

NYSBA 2020 Dues Waiver Program

NEW YORK STATE BAR ASSOCIATION DUES WAIVER PROGRAM:

As the oldest and largest voluntary state bar association in the nation, the New York State Bar Association owes its long-standing strength to the diversity of its membership.

The Dues Waiver Program is intended to help its members by providing assistance to attorneys whose financial circumstances are such that full payment of membership dues would pose a financial hardship. Situations which would merit a dues waiver include:

- unemployment or low income constraints
- time out from practice for family or health reasons
- reduced income based upon extraordinary practice or business losses

Current or prospective members of the New York State Bar Association are eligible to apply for dues waivers. **Participation in the program is limited to two consecutive membership years**, absent extenuating circumstances.

Those who wish to apply for a dues waiver must complete this application and sign the certification. All dues waiver applications are treated confidentially.

In the year following one's participation in the program, members will receive an invoice for the full dues amount. The Dues Waiver Program operates on an annual basis, and may be terminated at the close of any calendar year.

Dues Waiver Program participants are entitled to all NYSBA benefits of membership as provided under the bylaws.

2020 Membership Dues Category	Payment with 25% waiver	Payment with 50% waiver
ACTIVE/ASSOCIATE IN-STATE ATTORNEY MEMBERSHIP		
Admitted 2012 and prior	\$275.00	\$206.25
Admitted 2013-2014	\$185.00	\$138.75
Admitted 2015-2016	\$125.00	\$ 93.75
Admitted 2017 - 3.31.2019	\$ 60.00	\$ 45.00
ACTIVE/ASSOCIATE OUT-OF-STATE ATTORNEY MEMBERSHIP		
Admitted 2012 and prior	\$180.00	\$135.00
Admitted 2013-2014	\$150.00	\$112.50
Admitted 2015-2016	\$120.00	\$ 90.00
Admitted 2017 - 3.31.2019	\$ 60.00	\$ 45.00
DEFINITIONS		
<u>Active In-State</u> = Attorneys admitted in NYS, who work and or reside in NYS		
<u>Associate In-State</u> = Attorneys not admitted in NYS, who work and or reside in NYS		
<u>Active Out-of-State</u> = Attorneys admitted in NYS, who neither work nor reside in NYS		
<u>Associate Out-of-State</u> = Attorneys not admitted in NYS, who neither work nor reside in NYS		
Class based on first year of admission to bar of any state. Membership year runs January through December.		

HOW ARE DUES WAIVERS DETERMINED?

After determining the regular Association membership dues amount, applicants may apply for a **25 percent or 50 percent** waiver. All dues waiver applicants are requested to pay a minimum of one-half the regular dues for their membership category. In exceptional circumstances, where even these reduced dues levels prove difficult, applicants may suggest whatever payment is manageable.

All applicants must 1. submit a statement explaining the reason for their request and 2. sign and date the certification: BOTH ARE REQUIRED FIELDS. We cannot process your request without a statement. If you do not provide one, this application will be returned to you.

STATEMENT:

CERTIFICATION:

I certify that:

Full dues payment would pose a financial hardship.

Signature _____

Please Print Name _____

Date _____

Please also complete the reverse side of this form and return to:

NEW YORK STATE BAR ASSOCIATION MEMBER RESOURCE CENTER

One Elk Street, Albany, New York 12207

Phone: 800.582.2452/518.463.3200

Fax: 518.463.5993

E-mail: mrc@nysba.org

www.nysba.org

NYSBA 2020 Dues Waiver Application

APPLICANT INFORMATION:

As a current NYSBA member, I would like to apply for a dues waiver for 2020. I certify that full dues payment would pose a financial hardship.

I would like to become a member of the New York State Bar Association, and apply for a dues waiver for 2020. (Please include proof of admission to the practice of law.) I certify that full dues payment would pose a financial hardship.

Name _____

Address _____

City _____

State _____ Zip _____

Membership ID# _____

The above address is my: () office () home () both

Office phone _____

Home phone _____

E-mail address _____

Fax number _____

Date of birth _____

Original Admission to the Bar: Date _____ State _____

Other states and dates of Bar Admittance: _____

Law school _____

Graduation date _____

DUES WAIVER REQUESTED:

Based upon the membership dues categories, I would like to request the following dues waiver:

(Percentages to be waived can be 25 percent or 50 percent. Please submit a note explaining your circumstances.)

See reduced payment chart.

Normal dues amount: \$ _____

Requested dues waiver of _____ %

Dues payment with waiver: \$ _____

Section dues \$ _____

TOTAL PAYMENT ENCLOSED: \$ _____

SECTION DUES:

Section dues are not covered by the Dues Waiver Program.

- | | |
|--|--------|
| <input type="checkbox"/> Antitrust | \$ 30. |
| <input type="checkbox"/> Business Law | 25. |
| <input type="checkbox"/> Commercial & Federal Litigation | 40. |
| <input type="checkbox"/> Corporate Counsel | 30. |
| <input type="checkbox"/> Criminal Justice | 35. |
| <input type="checkbox"/> Dispute Resolution | 35. |
| <input type="checkbox"/> Elder Law & Special Needs | 30. |
| <input type="checkbox"/> Entertainment, Arts & Sports Law | 35. |
| <input type="checkbox"/> Environmental & Energy Law | 35. |
| <input type="checkbox"/> Family Law | 35. |
| <input type="checkbox"/> Food, Drug & Cosmetic Law | 30. |
| <input type="checkbox"/> General Practice | 25. |
| <input type="checkbox"/> Health Law | 35. |
| <input type="checkbox"/> Intellectual Property Law | 30. |
| <input type="checkbox"/> International | 35. |
| <input type="checkbox"/> Judicial | 25. |
| <input type="checkbox"/> Labor & Employment Law | 35. |
| <input type="checkbox"/> Municipal Law | 30. |
| <input type="checkbox"/> Real Property Law | 40. |
| (Attorneys admitted 5 years or less are \$10) | |
| <input type="checkbox"/> Senior Lawyers (Attorneys age 55 and over) | 20. |
| <input type="checkbox"/> Tax | 25. |
| <input type="checkbox"/> Torts, Insurance, & Compensation Law | 40. |
| <input type="checkbox"/> Trial Lawyers | 40. |
| <input type="checkbox"/> Trusts & Estates Law | 40. |
| <input type="checkbox"/> Women in Law | 30. |
| <input type="checkbox"/> Young Lawyers (Attorneys admitted less than 10 years) | 20. |

SECTION DUES SUBTOTAL \$ _____

METHOD OF PAYMENT:

() Check () VISA () MasterCard () AMEX () Discover

Card Number: _____

Expiration Date: _____

Signature: _____

Today's Date: _____

Membership dues for the New York State Bar Association are not deductible as charitable contributions for Federal Income Tax purposes. However, dues may be deductible as a business expense. **Please Note: Participation in the Dues Waiver Program is limited to two consecutive membership years, absent extenuating circumstances.**

Return this completed form to:

NEW YORK STATE BAR ASSOCIATION

MEMBER RESOURCE CENTER

One Elk Street, Albany, New York 12207

Phone: 800.582.2452/518.463.3200 Fax: 518.463.5993

E-mail: mrc@nysba.org • www.nysba.org

IMPORTANT NOTICE: Contributions to The New York Bar Foundation are tax deductible as charitable contributions. Membership dues to the New York State Bar Association are not tax deductible as charitable contributions for income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses subject to restrictions imposed as a result of association lobbying activities. The NYSBA estimates that the non-deductible portion of your 2020 dues which is allocated to lobbying is approximately 2.0%. Portions of your dues payment are allocated toward the annual publication subscriptions for the following: *NYSBA Journal*, \$14.75; *New York State Law Digest* \$6.25; *State Bar News* \$7.25.