### Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u>	For ti	ne 2014 calen	dar year, or tax year beg	inning		, 2014,	and ending	3		,		
В	Check i	f applicable:	C Name of organization P1	esbytei	rian Lay (	Committee	, Inc.		D Employ	er identific	cation number	
	X Ad	ddress change	Doing business as						13-2	25489	97	
	Na	ame change	Number and street (or P.O. b	ox if mail is not	delivered to street a	ddress)	Room/su	uite	E Telepho	ne number		
	In	itial return	Box 682247						(82	3) 75	8-8716	
	Fir	nal return/terminated	City or town, state or province	e, country, and	ZIP or foreign postal	code			(	,		
	$\vdash$	mended return	Franklin			TN	37068		G Gross re	eceipts \$	3,100,22	5
	-	pplication pending	F Name and address of princip	al officer:		111		H(a) Is this a	a group return			
		prioditori poridirig	Matthew Johnson Box		Frankl	lin TN	37068	H(b) Are all	subordinates attach a list. (	included?		
ī	Tav.	exempt status	X 501(c)(3) 501(c) (	00ZZ <del>I</del> /	(insert no.)	4947(a)(1) or	527	If 'No,'	attach a list. (	see instruct	tions)	
<u>.</u>				,	(III3CIT IIO.)	4747(a)(1) 01		H(a) Croup	exemption nu	mbor ►		
K			w.layman.org X Corporation Trust	Association	n Other ►	Lv	ear of formation	• •			al densisile. III	
		of organization:		Association	n Other	LY	ear of formation	n: 196!	5   101 8	state of lega	al domicile: T	<u>N</u>
Pa	rt I	Summar Briefly describ	<b>y</b> be the organization's missi	on or most	cianificant activi	tion: Desi	! no b / al d as b s a	ا	1	~ ~~		
	'	briefly describ	de the organization's missi	on or most	signincant activi	mes. <u>Pri</u>	int/aistr	<u>ibute r</u>	erigion	s eauc	ation mat	eriais.
Activities & Governance												
nar												
ě	2	Check this bo	x ► if the organization	n discontin	ued its operation	ns or disposed	of more th					
ဗ	3		ting members of the gover		•	•				3		12
∞ თ	4		lependent voting members							4		12
<u>ë</u>	5	Total number	of individuals employed in	calendar y	ear 2014 (Part \	V, line 2a)				5		10
Ξ	6	Total number	of volunteers (estimate if	necessary)						6		0
Ac			d business revenue from	,	( //					7a		0.
	b	Net unrelated	business taxable income	from Form 9	990-T, line 34 .					7b		0.
								Р	rior Year		Current '	<b>r</b> ear
Φ	8		and grants (Part VIII, line	,					830,0	39.	446	5,596.
Revenue	9	ū	ice revenue (Part VIII, line	0,								
eve	10		come (Part VIII, column (A	,	. ,				162,9			5,028.
ш	11		e (Part VIII, column (A), lin			,			6,8			5,592.
	12		<ul> <li>add lines 8 through 11</li> </ul>						999,7	84.	83	7,216.
	13		milar amounts paid (Part I		,.							
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)											
ģ	15	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)							560,4	20.	572	1,978.
Expenses	16 a	a Professional fundraising fees (Part IX, column (A), line 11e)										
Epe-	b	Total fundrais	ing expenses (Part IX, col									
û	17		es (Part IX, column (A), lir				6,601.		719,6	29	750	0,270.
	18	•	es. Add lines 13-17 (must					1	,280,0			2,248.
	19		expenses. Subtract line 1						-280,2			5,032.
- S		Trevende 1655	expenses. Cabildot into 1	0 110111 11110	12			Poginni	ng of Currer		End of Y	
anc a	20	Total assets (	Part X, line 16)						2,427,2			3,292.
Net Assets Fund Baland	21	,	(Part X, line 26)						25,4			1,903.
± et	22		fund balances. Subtract li		lina 20				2,401,7			
	rt II			16 21 110111	iiiie 20				1, <del>4</del> 01,/	90.	1,040	5,389.
		Signatur						, ,				
comp	er penali olete. De	ties of perjury, I dec eclaration of prepare	lare that I have examined this retuer (other than officer) is based on a	n, including aci	companying schedul f which preparer has	es and statements, any knowledge.	and to the best	of my know	ledge and bel	iet, it is true	e, correct, and	
Sig	ın	Signatu	re of officer					Da	ate			
He	jii re	100	и Соки									
110			H. Gery print name and title.									
		- '	reparer's name	Preparer's	signature		Date		Check	if P	TIN	
		, ,						1 -	L	⊒"		0
Pa			m J. Bacheler		. D. G		09/24/	т 2	self-employe	:u [P	0127077	J
	epare e On	Is a			P.C.				Eirmin Eiki B	• 00	000000	
US	G OII	Firm's addre		HWY			4 0 =		Firm's EIN		<u> 2978066</u>	
			CHERRY HILL		0 / 1 :		4-2511		Phone no.	(856)		
May	/ the I	RS discuss this	s return with the preparer	snown abov	/e? (see instruct	tions)					X Yes	No

			Yes	NO
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2		2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i>	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
١	b Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII	11 b		Х
(	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
•	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
•	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		X
1	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a	Х	
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		Х
13		13		X
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If 'Yes,' complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> 'Yes,' <i>complete Schedule G, Part I</i> (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		Х
19	complete Schedule G, Part III.	19		Х
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
- 1	<b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

# Form 990 (2014) Presbyterian Lay Committee, Inc. Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?  If 'Yes', complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a	Х	
b	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		Х
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> 'Yes,' <i>complete Schedule R, Part V, line</i> 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> 'Yes,' <i>complete Schedule R</i> , <i>Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?  Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form **990** (2014) BAA

# Form 990 (2014) Presbyterian Lay Committee, Inc. Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V . . . . .

	Check if Schedule O contains a response or note to any line in this Part V					. П
					Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	9			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and (gambling) winnings to prize winners?	l repor	table gaming	1 c	Х	
<b>2</b> a	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	2 a	10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax re			2 b	Х	
	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructi					
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3 a		Х
b	If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O			3 b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or oth financial account in a foreign country (such as a bank account, securities account, or other financial	ner autl al acco	nority over, a punt)?	4 a		Х
b	If 'Yes,' enter the name of the foreign country: ►					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financi	al Acc	ounts. (FBAR)			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year			5 a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tran			5 b		Х
C	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and disolicit any contributions that were not tax deductible as charitable contributions?	d the c	rganization	6a		Х
b	If 'Yes,' did the organization include with every solicitation an express statement that such contribution tax deductible?		or gifts were	6 b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly f services provided to the payor?	or goo	ds and	7 a		X
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it Form 8282?	t was r	equired to file	7 c		Х
C	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benef	it conti	ract?	7 e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit co	ntract	?	7 f		X
	If the organization received a contribution of qualified intellectual property, did the organization file as required?			7 g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organ Form 1098-C?	nization	n file a	7 h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining	ained b	by the sponsoring			
	organization have excess business holdings at any time during the year?			8		Х
9	Sponsoring organizations maintaining donor advised funds.					
	Did the sponsoring organization make any taxable distributions under section 4966? $\dots$			9 a		Х
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9 b		X
	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10 a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				
	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders	11 a				
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F		)41?	12 a		
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b				
	Section 501(c)(29) qualified nonprofit health insurance issuers.			40.		
а	Is the organization licensed to issue qualified health plans in more than one state?			13 a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.					
	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	13 b				
	Enter the amount of reserves on hand	13 c		44-		X
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Λ
ΔΔ	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedu	ııe ∪ .		14 b	000 /	2014)

Form 990 (2014) Presbyterian Lay Committee, Inc. 13-2548997 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. 

Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year			
	of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
r	Enter the number of voting members included in line 1a, above, who are independent 1b			i
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			i
2	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents			
	since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7 a	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?	7 a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	1		l
	stockholders, or persons other than the governing body?	7 b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8 a	Х	
b	Each committee with authority to act on behalf of the governing body?	8 b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	1
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10 a		X
k	of Yes, did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	40.		
	operations are consistent with the organization's exempt purposes?	10 b		<del>                                     </del>
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	40-	37	
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X	<del></del>
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	<u></u>
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done	12 c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official	15 a		v
	Other officers or key employees of the organization · · · · · · · · · · · · · · · · · · ·	15 a		X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).	130		
46.	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
102	taxable entity during the year?	16 a		Х
	of Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16 b		
Sec	tion C. Disclosure		-	
17	List the states with which a copy of this Form 990 is required to be filed See Form 990, Page 6, Line 17 (continued)			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a for public inspection. Indicate how you made these available. Check all that apply.	ıvailab	le	
	Own website X 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 the public during the tax year.	e to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	Carmen Fowler LaBerge Roy 682247 Franklin TN 37068 (80	101 -	368-	1110

## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any relate	ed organi	zatio	n cor	mpe	ensa	ted an	ny c	current officer, dire	ctor, or trustee.	
				(C)						
(A) Name and Title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					1	Reportable compensation from the organization	(E)  Reportable compensation from related organizations	(F) Estimated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
_(1) Connie Elliott	0.00									
Director		Х						0.	0.	0.
(2) Robert B. Fish	0.00	х							_	_
Director	0 00	Λ						0.	0.	0.
(3)_Susan_Mattingly Director	0.00	Х						0.	0.	0.
(4) Forrest Norman	0.00	21						0.	0.	0.
Chairman	_0.00	Х		Х				0.	0.	0.
(5) Lee H. Gery	0.00							0.	0.	
Treasurer		Х		Х				0.	0.	0.
(6) Matthew A. Johnson	0.00									
Chairman Elect		Х		Х				0.	0.	0.
(7) Raymond A.M. Jones	0.00									
Director		Х						0.	0.	0.
_(8)_Leslee E. Washer	0.00									
Secretary		Х		Χ				0.	0.	0.
_(9)_Lloyd_Lunceford	0.00	Х		3.7					_	_
Vice Chairman	0 00	X		Χ				0.	0.	0.
(10) Edward Kappus	0.00	Х						0	0	0
Director (11) Carmen Fowler	40.00	21						0.	0.	0.
President	- 40.00			Х		Х		100,584.	0.	0.
(12) David an Mairon	0.00							100,301.	0.	<u></u>
Vice Chair Elect		Х		Х				0.	0.	0.
(13) Cindy Pirtle	0.00									
Director		Х						0.	0.	0.
(14)										

Part VII   Section A. Officers, Directors, Trus		Key	En			es,	an	d Highest Con	pensated Emp	loyees	(conti	inued)
	(B)			•	C)							
(A) Name and title	Average hours per	box	, unle	ss pe	rson i	than o is both or/trust	an	(D) Reportable compensation from	(E)  Reportable compensation from	Es amou	(F) timated nt of oth	ier
	week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	com fr orga and	pensation om the anization d related anization	n I
<u>(15)</u>												
(16)												
<u>(17)</u>												
<u>(18)</u>												
<u>(19)</u>												
<u>(20)</u>												
<u>(21)</u>												
<u>(22)</u>	<del> </del>											
(23)												
(24)												
(25)												
1 b Sub-total							<b>&gt;</b>	100,584.	0.			0.
c Total from continuation sheets to Part VII, Section							<b>&gt;</b>	100 504				
d Total (add lines 1b and 1c)							eive	100,584. d more than \$100.0	0. 000 of reportable cor	l mpensat	ion	0.
from the organization 1												
3 Did the organization list any <b>former</b> officer, director,										-	Yes	No
on line 1a? If 'Yes,' complete Schedule J for such inc  4 For any individual listed on line 1a, is the sum of repo	ortable co	ompe	nsat	tion	and	othei	r coi	mpensation from		. 3		X
the organization and related organizations greater th such individual			٠.	٠.		• • •				. 4		Х
5 Did any person listed on line 1a receive or accrue co for services rendered to the organization? <i>If 'Yes,' co</i>	mpensat Implete S	ion fr Schea	om a lule	any <i>J foi</i>	unre r <i>suc</i>	lated h pe	l org	ganization or individ	dual 	. 5		Х
1 Complete this table for your five highest compensate compensation from the organization. Report compensation										ar.		
(A) (B)								Compe	C) nsatio	n		
2 Total number of independent contractors (including b	out not lin	nited	to th	nose	liste	ed ab	ove	l ) who received mo	re than			
\$100,000 of compensation from the organization	>											

Гаі	LVI	Check if Schedule O contains a response or note to a	any line in this Part VIII			
		Chicaria Company	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b d e f	Federated campaigns 1 a  Membership dues 1 b  Fundraising events 1 c  Related organizations 1 d  Government grants (contributions) . 1 e  All other contributions, gifts, grants, and similar amounts not included above . 1 f 446,559  Noncash contributions included in lines 1a-1f: \$ 8,54				
a S	h	Total. Add lines 1a-1f				
nue		Business Cod				
Program Service Revenue		All other program service revenue  Total. Add lines 2a-2f				
	3	Investment income (including dividends, interest and				
	4 5	other similar amounts)		0.	0.	48,690.
	b	Gross rents  Less: rental expenses Rental income or (loss)				
	7 a	Gross amount from sales of assets other than inventory Less: cost or other basis and sales expenses				
		Gain or (loss) 336,338.				
Other Revenue	8 a	Net gain or (loss)	336,338.	0.	0.	336,338.
ਰੋ	С	Net income or (loss) from fundraising events	►			
		Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses b				
	С	Net income or (loss) from gaming activities	►			
		Gross sales of inventory, less returns and allowances				
	С	Net income or (loss) from sales of inventory		3,742.	0.	0.
	4.4	Miscellaneous Revenue Business Cod				
	11 a b	Legal fee refunded 900099	1,850.	1,850.	0.	0.
	d	All other revenue				
		<b>Total.</b> Add lines 11a-11d	1,850.			
	12	Total revenue. See instructions		5,592.	0.	385,028.

### Part IX Statement of Functional Expenses

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

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

Do i 6b, 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22 · · · · · ·				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	100,583.	42,245.	41,239.	17,099.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)		,		,
7	Other salaries and wages	337,997.	141,959.	138,579.	57,459.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	27,794.	11,673.	11,396.	4,725.
9	Other employee benefits	73,985.	31,074.	30,334.	12,577.
10	Payroll taxes	31,619.	13,280.	12,964.	5,375.
11	Fees for services (non-employees):	31/01/	13/2001	12/501.	37373.
	Management				
	Legal				
	Accounting	6,000.	0.	6,000.	0.
d	Lobbying	0,0001	<u> </u>	0,000.	<u> </u>
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	10,882.	0.	10,882.	0.
g	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)			==,===	
12	Advertising and promotion	1,061.	0.	0.	1,061.
13	Office expenses	8,538.	0.	8,538.	0.
14	Information technology	43,340.	43,340.	0.	0.
15	Royalties				
16	Occupancy	5,062.	0.	5,062.	0.
17	Travel	38,457.	27,057.	8,057.	3,343.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	65,228.	65,228.	0.	0.
20	Interest	,	, ,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	11,580.	0.	11,580.	0.
23	Insurance	15,477.	0.	15,477.	0.
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	Dues and subscriptions	4,265.	1,049.	3,216.	0.
	Publications of Christian material	96,848.	96,848.	0.	0.
	<u>Utilities</u>	7,937.	0.	7,937.	0.
	Outside services	102,271.	24,000.	71,871.	6,400.
	All other expenses	333,324.	163,888.	80,874.	88,562.
25	Total functional expenses. Add lines 1 through 24e	1,322,248.	661,641.	464,006.	196,601.
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				

		Check if Schedule O contains a response or note to any line in this Part X $\dots$	<u></u>	<u>.</u>	<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing	87,438.	1	104,236.
	2	Savings and temporary cash investments	353,873.	2	193,618.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	3,218.	4	
	5	Loans and other receivables from current and former officers, directors,			
	Ū	trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			
				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
S	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	14,579.	8	
As	9	Prepaid expenses and deferred charges	7,535.	9	5,671.
	100	Land, buildings, and equipment: cost or other basis.	,		- , .
	ıva	Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	200,377.	10 c	168,410.
	11	Investments — publicly traded securities	1,757,165.	11	1,196,357.
	12	Investments — other securities. See Part IV, line 11	, - ,	12	, ,
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	3,046.	15	
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	2,427,231.	16	1,668,292.
	17	Accounts payable and accrued expenses	25,433.	17	21,903.
	18	Grants payable	•	18	•
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
es	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.  Complete Part II of Schedule L		22	
	22	Secured mortgages and notes payable to unrelated third parties		23	
	23 24	Unsecured notes and loans payable to unrelated third parties		23	
	24 25	Other liabilities (including federal income tax, payables to related third parties,		24	
		and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	01 000
	26	Total liabilities. Add lines 17 through 25	25,433.	26	21,903.
ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets	1,989,873.	27	1,368,180.
Bal	28	Temporarily restricted net assets	0.	28	
힏	29	Permanently restricted net assets	411,925.	29	278,209.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
9	30	Capital stock or trust principal, or current funds		30	
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
let	33	Total net assets or fund balances	2,401,798.	33	1,646,389.
_	34	Total liabilities and net assets/fund balances	2,427,231.	34	1,668,292.

BAA Form **990** (2014)

Part XI Reconciliation of Net Assets							
Check if Schedule O contains a response or note to any line in this Part XI							
1 Total revenue (must equal Part VIII, column (A), line 12)	1		83	37,2	16.		
2 Total expenses (must equal Part IX, column (A), line 25)	2		1,32	22,2	48.		
3 Revenue less expenses. Subtract line 2 from line 1	3		-48	35,0	32.		
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,40	)1,7	98.		
5 Net unrealized gains (losses) on investments	5		-27	78,7	80.		
6 Donated services and use of facilities	6			8,5	46.		
7 Investment expenses							
8 Prior period adjustments							
9 Other changes in net assets or fund balances (explain in Schedule O)							
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
column (B))	10		1,64	16,3	<u>89.</u>		
Part XII Financial Statements and Reporting							
Check if Schedule O contains a response or note to any line in this Part XII					. [		
				Yes	No		
1 Accounting method used to prepare the Form 990: Cash X Accrual Other							
If the organization changed its method of accounting from a prior year or checked 'Other,' explain							
in Schedule O.							
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?		]	2 a		X		
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on	a						
separate basis, consolidated basis, or both:							
Separate basis Consolidated basis Both consolidated and separate basis							
<b>b</b> Were the organization's financial statements audited by an independent accountant?			2 b	Χ			
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate							
basis, consolidated basis, or both:  Separate basis  Consolidated basis  Both consolidated and separate basis							
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the au review, or compilation of its financial statements and selection of an independent accountant?	dit, 		2 c	Х			
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.							
3 a 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?	· · · ·		3 a		Х		
<b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit							
or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3 b				

BAA Form 990 (2014)

### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

### **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.

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Presbyterian Lay Committee, Inc. 13-2548997 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.) 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 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(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)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-9 above or IRC section (iv) Is the rganization listed (v) Amount of monetary (vi) Amount of other organization in your governing (see instructions)) document? Yes No (A) (B) (C) (D) (E) Total

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.)

Sec	tion A. Public Support						
Cale: begii	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	930,250.	582,181.	1,839,537.	830,055.	446,596.	4,628,619.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	930,250.	582,181.	1,839,537.	830,055.	446,596.	4,628,619.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from line 4						4,628,619.
Sec	tion B. Total Support						
Cale: begii	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	<b>(d)</b> 2013	<b>(e)</b> 2014	(f) Total
7	Amounts from line 4	930,250.	582,181.	1,839,537.	830,055.	446,596.	4,628,619.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	66,076.	65,212.	47,687.	48,043.	48,690.	275,708.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10 · · · · · · · · · · ·						4,904,327.
12	Gross receipts from related activiti	es, etc (see instruc	tions)			12	
13	First five years. If the Form 990 is organization, check this box and s						
Sec	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 201-		•				94.38 %
15	Public support percentage from 20	13 Schedule A, Pa	art II, line 14			15	94.48 %
16 a	33-1/3% support test $-$ 2014. If and stop here. The organization of	the organization diq qualifies as a public	d not check the bo	x on line 13, and the nization	ne line 14 is 33-1/3	% or more, check	this box
b	33-1/3% support test — 2013. If to and stop here. The organization of						
17 a	10%-facts-and-circumstances te or more, and if the organization method the organization meets the 'facts-a	eets the 'facts-and-	circumstances' tes	st, check this box a	and <b>stop here.</b> Exp	lain in Part VI how	
	10%-facts-and-circumstances te or more, and if the organization me organization meets the 'facts-and-	eets the 'facts-and- circumstances' test	circumstances' tes t. The organization	st, check this box a n qualifies as a pub	and <b>stop here.</b> Exp licly supported org	lain in Part VI how anization	the ▶
18	Private foundation. If the organiz	ation did not check	a box on line 13,	16a, 16b, 17a, or 1	17b, check this box	and see instructio	ns ▶

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support							
	dar year (or fiscal yr beginning in)	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 201	4	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include any 'unusual grants.')							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
5	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
	Total. Add lines 1 through 5							
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c	Add lines 7a and 7b							_
8	<b>Public support</b> (Subtract line 7c from line 6.)							
Sec	tion B. Total Support			1				
Calen	dar year (or fiscal yr beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	<b>(e)</b> 201	4	(f) Total
10 a	Amounts from line 6							
	acquired after June 30, 1975							
11	Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
13	Total support. (Add lines 9, 10c, 11 and 12.)							
14	First five years. If the Form 990 is organization, check this box and s							▶ □
Sec	tion C. Computation of Pul	blic Support F	ercentage					
15	Public support percentage for 2014	4 (line 8, column (f	) divided by line 13	B, column (f))			15	%
16	Public support percentage from 20	13 Schedule A, Pa	art III, line 15				16	%
	tion D. Computation of Inv							
17					))		17	%
18	Investment income percentage fro	m 2013 Schedule	A, Part III, line 17				18	%
	33-1/3% support tests — 2014. If is not more than 33-1/3%, check the 33-1/3% support tests — 2013. If	nis box and <b>stop h</b>	ere. The organiza	tion qualifies as a p	oublicly supported	organization		<b>——</b>
	33-1/3% support tests — 2013. If line 18 is not more than 33-1/3%, or	check this box and	stop here. The o	rganization qualifie	s as a publicly sup	ported orgar	nization .	▶ 🔲
20	Private foundation. If the organiz	ation did not check	a box on line 14,	19a, or 19b, check	this box and see i	nstructions.		▶ 🗍

Part IV Supporting Organizations
(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All	Supporting	Organizations
----------------	------------	---------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If 'No,' describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe			
	the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> how the organization determined that the supported organization was			
•	described in section 509(a)(1) or (2)	2		
3 a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below	3a		
k	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in <b>Part VI</b> when and how the organization	01		
	made the determination	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4 a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
ŀ	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
•	organization? If 'Yes,' describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under			
	sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5 a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI,</b> including (i) the names and EIN numbers of the supported			
	organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
		Ja		
r	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of			
	the filing organization's supported organizations? If 'Yes,' provide detail in <b>Part VI</b>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with	_		
_	regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990)	8		
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))?  If 'Yes,' provide detail in <b>Part VI</b>	9a		
ŀ	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the	Ja		
	supporting organization had an interest? If 'Yes,' provide detail in <b>Part VI</b>	9b		
C	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in <b>Part VI</b>	9с		
10 a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer (b) below	10-		
,		10a		
r	Did the organization, have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Pa	rt IV	Supporting Organizations (continued)			
44	∐oo ti	he organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		ring body of a supported organization?	11a		
ı	<b>b</b> A fam	nily member of a person described in (a) above?	11b		
•	<b>c</b> A 35%	% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI	11c		
Sec	tion E	B. Type I Supporting Organizations			
	D: 14			Yes	No
1	or ele <b>Part</b> If the direct	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in \( \forall \) how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year	1		
2	Did th	ne organization operate for the benefit of any supported organization other than the supported organization(s)			
	that o	perated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the orting organization.	2		
Sec	tion (	C. Type II Supporting Organizations			
				Yes	No
1	of eac	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Sec	tion [	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	on organization provide to each of its supported organizations, by the last day of the fifth month of the			
•	organ	ne organization provide to each of its supported organizations, by the last day of the fifth month of the nization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, organ	(2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
_	147				
2	organ	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported ization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in <b>Part VI</b> how			
	the o	rganization maintained a close and continuous working relationship with the supported organization(s)	2		
3	voice	ason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at nes during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played			
		s regard	3		
Sec	tion E	E. Type III Functionally-Integrated Supporting Organizations			
1	Chec	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):			
		The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	ь⊟т	The organization is the parent of each of its supported organizations. Complete line 3 below.			
	=	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruction)	ons).		
2	Λ ctivi:	ties Test. Answer (a) and (b) below.	ĺ	Vaa	Na
				Yes	No
•	suppo orgai respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part VI identify those supported nizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was onsive to those supported organizations, and how the organization determined that these activities constituted			
	subst	antially all of its activities	2a		
I	the or	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in <b>Part VI</b> the reasons for rganization's position that its supported organization(s) would have engaged in these activities but for the			
		partization's position that its supported organization(s) would have engaged in these activities but for the	2b		
3	Parer	nt of Supported Organizations. Answer (a) and (b) below.			
i	a Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			
	each	of the supported organizations? Provide details in Part VI	3a		
ı		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its	3h		

Pa	rt V   Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nıza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on N other Type III non-functionally integrated supporting organizations must complete Sect	lovem tions A	ber 20, 1970. <b>See instru</b> A through E.	uctions. All
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
8	A Average monthly value of securities	1 a		
k	Average monthly cash balances	1 b		
	Fair market value of other non-exempt-use assets	1 c		
	Total (add lines 1a, 1b, and 1c)	1 d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally-integrated (see instructions).	d Туре	e III supporting organizat	ion

Schedule **A** (Form 990 or 990-EZ) 2014

Par	t V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
Sec	tion D – Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purpos	es		
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of suppo			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions			
7	<b>Total annual distributions.</b> Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the organization <b>Part VI</b> ). See instructions			
9	Distributable amount for 2014 from Section C, line 6 $ \ldots  \ldots  \ldots $			
10	Line 8 amount divided by Line 9 amount			
Sec	Section E – Distribution Allocations (see instructions)  (i) Excess Distributions Pre-2014			
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014 (reasonable cause required — see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а				
b				
С				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2014 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4			
5	Remaining underdistributions for years prior to 2014, if any.  Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7	Excess distributions carryover to 2015. Add lines 3j and 4c			
8	Breakdown of line 7:			
а				
b				
С				
d	Excess from 2013			
e	Excess from 2014			

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Schedule **A** (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. 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).

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF
► Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2014

Employer identification number

Presbyterian Lay Committee, I	nc.	13-2548997
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a priv	vate foundation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private	foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gen	eral Rule or a Special Rule	
Note. Only a section 501(c)(7), (8), or (10) organi	zation can check boxes for both the General Rule and a Special	Rule. See instructions.
General Rule		
For an organization filing Form 990, 990-EZ, property) from any one contributor. Complete	or 990-PF that received, during the year, contributions totaling \$5 Parts I and II. See instructions for determining a contributor's tot	5,000 or more (in money or all contributions.
Special Rules		
under sections 509(a)(1) and 170(b)(1)(A)(vi)	c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support tes, that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 year, total contributions of the greater of (1) \$5,000 or (2) 2% of EZ, line 1. Complete Parts I and II.	, 16a, or 16b, and that
during the year, total contributions of more that	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ar an \$1,000 <i>exclusively</i> for religious, charitable, scientific, literary, hildren or animals. Complete Parts I, II, and III.	ny one contributor, or educational
during the year, contributions exclusively for s \$1,000. If this box is checked, enter here the charitable, etc., purpose. Do not complete an	c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an religious, charitable, etc., purposes, but no such contributions tot total contributions that were received during the year for an exclusion of the parts unless the <b>General Rule</b> applies to this organization, etc., contributions totaling \$5,000 or more during the year	aled more than usively religious,
990-PF), but it must answer 'No' on Part IV, line :	he General Rule and/or the Special Rules does not file Schedule 2, of its Form 990; or check the box on line H of its Form 990-EZ ing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	

# SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

m990. Open to Public Inspection
Employer identification number

	Presbyterian Lay Committee, I	inc.		1	3-2548997	
Par			er Similar Funds o			
Pai	Complete if the organization answere	d 'Yes' to Form 990, P	art IV, line 6.	oi Aooo	anto.	
		(a) Donor advised f	unds	<b>(b)</b> Fur	nds and other accor	ınts
1	Total number at end of year	(4) 201101 44110041		(4)		
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor adv	isors in writing that the asse	ts held in donor advised	l funde		
3	are the organization's property, subject to the organization				Yes	No
6	Did the organization inform all grantees, donors, and	donor advisors in writing the	at grant funds can be us	sed only		
	for charitable purposes and not for the benefit of the impermissible private benefit?	donor or donor advisor, or fo	or any other purpose cor	nferring	Yes	No
Par	t II Conservation Easements.				<u>                                     </u>	
<u>. u.</u>	Complete if the organization answere	d 'Yes' to Form 990, P	art IV, line 7.			
1	Purpose(s) of conservation easements held by the o	rganization (check all that ap	oply).			
	Preservation of land for public use (e.g., recreati	on or education)	Preservation of a his	torically in	mportant land area	
	Protection of natural habitat		Preservation of a cer	rtified hist	oric structure	
	Preservation of open space	'				
2	Complete lines 2a through 2d if the organization held	d a qualified conservation co	ntribution in the form of	a conserv	ation easement on	the
	last day of the tax year.				ld at the Food at th	- <b>T</b> V
	Total accept as of accept within a constant				ld at the End of th	e rax year
	a Total number of conservation easements			2 a 2 b		
	<ul> <li>Number of conservation easements on a certified his</li> </ul>			2 C		
			· —	26		
(	d Number of conservation easements included in (c) a structure listed in the National Register			2 d		
3	Number of conservation easements modified, transfetax year ►	erred, released, extinguished	d, or terminated by the o	organizatio	on during the	
4	Number of states where property subject to conserva	ation easement is located >				
5	Does the organization have a written policy regarding and enforcement of the conservation easements it has				Yes	No
6	Staff and volunteer hours devoted to monitoring, insp					
7	Amount of expenses incurred in monitoring, inspectin	ng, and enforcing conservati	on easements during th	e year		
8	Does each conservation easement reported on line 2			)(4)(B)(i)	□vaa	Пы
9	and section 170(h)(4)(B)(ii)?	enservation easements in its	revenue and expense s			
	include, if applicable, the text of the footnote to the o conservation easements.				•	r
Par	Organizations Maintaining Collection Complete if the organization answere	ons of Art, Historical d 'Yes' to Form 990, P	Treasures, or Oth art IV, line 8.	er Simi	lar Assets.	
1 a	a If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held f in Part XIII, the text of the footnote to its financial sta	or public exhibition, education	on, or research in further	ent and ba rance of p	alance sheet works oublic service, provi	of de,
ı	b If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p following amounts relating to these items:	116 (ASC 958), to report in ublic exhibition, education, of	its revenue statement a or research in furtheranc	and baland be of publi	ce sheet works of a c service, provide t	rt, he
	(i) Revenue included in Form 990, Part VIII, line 1.					
	(ii) Assets included in Form 990, Part X				. ▶ \$	
2	If the organization received or held works of art, histo amounts required to be reported under SFAS 116 (A	orical treasures, or other sim SC 958) relating to these ite	ilar assets for financial ç ems:	gain, prov	ide the following	
á	Revenue included in Form 990, Part VIII, line 1				. ▶\$	
	Assets included in Form 990 Part X				<b>▶</b> ୯	

Part III Organizations Maintain	ning Collections	of Art, Histor	rical Treasures, o	r Other Similar Ass	sets (contin	nued)
3 Using the organization's acquisition, items (check all that apply):	, accession, and othe	r records, check ar	ny of the following that	are a significant use of it	s collection	
a Public exhibition		d Loan or	exchange programs			
<b>b</b> Scholarly research		e Other				
c Preservation for future generation	ons					
4 Provide a description of the organize Part XIII.	ation's collections and	d explain how they	further the organizatio	n's exempt purpose in		
5 During the year, did the organization to be sold to raise funds rather than	to be maintained as I	part of the organiza	ation's collection?		Yes	No
Part IV   Escrow and Custodial line 9, or reported an an	Arrangements. nount on Form 99	Complete if the 00, Part X, line	e organization ans 21.	wered 'Yes' to Form	990, Part I	V,
1 a Is the organization an agent, trustee					П.,	П.,
on Form 990, Part X? <b>b</b> If 'Yes,' explain the arrangement in I					Yes	No
					Amount	
<b>c</b> Beginning balance				. 1c		
<b>d</b> Additions during the year				. 1 d		
e Distributions during the year				. 1 e		
f Ending balance				. 1f		
2 a Did the organization include an amo	ount on Form 990, Pa	rt X, line 21, for es	crow or custodial acco	unt liability?	Yes	No
<b>b</b> If 'Yes,' explain the arrangement in I	Part XIII. Check here	if the explanation h	nas been provided in P	art XIII	<del></del>	
		·	·			
Part V Endowment Funds. Co	omplete if the org	anization answ	ered 'Yes' to Form	990, Part IV, line 1	0.	
·	(a) Current year	(b) Prior year	(c) Two years back		(e) Four yea	ars back
<b>1 a</b> Beginning of year balance	411,925.	364,55		•	.,,,,	5,929.
<b>b</b> Contributions	111/2201	301733	2. 333733	3137071	1 323	7,,,,,
<u> </u>					1	
c Net investment earnings, gains, and losses		47,37	3. 28,96	110,083	. 28	3,745.
d Grants or scholarships					<del>                                     </del>	
e Other expenditures for facilities and programs						
f Administrative expenses	444 005	444 00	- 064	205 501		
g End of year balance	411,925.	411,92		2. 335,591.	.1 345	674.
2 Provide the estimated percentage o	•	I balance (line 1g,	column (a)) held as:			
a Board designated or quasi-endowm		%				
<b>b</b> Permanent endowment	<u></u> %					
<b>c</b> Temporarily restricted endowment		% 				
The percentages in lines 2a, 2b, and	•		on bodd on displaying	and formula a		
3 a Are there endowment funds not in the organization by:	ne possession of the o	organization that a	re neid and administer	ed for the	Yes	No
(i) unrelated organizations					. 3a(i)	Х
(ii) related organizations					. 3a(ii)	X
<b>b</b> If 'Yes' to 3a(ii), are the related orga					. 3b	
( ) .		•			. 30	
4 Describe in Part XIII the intended us		is endowment fun	ius.			
Part VI Land, Buildings, and E Complete if the organization	• •	es' to Form 99	0, Part IV, line 11a	a. See Form 990, Pa	art X, line 10	Э.
Description of property		or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book v	value
<b>1 a</b> Land			21,790.		2.1	1,790.
<b>b</b> Buildings			289,525.	142,905.		6,620.
c Leasehold improvements						
d Equipment			34,360.	34,360.		0.
<b>e</b> Other			51,500.	31,300.		
Total. Add lines 1a through 1e. (Column (	•	990. Part X. columi	n (B), line 10c.)		169	8,410.
	.,	, ,	, ,,		100	2, 110.

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Part VII Investments — Other Securities.	Wasi ta Farm 000	Dort IV line 14h Coe Form 000 F	lant V. lina 40
Complete if the organization answered  (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	
(1) Financial derivatives	` '	(C) Welflod of Valuation. Cost of end-o	i-yeai market value
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
$\frac{(H)}{(I)}$			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.) >			
Part VIII Investments — Program Related.			
Complete if the organization answered			
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1)			
(2)			
(3)			
<u>(4)</u> (5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.) ▶			
Part IX Other Assets. Complete if the organization answered	Yes' to Form 990	Part IV line 11d See Form 990 F	Part X line 15
	escription		(b) Book value
(1)			
(2)			
<u>(3)</u> (4)			
(5)			
(6)			
(7)			
(8)			
(9) (10)			
Total. (Column (b) must equal Form 990, Part X, column (B),	lino 15 )		
Part X Other Liabilities.	iiiie 15.)		
Complete if the organization answered 'Yes' to F	orm 990, Part IV, line 1	1e or 11f. See Form 990, Part X, line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
<u>(2)</u> (3)			
(4)			
(5)			
(6)			
(7)			
(8)			
<u>(9)</u>			
(10)			
(11) Tetal (Column (h) must equal Form 000, Part V, column (P) line 25)			
<b>Total.</b> (Column (b) must equal Form 990, Part X, column (B) line 25.) <b>2.</b> Liability for uncertain tax positions. In Part XIII, provide the text of the foo		ancial statements that reports the organization's lial	pility for uncertain
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote			

Part XI Reconciliation of Revenue per Audited Financial Statements With Re	evenue per Return	Ī
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12	₽a.	
1 Total revenue, gains, and other support per audited financial statements	1	558,193.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	-278,780.	
b Donated services and use of facilities	8,546.	
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		-270,234.
3 Subtract line 2e from line 1	3	828,427.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a	10,882.	
b Other (Describe in Part XIII.)	-2,093.	
c Add lines 4a and 4b		8,789.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	837,216.
Part XII Reconciliation of Expenses per Audited Financial Statements With E	Typopoo por Dotu	w 100
·		rn.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12		rn.
·	?a.	1,313,602.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12	?a.	T
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements	?a.	T
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements	?a.	T
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  2 b  c Other losses.	?a.	T
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.).  2 d	2a. 	T
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  2 b  c Other losses.	2a. 	1,313,602.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.).  2 d	4,086.	1,313,602.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements	4,086.	1,313,602. 4,086.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements	4,086.	1,313,602. 4,086.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  2 a  b Prior year adjustments.  2 b  c Other losses.  2 c  d Other (Describe in Part XIII.)  2 a  e Add lines 2a through 2d  3 Subtract line 2e from line 1  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b  4 a  b Other (Describe in Part XIII.)  4 b  12  13  14  15  16  17  17  18  18  18  18  18  18  18  18	4,086. 	1,313,602. 4,086. 1,309,516.
Complete if the organization answered 'Yes' to Form 990, Part IV, line 12  1 Total expenses and losses per audited financial statements	4,086. 4,086. 2e 4,086. 2e 10,882. 1,850. 4c	1,313,602. 4,086. 1,309,516.

Part XIII Supplemental Information.

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

Pt XI, Line 4b Legal fee refund \$1,850; Cost of books sold (\$3,943) Pt XII, Line 2d Cost of books sold \$3,943; Prior year adjustment \$143 Pt XII, Line 4b Legal fee refund \$1,850

Schedule **D** (Form 990) 2014

### SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions With Interested Persons**

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).

► Attach to Form 990 or Form 990-EZ. ► Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 2014

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Presbyterian Lay Committee, Inc.

Employer identification number

Committee, Inc. 13-2548997

1	(a) Name of disqualified person	(b) Relationship between disqualified	(c) Description of transaction	(d) Corrected?	
•		person and organization		Yes	No
(1)					
(2) (3)					
(4)					
(5)					
(6)					
		e organization managers or disqualified persons			
3 E	nter the amount of tax, if any, on line	e 2, above, reimbursed by the organization			
Part I	Complete if the organization a	nterested Persons. nswered 'Yes' on Form 990-EZ, Page V, line 38 unt on Form 990, Part X, line 5, 6, or 22.	a or Form 990, Part IV, line 26; or if the		

(a) Name of interested person	(b) Relationship with organization (c) Purp of loa	(c) Purpose of loan	(c) Purpose of loan from organiz	n the principal amount	(f) Balance due	( <b>g)</b> In d	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												

### Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of Assistance	(e) Purpose of assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

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

Schedule L (Form 990 or 990-EZ) 2014

# Part IV Business Transactions Involving Interested Persons. Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Parker Williamson	None	30,000.	Consulting fees		Х
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

### **SCHEDULE O** (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number 13-2548997 Presbyterian Lay Committee, Inc. Pt VI, Line 11b The Form 990 is prepared by a third-party CPA and Pt VI, Line 11b submitted to the Board of Directors for approval. Pt VI, Line 19 Upon request. Pt VI, Line 12c Board of Directors and President of organization Pt VI, Line 12c monitors all activity of organization.

# Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 6, Line 17 (continued)

Tennessee
Hawaii
Alaska
North Dakota
Minnesota
Georgia
Wisconsin
West Virginia
Colorado
Mississippi
Washington
Florida
Virginia
Washington
New Hampshire

Schedule O (Form 990 or 990-EZ), Supplemental Information to Form 990 or 990-EZ Form 990, Page 10, Line 24e All Other Expenses (continued)

Description	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
Postage and mailing	133,370.	83,859.	6,834.	42,677.
Bank and credit card fees	4,764.	0.	4,764.	0.
Telephone	7,070.	192.	6,878.	0.
Internet and website	44,516.	44,164.	352.	0.
General publishing expense	20,762.	0.	0.	20,762.
Ministry expense	16,746.	16,746.	0.	0.
Writers' fees	6,829.	6,829.	0.	0.
Repairs and maintenance	5,505.	0.	5,505.	0.
Annual appeal	25,123.	0.	0.	25,123.
Charitable donation	101.	101.	0.	0.
Staff training	220.	0.	220.	0.
Office closure expense	42,582.	0.	42,582.	0.
Strategic planning	7,755.	0.	7,755.	0.
Write-off old inventory	11,997.	11,997.	0.	0.
Office opening expense	5,984.	0.	5,984.	0.