations for lobbying purposes?</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Direct contact with legislators, their staffs, government officials, or a legislative body?</td>
<td></td>
</tr>
<tr>
<td>h</td>
<td>Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</td>
<td></td>
</tr>
<tr>
<td>i</td>
<td>Other activities?</td>
<td></td>
</tr>
<tr>
<td>j</td>
<td>Total. Add lines 1c through 1i</td>
<td></td>
</tr>
</tbody>
</table>

2 a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? |

b | If "Yes," enter the amount of any tax incurred under section 4912 |

c | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 |

d | If the filing organization incurred a section 4912 tax did it file Form 4720 for this year? |

### Part III-A

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Were substantially all (90% or more) dues received nondeductible by members?</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Did the organization make only in-house lobbying expenditures of $2,000 or less?</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Did the organization agree to carry over lobbying and political expenditures from the prior year?</td>
<td></td>
</tr>
</tbody>
</table>

### Part III-B

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

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

### Part IV - Supplemental Information

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

---

JSA

2E1266 1000

Schedule C (Form 990 or 990-EZ) 2012

73519X M261

PAGE 23
**Supplemental Financial Statements**

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

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

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

1. Purpose(s) of conservation easements held by the organization (check all that apply).
   - [ ] Preservation of land for public use (e.g., recreation or education)
   - [ ] Preservation of an historically important land area
   - [ ] Preservation of a certified historic structure
   - [ ] Preservation of open space

2. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

<table>
<thead>
<tr>
<th></th>
<th>Held at the End of the Tax Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Total number of conservation easements</td>
</tr>
<tr>
<td>2b</td>
<td>Total acreage restricted by conservation easements</td>
</tr>
<tr>
<td>2c</td>
<td>Number of conservation easements on a certified historic structure included in (a)</td>
</tr>
<tr>
<td>2d</td>
<td>Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register</td>
</tr>
</tbody>
</table>

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

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

5. Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? | [ ] Yes [ ] No |

6. Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

7. Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

8. Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? | [ ] Yes [ ] No |

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

**Part III: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

2. If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts relating to these items:
   - Revenues included in Form 990, Part VIII, line 1
   - Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Part III  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
   a [ ] Public exhibition
   b [ ] Scholarly research
   c [ ] Preservation for future generations
   d [ ] Loan or exchange programs
   e [ ] Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold rather than to be maintained as part of the organization's collection? [ ] Yes [ ] No

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

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

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

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning balance</td>
<td>1c</td>
</tr>
<tr>
<td>Additions during the year</td>
<td>1d</td>
</tr>
<tr>
<td>Distributions during the year</td>
<td>1e</td>
</tr>
<tr>
<td>Ending balance</td>
<td>1f</td>
</tr>
</tbody>
</table>

2a Did the organization include an amount on Form 990, Part X, line 21? [ ] Yes [ ] No

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

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

1a Beginning of year balance ........................................ 142,923. 160,408. 187,678. 319,037. 296,621.

b Contributions ...................................................... 100,417. 100. 1,491. 14,921. 63,312.

c Net investment earnings, gains, and losses ......................... 199. 240.

d Grants or scholarships ..............................................

e Other expenditures for facilities and programs ................... 16,885. 17,825. 28,761. 146,280. 40,896.

f Administrative expenses ............................................

g End of year balance .................................................. 226,654. 142,923. 160,408. 187,678. 319,037.

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

   a Board designated or quasi-endowment ▶ %

   b Permanent endowment ▶ %

   c Temporarily restricted endowment ▶ 100.0000 %

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

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

   (i) unrelated organizations ........................................ 3a(i) X

   (ii) related organizations .... 3a(ii) X

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

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

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c Leasehold improvements</td>
<td>25,344</td>
<td>2,536.</td>
<td>22,808.</td>
<td></td>
</tr>
<tr>
<td>1d Equipment</td>
<td>1,236,743</td>
<td>1,109,010</td>
<td>127,733.</td>
<td></td>
</tr>
<tr>
<td>1e Other</td>
<td>22,552</td>
<td>17,298.</td>
<td>5,254.</td>
<td></td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)). ▶ 155,795.
### Part VII Investments - Other Securities. See Form 990, Part X, line 12.

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
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</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)

### Part VIII Investments - Program Related. See Form 990, Part X, line 13.

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)

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

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
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</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)

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

1. *(a) Description of liability* *(b) Book value* *(c) Method of valuation Cost or end-of-year market value* *(d) Book value* *(e) Method of valuation Cost or end-of-year market value* *

<table>
<thead>
<tr>
<th>(a) Description of liability</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
</tr>
<tr>
<td>(2) DUE TO NATIONAL ALS ASSOCIATIO</td>
<td>60,782.</td>
</tr>
<tr>
<td>(3)</td>
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<td>(11)</td>
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</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

X
**Part XI**  Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue, gains, and other support per audited financial statements</td>
<td>3,141,543</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part VIII, line 12.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Net unrealized gains on investments</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b Donated services and use of facilities</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c Recoveries of prior year grants</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>-3,141,543</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part VIII, line 12, but not on line 1.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)</td>
<td>3,141,543</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total expenses and losses per audited financial statements</td>
<td>2,880,276</td>
</tr>
<tr>
<td>2</td>
<td>Amounts included on line 1 but not on Form 990, Part IX, line 25</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Donated services and use of facilities</td>
<td>2a</td>
</tr>
<tr>
<td></td>
<td>b Prior year adjustments</td>
<td>2b</td>
</tr>
<tr>
<td></td>
<td>c Other losses</td>
<td>2c</td>
</tr>
<tr>
<td></td>
<td>d Other (Describe in Part XIII.)</td>
<td>2d</td>
</tr>
<tr>
<td></td>
<td>e Add lines 2a through 2d</td>
<td>2e</td>
</tr>
<tr>
<td>3</td>
<td>Subtract line 2e from line 1</td>
<td>-2,880,276</td>
</tr>
<tr>
<td>4</td>
<td>Amounts included on Form 990, Part IX, line 25, but not on line 1.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>a Investment expenses not included on Form 990, Part VIII, line 7b</td>
<td>4a</td>
</tr>
<tr>
<td></td>
<td>b Other (Describe in Part XIII.)</td>
<td>4b</td>
</tr>
<tr>
<td></td>
<td>c Add lines 4a and 4b</td>
<td>4c</td>
</tr>
<tr>
<td>5</td>
<td>Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)</td>
<td>2,880,276</td>
</tr>
</tbody>
</table>

**Part XIII**  Supplemental Information

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

SEE PAGE 5
ENDOWMENT FUNDS

PART V - LINE 4

THE TEMPORARILY RESTRICTED FUNDS WILL BE USED TO FIGHT TO CURE AND TREAT
ALS THROUGH GLOBAL, CUTTING EDGE RESEARCH, AND TO EMPOWER PEOPLE WITH LOU
GEHRIG'S DISEASE AND THEIR FAMILIES TO LIVE FULLER LIVES BY PROVIDING
THEM WITH COMPASSIONATE CARE AND SUPPORT.

OTHER LIABILITIES

PART X - LINE 2

AS OF JANUARY 31, 2013, NO AMOUNTS WERE RECOGNIZED FOR TAX BENEFITS
RESULTING FROM UNCERTAIN INCOME TAX POSITIONS. THE ASSOCIATION'S TAX
RETURNS FOR FISCAL YEAR 2010 AND FORWARD ARE SUBJECT TO THE USUAL REVIEW
BY THE APPROPRIATE TAXING AUTHORITIES.
### Supplemental Information Regarding Fundraising or Gaming Activities

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

#### Part I

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

Form 990-EZ filers are not required to complete this part.

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

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

2a. Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? [ ] Yes [ ] No

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

     | (i) Name and address of individual or entity (fundraiser) | (b) Activity | (iii) Did fundraiser have custody or control of contributions? | (iv) Gross receipts from activity | (v) Amount paid to (or retained by) fundraiser listed in col (i) | (vi) Amount paid to (or retained by) organization |
     |-----------------------------------------------------------|-------------|---------------------------------------------------------------|---------------------------------|---------------------------------------------------------------|-----------------------------------------------|
     | 1                                                        |             | Yes                                                           |                                 |                                                               |                                               |
     | 2                                                        |             |                                                               |                                 |                                                               |                                               |
     | 3                                                        |             |                                                               |                                 |                                                               |                                               |
     | 4                                                        |             |                                                               |                                 |                                                               |                                               |
     | 5                                                        |             |                                                               |                                 |                                                               |                                               |
     | 6                                                        |             |                                                               |                                 |                                                               |                                               |
     | 7                                                        |             |                                                               |                                 |                                                               |                                               |
     | 8                                                        |             |                                                               |                                 |                                                               |                                               |
     | 9                                                        |             |                                                               |                                 |                                                               |                                               |
     | 10                                                       |             |                                                               |                                 |                                                               |                                               |

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

---

**Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.**

**Schedule G (Form 990 or 990-EZ) 2012**

**JSA 2E1281 1 000**

**73519X M261**
### Part II  Fundraising Events
Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Event #1 WALKATHON (event type)</th>
<th>(b) Event #2 SPORTS DINNER (event type)</th>
<th>(c) Other events (total number)</th>
<th>(d) Total events (add col (a) through col (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross receipts</td>
<td>2,006,224</td>
<td>843,238</td>
<td>104,454</td>
<td>2,953,916.</td>
</tr>
<tr>
<td>2 Less. Contributions</td>
<td>2,006,224</td>
<td>754,443</td>
<td>104,454</td>
<td>2,865,121.</td>
</tr>
<tr>
<td>3 Gross income (line 1 minus line 2)</td>
<td></td>
<td></td>
<td>88,795.</td>
<td>88,795.</td>
</tr>
<tr>
<td>4 Cash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Food and beverages</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Entertainment</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other direct expenses</td>
<td>503,884</td>
<td>330,250</td>
<td>26,520.</td>
<td>860,654.</td>
</tr>
</tbody>
</table>

10 Direct expense summary. Add lines 4 through 9 in column (d)          |                                      |                                        |                               | 860,654.                                    |
11 Net income summary Combine line 3, column (d), and line 10            |                                      |                                        |                               | -771,859.                                    |

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

<table>
<thead>
<tr>
<th>Revenue</th>
<th>(a) Bingo</th>
<th>(b) Pull tabs/instant bingo/progressive bingo</th>
<th>(c) Other gaming</th>
<th>(d) Total gaming (add col (a) through col (c))</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Gross revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Cash prizes</td>
<td></td>
<td></td>
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<tr>
<td>3 Noncash prizes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Rent/facility costs</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Other direct expenses</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Volunteer labor</td>
<td>Yes %</td>
<td>Yes %</td>
<td>Yes %</td>
<td></td>
</tr>
<tr>
<td>7 Direct expense summary Add lines 2 through 5 in column (d)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Net gaming income summary Combine line 1, column d, and line 7</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

9 Enter the state(s) in which the organization operates gaming activities:

a) Is the organization licensed to operate gaming activities in each of these states? □ Yes □ No

b) If "No," explain ____________________________________________________________

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? □ Yes □ No

b) If "Yes," explain ____________________________________________________________
11 Does the organization operate gaming activities with nonmembers? □ Yes □ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? □ Yes □ No

13 Indicate the percentage of gaming activity operated in
   a. The organization’s facility .......................................................... 13a %
   b. An outside facility ................................................................. 13b %

14 Enter the name and address of the person who prepares the organization’s gaming/special events books and records:

   Name ▶

   Address ▶

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

   b. If “Yes,” enter the amount of gaming revenue received by the organization ▶ $  
   c. If “Yes,” enter the amount of gaming revenue retained by the third party ▶ $  

16 Gaming manager information:

   Name ▶

   Gaming manager compensation ▶ $  

   Description of services provided ▶

   □ Director/officer   □ Employee   □ Independent contractor

17 Mandatory distributions:

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

   b. Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization’s own exempt activities during the tax year ▶ $  

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).
Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

Attach to Form 990.

<table>
<thead>
<tr>
<th>Name of the organization</th>
<th>Employer Identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE ALS ASSOCIATION GREATER NY CHAPTER</td>
<td>13-3616680</td>
</tr>
</tbody>
</table>

Part I General Information on Grants and Assistance

1. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  
   - Yes [X]  
   - No [ ]

2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>1</th>
<th>(a) Name and address of organization or government</th>
<th>(b) EIN</th>
<th>(c) IRC section if applicable</th>
<th>(d) Amount of cash grant</th>
<th>(e) Amount of non-cash assistance</th>
<th>(f) Method of valuation (book, FMV, appraisal, other)</th>
<th>(g) Description of non-cash assistance</th>
<th>(h) Purpose of grant or assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
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<td></td>
</tr>
</tbody>
</table>

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

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
Part III  Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

<table>
<thead>
<tr>
<th>(a) Type of grant or assistance</th>
<th>(b) Number of recipients</th>
<th>(c) Amount of cash grant</th>
<th>(d) Amount of non-cash assistance</th>
<th>(e) Method of valuation (book, FMV, appraisal, other)</th>
<th>(f) Description of non-cash assistance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 IN-HOME CARE/RESpite GRANTS</td>
<td>14</td>
<td>11,842</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Part IV  Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

GRANTS

PART III

THE ASSOCIATION RECEIVES FUNDS FROM DONORS TO PROVIDE GRANTS TO INDIVIDUALS TO ASSIST WITH HOME HEALTH AID COSTS. THESE GRANTS ARE GIVEN AFTER INDIVIDUALS SUBMIT A WRITTEN APPLICATION, WHICH INCLUDES DOCUMENTATION OF PAYMENTS MADE TO HEALTHCARE PROVIDERS. THE DIRECTOR OF PATIENT SERVICES AND HER TEAM EVALUATE APPLICATIONS BASED ON FAMILIES' FINANCIAL NEEDS.
## Part I: Questions Regarding Compensation

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First-class or charter travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Travel for companions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tax indemnification and gross-up payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discretionary spending account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Housing allowance or residence for personal use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments for business use of personal residence</td>
<td></td>
<td></td>
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<tr>
<td>Health or social club dues or initiation fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Personal services (e.g., maid, chauffeur, chef)</td>
<td></td>
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</tr>
</tbody>
</table>

| 1b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.                                                                 | 2   |
| 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? | 2   |

| 3 Indicate which, if any, of the following filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III |     |
| Compensation committee                                                  | X   |
| Independent compensation consultant                                     |     |
| Form 990 of other organizations                                         | X   |
| Written employment contract                                             |     |
| Compensation survey or study                                            |     |
| Approval by the board or compensation committee                         |     |

| 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization |     |
| a Receive a severance payment or change-of-control payment?             | X   |
| b Participate in, or receive payment from, a supplemental nonqualified retirement plan? | X   |
| c Participate in, or receive payment from, an equity-based compensation arrangement? | 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) and 501(c)(4) organizations must complete lines 5-9.

| 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of |     |
| a The organization?                                                      | X   |
| b Any related organization?                                              | X   |

If "Yes" to line 5a or 5b, describe in Part III.

| 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of |     |
| a The organization?                                                      | X   |
| b Any related organization?                                              | X   |

If "Yes" to line 6a or 6b, describe in Part III.

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

| 8 Were any amounts reported in 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 | X   |

| 9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? | X   |
### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Use duplicate copies if additional space is needed

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation reported as deferred in prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td>DORINE GORDON</td>
<td>(i) 162,748</td>
<td>(iii) 0</td>
<td>4,882</td>
<td>12,722</td>
<td>180,352</td>
</tr>
<tr>
<td>1 PRESIDENT &amp; CEO</td>
<td>(i) 0</td>
<td>(ii) 0</td>
<td>0</td>
<td>0</td>
<td>0</td>
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<td>2</td>
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<td>16</td>
<td></td>
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</tbody>
</table>

Schedule J (Form 990) 2012
Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

<table>
<thead>
<tr>
<th>Part</th>
<th>Types of Property</th>
</tr>
</thead>
<tbody>
<tr>
<td>(a)</td>
<td>Check if applicable</td>
</tr>
<tr>
<td>(b)</td>
<td>Number of contributions or items contributed</td>
</tr>
<tr>
<td>(c)</td>
<td>Noncash contribution amounts reported on Form 990, Part VIII, line 1g</td>
</tr>
<tr>
<td>(d)</td>
<td>Method of determining noncash contribution amounts</td>
</tr>
</tbody>
</table>

1. Art - Works of art
2. Art - Historical treasures
3. Art - Fractional interests
4. Books and publications
5. Clothing and household goods
6. Cars and other vehicles
7. Boats and planes
8. Intellectual property
9. Securities - Publicly traded
10. Securities - Closely held stock
11. Securities - Partnership, LLC, or trust interests
12. Securities - Miscellaneous
13. Qualified conservation contribution - Historic structures
14. Qualified conservation contribution - Other
15. Real estate - Residential
16. Real estate - Commercial
17. Real estate - Other
18. Collectibles
19. Food inventory
20. Drugs and medical supplies
21. Taxidermy
22. Historical artifacts
23. Scientific specimens
24. Archeological artifacts
25. Other ▶ (ATCH 1) 24. 126,500.
26. Other ▶ (                      )  
27. Other ▶ (                      )  
28. Other ▶ (                      )  
29. Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29

30a. During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? Yes X
31. If "Yes," describe the arrangement in Part II

32a. Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? Yes X
32b. If "Yes," describe in Part II

33. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Schedule M (Form 990) (2012)

Page 38
Part II. Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

NONE
<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>(A) CHECK</th>
<th>(B) NUMBER OF CONTRIBUTIONS</th>
<th>(C) REVENUES REPORTED</th>
<th>(D) METHOD OF DETERMINING</th>
</tr>
</thead>
<tbody>
<tr>
<td>VARIOUS MEDICAL EQUIPMENT</td>
<td>X</td>
<td>24.</td>
<td>126,500</td>
<td>3RD PARTY APPRAISAL</td>
</tr>
<tr>
<td>TOTALS</td>
<td></td>
<td>24.</td>
<td>126,500</td>
<td></td>
</tr>
</tbody>
</table>
STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS

PART III - LINE 4D

ADVOCACY: THE ALS ASSOCIATION PLAYS A LEAD ROLE IN ADVOCACY FOR INCREASED PUBLIC AND PRIVATE SUPPORT OF ALS RESEARCH AND PUBLIC POLICY INITIATIVES THAT RespondS TO THE NEEDS OF PEOPLE WITH ALS. THE ORGANIZATION'S ADVOCACY EFFORTS IN NEW YORK, NEW JERSEY AND IN WASHINGTON, D.C., HAVE RAISED THE PROFILE OF ALS AND HELPED TO ENACT NEW POLICIES. THE GREATER NEW YORK CHAPTER'S EFFORTS WERE INSTRUMENTAL IN THE PASSAGE OF THE ALS NATIONAL REGISTRY ACT AND OUR CHAPTER CONTINUES TO PLAY A VITAL ROLE IN THE FUNDING AND IMPLEMENTATION OF THE REGISTRY. ADDITIONALLY, THE GREATER NEW YORK CHAPTER TOOK AN ACTIVE ROLE IN ENCOURAGING CONGRESS TO APPROVE $8 MILLION THIS PAST YEAR FOR ALS RESEARCH IN THE DEPARTMENT OF DEFENSE BUDGET.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 11B

THE FORM 990 WILL BE E-MAILED TO THE ENTIRE BOARD FOR REVIEW PRIOR TO FILING.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 12C

ON AN ANNUAL BASIS, ALL OFFICERS AND DIRECTORS, AS WELL AS KEY EMPLOYEES ARE REQUIRED TO REVIEW AND SIGN A CONFLICT OF INTEREST POLICY. THEY ARE
REMINDED AT THAT TIME THAT THEY MUST NOTIFY ALS ASSOCIATION MANAGEMENT AT ANY TIME THROUGHOUT THE YEAR IF THEY FEEL THERE IS EVEN A QUESTION OF A CONFLICT OF INTEREST.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION B. - QUESTION 15B
THE INDEPENDENT MEMBERS OF THE BOARD REVIEW AND APPROVE ALL COMPENSATION PACKAGES FOR OTHER OFFICERS AND KEY EMPLOYEES. BEFORE ANY PACKAGE IS OFFERED, SALARIES FOR SIMILARLY TITLES EMPLOYEES AT OTHER ORGANIZATIONS ARE RESEARCHED.

GOVERNANCE, MANAGEMENT, AND DISCLOSURE

PART VI, SECTION C. - QUESTION 19
THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. THE ORGANIZATION ALSO MAKES THE FINANCIAL STATEMENTS AND THE FORM 990 AVAILABLE VIA THE WEBSITE AT WWW.ALS-NY.ORG.

BAY SHORE, NY 11706
718-709-3348
Application for Extension of Time To File an Exempt Organization Return

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T, or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/eFile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension – check this box and complete Part I only.

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

Enter filer's identifying number, see instructions.

Type or print
File by the due date for filing return. See instructions.

Name of exempt organization or other filer, see instructions
THE ALS ASSOCIATION GREATER NY CHAPTER

Employer identification number (EIN) or
13-3616680

Social security number (SSN)
42 BROADWAY

City, town or post office, state, and ZIP code For a foreign address, see instructions
NEW YORK, NY 10004

Enter the Return code for the return that this application is for (file a separate application for each return).

Application

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

The books are in the care of
THE ASSOCIATION,

Telephone No
212 619-1400

Fax No

If the organization does not have an office or place of business in the United States, check this box.

If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 4119. If this is for the whole group, check this box. If it is for part of the group, check this box.

1 If I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 09/16/2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 20   or
- tax year beginning 02/01/2012  , and ending 01/31/2013

2 If the tax year entered in line 1 is for less than 12 months, check reason:

- Initial return
- Final return
- Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions

3b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453 EO and Form 8879-EO for payment instructions.