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Form **990**

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2008

Inter	artment nal Reve	of the Treasury enue Service		► The organization	may have to use a	copy of this return to	satisfy state repo	rtıng requirer	nents	Ор	en to Public Ins	pection
	For th	e 2008 calend	ar year,	or tax year beginni	ng Sep 1	, 2	008, and endi	ng Aug	31		, 2009	
В	Check r	f applicable		C Name of organizati	ion	·			D Employ	er Iden	ntification Number	
	Ad	dress change	Piease use IRS label	TX Criminal	Defense	Lawyers EI) Institu	te	74-	2233	3987	
	Na	me change	or print or type.	Number and street	(or PO box if mail	is not delivered to str	eet addr) Room	suite	E Telepho	one num	nber	
		tial return	See specific	1717 W. 6th	Street		315	,	(51	2) 4	478-2514	
		rmination	instruc- tions.	City, town or count	-		State ZIP code +		·			
		nended return	401131	Austin			TX 78703		G Gross r	eceints	\$ 1,376,404	4
	=	plication pending	F Name a	and address of principal	officer		111 70.00		a group retur	_		$\overline{}$
	☐ Ap			rtinez, 1717 W.		netin	TX 78703		l affiliates inc		Yes	-
_	Tax	exempt status			insert no.)	4947(a)(1) o		- If 'No,	' attach a list	(see ın	istructions)	
!				(0) (3))-(insert no.)] 4347(a)(1) 0	1 1 1 1 1 1 2 7	-			-	
		osite: ► N/A					Tr. v.		exemption no			
K		of organization	X Corpora	ation Trust	Association O	ther -	L Year of Form	ation 190	1 1141 5	tate of	legal domicile TX	
Fåð		Juillina					Ma =====	.+	1		+ h o	
				janization's mission) <u>r</u> c	<u> </u>	
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<u> </u>		or crimi	uar _de	efense lawye	is and th	ierr Zrarr.					·	
& Governance											·	
> ĝ				if the organization bers of the governi			isposed of mo	re man 25	% OI IIS as		17	
				t voting members of			ine 1b)				17	
⊇ຼຶ	1		-	yees (Part V, line 2		, 2003 (1 0,11 1), 1.				5	0	
Activities	6	Total number	of volunte	pare (actimate if ne	neccani) -	-				6	20	
`۶	7a	Total gross un	related b	usiness revenue fr	om Part VIII, Ir	ne 12, Rounnit	N/ED	7		7 a	37	,499.
ָ ו	b	Net unrelated	business	taxable income fro	m Form 990 T	, I _{me-34}	IVED			7 b		,091.
Hevenue of the					160	2	70	/ F	rior Year		Current Y	ear
2	8	Contributions a	and grant	ts (Part VIII, line 1	ال (1	[JUL 1 9	2010 SS-0SC	1	35,6	571.		,941.
<u> </u>	_	D		on (Dort VIII June 2)	- 1	1	10.0	<i></i>	112,4			,314.
) <u>ē</u>	10	Investment inc	ome (Pa	ue (Part VIII, IIIIe 2 irt VIII, column (A), II. column (A), line:	lines 3, 4, and	7dDCDEA	اغزا			37.		,370.
PE	11	Other revenue	(Part VII	II, column (A), line	s 5, 6d, 8c, 9c,	Toc, and Tim	, UT		128,3			,382.
				nes 8 through 11 (n			, line 12)		281,5	68.		,007.
				ounts paid (Part IX,					54,9) 55.	68	,629.
				nembers (Part IX,								
		•		sation, employee b			nes 5-10)			0.		
Expenses				g fees (Part IX, col			,					
ë	l			-			•	7.4	- 14 18 - 2	ž. (
핓	l		•	ises (Part IX, colun			0.	-				
	ı			X, column (A), line					159,1			<u>,127.</u>
				nes 13-17 (must eq		umn (A), line 25))		214,1			<u>,756.</u>
	19	Revenue less	expenses	Subtract line 18 f	rom line 12				67,4	.38.	613	,251.
5 8								Begi	nning of Y	ear	End of Ye	ear
Net Assets or Fund Belances	20	Total assets (F	Part X, Iir	ne 16)					757,2	66.	_1,117	,029.
A B	21	Total liabilities	(Part X,	Ine 26)					302,8	57.	48	,733.
Ϋ́	22	Net assets or t	fund bala	hces Subtract line	21 from line 2	0			454,4	09.	1,068	,296.
Pa	rt II	Signatu									2	
					muser this return in	cluding accompanying	schedules and sta	atements and	to the hest o	f my kn	nowledge and belief.	nt is
		true, correct, an	d complete	I declare that I have example that I have example to the control of preparer	(other than officer)	is based on all informa	ation of which prep	arer has any	knowledge	·,	omeage and conce,	
Sig	ın	▶	- 1					1	7-13	-10	>	
He		Signature o	f officer	-				Da	ate /			
		► Tosen	h Mari	Anez, Execu	ative Dire	actor						
		Type or prir		41 —————	ICIAE DITE	50001						
				HAAA			Date	T_	heck if	TP	Preparer's identifying see instructions)	number
Pai	hi		1			3		se	elf-		ee instructions)	
Pre		Preparer's signature	▶ [/11/1///	/X//		07/06/1	1	mployed P			
pai	rer's		/	1VV		P. C	07/06/1					
Us		Firm's name (or yours if self-		temayok H	& Compan				フ	u .:	2902112	^
On		employed), address, and	<u> 300∶</u>	 	Blvd.,	Suite 320		E				()
		ZIP + 4	Aust		/		704	Pi	hone no 🟲	(51:		
May	the IF	S discuss this	return w	ith the preparer of	own above? (se	ee instructions)		·			X Yes	No_
DA/	N Ear	Drivocy Act an	d Danca	work Reduction Ac	t Natice see th	se cenarate instr	uctions		TEFACIOI	04/23	2/09 Form 991	n <i>(2</i> 008) 1

Forn	n 990 (2008) TX	Criminal	Defen	se Law	yers	ED I	nstitu	e			74-	-22339	87		Page 2
			ent of Prog							ictions	5)				·	
			organization													
	•		and supp		_											
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	of cri	winai	<u>defense</u>	_rawyei	rs and	the	Ir sta	<u> </u>						- - -	-	
										-		···				
2	Did the or	ganızatıo	n undertake a	any signific	ant progra	m sen	rices dur	ing the yea	ir which	were n	ot listed	on the prior			_	
	Form 990	or 990-E	Ζ ^γ											Yes	X	No
	If 'Yes,' de	escribe th	nese new serv	rices on Sc	hedule O											
3	Did the or	ganizatio	n cease cond	ucting, or i	make signi	ficant	changes	in how it o	onducts	s, any p	rogram s	services?		Yes	X	No
•		_	nese changes								_				_	
4			pt purpose ac			of the	organiza	tion's three	a larnec	t progra	m servir	res hy eyner	ses Sert	ion 501	1(5)(3)	
7	and 501(c)(4) orga.	nizations and	section 49	947(a)(1) tr	usts a	re require	ed to repor	t the an	nount of	f grants	and allocation	ns to othe	ers, the	total	
	expenses,	and reve	enue, if any, f	for each pr	ogràm sen	re re	ported	·			-					
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4:			_) (Expenses													
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4	b (Code) (Expenses	\$	68,62	29. ı	ncluding	grants of	\$	6	8,629	<u>.</u>) (Revenu	• \$			0.)
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4	d Other prog	gram serv	rices. (Describ	oe in Sched	dule O)											
	(Expenses	\$ [_]			ncluding a	rants o	of \$) ((Revenue	e \$)	
40	e Total proc	ram ser	vice expenses	5 ▶ \$	1	74,2	287. (A	Aust equal	Part IX	Line 2	5, colum	nn (B))				

Part IV ,	Checklist of Re	quired Schedules

			Yes	No
_	1) I I I I I I I I I I I I I I I I I I I			
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	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	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? If 'Yes,' complete Schedule C, Part II	4		Х
5	502(6)	5		
6	Did the organization maintain any donor advised funds or any accounts where 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		X
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, 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 hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was	12	Х	
12	prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
	I Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		X
		, , , ,	-	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
17		17		Х
18		18		X
19		19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		Х
21	Did the organization report more than \$5,000 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 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, questions 3, 4, or 5? If 'Yes,' complete Schedule J	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, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and			
	complete Schedule K. If 'No,'go to question 25	24a		Х
Ь	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
BAA		Form	990 (2008)

	Part IV	Checklist of Require	d Schedules	(continued)
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			162	110
28	Quring the tax year, did any person who is a current or former officer, director, trustee, or key employee.			
i	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a	-	X
I	b Have a family member who had a direct or indirect business relationship with the organization? If 'Yes,' complete Schedule L, Part IV	28b		х
•	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	_29		х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32	Х	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I	33		<u>x</u>
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35	is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		х
BAA		Form	990 ((2008)

Part V Statements Regarding Other IRS Filings and Tax Compliance			Г
Transmittel of U.S.	<u></u>	Yes	No
1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S.linformation Returns Enter -0- if not applicable 1 a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S.			
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	4		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a C			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	х	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь	Х	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
b If 'Yes,' enter the name of the foreign country			
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a Did the organization solicit any contributions that were not tax deductible?	6a		Х
b if 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization provide goods or services in exchange for any guid pro guo contribution of more than \$75?	7a		Х
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year			
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have			
excess business holdings at any time during the year?	8		X
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
a Did the organization make any taxable distributions under section 4966?	9a		X
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b		X
10 Section 501(c)(7) organizations. Enter.			
a Initiation fees and capital contributions included on Part VIII, line 12	 		į .
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11 Section 501(c)(12) organizations. Enter			
a Gross income from other members or shareholders 11a	1 1		i
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b	10-		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		 ,
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	Form	990 (้วบบอา
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Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Sec	tion A. Governing Body and Management			-	
	For each 'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, d processes. or changes in Schedule O See instructions			Yes	No
1 a	Enter the number of voting members of the governing body	1a 17	j		'
	Enter the number of voting members that are independent	1b 17]		·
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel officer, director, trustee or key employee?	ationship with any other	2		X
3	Did the organization delegate control over management duties customarily performed by or up of officers, directors or trustees, or key employees to a management company or other person	nder the direct supervision	3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		4		Х
5	Did the organization become aware during the year of a material diversion of the organization	's assets?	5		x
6	Does the organization have members or stockholders?		6		Х
	Does the organization have members, stockholders, or other persons who may elect one or magoverning body?	nore members of the	7a	Х	
	and the governing body. Are any decisions of the governing body subject to approval by members, stockholders, or other.	ner persons?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions under the following				
á	a The governing body?		8a	X	
	Each committee with authority to act on behalf of the governing body?		8b	Χ_	
	Does the organization have local chapters, branches, or affiliates?		9a		X
ı	If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed describe in Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	х	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	11		х
Sec	tion B. Policies				
				Yes	No
	Does the organization have a written conflict of interest policy? If 'No,' go to line 13		12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?		12b	Х	
	Does the organization regularly and consistently monitor and enforce compliance with the pole Schedule O how this is done .	icy? If 'Yes,' describe in	12c		x
	Does the organization have a written whistleblower policy?		13		Х
14	Does 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 a persons, comparability data, and contemporaneous substantiation of the deliberation and dec	ipproval by independent ision			
	The organization's CEO, Executive Director, or top management official?		15a		X
ı	Other officers of key employees of the organization?		15 b		х
	Describe the process in Schedule O (see instructions)				
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?		16a		х
ŀ	o if 'Yes,' has the organization adopted a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and taken steps to safeguard status with respect to such arrangements?	to evaluate its participation the organization's exempt	16b		
Sec	tion C. Disclosures	,,	1 1 1 1 1		
	List the states with which a copy of this Form 990 is required to be filed				
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar inspection. Indicate how you make these available. Check all that apply.	nd 990-T (501(c)(3)s only) av	aılable	for pu	ıblıc
	Own website Another's website X Upon request				
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docum	ents, conflict of interest police	v. and	fınanc	al
	statements available to the public				
20	statements available to the public State the name, physical address, and telephone number of the person who possesses the bo	ooks and records of the organ	ıızatıon		
		ooks and records of the organ	ıızatıon		

TEEA0106 12/18/08

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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) or 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.

(A)	compens (B)			•	c)			(D)	(E)	(F)
Name and Title	Average hours			check	all f	hat app	·	Reportable compensation from	Reportable	Estimated amount of other
	per week	andividi al frascee or director	institutional trustee	Offi er	Key employee	Highest coinperisated employee	Former	the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
Michael R. Gibson										
Director	1.00	х						0.	0.	0
Joseph A. Cordova										
Director	1.00	Х						0.	0.	0
David Guinn, Jr.										
Director	1.00	Х						0.	0.	0
Lance Evans										
Director	1.00	X						0.	0.	0
Shirley Baccus-Lobel										
Director	1.00	X						0.	0.	0
William M. House, Jr.										
Director	1.00	X						0.	0.	0
Michele P. Esparza										
Director	1.00	Х						0.	0.	0
Kameron D. Johnson	.					i				
Director	1.00	X						0.	0.	0
Angela J. Moore										
Director	1.00	Х		_				0.	0.	0
Frank B. Suhr	.			ł						
Director	1.00	X		_				0.	0.	0
Jaime E. Gonzalez	.									_
Director	1.00	_X						0.	0.	0
Teana V. Watson										_
Director	1.00	X	\sqcup	_				0.	0.	0.
Phoebe S. Smith				ı						_
Director	1.00	<u>X</u>						0.	0.	0.
John S. Young										0
Secretary	1.00			X	-			0.	0.	0.
Ronald L. Goranson	1 , ,,			,				_	_	•
Past Chair	1.00		\dashv	X				0.	0.	0.
Brent John Cahill	1 00			,	l			_	_	- ^
Vice Chair	1.00		\dashv	Х	\dashv			0.	0.	0.
Randy Wilson	, ,,			Ţ	- [_	0.	0.
ChairBAA	1.00		EEA0	Х		24/09		0.]	U.]	Form 990 (2008

AS AMENDED

Part VII Section A. Officers, Directors, Trus		(ey	En			es,	an			
(A)	(B) Average	Posi	tion (c) kalli	that a	(עומחי	(D)	(E)	(F)
Name and Title	hours per week	or director	institution	Officer	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Joseph Martinez Executive Director	15.00			х				0.	132,162.	39,338.
						L				
			_							
						_				
				-						
~										
									······································	
1 b Total							<u> </u>	0.	132,162.	39,338.
2 Total number of individuals (including those in 1a) whorganization	no receiv	ved i	mor	e tha	an \$	5100	,000) in reportable con	npensation from the	•
										Yes No
 Did the organization list any former officer, director of on line 1a? If 'Yes,' complete Schedule J for such ind For any individual listed on line 1a, is the sum of repithe organization and related organizations greater the individual 	lividual ortable d	com	pens	satıo	n a	nd o	ther	· compensation fro	m	3 X
5 Did any person listed on line 1a receive or accrue correndered to the organization? If 'Yes,' complete Sche	mpensa dule J fo	tion or su	fron	n an pers	y ur on	nrela	ated	organization for s	ervices	5 X
Section B. Independent Contractors									#100 000 r	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization										
(A) Name and business address				_				(B) Description o	f Services	(C) Compensation
2 Total number of independent contractors (including the compensation from the organization ► 0	ose in 1) wh	no re	eceiv	/ed	mor	e th	an \$100,000 in		

Pa	rt VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ 0	1a Federated campaigns 1a				
TAN	b Membership dues 1b				
Mon	c Fundraising events 1c				
IFTS NR A	d Related organizations 1d				
S, G MIL	e Government grants (contributions) 1e				
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	f All other contributions, gifts, grants, and similar amounts not included above 1f 20,	941.			
N O O	g Noncash contribns included in Ins 1a-1f \$				
양독	h Total. Add lines 1a-1f	▶ 20,941.			
IUE	Business C				
.VE	2a Rent from exempt org 531120	44,523.		0.	44,523.
ERE	b Publication sales 611710	5,7 <u>91</u> .	0.	0.	5,791.
Z.	c				
SER	d				
XAM.	e				
90	f All other program service revenue		-		
<u> </u>	g Total. Add lines 2a-2f	► 50,314.	<u> </u>		
	3 Investment income (including dividends, interest an	d _ 1 007	0.	0.	1 007
	other similar amounts)	1,897.	0.	0.	1,897.
	4 Income from investment of tax-exempt bond procee	as [
	5 Royalties (i) Real (ii) Pers	onal			
		499.			
		0.	,		
	2 2000 Total Original	499.			*
	d Net rental income or (loss)	<u>49,799.</u> ★	12,300.	37,499.	0.
	(i) Securities (ii) Oth		12,300.	31,433.	
	7a Gross amount from sales of assets other than inventory 1,232,		ľ		
		<u> </u>			
	b Less: cost or other basis and sales expenses 571,	397			
	c Gain or (loss) 661,				
	d Net gain or (loss)	► 661,473.	0.	0.	661,473.
		001/175.			
1UE	8a Gross income from fundraising events (not including \$				
EVE	of contributions reported on line 1c)				
R	See Part IV, line 18				
OTHER REVENU	b Less direct expenses b				
ь	c Net income or (loss) from fundraising events	•			
	9a Gross income from gaming activities. See Part IV, line 19 a				
	b Less direct expenses b		-		
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances				
	b Less cost of goods sold b				
	c Net income or (loss) from sales of inventory	•			
	Miscellaneous Revenue Business C	ode			
	11a Merchandise sales 611710	20,583.	0.	0.	20,583.
į	b				
ĺ	c				
-	d All other revenue				
	e Total. Add lines 11a-11d	▶ 20,583.			
	12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c,				
_	10c, and 11e	8 <u>05,007.</u>	12,300.	37,499.	734,267.

TX Criminal Defense Lawyers ED Institute

Form 990 (2008)

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must comp	olete column (A) but are	not required to comple	te columns (B), (C), and	(D).
	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	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	68,629.	68,629.		,
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
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				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	i			
10	Payroll taxes				
11	Fees for services (non-employees)				
á	a Management	9,167.	7,792.	1,375.	0.
1	Legal				
	Accounting	8,800.	7,480.	1,320.	0.
	d Lobbying	,		· ·	
	Prof fundraising svcs See Part IV, In 17				
	Investment management fees				
	1 Other	7,732.	6,572.	1,160.	0.
	Advertising and promotion	4,088.	3,679.	409.	0.
13	Office expenses	3,963.	3,567.	396.	0.
14	Information technology	3/3031	3,007.		
15	Royalties				· · · · · · · · · · · · · · · · · · ·
16	Occupancy	18,014.	16,212.	1,802.	0.
17	Travel	10,487.	6,817.	3,670.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10, 407.	0,017.		
19	Conferences, conventions, and meetings	5,003.	3,252.	1,751.	0.
20	Interest	11,032.	9,929.	1,103.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,068.	12,661.	1,407.	0.
23 24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	1,454.	1,309.	145.	0.
ā	UBI Taxes	14,031.	12,628.	1,403.	0.
	Other operating expenses	11,777.	10,599.	1,178.	0.
	Miscellaneous	3,511.	3,161.	350.	0.
(
•		T			
	All other expenses				
	Total functional expenses. Add lines 1 through 24f	191,756.	174,287.	17,469.	0.
	Joint Costs. Check here ► if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational				
BAA	campaign and fundraising solicitation				Form 990 (2008)

AS AMENDED

Pa	art X	Balance Sheet					
					(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing			83,268.	1	20,296.
	2	Savings and temporary cash investments			126,300.	2	1,078,009.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors or other related parties. Complete Part II of Schedule	s, trust	ees, key employees,		5	
	6	Receivables from other disqualified persons (as define				-	
	"	and persons described in section 4958(c)(3)(B) Comp				6	
Ą	7	Notes and loans receivable, net	nete i	art ii or ochedule L		7	
A S S E T	8	Inventories for sale or use			21,080.	8	7,412.
Ţ	_	Prepaid expenses and deferred charges			21,000.	9	
3		Land, buildings, and equipment cost basis	10 a	48,623.		-	
		Less accumulated depreciation. Complete Part VI of		10/023.			
		Schedule D	10 ь	37,311.	526,618.	10 c	11,312.
	11	Investments — publicly-traded securities		0.7011.	020,0201	11	11/012.
	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			··· · · ···	15	
	16	Total assets Add lines 1 through 15 (must equal line)	34)	Ì	757,266.	16	1,117,029.
	17	Accounts payable and accrued expenses	/		1,258.	17	1,854.
	18	Grants payable				18	
	19	Deferred revenue				19	
Ļ	20	Tax-exempt bond liabilities		Ì		20	
Å	21	Escrow account liability Complete Part IV of Schedule	D			21	
Ļ	22	Payables to current and former officers, directors, trus highest compensated employees, and disqualified personal compensated employees.	tees. k	key employees,			*
Ť	1	of Schedule L		Join proto v dive ii		22	
Ė	23	Secured mortgages and notes payable to unrelated this	rd part	ies		23	
	1	Unsecured notes and loans payable			278,637.	24	
	1	Other liabilities Complete Part X of Schedule D			22,962.	25	46,879.
	1	Total liabilities. Add lines 17 through 25			302,857.	26	48,733.
N		Organizations that follow SFAS 117, check here ▶	ar	nd complete lines			
N E T	1	27 through 29 and lines 33 and 34.		-			
Ą	27	Unrestricted net assets				27	
Ş E	28	Temporarily restricted net assets				28	
Š	29	Permanently restricted net assets				29	
R		Organizations that do not follow SFAS 117, check her	e ►	X and complete			
FUZD		lines 30 through 34.		ļ			
N D	30	Capital stock or trust principal, or current funds			454,409.	30	1,068,296.
B	31	Paid-in or capital surplus, or land, building, and equipr	nent fu	ınd _		31	
B414Z0mの	32	Retained earnings, endowment, accumulated income,	or othe	er funds		32	
Ç	33	Total net assets or fund balances.			454,409.	33	1,068,296.
_	34	Total liabilities and net assets/fund balances			757,266.	34	1,117,029.
Pa	<u>rt XI</u>	Financial Statements and Reporting					1 1
_				. n	Otto		Yes No
			ash		Other		
2		re the organization's financial statements compiled or re		•	countant?		2a X
		re the organization's financial statements audited by an			for outgrounds of the 1		2b X
	c it 'Y	'es' to 2a or 2b, does the organization have a committe lew, or compilation of its financial statements and selec	ะ เกลเ : tion of	assumes responsibility t an independent accoun	tant?	ıı,	2c X
3	a As a	a result of a federal award, was the organization require				ngle	
-	Aud	lit Act and OMB Circular A-133?				•	3a X
_		es,' did the organization undergo the required audit or a	audits?) 			3b (2009)
BA	A						Form 990 (2008)

SCHEDULE A (Form 990 or 990-EZ)

509(a)(2)

Public Charity Status and Public Support

To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

2008

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Internal Revenue Service

Employer identification number Name of the organization 74-2233987 Criminal Defense Lawyers ED Institute 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 (Please check only one organization) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii) Enter the hospital's 4 name, city, and state 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described 7 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 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 \mathbf{x} 9 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). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h

e | By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section

Type III — Functionally integrated

If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? q a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) below, the governing body of the supported organization? a family member of a person described in (i) above? (iii) a 35% controlled entity of a person described in (i) or (ii) above?

C

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

Type III— Other

Provide the following information about the organizations the organization supports h (iv) Is the organization in col (i) listed in your (v) Did you notify the organization in col (i) of (vi) Is the organization in col (i) organized in the US? (iii) Type of organization (described on lines 1-9 above or IRC section (i) Name of Supported (vii) Amount of Support Organization your support? (see instructions)) governing document? No Yes No Yes No Yes Total

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

b

Type II

Schedule A (Form 990 or 990-EZ) 2008

	edule A (Form 990 or 990-EZ) 200						
Pai	rt II Support Schedule for	-			(b)(1)(A)(iv) ar	nd 170(b)(1)(A)	(vi)
	(Complete only if you checke	ed the box on line	5, 7, or 8 of Part	1)			
	tion A. Public Support	·		Τ	· ·	T	
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge						
4	Total. Add lines 1-3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	ECONOMICO ANTONOS OS SER ESTADOS OS	F AMERICAN U About A	200 - 10	and the supplementation of the supplementatio	S a S.	
6	Public support. Subtract line 5 from line 4			1 1 1 1		-	
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income form unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activi	ities, etc (see ins	structions)			12	
13	First five years. If the Form 990 i organization, check this box and		ation's first, second	d, third, fourth, or	fifth tax year as a	a section 501(c)(3)	▶ □
Sec	tion C. Computation of Pul	blic Support F	Percentage				
	Public support percentage for 200	,		11, column (f)		14	<u>%</u>
15	Public support percentage for 200	07 Schedule A, P	art IV-A, line 26f			15	<u> </u>
16 a	33-1/3 support test – 2008. If the and stop here. The organization of				he line 14 is 33-1.	/3 % or more, chec	k this box
b	33-1/3 support test – 2007. If the and stop here. The organization of				and line 15 is 33-	1/3% or more, che	ck this box
17 a	10%-facts-and-circumstances te or more, and if the organization n the organization meets the 'facts-	neets the 'facts-a	nd-circumstances'	test, check this be	ox and stop here.	. Explain in Part IV	0% how
b	o 10%-facts-and-circumstances te or more, and if the organization no organization meets the 'facts-and	neets the 'facts-a	nď-circumstances'	test, check this bo	ox and stop here.	Explain in Part IV	5 is 10% how the

18 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008

BAA

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

	(Complete only if you cried	cked the box on iin	le 9 of Part 1.)					
	tion A. Public Support	 	<u> </u>		40			
	ndar year (or fiscal yr beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	29,100.	3,680.	7,397.	35,671.	20,9	941.	96,789.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	97,459.	120,439.	141,998.	175,269.	83,1	197.	618,362.
	Gross receipts from activities that are not an unrelated trade or business under section 513							
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1-5	126,559.	124,119.	149,395.	210,940.	104,3	138.	715,151.
7 a	Amounts included on lines 1, 2, 3 received from disqualified persons	0.	0.	0.	0.		0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11,							
	and 12 for the year or \$5,000	82,382.	88,022.	87,103.	95,761.	46,8		<u>400,091.</u>
C	: Add lines 7a and 7b	82,382.	88,022.	87,103.	95,761.	46,8	323.	400,091.
8	Public support (Subtract line							
	7c from line 6)						-	315,060.
Sec	tion B. Total Support							
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total
9	Amounts from line 6	126,559.	124,119.	149,395.	210,940.	104,1	138.	715,151.
10 a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,760.	2,154.	9,754.	5,137.	1 . 8	397.	20,702.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b	1,760.	2,154.	9,754.	5,137.	1,8	97.	20,702.
11	Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on	17,600.	29,500.	24,600.	51,750.	37,4	199.	160,949.
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)				13,741.			13,741.
13	Total support. (add Ins 9, 10c, 11, and 12)							910,543.
	First five years. If the Form 990 i organization, check this box and			third, fourth, or	fifth tax year as a	section 50	1(c)(3)	
	tion C. Computation of Pul							
	Public support percentage for 200	• •	• • •	13, column (f))			15	34.60%
	Public support percentage from 2						16	84.60%
Sec	tion D. Computation of Inv	estment Incon	ne Percentage					
17	Investment income percentage fo	r 2008 (line 10c, c	olumn (f) dıvıded t	by line 13, column	ı (f))		17	2.27 %
	Investment income percentage from		•				18	2.60%
	33-1/3 support tests – 2008. If the more than 33-1/3%, check this both	ox and stop here.	The organization q	ualifies as a publi	cly supported org	anızatıon		. × X
	33-1/3 support tests – 2007. If the is not more than 33-1/3%, check	this box and stop	here. The organiza	ition qualifies as a	a publicly support	ed organiza	tion	and line 18
20	Private foundation. If the organiz	ation did not check	k a box on line 14,	19a, or 19b, chec	ck this box and se	e instructio	п\$	

Schedule A (Forn	n 990 or 990-EZ) 2008	<u>3 </u>	l Defense L	awyers ED Ir	<u>istitute 74</u>	-2233987	Page 4
Part IV Sup Part	plemental Inform II, line 17a or 17	lation. Complete b; or Part III, line	this part to pro 12. Provide a	ovide the explainly other addition	nation required onal information	by Part II, line n. (see instruction	10; ons)
Other_Inco	me Part III,	Line 12					
Description	n: Insurance p	proceeds	- 	-			
2007: 1359	<u>1</u> _		-	 -	-		- -
Description	n: Rebates						
2007: 150.				-			
		-					
							- -
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	·	· 					
		_					

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

b Assets included in Form 990, Part X.

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

Attach to Form 990. To be completed by organizations that

Open to Public answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. Inspection Employer Identification number Name of the organization 74-2233987 TX Criminal Defense Lawyers ED Institute Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 2 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 1 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easement it holds? Nο Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b if the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1

Schedule **D** (Form 990) 2008

Schedule D (Form 990) 2008 TX C1	riminal Defe	ense Lawyers	ED Institute	74-223		Page 2
Part III Organizations Mainta	ining Collection	ons of Art, Histo	orical Treasures, o	r Other Similar Ass	ets (contir	nued)
3 Using the organization's accessio that apply)	n and other record	_		gnificant use of its collec	tion items (ch	ieck all
a Public exhibition		\vdash	or exchange programs			
b Scholarly research		e [Other				
c Preservation for future genera						
4 Provide a description of the organ Part XIV					ın	
5 During the year, did the organizat assets to be sold to raise funds ra	ion solicit or recei ather than to be m	ve donations of art, aintained as part of	nistorical treasures, or the organization's colle	otner similar ection?	Yes	No
Part IV Trust, Escrow and Cu IV, line 9, or reported	stodial Arrano	ements Comple	ete if organization	answered 'Yes' to	Form 990, I	Part
1 a Is the organization an agent, trust included on Form 990, Part X?				er assets not	Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and co	mplete the following	g table			
					Amount	
c Beginning balance				1c		
d Additions during the year				1d		
 Distributions during the year 				1e		
f Ending balance				1f		
2a Did the organization include an ai	mount on Form 99	0, Part X, line 21?			Yes	No
b if 'Yes,' explain the arrangement	ın Part XIV					
Part V Endowment Funds Co	mplete if orgar	nization answere				
	(a) Current year	(b) Prior year			(e) Four ye	ears back
1 a Beginning of year balance		/4 /	1 1 1 1	* * * *	* , ~	
b Contributions		¥,) (A #			
c Investment earnings or losses		<u> </u>		è		****
d Grants or scholarships		923) · (& **)	, }	1,	11/1
 Other expenditures for facilities and programs 	· · · · · · · · · · · · · · · · · · ·					
f Administrative expenses	·		(X.) } &			
g End of year balance	·		\$?>		<u> </u>	
2 Provide the estimated percentage	of the year end b	alance held as				
a Board designated or quasi-endow	ment -	8				
b Permanent endowment	%					
c Term endowment ►	%					
3a Are there endowment funds not in organization by.	the possession o	f the organization th	nat are held and admini	stered for the	Yes	No
(i) unrelated organizations					3a(i)	
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(ii), are the related or	raanizations listed	as required on Sch	nedule R2		3b	
4 Describe in Part XIV the intended					1.02 1	
Part VI Investments—Land, B				line 10		
Description of investment		Cost or other basis	(b) Cost or other	(c) Depreciation	(d) Book	Value
Description of investment	(a)	(investment)	basis (other)	(a) Depresions		
1 a Land						
b Buildings						
c Leasehold improvements	. 🗀					
d Equipment			40,624.	31,072.		9,552.
e Other			7,999.	6,239.		1,760.
Total. Add lines 1a-1e (Column (d) sho	uld equal Form 99	0, Part X, column (i	B), line 10(c))	►	1	1,312.
ВАА				Sche	dule D (Form	990) 2008

AS AMENDED

Part VII Investments-Other Securities See Fo	orm 990, Part X, line	12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990 Part X, col (B) line 12) ►		
Part VIII Investments-Program Related (See I	orm 990, Part X, lin	e 13)
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(4) 2001. 101.00	Cost or end-of-year market value
Total. Column (b)(should equal Form 990, Part X, Col (B) line 13)		> &
Part IX Other Assets (See Form 990, Part X,	line 15)	
(a) De	scription	(b) Book value
	· · · · · · · · · · · · · · · · · · ·	
Total. Column (b) Total (should equal Form 990, Part X, col	(B) line 15)	•
Part X Other Liabilities (See Form 990, Part		
(a) Description of Liability	(b) Amount	<u> </u>
Federal Income Taxes	(S) / arroanc	-
Crisis relief fund	0	-
Due to TCDLA	46,879	
	40,879	- -1
Real estate taxes payable		'
	- 	-
		-
		-
		-
		-
		-
		4
(-)	46,879	
In Part XIV, provide the text of the footnote to the organization	in's financial statements th	nat reports the organization's liability for uncertain tax

Schedule D (Form 990) 2008 TX Criminal Defense Lawyers ED Institute

Schedule D (Form 990) 2008
AS AMENDED

74-2233987

Page 3

BAA

		-2233961	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	·	805,007.
2	Total expenses (Form 990, Part IX, column (A), line 25)		191,756.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		613,251.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		 .
9	Total adjustments (net) Add lines 4-8		
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9		613,251.
Pa	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	1 1	
1	Total revenue, gains, and other support per audited financial statements	1	143,534.
	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
	a Net unrealized gains on investments		
	Donated services and use of facilities 2b		
	Recoveries of prior year grants		
•	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d		
	Subtract line 2e from line 1	3	143 <u>,5</u> 34.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
•	a Investments expenses not included on Form 990, Part VIII, line 7b		
1	Other (Describe in Part XIV) 4b 661, 473.		
•	Add lines 4a and 4b	4c	661,473.
	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	805,007.
Pai	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
1	Total expenses and losses per audited financial statements	1	191,756.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
á	Donated services and use of facilities 2a		
ı	Prior year adjustments 2b	ĺ	
	Losses reported on Form 990, Part IX, line 25	ř.	
	d Other (Describe in Part XIV)		
	e Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	191,756.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total expenses Add lines 3 and 4c (This should equal Form 990, Part I, line 18.)	5	191,756.
	t XIV Supplemental Information		
line 4	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 4, Part XI, lines 2d and 4b, and Part XIII, lines 2d and 4b XII Line 4b Unusual or infrequent item: Gain on sale of fixed As		; Part V,
-			

SCHEDULE I (Form 990)		ট	ants and Oth Governmen	Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.	o Organization als in the U.S.	S,		2008 No 1545-0047
Department of the Treasury Internal Revenue Service		► Comple	ete if the organizati	Complete if the organization answered 'Yes,' on Form 990, Part IV, lines 21 or 22.Attatch to Form 990.	orm 990, Part IV, lines).	21 or 22.	. 1	Open to Public Inspection
Name of the organization TX Criminal De	Defense Lawvers ED I	Institute	a				Employer identification number 74-2233987	ation number
Part General Ir	ion on Grants a	d Assista	ance					
1 Does the organize the selection crite Selection crite Describe in Part I	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant finds in the United States.	tantiate the rr assistance	amount of the gran	ts or assistance, the grain finds in the United St	ntees' eligibility for the	grants or assistance,	and	X Yes No
Part II Grants an 990, Part	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	sovernme ent that re	ering and Organ	A Organizations in the United States. Complete if the organization answered 'Yes' on F more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	ed States. Comple his box if no one r	te if the organizat ecipient received	ion answered 'Y more than \$5,00	es' on Form 00. Use
1 (a) Name and address of organization or government	-	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Texas Criminal Defense 1717 W 6th Street Austin TX 78703	La 7	4-1697078	501(c)(6)	68,629.		(1010)		Scholarships
2 Enter total number	Enter total number of section 501(c)(3) and government organizations	vernment or	ganizations					
BAA For Privacy Act	BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.	Notice, see	the Instructions for	or Form 990.	TEEA3901 12/19/08	12/19/08	Schec	Schedule 1 (Form 990) 2008

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TX Criminal Defense Lawyers ED Institute

Schedule I (Form 990) 2008

SCHEDULE J (Form 990)

Compensation Information

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, line 23.

Open to Public Inspection

Employer identification number

74-2233987 TX Criminal Defense Lawyers ED Institute Part I Questions Regarding Compensation No Yes 1 a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Health or social club dues or initiation fees Tax indemnification and gross-up payments Personal services (e.g., maid, chauffeur, chef) Discretionary spending account b If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1 b Х Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 X Indicate which, if any, of the following organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Written employment contract Compensation committee Independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a: a Receive a severance payment or change of control payment? 4a 4Ь X b Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4 c Х c Participate in, or receive payment from, an equity-based compensation arrangement? If 'Yes' to any of 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a Х 5b X b Any related organization? If 'Yes' to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? 6a X 6b X b Any related organization? If 'Yes' to line 6a or 6b, describe in Part III. For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III Х

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

Schedule J (Form 990) 2008



Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If 'Yes,' describe in Part III

Page 2

Schedule J (Form 990) 2008 TX Criminal Defense Lawyers ED Institute

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Brea	akdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(i) Base compensation	uo	(ii) Bonus and incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-F7
	0	0	0.		0		0.	0.
Joseph Martinez	132	,162.	0	0	11,900.	27,43	171,500.	.0
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BAA				TEEA4102 08/1	80/11/08		Sche	Schedule J (Form 990) 2008

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ.
► To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number Name of the organization 74-2233987 TX Criminal Defense Lawyers ED Institute Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (b) Description of transaction (a) Name of disqualified person 1 Enter the amount of tax imposed on the organization managers or disgualified persons during the year under \$ Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a. (g) Written agreement? (f) Approved by board or committee? (a) Name of interested person and purpose (b) Loan to or from (c) Original (d) Balance due (e) In default? From Yes No Yes No Yes No ▶ \$ Total Grants or Assistance Benefitting Interested Persons. Part III To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 27. (b) Relationship between interested person and the organization (a) Name of interested person (c) Amount of grant or type of assistance **Business Transactions Involving Interested Persons.** To be completed by organizations that answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c. (c) Amount of transaction \$ (a) Name of interested person (b) Relationship between (d) Description of transaction (e) Sharing of interested person and the organization organization's revenues? No 0. N/A X H.F. Rich Hagen Board Member of related o N/A Х Lydia Clay-Jackson Board Member of related o 0. N/A X Bobby Mims Board Member of related o O.N/A X John Convery Board Member of related o 0.|N/AХ Greg Westfall Board Member of related o See Schedule L, Part IV (continued)

Schedule L (Form 990 or 990-EZ) 2008

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

Schedule O, Supplemental Information to Form 990

Schedule L. Pa	t IV (continued)
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. (a) Name of Interested Person	Chk If a Bus	(b) Relationship Between Interested	(c) Amount of Transaction	(d) Description of Transaction	Organ	(e) ring of lization's enues?
		Person and The Organization			Yes	No
Emmett Harris Betty Blackwell David Botsford Mark Daniel Michael Heiskell Clifton Holmes Robert Lerma Cynthia Orr		Board Member of related	0. 0. 0. 0. 0. 0.	N/A		X

SCHEDULE N (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization

Liquidation, Termination, Dissolution, or Significant Disposition of Assets

OMB No 1545-0047 2008

To be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 31 or 32; or Form 990-EZ, line 36.

Attach certified copies of any articles of dissolution, resolutions, or plans.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

74-2233987

Ϋ́	TX Criminal Defense Lawyers ED Institute	ers ED Ins	stitute			74-2233987	
Part	_	on, or Dissolu	ution. Complete thi	s part if the orgar. 1.	iization answered	Liquidation, Termination, or Dissolution. Complete this part if the organization answered 'Yes' to Form 990, Part IV, line 31, or Form 990-EZ, line 36. Use Schedule N-1 if additional space is needed.	، 990-EZ,
-	(a) Description of asset(s) distributed or transaction expenses paid	(b) Date of distribution	(c) Fair market value of asset(s) distributed or amount of transaction expenses	(d) Method of determining FMV for asset(s) distributed or transaction expenses	(e) EIN of recipient	(f) Name and address of recipient	(g) IRC Code section of recipient(s) (if tax-exempt) or type of entity
Ì							
İ							
18							
A							
W							
							Yes No
~ \	 Did or will any officer, director, trustee, or key employee of the organization: a Become a director or trustee of a successor or transferee organization? 	istee, or key emi	ployee of the organization	:uc			

a Become a director or trustee of a successor or transferee organization?

b Become an employee of, or independent contractor for, a successor or transferee organization?

c Become a direct or indirect owner of a successor or transferee organization?

d Receive, or become entitled to, compensation or other similar payments as a result of the organization's liquidation, termination, or dissolution? e If the organization answered 'Yes' to any of the questions in this line, provide the name of the person involved and explain in Part III

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

02/23/09 TEEA4701

Schedule N (Form 990 or 990-EZ) 2008

2 b 2c

ונט	a)	TX Crim		Lawyers ED Ins	Institute		74-2233987	Page 2
	Part Liquidation, Termination, or Dissolution (continued)	n, or Dissolut						
	Note. If the organization distributed all of its assets during the tax year, then Form 990, Part X, column (B) should equal -0	I all of its assets	during the tax year, the	en Form 990, Part X,	column (B) should equa	.1 -0		Yes No
	3 Did the organization distribute its assets in accordance with its governing instrument(s)? If 'No,' describe in Part III	ssets in accordai	nce with its governing i	nstrument(s)? If 'No,'	describe in Part III		m :	
	4a Did the organization request or receive a determination letter from EO Determinations that the organization's exempt status was terminated?	eive a determina	tion letter from EO Dete	erminations that the o	rganization's exempt s	atus was terminated?		
	b (If 'Yes', provide the date of the letter	ter ▶						
	5a is the organization required to notify the attorney general or other appropriate state official of its intent to dissolve Irguidate or terminate?	v the attorney of	neral or other appropri	ate state official of its	intent to dissolve light	data or terminate?	, t	1
	b if 'Yes', did the organization provide such notice?	such notice?			ייינטיי נס מוסססועס, יייאמ	משובי, כו נפורווווימופי	ם ת	
	6 Did the organization discharge or pay all liabilities in accordance with	av all liabilities II		ctato laws?			G 4	
		eyerrof bonds ou	tstanding diving the ve	, die. 5.	•		ם ל	
	of the contract contract of the Contract of th	no epinor nomes on	ווווח ליוווים לוווב אב				e/	
	Unionie organization discharge of delease tax-exempt bond ilabilities of 15 Yes ' describe in Bart III how the construction defended or etherwise	erease tax-exem	pt bond flabilities in ac	cordance with the Inte	in accordance with the Internal Revenue Code and state laws?	i state laws?	7.0	
ت	-	organization del	eased of officerwise set	ned mese nabilities.	I No, explain in Part II			
ا نــ	Fatt II Sale, Exchange, Disposition, or Other Transfer of I Yes' to Form 990, Part IV, line 32, or Form 990-EZ	ition, or Othe IV, line 32, or	Form 990-EZ, line	e than 25% of the e 36. Use Schedu	More than 25% of the Organization's Assets. Complete the incomplete the second of the Schedule N-1 if additional space is needed.	More than 25% of the Organization's Assets. Complete this part if the organization answered , line 36. Use Schedule N-1 if additional space is needed.	he organization	answered
	1 (a) Description of asset(s)	(b) Date of	(c) Fair market value of	(d) Method of	(e) EIN of recipient	(f) Name and address of recipient	ecipient	(g) IRC Code
'	distributed or transaction expenses paid	distribution	asset(s) distributed or amount of transaction expenses	determining FMV for asset(s) distributed or transaction expenses				section of recipient(s) (if tax-exempt) or type of entity
-,	Building 600 W 13th	01/27/09	492,000.	FMV	Not availab	William B Mange PC 3301 Northland Austin	TX 78731	Lawoffice
	Building 1717 Nueces	05/12/09	740,870.	FMV	Not availab	Bat City Awards Inc.	TX 78701	Corporation
I			l					
ı								
1								
S								
N								
E								
VC	2 Did or will any officer, director, trustee, or key employee of the organization	stee, or key empl	ovee of the organization					Yes No
E	æ	uccessor or trans	sferee organization?				2a	×
		indent contractor	for, a successor or trai	nsferee organization?			2 p	×
		of a successor or	transferee organizatio	٦٠ .			2c	
	d Receive, or become entitled to, compensation or other similar payments as a result of the organization's significant disposition of assets? e If the organization answered 'Yes' to any of the givestions in this line, provide the page of the pag	npensation or other or other	ner similar payments as stions in this line, provi	s a result of the organ de the name of the n	iization's significant dis	position of assets?	20	×
, w	BAA	איני וא ליום איני	אינים	TEEA4702 02	02/23/09		Schedule N (Form 990 or 990-EZ) 2008	or 990-EZ) 2008

Schedule N (Form 990 or 990-EZ) 2008

TEEA4702 02/23/09

Schedule !	He N (Form 990 or 990-EZ) 2008 TX Criminal Defense Lawyers ED Institute	e 74-2233987 Page 3
Part III	ule N (Form 990 or 990-EZ) 2008 TX Criminal Defense Lawyers ED Institute Supplemental Information. Complete this part to provide the information requ	ured by Part I, lines
	2e, 7c; or Part II, line 2e; and any additional information.	
	20, 70, 61 (41, 11, 11)	
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- <i></i> -		
		
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

OMB No 1545-0047

2008

Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Open to Public Inspection

	Employer identification number
TX Criminal Defense Lawyers ED Institute	74-2233987
Pt_VI-A, Line 7a The chairperson of the board appoints a nominat	ing
committee_who_reviews_people_as_potential_board	members
The committee presents a nominating slate and to	he
board_votes on the slate at the annual board me	eting.
Pt_VI-A, Line 10 The Form 990 is electronically provided to boar	d_members
for review and comments prior to executive directions	ctor
signing the return. Questions/comments are directions	ected
to the executive director for response.	
Pt_VI-B, Line 15 Texas Criminal Defense Lawyers Educational Institute de	oes not have any employees.
Pt_VI-C, Line 19 Organization makes governing documents available	to public upon request.
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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2008

OMB No 1545-0047

Open to Public Inspection

(F)
Direct controlling
entity Employer identification number 74-2233987 (E) End-of-year assets Attach to Form 990. To be completed by organizations that answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 See separate instructions. (**D)** Total income (C) Legal domicile (state or foreign country) (B) Primary activity Part II Identification of Related Tax-Exempt Organizations Criminal Defense Lawyers ED Institute (A) Name, address, and EIN of disregarded entity Part I Identification of Disregarded Entities Department of the Treasury Internal Revenue Service Name of the organization

(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	Exempt Code section Public charity status (if section 501(c)(3))	(F) Direct controlling entity
Texas Criminal Defense Lawyers Associataion 74-1697078 Provide education to criminal 1717 W. 6th Street, Austin TX 78703 defense professionals	Provide education to criminal defense professionals TX		501(c)(6)		ON
P. D					

Schedule R (Form 990) (2008)

TEEA5001 12/23/08

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

74-2233987

Schedule R (Form 990) 2008 TX Criminal Defense Lawyers ED Institute

Part III Identification of Related Organizations Taxable as a Partnership

(J) Genefal or managing paitner?	Yes No		•				
Code V-UBI amount in Box 20 of Schedule K-1	(Form 1065)						
(H) Disproportionate	Yes No	 					-
e Share of end-of-year [assets a							
(F) Share of total income							
(E) Predominant income (related, investment, unrelated)							
(C) (D) Legal Direct domicile controlling entity (state or foreign							
(C) Legal domicile (state or foreign	country)				_		
(B) Primary Activity							
(A) Name, address, and EIN of related organization						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	

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Part IV
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Part IV Identification of Related Organizations Taxable as	. 2	a Corporation or Trust	***				
(A) Name, address, and EIN of related organization	(B) Primary Activity	Activity Legal domicile Direct Type of entity (state or foreign controlling entity (C corp, S corp, counity)	(D) Direct ntrolling entity	Type of entity (C corp, S corp, or trust)	(F) (G) Share of end-of-year assets	(G) Share of end-of-year assets	(H) Percentage ownership
			1				
ВА		TEEA5002 12/23/08	80			Schedule R (Form 990) (2008)	990) (2008)

Schedule R (Form 990) (2008)

TEEA5003 07/02/08

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Page 3

74-2233987

Schedule R (Form 990) 2008 TX Criminal Defense Lawyers ED Institute

Schedule R (Form 990) 2008 TX Criminal Defense Lawyers ED Institute Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See Instructions regarding exclusion for certain investment partnerships

		(State or Foreign Country)	Are all partners section 501(c)(3) organizations?	Share of end-of-year assets	Disprópor- tionate allocations?	Code V-ÙBl amount in Box 20 of Schedule K-1 Form (1065)	General or managing partner?
			Yes No		Yes No		Yes No
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Form 8868	(Rev 4-2008) TX Criminal Defense Lawyers ED Inst	itute	74-2233987	Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month Extension, complete only	y Part II and check the	s box	► X
Note. Only	complete Part II if you have already been granted an automatic 3-month exte	ension on a previously	filed Form 8868	_
• If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page	1)		
Partill	Additional (Not Automatic) 3-Month Extension of Time. You		I and one copy.	
	Name of Exempt Organization	The Age of the Portra	Employer identification nu	mber
7				
Type or print	TX Criminal Defense Lawyers ED Institute		74-2233987	
J	Number, street, and room or suite number. If a P.O. box, see instructions		For IRS use only	
File by the extended			•	
due date for	1717 W. 6th Street, #315		27 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tracythme To bus 57%
return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions			加工的经验
instructions	Austin TX 78703			The Table
		Production of the first of savelling	Bar of Abras a served on the Police	of the wastern
	of return to be filed (File a separate application for each return)	Пг 1041 A	П-	5050
Form 99		Form 1041-A	—	m 6069
Form 99		Form 4720	∐ For	m 8870
X Form 99	~	Form 5227	·	
	ot complete Part II if you were not already granted an automatic 3-month ex	tension on a previou	ısly filed Form 8868.	
The boo	ks are in care of			
Telepho	ne No ► FAX No. ►			
 If the or 	panization does not have an office or place of business in the United States,	check this box .		. ► 🔲
• If this is	for a Group Return, enter the organization's four digit Group Exemption Nu $f m$	ber (GEN)	If ·	this is for the
vhole group	check this box 🕒 📗 If it is for part of the group, check this box 🕨 📃	and attach a list wit	h the names and EIN:	s of all
nembers th	e extension is for.			
4 reque	st an additional 3-month extension of time until Jul 15 , 20	10		
5 For ca	endar year , or other tax year beginning Sep 1 , 20	08, and ending A	ug 31 , 2	09.
			Change in accour	
	n detail why you need the extension All information necess			
comp	lete and accurate return is not yet available;	therefore,		
	tional time to file is hereby respectfully req			
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tental			
nonrefi	indable credits. See instructions.	ive tax, less ally	. 8a \$	O.
	pplication is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cr	edits and estimated t	C 45.53	
payme	nts made. Include any prior year overpayment allowed as a credit and any ar	mount paid previously		
with Fo	rm 8868	<u> </u>	8b \$	0.
c Balanc	Due. Subtract line 8b from line 8a Include your payment with this form, or,	if required, deposit		
with F I	D koupon or, if required, by using EFTPS (Electronic Federal Tax Payment S		8c \$	0.
	Signature and Verification			
der penalties or rrect, and com	f penury, I declare that I have examined this form, including accompanying schedules and statement liefs, and that I am authorized to prepare this form.	is, and to the best of my kno	owledge and belief, it is true	•
				1.10
gnature -	Title CY FF		Date	. [.]0
AA	FIFZ0502 04/16/08		Form 8868	3 (Rev 4-2008)

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Form **8868**(Rev April 2008)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

QMB No 1545-1709

Department of the Treasury Internal Revenue Service

If you are	e filing for an Automatic 3-Month	Extension, complete only Part I and check this bo	x			▶ X
		omatic) 3-Month Extension, complete only Part II				
Do not comp	plete Part II unless you have alrea	dy been granted an automatic 3-month extension of	on a previously file	d Form 88	58	
Part I	Automatic 3-Month Extens	sion of Time. Only submit original (no co	pies needed).			
						_
A corporation	n required to file Form 990-T and	requesting an automatic 6-month extension – chec	ck this box and coi	mplete Pari	I only	▶ 📗
All other corp income tax r	porations (including 1120-C filers) eturns	, partnerships, REMICS, and trusts must use Form	1 7004 to request a	n extensio	n of time to file	
returns noted the additiona Form 990-T	d below (6 months for a corporation of the corporation) (not automatic) 3-month extension	ectronically file Form 8868 if you want a 3-month a in required to file Form 990-T) However, you cann on or (2) you file Forms 990-BL, 6069, or 8870, gro completed and signed page 2 (Part II) of Form 88 -file for Charities & Nonprofits	ot file Form 8868 out returns, or a c	electronical	ly if (1) you wai	int
	Name of Exempt Organization			Employer id	entification number	
Type or						
print File by the	TX Criminal Defense Number, street, and room or suite number	Lawyers ED Institute		74-223	3987	
due date for filing your	1717 W. 6th Street,	#315				
return See instructions		# 5 ± 5 te For a foreign address, see instructions.				
	Austin	•		TX	78703	
Check type o	of return to be filed (file a separate	e application for each return):		<u></u>	70703	
Form 990	· · · · · · · · · · · · · · · · · · ·	Form 990-T (corporation)	☐ Form 472	PO.		
Form 990	 -	Form 990-T (section 401(a) or 408(a) trust)	Form 522			
X Form 990		Form 990-T (trust other than above)	Form 606			
Form 990	 	Form 1041-A	Form 887			
		. 				
Telephone	e No. ►	FAX No				. 🗀
		or place of business in the United States, check th				► ∐
		nization's four digit Group Exemption Number (GEI				•
		ne group, check this box 🕨 🔲 and attach a list	with the names ar	nd EINs of a	all members	
	sion will cover.					
•		s for a corporation required to file Form 990-T) ext				
_		the exempt organization return for the organization	n named above.			
_	ension is for the organization's ret	urn tor:				
	calendar year 20 or					
- X	tax year beginning Sep 1	, 20 <u>08</u> _, and ending <u>Aug 31</u> , 20	09			
2 If this ta	x year is for less than 12 months,	check reason: Initial return Final	return C	hange in a	ccounting period	d
	oplication is for Form 990-BL, 990 ndable credits See instructions	-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any	3a \$	··	0.
b If this armade. In	oplication is for Form 990-PF or 99 nclude any prior year overpaymen	90-T, enter any refundable credits and estimated to tallowed as a credit	ax payments	3ь\$		0.
deposit	with FTD coupon or, if required, by	a. Include your payment with this form, or, if requir y using EFTPS (Electronic Federal Tax Payment S	red, system).	,		•
See inst				3c \$		0.
Caution. If you payment instru		fund withdrawal with this Form 8868, see Form 84	153-EO and Form	8879-EO fo	or	

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 4-2008)

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