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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

Department of the Treasury

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

Open to Public Inspection

												
			lar year, o	r tax year beginn	ing		, 2009, and end	ng	D = 1	1		·
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<u>ٺ</u>		xempt statu			(insert no)	4947(a)(1)	or 527	-		_		
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K		organization	X Corpora	ation Trust	Association	Other ►	L Year of Forn	ation 199	Z M Stat	te of legal domi	cile OR	
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8			_	•		rning body (Part V	I, line 1b)		_	4		26
itle	5 T	otal number	of emplo	yees (Part V, line	e 2a).					5		5
ctiv				eers (estimate if	• •				<u>L</u>	6		0
٧	7a T	otal gross u	nrelated b	ousiness revenue	from Part V	III, column (C), lin	e 12		<u> </u>	7a	20,	398.
	b N	et unrelated	d business	taxable income	from Form 9	90-T, PEEEIN	/ED			7b	 	0.
					į.			!	Prior Year	Cı	urrent Ye	
•				its (Part VIII, line		NOV 15	2010 SS-					074.
enn				ue (Part VIII, line	٠,	•	2010 0	-			425,	973.
Revenue				art VIII, column (A							20	616. 398.
_	11 O	ther revenu	ie (Part Vi	ill, column (A), ill	nes 5, 6a, Bc	, 9c Ob and 11e Par Off Column	(4) 15, 13	-				061.
				ounts paid (Part I			(A) INTE 12)					500.
	1			members (Part I)								300.
	l	-				art IX, column (A)	lines 5.10)				425	038.
e O	l						, 111163 3-10)					
Expenses	ĺ			ng fees (Part IX, o								
х	1			nses (Part IX, col								
_			-	IX, column (A), lii								494.
		-				(, column (A), line	25)					032.
		evenue less	s expense	s Subtract line 1	8 from line 1	2						029.
Net Assets or Fund Balances								Beg	inning of Ye		nd of Ye	
3afat	20 T	otal assets	•	•					201,18			183.
A P	21 T	otal liabilitie	es (Part X,	, line 26)					228,63			605.
				ances Subtract I	ine 21 from I	ne 20			-27,45	51.	5,	<u>578.</u>
Pa	ırt II	1	ure Blo									
j		Under penalte	es of perjury,	, I declare that I have o	examined this re	turn, including accompa officer) is based on all in	nying schedules and formation of which p	statements, a	nd to the best o	f my knowledge	and belief,	, it is
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Or		employed), address, and		SW COLUMB			<u> </u>)-588800		2
_		ZIP + 4		RTLAND, OR					Phone no		25 - 161	
Ma	y the IR	S discuss th	nis return	with the preparer	shown abov	e? (see instruction	ns)			X ·	Yes	No

	990 (2009) OREGON TRIAL LAWYERS ASSOCIATION	93-0605471	_	Page 2
Pai	Minimum			
1	Briefly describe the organization's mission: PROMOTE THE LEGAL PROFESSION, THE RIGHTS OF INJURED PERSONS, TO SYSTEM, AND TO PROVIDE EDUCATION OPPORTUNITIES AND OTHER SERVICE.	IMPROVE THE	LEGAL BERS.	
2	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?		'es X	No
3	If 'Yes,' describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program service.	es?	res X	No
4	If 'Yes,' describe these changes on Schedule O. Describe the exempt purpose achievements for each of the organization's three largest program services by and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and expenses, and revenue, if any, for each program service reported.	/ evnenses Section 5	501(c)(3) he total	
42	(Code) (Expenses \$	(Revenue \$ATION OF LEGA	L)
			 	-
4 t	(Code:) (Expenses \$		0)
40	PUBLICATIONS AND NEWSLETTERS - PUBLICATION OF A QUARTERLY MAGAZ NEWSLETTER RELATING TO LEGAL PROFESSION.	(Revenue \$	LY)
	Doba and a second			
	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue 5)	\$)	
4e	Total program service expenses ► 0 .		 _	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	. 1		Х
2	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		X
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or 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		_X_
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		<u>X</u>
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	i	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI			
•	Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII</i>			
	Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII			
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX			
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	`		
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes, ' complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		X
12/	AWas the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13	ļ	X_
14a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		Х
15	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		X
	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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		<u> </u>

Form 990 (2009) OREGON TRIAL LAWYERS ASSOCIATION
Part IV | Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	_21_	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23_		<u>X</u>
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 lines 24b through 24d and complete Schedule K If 'No, 'go to line 25	24a		Х_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) 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	25 a	_	
t	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
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, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
ε	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		<u> X</u>
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		<u>x</u>
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		<u>x</u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31	<u> </u>	X_
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	ļ	X
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		X
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	<u> </u>	
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
RΔΔ		For	າ 990	(2009)

1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.	No
1. Enter the number reported in Pay 2 of form 1006, Applied Summers, and Transmitted of U.S.	
Information Returns. Enter -0- if not applicable	
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 a 5	
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file 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 X	
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a	Х
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?	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b	X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any-contributions that were not tax deductible? 6a X	
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible? 6b X	
7 Organizations that may receive deductible contributions under section 170(c).	
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	
d If 'Yes,' indicate the number of Forms 8282 filed during the year 7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	_
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	
9 Sponsoring organizations maintaining donor advised funds.	
a Did the organization make any taxable distributions under section 4966?	
b Did the organization make any distribution to a donor, donor advisor, or related person? 9b	
10 Section 501(c)(7) organizations. Enter	
a Initiation fees and capital contributions included on Part VIII, line 12	
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	
11 Section 501(c)(12) organizations. Enter:	
a Gross income from other members or shareholders.	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b	

Form 990 (2009)

Governing Body and Management

Section A.

Yes No

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

					-110		
1 a	Enter the number of voting members of the governing body	1a 26	1. 1				
b	Enter the number of voting members that are independent	1ы 26					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship or a business relation, director, trustee or key employee? SEE SCHEDULE 0	ationship with any other	2	Х			
3	Did the organization delegate control over management duties customarily performed by or un of officers, directors or trustees, or key employees to a management company or other person	nder the direct supervision	3		Х		
4	Did the organization make any significant changes to its organizational documents		4		X		
	since the prior Form 990 was filed?						
5	Did the organization become aware during the year of a material diversion of the organization	's assets?	5		<u>X</u>		
6	Does the organization have members or stockholders?		6	_X			
7 a	Does the organization have members, stockholders, or other persons who may elect one or m governing body?	nore members of the	7a	х			
b	Are any decisions of the governing body subject to approval by members, stockholders, or oth	ner persons?	7b		X		
8	Did the organization contemporaneously document the meetings held or written actions under the following.	taken during the year by					
а	The governing body?		8a	Х			
t	Each committee with authority to act on behalf of the governing body?		8b	Х			
9	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	9		<u> </u>		
	ction B. Policies (This Section B requests information about policies not enue Code)	required by the Interna	al				
				Yes	No		
10 a	Does the organization have local chapters, branches, or affiliates?		10 a		X		
t	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,	10 b				
11	Has the organization provided a copy of this Form 990 to all members of its governing body be	efore filing the form?	11		X		
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O							
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13							
ŀ	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	that could give rise	12b	X			
c	Does the organization regularly and consistently monitor and enforce compliance with the polished use of the SEE SCHEDULE 0.	cy? If 'Yes,' describe in	12 c	Х			
13	Does the organization have a written whistleblower policy?		13	X			
14	Does the organization have a written document retention and destruction policy?		14	X	,,		
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	approval by independent ision?					
	a The organization's CEO, Executive Director, or top management official SEE SCHEDULE	E 0	15 a	X			
t	Other officers of key employees of the organization SEE SCHEDULE O		15b	X	<u></u>		
	If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	arrangement with a taxable	16 a		X		
k	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	ction C. Disclosures			·			
17	List the states with which a copy of this Form 990 is required to be filed ►OR						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and inspection. Indicate how you make these available. Check all that apply.	d 990-T (501(c)(3)s only) ava	ılable	for pu	blic		
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how) the organization makes its governing docum statements available to the public SEE SCHEDULE O	ents, conflict of interest police	y, and	l finan	cıal		
•		<u> </u>					

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

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

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

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

Check this box if the organization did	not compens	ate ar	пу с	urrei	nt o	fficer,	dıre	ctor, or trustee		
(A)	(B)			((-			(D)	(E)	(F)
Name and Title	Average hours					hat app		Reportable compensation from	Reportable compensation from	Estimated amount of other
•	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
DANA SULLIVAN										
PRESIDENT	0.1	X	_	X			<u>.</u>	0.	0.	0.
TOM D'AMORE										
PRESIDENT ELECT	0.1	X		X		<u> </u>		0.	0.	0.
MICHAEL WISE										
SEC./TREASURER	0.1	X		X				0.	0.	0.
BRIAN DRETKE						1				
PRLMNT DIST 2	0.1	X	_			ļ	_	0.	0.	0.
DON JACOBS							İ			
IMMD. PAST PRES	0.1	X		<u> </u>				0.	0.	0.
MARTY ALVEY			ļ	1						
GOVERNOR DIST 1	0.1	X						0.	0.	0.
MIKE GREENE			İ						·	
GOVERNOR DIST 1	0.1	X						0.	0.	0.
KELLY ANDERSEN				1		1				
GOVERNOR DIST 2	0.1	X	<u> </u>	<u> </u>		ļ	_	0.	0.	0.
BETH CREIGHTON		i	1				İ			
GOVERNOR DIST 3	0.1	X		<u> </u>	<u> </u>	ļ	<u> </u>	0.	0.	0.
NEIL JACKSON										_
GOVERNOR DIST 3	0.1	X	ļ	<u> </u>	<u> </u>	ļ		0.	0.	0.
LARA JOHNSON										_
GOVERNOR DIST 4	0.1	X	<u> </u>			ļ	_	0.	0.	0.
TINA STUPASKY										_
GOVERNOR DIST 4	0.1	X			_	<u> </u>	<u> </u>	0.	_0.	0.
VANCE DAY										_
GOVERNOR DIST 5	0.1	X	<u> </u>		ļ			0.	0.	0.
SONYA FISCHER		ŀ								_
GOVERNOR DIST 5	0.1	X	<u> </u>			ļ	<u> </u>	0.	0.	0.
ROB BEATTY-WALTERS		1				1				
GOV. AT LARGE	0.1	X						0.	0.	0.
RICK LUNDBLADE					1					
GOV. AT LARGE	0.1	X			$oxed{oxed}$			0.	0.	0.
LIZ MCKANNA									1	
GOV. AT LARGE	0.1	X		L				0.	0.	0.
RAA			TFF.	10107	1 1	1/10/09				Form 990 (2009)

[Fait VII Section A. Officers, Directors, 11us		ve A				.cs,	, all					<u>)//()</u>
(A)	(B) Average	Posi	tion (obacı		hat ai	naka	(D)	, (E)		(F)	
Name and Title						-		Reportable compensation from	Reportable compensation from	amou	timated nt of oth	ner
	nours per week	r diri	nstut.	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	fro	ensation the	
		dual	ition	"	mg	st co	er,			orga and	nization related	ì
		trus	al tru		уее	mpe				orga	nızatıon	s
		l ee	ıste			nsa						
			"			e d						
STEPHEN HENDRICKS	 	┢─	_			Н						
GOV. AT LARGE	0.1	X						0.	0.			0.
LESLIE O'LEARY	0.1	*	-	\vdash		\vdash		<u> </u>	···			
GOV. AT LARGE	0.1	Х			İ		ŀ	0.	0.			0.
SHELLEY RUSSELL			-									
GOV. AT LARGE	0.1	X						0.	0.			0.
SCOTT SHORR	ļ											
GOV. AT LARGE	0.1	Х			ļ			0.	0.			0.
DAVID SUGERMAN												
GOV. AT LARGE	0.1	X						0.	0.	_		0.
KIM TUCKER												•
GOV. AT LARGE	0.1	X						0.	0.			0.
TIM WILLIAMS												
GOV. AT LARGE	0.1	X				<u> </u>		0.	0.			0.
KATHRYN CLARKE												
GOVERNOR AAJ	0.1	X			ļ	_	<u> </u>	0.	0.			0.
HALA GORES					1							
DELEGATE AAJ	0.1	X	<u> </u>			ļ	_	0.	0.			0.
ELIZABETH WELCH				ļ								_
NEW LAWYER GOV.	0.1	X	<u> </u>	_	_		<u> </u>	0.	0.			0.
ELIZABETH BERNARD		İ		١	١			104 600			10 -	700
EXECUTIVE DIREC	40	-		X	X	-	╁	124,600.	0.		19,7	100.
			l							1		
		╁	├—	-	╁	╁	-					
		ł				ł						
1b Total		J	L			<u>. </u>	▶	124,600.	0.		19,	700.
Total number of individuals (including but not limited	to the	e lis	ted	aho	vel	who	rec		l			
from the organization • 1	2 (0 1100	, ,,,	, lou	ubo	,,,	*****	, , 00	orroa maro aran q	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
non the organization								· · · · · · · · · · · · · · · · · · ·	~		Yes	No
3 Did the organization list any former officer, director	or tructi	ا مد	(0)	ണ്ട	love		or his	nheet compensate	d employee			
on line 1a? If 'Yes,' complete Schedule J for such ii	oi uusi ndividua	86, r 	Су	emp	lloye	:e, u	n ini	griest compensate	d employee	3		X
4 For any individual listed on line 1a, is the sum of rei	portable	con	nper	nsat	ion :	and	othe	er compensation fr	om			
the organization and related organizations greater the individual	han \$15	0,00	0?	lf 'Y	es' d	comp	plete	e Schedule J for s	ıch	. 4		X
W. 4. () = 5.5.												<u> </u>
5 Did any person listed on line 1a receive or accrue or rendered to the organization? If 'Yes,' complete Sci	ompens hedule .	atior <i>I for</i>	זור suc	om a h pe	any i Prsoi	unre n	late	d organization for	services	5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest compensat	ed inde	pend	lent	con	trac	tors	that	t received more th	an \$100,000 of			
compensation from the organization									- 			.
(A)								(E),		C)	
Name and business address	S\$				_			Description	of Services	Compe	ensauc	חנ
												
		_						 				
	-							 				
2 Total number of independent contractors (including	but not	lımıt	ted f	to th	ose	liste	ed a	bove) who receive	d more than	····		
\$100,000 in compensation from the organization	_	, 111	'									

	t VIII Statement of Revenue		T		r
+	.	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contribns included in lins la-lf \$ h Total. Add lines la-lf Business Code 541900 b CONTINUING EDUCATION 611600 c CONFERENCES AND EVENTS 611600	400,074. 251,533. 78,684. 54,252.	251,533. 78,684. 54,252.		
GRAM SERVI	d SPONSORSHIPS 900099 e OTHER 900099 f All other program service revenue.	36,000. 5,504.	36,000. 5,504.		
8	g Total. Add lines 2a-2f ▶	425,973.			
	 Investment income (including dividends, interest and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties 	616.			616.
	(i) Real (ii) Personal 6a Gross Rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19		`		
	b Less. direct expenses c Net income or (loss) from gaming activities	•			
	10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory	-		,	
	Miscellaneous Revenue Business Code 11a PUBLICATION ADVERTISING 511120 b	20,398.		20,398	
	d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions	20,398. 847,061.	425,973.	20,398	. 616.

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do t	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
	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	5,500.	скропосо	and desired the second	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	2,000.			· · · · · · · · · · · · · · · · · · ·
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				111111111111111111111111111111111111111
5	Compensation of current officers, directors, trustees, and key employees	124,600.	0.	0.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	207,829.			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	28,528.			
9	Other employee benefits.	34,464.			
10	Payroll taxes	29,617.			
11	Fees for services (non-employees)				
а	Management .	·			
b	Legal				<u> </u>
c	: Accounting	18,360.			
c	Lobbying	84,000.			(
€	Prof fundraising svcs See Part IV, In 17				
f	Investment management fees				<u> </u>
	Other	4,458.			
	Advertising and promotion	1,603.			
13	Office expenses	13,052.			
14	Information technology				
15	Royalties	26,215.			
16	Occupancy .	20,213.			
17 18	Travel Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	100,571.			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	3,454.			
23		3,070.		ļ	
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.)	+			
	PRINTING AND PUBLICATIONS	43,176.			
	UNCOLLECTIBLE PLEDGES	27,715.			
	POSTAGE AND SHIPPING	13,837.			
	TELEPHONE	13,499.		<u> </u>	
•	BANK FEES AND CHARGES	12,810.			
	All other expenses	17,674.			
_ 25	Total functional expenses Add lines 1 through 24f	814,032.	0.	0	0.
26	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 campaign and fundraising solicitation.				
BAA					Form 990 (2009)

		•	(A) Beginning of year		(B) End of year
1	1	Cash – non-interest-bearing.	84,963.	1	162,842.
	2	Savings and temporary cash investments	55,197.	2	55,663.
	3	Pledges and grants receivable, net	41,274.	3	9,291.
	4	Accounts receivable, net	11,057.	4	1,085.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1))			
,		and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
A S E T S	7	Notes and loans receivable, net		7	
Ě	8	Inventories for sale or use		8	
s	9	Prepaid expenses and deferred charges	2,766.	9	11,167.
	10 a	Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	<u>•</u>		
	b	Less. accumulated depreciation 10b 53,333	. 5,926.	10 c	13,135.
	11	Investments – publicly-traded securities		11	·
- 1	12	Investments – other securities See Part IV, line 11		12	
	13	Investments – program-related See Part IV, line 11		13	
- 1	14	Intangible assets		14	
- 1	15	Other assets. See Part IV, line 11		15	
	16	Total assets Add lines 1 through 15 (must equal line 34)	201,183.	16	253,183.
T	17	Accounts payable and accrued expenses	62,705.	17	56,154.
-	18	Grants payable		18	
	19	Deferred revenue	153,125.	19	129,034.
<u> </u>	20	Tax-exempt bond liabilities	· · · · · · · · · · · · · · · · · · ·	20	
B	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
۱ ۱		Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II			
T		of Schedule L		22	
E	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
1	25	Other liabilities. Complete Part X of Schedule D	12,804.	25	62,417.
	26	Total liabilities. Add lines 17 through 25	228,634.	26	247,605.
И		Organizations that follow SFAS 117, check here ► X and complete lines			
Ë		27 through 29 and lines 33 and 34.		1 1	
A S S	27	Unrestricted net assets	-27,451.	27	5,578.
₽	28	Temporarily restricted net assets		28	
Š	29	Permanently restricted net assets		29	
8		Organizations that do not follow SFAS 117, check here ▶ and complete	•		
- 1		lines 30 through 34.		Ŧ	
FUND	30	Capital stock or trust principal, or current funds		30	
- 1	31	Paid-in or capital surplus, or land, building, and equipment fund		31	
B A L	32	Retained earnings, endowment, accumulated income, or other funds		32	
ANCES	33	Total net assets or fund balances.	-27,451.	33	5,578.
Εİ	34	Total liabilities and net assets/fund balances.	201,183.	34	253,183.

orm 990 (20	09) OREGON	TRIAL	LAWYERS	ASSOCIATION	
01111:000 (20	03)01120011		211111	110000111111011	

93-0605471

Page 12

Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:			
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		Х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

BAA

Form 990 (2009)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below.

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

OMB No 1545-0047

2009

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Department of the Treasury Internal Revenue Service

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

• Section 501(c)(3) organizations: complete Parts I-A and B. Do not complete Part I-C.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

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

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

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

• S	ection 501(c)(4), (5), or (6) or	ganizations: Complete Part III.			
Name	of organization			Employer identificat	on number
ORE	GON TRIAL LAWYERS A	ASSOCIATION		93-0605473	
Par	t I-A Complete if the or	rganization is exempt under secti	on 501(c) or is a	section 527 organi	zation.
1	Provide a description of the o	organization's direct and indirect political car	mpaign activities in Pa	art IV.	
2	Political expenditures			► \$	
3	Volunteer hours				
Par	t I-B Complete if the or	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any excis	se tax incurred by the organization under se	ection 4955	► \$_	
2	Enter the amount of any excis	se tax incurred by organization managers u	ınder section 4955	► \$_	·
3		section 4955 tax, did it file Form 4720 for the			Yes No
4a	Was a correction made?				Yes No
b	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the o	rganization is exempt under secti	on 501(c) , excep	t section 501(c)(3)	
		pended by the filing organization for section			
2	Enter the amount of the filing function activities	organization's funds contributed to other o	rganizations for section	on 527 exempt ►\$	
3	Total of exempt function expeline 17b	enditures. Add lines 1 and 2. Enter here and	d on Form 1120-POL,	► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes X No
5	made For each organization	and employer identification number (EIN) o listed, enter the amount paid from the filing	a organization's funds	Also enter the amount	t of political
	or a political action committee	ere promptly and directly delivered to a sep e (PAC). If additional space is needed, pro	vide information in Pa	rt IV.	e segregated fund
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
-					
	•				
				· · · · · · · · · · · · · · · · · · ·	
		1	l l		l

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if		on is exempt under se		93-0603	
section 501(m is exempt under se	ction sor(c)(s) an	u illeu Foriii 5700 (e	nection under
A Check ► I If the filin	g organization belo	ongs to an affiliated group.			
B Check ► I If the filin	ig organization che	cked box A and 'limited con	trol' provisions apply.	<u>, , , ,</u>	
(The term	Limits on Lobby 'expenditures' me	ng Expenditures — ans amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	ires to influence pu	blic opinion (grass roots lob	bying)		
b Total lobbying expenditu	ires to influence a	egislative body (direct lobb)	/ing).		
c Total lobbying expenditu	ires (add lines 1a a	and 1b)			
d Other exempt purpose e	xpenditures .				
e Total exempt purpose ex	xpenditures (add lii	nes 1c and 1d).			
f Lobbying nontaxable am both columns.	ount. Enter the an	nount from the following tabl	le ın		
If the amount on line 1e, colu	ımn (a) or (b) is	The lobbying nontaxable ar	mount is		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,0	000,000	\$100,000 plus 15% of the excess	over \$500,000	1	
Over \$1,000,000 but not over \$	1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000.		
Over \$1,500,000 but not over \$	17,000,000	\$225,000 plus 5% of the excess o	over \$1,500,000.	1	
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable a	•				
h Subtract line 1g from lin					
i Subtract line 1f from line	e 1c If zero or less	, enter -0-			
j If there is an amount off section 4911 tax for this	ner than zero on ei year?	ther line 1h or line 1i, did th	e organization file Forr	n 4720 reporting	Yes No
(Sor	ne organizations tl	4-Year Averaging Period L nat made a section 501(h) el	Jnder Section 501(h) ection do not have to c	complete all of the five	
•		nat made a section 501(h) el ins below. See the instruction			
	Lob	bying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))				1	
f Grassroots lobbying expenditures				Cabatta 2.5	000 000 E7\ 0000
BAA				Schedule C (For	m 990 or 990-EZ) 2009

				MODOCINII ON	
Part II-B	Complete if t	he organizatio	n is exempt	under section 501(c)(3	3) and has NOT filed Form 5768
	(election und	er section 501	(h)).		

•	(a)		b)	
	Yes.	No	Am	ount	
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body? .	L				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities? If 'Yes,' describe in Part IV					
j Total. Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b if 'Yes,' enter the amount of any tax incurred under section 4912		l <u>L</u>			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
art III-A Complete if the organization is exempt under section 501(c)(4), section 5	501(c)(5	5), or se	ection !	501(c)(
				Yes	1
Were substantially all (90% or more) dues received nondeductible by members?			1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
5 D. H				1	Г

<u> </u>	Att D Complete if the executation is exempt under section E01(c)(A) section E01(c)(F) or section	i a	n F	:01(~	VET	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	_	3		<u> X</u>	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		<u>X</u>	_
	Were substantially an (30 % of more) dues received horideddolible by members:	-	∸⊣			_

Part III-B | Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	636,856.
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	_ 2a	145,094.
b Carryover from last year	2 b	
c Total	2 c	145,094.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	191,057.
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exces does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli expenditure next year?	is tical	0.
5 Taxable amount of lobbying and political expenditures (see instructions)	5	0.

Part IV Supplemental Information	
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I Also, complete this part for any additional information.	·C, line 5, a

•														
	 - :	 	 -		 	 	_	 . – – –	- - -	:		 ~ – –	 	
	 	 	 	-	 	 		 - - -	- - -		 -	 	 	
	 	 	 	- 	 	 		 				 	 	
	 	 	 	_	 - - -	 		 				 	 	

Schedule C (Form 990 or 990-EZ) 2009 OREGON TRIAL LAWYERS ASSOCIATION	<u>93-</u> 06054/1	Page 4
Part IV Supplemental Information (continued)		
	· · · · · · · · · · · · · · · · · · ·	
- 		
		-
		
		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions OMB No 1545-0047

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Employer Identification number

ORE	GON TRIAL LAWYERS ASSOCIATION		93-0605471
Par	tl Organizations Maintaining Dono	r Advised Funds or Other Similar	
	the organization answered 'Yes'		
	Total Control of	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and don funds are the organization's property, subject	to the organization's exclusive legal control	? Yes Mo
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private benefits.	he benefit of the donor or donor advisor or	funds may be for any other Yes No
Par	t II Conservation Easements Compl		
	Purpose(s) of conservation easements held by		163 to 1 6111 330, 1 dr. 17, line 7.
•	Preservation of land for public use (e.g., r		tion of an historically important land area
	Protection of natural habitat		tion of certified historic structure
	Preservation of open space		
2	• •	on held a qualified conservation contribution	n in the form of a conservation easement on the
			Held at the End of the Year
а	Total number of conservation easements		2a
Ŀ	Total acreage restricted by conservation easer	ments	2b
c	Number of conservation easements on a certif	ied historic structure included in (a)	2c
c	Number of conservation easements included in	n (c) acquired after 8/17/06	2 d
3	Number of conservation easements modified,	transferred, released, extinguished, or terr	ninated by the organization during the tax
	year ▶		
4	Number of states where property subject to co	nservation easement is located 🕨	
5	Does the organization have a written policy reand enforcement of the conservation easemer	garding the periodic monitoring, inspection it it holds?	handling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring the year ►		
,	Amount of expenses incurred in monitoring, in during the year ►		\$
8	Does each conservation easement reported or 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of	of section Yes No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote t conservation easements	orts conservation easements in its revenue the organization's financial statements the	e and expense statement, and balance sheet, and at describes the organization's accounting for
Pai	rt III Organizations Maintaining Collection Complete of the organization and	ections of Art, Historical Treasure swered 'Yes' to Form 990, Part IV	es, or Other Similar Assets line 8.
1 &	a If the organization elected, as permitted under treasures, or other similar assets held for pub the text of the footnote to its financial stateme	lic exhibition, education, or research in furt	tement and balance sheet works of art, historical herance of public service, provide, in Part XIV,
ł	b If the organization elected, as permitted under treasures, or other similar assets held for pub amounts relating to these items	SFAS 116, to report in its revenue statem lic exhibition, education, or research in furt	herance of public service, provide the following
	(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 a amounts required to be reported under SFAS	116 relating to these items.	ets for financial gain, provide the following
	a Revenues included in Form 990, Part VIII, line	1	►\$
١	b Assets included in Form 990, Part X		► \$

Schedule D (Form 990) 2009 OREGO	N TRIAL	LAWYERS ASSOCIA	ATION	93-060	5471 P	age 2
Part III Organizations Maintai	ning Colle	ections of Art, Hist	orical Treasures, c	or Other Similar As	sets (continui	ed)
3 Using the organization's acquisition items (check all that apply):	n accession			nat are a significant use	of its collection	
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e Other				
c Preservation for future genera 4 Provide a description of the organi		ections and evoluin how	they further the organiz	zation's evennt nurnoss	ı ın	
Part XIV.				·	11 1	
5 During the year, did the organizati assets to be sold to raise funds ra	on solicit or ther than to	receive donations of art be maintained as part o	, historical treasures, or f the organization's colle	other similar ection?		No
Part IV Escrow and Custodial 9, or reported an amou	Arrangen unt on For	nents Complete if om 990, Part X, line	organization answe 21.	ered 'Yes' to Form	990, Part IV, I	ine
1 a Is the organization an agent, truste included on Form 990, Part X?		•		er assets not	Yes	No
b If 'Yes,' explain the arrangement in	n Part XIV ai	nd complete the following	ng table.			
a Danmara hatara					Amount	
 c Beginning balance d Additions during the year 				1c		
J ,				1d		
Distributions during the year Ending balance .				1e 1f		
2a Did the organization include an am	nount on For	m 900 Part V line 212		<u> </u>	Yes	Ma
b if 'Yes,' explain the arrangement in		111 990, Fait A, IIIle 21'				No
Part V Endowment Funds Cor		roanization answe	red 'Yes' to Form 9	90 Part IV line 10)	
, and s paragraphic transfer of	(a) Current				(e) Four years ba	ack
1 a Beginning of year balance	(2) 5 4110111	744.	(c) / iie jeme naci	(4) :::::0)04:0 240:1	(0) 1001 30010 21	
b Contributions					-	*********
c Net Investment earnings, gains, and losses	·					
d Grants or scholarships						
e Other expenditures for facilities and programs					-	
f Administrative expenses						
g End of year balance					<u> </u>	
2 Provide the estimated percentage	of the year	end balance held as.				
a Board designated or quasi-endowr	ment 🟲	%				
b Permanent endowment ►	%					
c Term endowment ►	<u> </u>					
3a Are there endowment funds not in	the possess	ion of the organization	that are held and admin	istered for the		
organization by					_ 	No
(i) unrelated organizations(ii) related organizations					3a(i)	
b If 'Yes' to 3a(ii), are the related or	aonizotiono l	icted on required on Cal	hadula D2		3a(ii)	
4 Describe in Part XIV the intended	•	•			30	
Part VI Investments—Land, Bu				(line 10		
Description of investment	<u> </u>	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Valu	ıė
1 a Land		,	· · · · · · · · · · · · · · · · · · ·			
b Buildings						
c Leasehold improvements .						
d Equipment						
e Other			66,468.	53,333.	13,1	35.
Total. Add lines 1a through 1e (Column	(d) must equ	ıal Form 990, Part X, co	olumn (B), line 10(c))	•	13,1	ι35.
BAA				Sche	dule D (Form 990)	2009

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Schedule D (Form 990) 2009 OREGON TRIAL LAWY	ERS ASSOCIATION		93-0605471	Page :
Part VII Investments-Other Securities See F	orm 990, Part X, III	ne 12. N/A		
(a) Description of security or category(including name of security)	(b) Book value	Cost of	Method of valuation end-of-year market value	
Financial derivatives				
Closely-held equity interests .				
Other		· · · · · · · · · · · · · · · · · · ·		
	· 			
		<u> </u>		
	. <u>. </u>			
Total. (Column (b) must equal Form 990 Part X, col. (B) line 12.) ►				
Part VIII Investments-Program Related (See	Form 990, Part X,	line 13) N/A		
(a) Description of investment type	(b) Book value	(0) Method of valuation	
	 	Cost or	end-of-year market value	
				
	 			
				
		·		
		<u> </u>		
		<u> </u>		
	 			
Total. (Column (b) must equal Form 990, Part X, Col (B) line 13)			······································	······································
Part IX Other Assets (See Form 990, Part X,	line 15) N/A	<u> </u>		
	escription		(b) Book	value
(4)	Joen priori		(S) Book	vuiuc
				
	·	_ 		·
				
				
				
Total. (Column (b) must equal Form 990, Part X, col (B), III	ne 15)		•	
Part X Other Liabilities (See Form 990, Part				
(a) Description of Liability	(b) Amount		-	
Federal Income Taxes				
DUE TO AFFILIATE	62,41	7.		
,]		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	62,41	7.		
2. FIN 48 Footnote. In Part XIV, provide the text of the footr for uncertain tax positions under FIN 48.			that reports the organization's	liability

Schedule D (Form 990) 2009 OREGON TRIAL LAWYERS ASSOCIATION	93-0605	471 Page 4
Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statement		/A
1 Total revenue (Form 990, Part VIII,column (A), line 12)		· · · · · · · · · · · · · · · · · · ·
2 Total expenses (Form 990, Part IX, column (A), line 25)		
3 Excess or (deficit) for the year. Subtract line 2 from line 1		
4 Net unrealized gains (losses) on investments	<u> </u>	
5 Donated services and use of facilities	-	
6 Investment expenses	_	
7 Prior period adjustments	<u> </u>	
		
8 Other (Describe in Part XIV) 9. Total adjustments (not). Add lines 4 through 9	-	
9 Total adjustments (net). Add lines 4 through 8	· -	
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	n Dotum	NI / N
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	N/A
1 Total revenue, gains, and other support per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains on investments . 2a	_	
b Donated services and use of facilities 2b		
c Recoveries of prior year grants		
d Other (Describe in Part XIV)	1	
e Add lines 2a through 2d	2e	
3 Subtract line 2e from line 1	3	
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		
b Other (Describe in Part XIV)		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per I	Return	N/A
1 Total expenses and losses per audited financial statements	1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities 2a		
b Prior year adjustments 2b		
c Other losses	_	
d Other (Describe in Part XIV)	-	
	2e	
e Add lines 2a through 2d	3	
3 Subtract line 2e from line 1		
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investments expenses not included on Form 990, Part VIII, line 7b	 	
b Other (Describe in Part XIV).	- .1.	
c Add lines 4a and 4b	4c	
5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18.)	5	
Part XIV Supplemental Information		
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part line 4; Part X, line 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this information	IV, lines 1b part to provi	and 2b; Part V, ide any additional
·		
		·
BAA TEEA3304L 02/02/10	Sched	ule D (Form 990) 2009

ocitedale D	OHI 990) 2009 OREGON TRIAL HAWTERS ASSOCIATION	93-06054/1	Page 5
Part XIV	Supplemental Information (continued)		
•			
			
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		(4				OMB No 1545-0047
SCHEDULE 1 (Form 990)		Gov	ants and Other ernments and	Governments and Individuals in the United States	the United Sta	s, tes		2009
Department of the Treasury Internal Revenue Service		Complet	te if the organizatior	Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22. ➤ Attatch to Form 990.	m 990, Part IV, lines 21	or 22.		Open to Public Inspection
Name of the organization							Employer identification number	ition number
OREGON TRIAL LAWYERS ASSOCIATION	AWYERS ASSOCIA	ATION					93-06054 /1	7
Part General Ir	General Information on Grants and Assistance	ants and Assist	ance					
1 Does the organize the selection critering	ation maintain records	to substantiate the grants or assistance	amount of the grant: e?	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?	ntees' eligibility for the	grants or assistance,	and	X Yes No
Opecribe in Part	IV the organization's p	rocedures for monitor	oring the use of gran	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	ates SEE PART IV	AT IV		
Part II Grants an	d Other Assistan	ce to Governme	ents and Organi	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form	ed States. Comple	ete if the organiza	ation answered "	res' to Form
990, Part	IV, line 21 for any	recipient that r	eceived more th	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	this box if no one	recipient received	d more than \$5,0	00. Use ▼
רמון וי	Part IV alla Sciledale I-1 (10111 350) II additional space is necessar	UIII Jan II ann	שונוחוומו שממכ וש	nonoor				
1 (a) Name and address of organization or government	ess of organization nment	(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, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ASSOCIATION FOR JUSTICE	ION FOR JUSTICE			•				TO FURTHER
777_6TH STREET, NW, SUITE 200	W, SUITE 200				,			ASSOCIATIONS
WASHINGTON, DC 20001	1001	04-2114561 501(C)	501(C)(6)	5, 500.	0.	N/A	NONE	MISSION
 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	•						
! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							
	1 1 1 1							
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1							

2 Enter total number of section 501(c)(3) and government organizations
 3 Enter total number of other organizations
 BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule I (Form 990) 2009

Page 2 Grants and Other Assistance to Individuals in the United States. Complete of the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) of additional space is needed. (f) Description of non-cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. 93-0605471 (e) Method of valuation (book, FMV, appraisal, other) MEMBERS OF THE BOARD ARE ALSO MEMBERS OF THE NATIONAL ASSOCIATION TO WHICH THE (d) Amount of non-cash assistance CONTRIBUTION WAS MADE AND ARE AWARE OF WHAT FUNDS ARE BEING USED FOR. PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED (c) Amount of cash grant OREGON TRIAL LAWYERS ASSOCIATION (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) 2009

Schedule | (Form 990) 2009

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SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No 1545-0047

2009

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
► Attach to Form 990.

Open to Public Inspection

Name of the organization OREGON TRIAL LAWYERS ASSOCIATION	Employer identification number 93-0605471
FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS	
DIRECTORS HAD A CO-COUNSEL RUSINESS DELATIONSHIP	
FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS	
REVIEWED BY THE EXECUTIVE DIRECTOR, BUDGET COMMITTEE AND EXECUT	TIVE COMMITTEE
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMI	
CONFLICT OF INTEREST POLICY WAS RECENTLY ENACTED AND BOARD MEMB	
BE MONITORED AND REVIEWED ON AN ANNUAL BASIS.	DER DISCHOSORES WITH
	FOR CEO EVEC DID OR TOP MC
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS	
REVIEW AND APPROVAL BY EXECUTIVE COMMITTEE USING VARIOUS FACTOR	
COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN COMP	
PERFORMANCE EVALUATIONS, COST OF LIVING INCREASES AND OTHER FAC	CIORS AS CONSIDERED
RELEVANT.	
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS	
REVIEW AND APPROVAL BY EXECUTIVE COMMITTEE USING VARIOUS FACTOR	
COMPARABLE COMPENSATION FOR SIMILARLY QUALIFIED PERSONS IN COMP	
PERFORMANCE EVALUATIONS, COST OF LIVING INCREASES AND OTHER FAC	CTORS AS CONSIDERED
RELEVANT.	
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV	/AILABLE
MAILED UPON REQUEST	

TEEA4901L 07/17/09

Schedule O (Form 990) 2009		Page 2
Name of the organization OREGON TRIAL LAWYERS ASSOCIATION	Employer Identification number 93-0605471	
ONDON INITIAL MANIAND ADDOCIATION	33 00031/1	
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	·	
		
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

2009

OMB No 1545-0047

Open to Public Inspection

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.
 Attach to Form 990.

Schedule R (Form 990) (2009) (F)
Direct controlling
entity (F)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related tax-exempt organizations during the tax year.) N/A Employer identification number 93-0605471 (f) Public charity status (if section 501(c)(3)) (E) End-of-year assets σ Part I Identification of Disregarded Entities (Complete If the organization answered 'Yes' to Form 990, Part IV, line 33.) (D) Exempt Code section (**D)** Total income 501(C)(3) TEEA5001L 02/05/10 Legal domicile (state or foreign country) (C) Legal domicile (state or foreign country) S. SYSTEM EDUCATE PUBLIC ABOUT CIVIL BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. (B) Primary activity (B) Primary activity JUSTICE (A) Name, address, and EIN of related organization (A)
Name, address, and EIN of disregarded entity OREGON TRIAL LAWYERS ASSOCIATION OREGON JURY PROJECT FOUNDATION #400 1120 SW TAYLOR ST., PORTLAND, OR 97205 93-1270935 Name of the organization Part II

Page 2

93-0605471

Schedule R (Form 990) 2009 OREGON TRIAL LAWYERS ASSOCIATION

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34

Part III Identification of Related Organizations treated as a partnership during the tax year.)

signed organizations treated as a particular	שניני מו לייני ווייני מי מי מי מי מי מי מי מי מי מי מי מי מי		(G)	(5)	9		£	e	5
(B) (C) (D) (E) (F) (U) (C) (D) (D) (E) (F) (D) (C) (D) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(E) Predominant	(E) Predominant	(E) Predominant	Share of total income		Share of end-of-year	Dispropor-	Code V-UBI	General
domissile controlling entity income (related, state or	income (related, unrelated, excluded	income (related, unrelated, excluded	income (related, unrelated, excluded		,-	assets	tionate allocations?	amount in box 20 of Schedule	managing partner?
foreign from tax under country) sections 512-514)	foreign from tax under country) sections 512-514)	from tax under sections 512-514)	from tax under sections 512-514)				Yes No	(Form 1065)	Yes No
		-							
					_				

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV,	Taxable as a Co	rporation or T	rust (Comple corporation or	te if the organ trust during t	ization answered "	Yes' to Form 990,	art IV,
Name, address, and EIN of related organization	(B) Primary Activity	(C) Legal domicile (state or foreign country)	(b) Direct controlling entity	(E) Type of entity (C corp, S corp, or trust)	(F) Share of total income	(B) (C) (D) (D) (E) Type of entity (C corp, S corp, country) (C corp, S) (C corp, S corp, country) (C corp, S) (C corp, S corp, country) (C corp, S corp, country) (C corp, S corp, S corp, country) (C corp, S corp,	(H) Percentage ownership
0 <u>TLA-PAC</u> 1020 SW TAYLOR, SUITE 400 PORTLAND, OR 97205 93-6088690	POLITICAL ACTION COMMITTEE	SQ.	N/A	PAC	0.	0.	
BAA		TEEA5002L 02/05/10	1/05/10			Schedule R (Form 990) (2009)	(2003) (366

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Schedule R (Form 990) 2009 OREGON TRIAL LAWYERS ASSOCIATION

Part V Transactions With Related Organizations (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

Note Complete line 1 if any entity is listed in Darte II III or IV of this schedule			Yes	å
			ببسيد	ı
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		<u>e</u>	7	×
b Gift. grant. or capital contribution to other organization(s)		1 b	_	×I
e-Cit grant or cantal contribution from other organization(s)		ار	_	×
L control of control of the Abraham Control o		PL	_	×
a Loans of loan guarantees to of 101 of 101 of 103		9		l×
e Loans of Ioan guarantees by outer organization(s)			<u> </u> 	:l
f Sale of assets to other organization(s)		11	_	×
		Jg	^	×
g clickaco of assets non order organization(s)		٦ ۲	_	⋈
		=		>
i Lease of facilities, equipment, or other assets to other organization(s)		=	,	∢
j Lease of facilities, equipment, or other assets from other organization(s)		<u>-</u> ;		×∣⊳
k Performance of services or membership or fundraising solicitations for other organization(s)		¥	1	داه
I Performance of services or membership or fundraising solicitations by other organization(s)		=	7	×I
m Sharing of facilities, equipment, mailing lists, or other assets		T E	^	×
n Sharing of baid employees		ין	$\stackrel{\sim}{-}$	×
			· 	:
o Reimbursement paid to other organization for expenses		9	~ ·	×I:
p Reimbursement paid by other organization for expenses		٩	~	×
		141	·····	
q Other transfer of cash or property to other organization(s)		19	^	×
r Other transfer of cash or property from other organization(s)		11	_	×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	action thresholds.	:		
Name of ot	(B) Transaction A type (a-r)	(C) Amount involved	volved	
(1)				
(2)				ĺ
(4)				
TEEA5003L 02/05/10	Schedule R (Form 990) (2009)	(Form 9	30) (200	6

Schedule R (Form 990) 2009 OREGON TRIAL LAWYERS ASSOCIATION

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

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.

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K·1 Form (1065)	(H) General or managing partner?	al or ging er?
			Yes No		Yes No	,	Yes	2
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ВАА		TEEA5004L 02/05/10				Schedule R (Form 990) (2009)	л 990) ((5005)

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

File a separate application for each return.

internal Revenue	Service	i no a sepan	ate application for ea				
•, If you are	filing for an Automatic 3-Month	Extension, comple	te only Part I and che	ck this box			► X
If you are	filing for an Additional (Not Auto	omatic) 3-Month Ex	tension, complete or	nly Part II (on pa	ge 2 of this f	orm).	
Do not comp	<i>lete Part II unless</i> you have alrea	dy been granted a	automatic 3-month	extension on a p	previously file	ed Form 8868.	
Part I	Nutomatic 3-Month Extens	sion of Time. C	only submit origin	nal (no copie	s needed)	•	
A corporation	required to file Form 990-T and	requesting an auto	matic 6-month extens	sion – check thi	s box and co	mplete Part I onl	y. ► 📋
All other corp	orations (including 1120-C filers),	partnerships, REi	MICS, and trusts mus	t use Form 7004	to request a	an extension of til	ne to file
rorm 990-1.	ing <i>(e-file)</i> . Generally, you can el below (6 months for a corporatio (not automatic) 3-month extensi nstead, you must submit the full t <i>www irs gov/efile</i> and click on a	/ completed and si	gned page 2 (Part II)	3-month autom r, you cannot file or 8870, group re of Form 8868. I	atic extension e Form 8868 eturns, or a c For more deta	n of time to file o electronically if (composite or cons ails on the electro	ne of the I) you want solidated onic filing of
	Name of Exempt Organization					Employer identificat	ion number
Type or print	OREGON TRIAL LAWYERS	ASSOCIATIO	N			 93-0605471	
File by the due date for filing your	Number, street, and room or suite number						
return See	1020 S.W. TAYLOR STR						
instructions	City, town or post office, state, and ZIP co	de For a foreign addres	s, see instructions				
Charlet house	PORTLAND, OR 97205		ale waterways		· ·····		
X Form 990	f return to be filed (file a separat ר	Form 990-T (co	•		☐ Form 472	γ Λ	
Form 990	<u></u>	-	ction 401(a) or 408(a)	trust)	Form 522		
Form 990		-	st other than above)	austy	Form 606		
Form 990	ļ .	Form 1041-A	,		Form 887		
Telephone If the orga If this is for check this	No. ► 503-223-5587 anization does not have an office or a Group Return, enter the organists box ► If it is for part of the control of t	or place of busine	it Group Exemption N	lumber (GEN)	If		
	sion will cover.			. 000 T)			
until _ The ext	at an automatic 3-month (6 month $8/15$, 20 10 _ , to file ension is for the organization's recallendar year 20 09 or	the exempt organ	•	-			
_	tax year beginning	. 20	and endina	. 20			
	x year is for less than 12 months		Initial return	Final retu		Change in accoun	ting period
3a If this a nonrefu	oplication is for Form 990-BL, 990 ndable credits. See instructions		or 6069, enter the te			3a \$	0.
b If this a made. I	oplication is for Form 990-PF or 9 nclude any prior year overpayme	990-T, enter any re nt allowed as a cr	fundable credits and edit	estimated tax p		3ь\$	0.
deposit	Due. Subtract line 3b from line 3 with FTD coupon or, if required, tructions	Ba. Include your pa by using EFTPS (I	Electronic Federal Ta	, or, if required, x Payment Syst	em).	3c \$	0.
Caution, If yo	u are going to make an electroni	c fund withdrawal	with this Form 8868,	see Form 8453-	EO and Form	8879-EO for	

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

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-	re filing for an Additional (Not Automatic) 3-Month Extension, complete only Pa		► X
Note. Only	complete Part II if you have already been granted an automatic 3-month extensi	ion on a previously filed Forr	n 8868.
	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only f	file the original (no cop	nes needed)
	Name of Exempt Organization	Employer Id	entification number
Type or			
print	OREGON TRIAL LAWYERS ASSOCIATION	93-060	5471
File by the	Number, street, and room or suite number. If a P.O. box, see instructions	For IRS use	only
extended due date for		1	
filing the return See	1020 S.W. TAYLOR STREET #400		
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions		
	PORTLAND, OR 97205		
	of return to be filed (File a separate application for each return)	Π	□- coco
X Form 9		Form 1041-A	Form 6069
Form 9		Form 4720	Form 8870
Form 9	· · · · · · · · · · · · · · · · · · ·	Form 5227	0000
	not complete Part II if you were not already granted an automatic 3-month exten oks are in care of ► MANAGEMENT		orm 8868.
	one No. ► 503-223-5587 FAX No ►		
	rganization does not have an office or place of business in the United States, ch		▶ □
	s for a Group Return, enter the organization's four digit Group Exemption Number		. If this is for the
	p, check this box ► If it is for part of the group, check this box ► If a	· · · —	
	ne extension is for	and detecting the man are main	and Line of an
	lest an additional 3-month extension of time until $11/15$, 20 10)	
	alendar year 2009 , or other tax year beginning , 20		, 20
6 If this	tax year is for less than 12 months, check reason I Initial return	Final return Chang	ge in accounting period
7 State	in detail why you need the extension WE RESPECTFULLY REQUES	T ADDITIONAL TIME	IN ORDER TO
	AIN ALL THE INFORMATION NECESSARY TO FILE A COMPL	ETE AND ACCURATE	RETURN.
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative fundable credits. See instructions	ve tax, less any 8	a \$
b If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cred	dits and estimated tax	
paym	ents made Include any prior yéar overpayment allowed as a credit and any am Form 8868	ount paid previously	ь \$
c Balar with f	ice Due. Subtract line 8b from line 8a. Include your payment with this form, or, in TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	ıf required, deposit ystem) See instrs 8	c \$
	Signature and Verification		
Under penaltie correct, and co	s of perjury, I declare that I have examined this form, including accompanying schedules and statements omplete, and that I am authorized to prepare this form	s, and to the best of my knowledge a	nd belief, it is true,
Signature -	Title ► CPA		Date > 8/10/10
BAA	FIFZ0502L 03/11/09		Form 8868 (Rev 4-2009)