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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

Open to Public İnspection

A	For the	2009 calendar	year, or tax year beginning JUL 1, 2009 and ending	JUN 30, 2010	
В	Check if	Please C Nar	ne of organization	D Employer identific	cation number
	applicable	use IRS	•		
Γ	Addre	s label or ARK	ANSAS TRIAL LAWYERS ASSOCIATION		
Ē	Name chang	type	ng Business As	51-0	189104
Ē	Initial		nber and street (or P.O. box if mail is not delivered to street address) Room/si		
Ē	Termir	Specific 1 4 O	0 WEST MARKHAM, SUITE 307		376-2852
ř	ated Amend		or town, state or country, and ZIP + 4	G Gross receipts \$	614,982.
F	Ireturn Applic		TLE ROCK, AR 72201	H(a) Is this a group re	
\$	tion pendir		address of principal officer MATTHEW HASS	for affiliates?	Yes X No
7.0	j		EST MARKHAM, SUITE 307, LITTLE ROCK,		
Š	Tayey		501(c) (6) ◀ (insert no) 4947(a)(1) or 527		list (see instructions)
چ ار ال		e: HTTP:		H(c) Group exemption	
_		organization: X		ear of formation: 1976 N	
	Part I	Summary		out of formation 23 / of it	Totalo or logar dominolog 2222
SCANNED	, 1		the organization's mission or most significant activities ATLA SER	VES ITS MEMBE	RSHIP BY
48	호 '		G TRAINING, THROUGH CONTINUING LEGAL		
Ź	2		If the organization discontinued its operations or disposed of m		
X S	3		g members of the governing body (Part VI, line 1a)	3	34
S_{0}	3 4		pendent voting members of the governing body (Part VI, line 1b)	4	34
			employees (Part V, line 2a)	5	7
. :	6		volunteers (estimate if necessary)	6	0
)	7a		lated business revenue from Part VIII, column (C), line 12	7a	24,931.
<	h	=	isiness taxable income from Form 990-T, line 34	7b	<5,067.>
1-	-			Prior Year	Current Year
Ι.	. 8	Contributions ar	nd grants (Part VIII, line 1h)	127,261.	428,445.
}	9		revenue (Part VIII, line 2g)	156,671.	163,539.
91100710	10	=	me (Part VIII, column (A), lines 3, 4, and 7d)		680.
٥	11		Part VIII, column (A, lines 5,64-8c, 9e, 10c, and 11e)	420,685.	18,833.
			idd lines 8 through 11 (must equal Pair Vill Column (A), line 12)	704,617.	611,497.
-	13	Grants and simil	ar amounts paid (Part IX, column (A), lines 1-9)		
	14	Benefits paid to	or for members (Part Ik, Column &A) 2 ling A) n		
9			ompensation, employee benefits (Part IX, column (A), lines 5-10)	385,996.	284,305.
	15 16a b	Professional fun	draising fees (Part IX, cottom (A); (ine 11e) S	5,300.	
1	j b		expenses (Part IX, column (D), line 25)	,	·
Ú	j 17	Other expenses	(Part IX, column (A), lines 11a-11d, 11f-24f)	333,228.	264,979.
)	18	Total expenses.	Add lines 13·17 (must equal Part IX, column (A), line 25)	724,524.	549,284.
_		Revenue less ex	penses Subtract line 18 from line 12	<19,907.	> 62,213.
, or	Ses			Beginning of Current Year	End of Year
Net Assets or	[20	Total assets (Pa	rt X, line 16)	84,862.	116,985.
t As	일 21	Total liabilities (F	Part X, line 26)	49,402.	19,312.
_			nd balances Subtract line 21 from line 20	35,460.	97,673.
[[Part II	Signature			·
		Under penalties of p and complete Decla	erjury, I declare that I have examined this return, including accompanying schedules and stateme ration of preparer (other than officer) is based on all information of which preparer has any knowle	nts, and to the best of my knowledgedge	ge and belief, it is true, correct,
		Mai	11. 1 2/ pa	11110	/10
Si	gn	Signature o	tother.	Data ///	10
Н	ere			Date/ /	The state of the s
			EW HASS, EXECUTIVE DIRECTOR		
_		,	nt name and title	Check If Prepare	er's identifying number
Pa	iid	Preparer's signature	unule helman 11-10-10	Self- (see ins	structions)
Pr	eparer's	Firm's name (or	3 1 1000	employed >	
Us	se Only	yours if self-employed),	HUDSON, CISNE & CO. LLP	EIN ►	
		address, and	11412 HURON LANE LITTLE ROCK, AR 72211	Dhone so	501)221-1000
-	au tha II	ZIP + 4		j rnone no. ► (
<u>IVI</u>	ay 1110 11		eturn with the preparer shown above? (see instructions)	instructions	X Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

			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		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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	_	ν,	
_	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			v
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		<u>X</u>
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	ļ	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			Λ_
0	Schedule D, Part III	8		X
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, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10		Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable	11	x	
•	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? If "Yes," complete Schedule D, Part VII			
•	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		Ì	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
10	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 statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	10	х	
124		12	^	
127	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	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
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		<u>X</u>
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		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	ŀ		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"		ļ	37
20	complete Schedule G, Part III	19		<u>X</u>
20_	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	990 (2	X
		LOIM:	ノゴリ (2	20091

			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		<u> X</u>
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? If "Yes," complete			
	Schedule J	_23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			Ï
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
25a	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		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
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 committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			_ ==_
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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		X
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		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		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)?	7		
	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		
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
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	
			990 (2	20091
			1.	/

009) ARKANSAS TRIAL LAWYERS ASSOCIATION
Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U.S Information Returns Enter -0- if not applicable	1a 4			
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		4		
С		eportable gaming	,	ì	
	(gambling) winnings to prize winners?	1 1	1c		
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	_			
	filed for the calendar year ending with or within the year covered by this return		Ί.		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	•			
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	ed by this return?	3a	X	ļ. <u></u>
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other				,,
_	financial account in a foreign country (such as a bank account, securities account, or other financial	account) ²	4a		X
b	If "Yes," enter the name of the foreign country	<u> </u>			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank and			
. .	Financial Accounts				v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	otion?	5a_		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax Exempt Entity Regardax Shelter Transaction?	arang Prohibited	E.		
62	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit	<u>5c</u>		
Va	any contributions that were not tax deductible?	to organization solicit	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or aifts			
_	were not tax deductible?	and or grad	6b		
7	Organizations that may receive deductible contributions under section 170(c).		,		
а	6000	goods and services			
	provided to the payor?	-	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b_		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as required			
	to file Form 8282?	1 1	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	personal			
	benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit conti		7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g	ļ	
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	·	7h	2:	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting or	•		,	
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exc at any time during the year?	ess business noidings			
9	Sponsoring organizations maintaining donor advised funds.		8		
	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter.				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b]		
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11a]		'
ь	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them)	11b	1		
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	L	لييا	
			Form	990	/PNN91

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

Sec	tion A. Governing Body and Management			_		
					Yes	No
1a	Enter the number of voting members of the governing body	1a	34			
b	Enter the number of voting members that are independent	1b	34			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	o with any other	j			
	officer, director, trustee, or key employee?		L	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision				
	of officers, directors or trustees, or key employees to a management company or other person?			3_		Х
4	Did the organization make any significant changes to its organizational documents since the prior Fo	rm 990 was filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's asset	s?		5_		X
6	Does the organization have members or stockholders?		L	6	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	mbers of the				
	governing body?			7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	sons?	L	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken	during the year				
	by the following.					
	The governing body?		L	8a	Χ	!
b	Each committee with authority to act on behalf of the governing body?			8b	<u> X</u>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ched at the	Ì			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue Code)				
			_		Yes	No
	Does the organization have local chapters, branches, or affiliates?		Ŀ	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapters, affiliates,	-			
	and branches to ensure their operations are consistent with those of the organization?		-	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before fi	ing the form?		11	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			•		,
	Does the organization have a written conflict of interest policy? If "No," go to line 13		L	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that cou	ıld give rise				
	to conflicts?		<u> </u> -	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	'Yes," describe				
	in Schedule O how this is done			12c	X	
13	Does the organization have a written whistleblower policy?			13	X	
14	Does the organization have a written document retention and destruction policy?		-	14	<u> </u>	
15	Did the process for determining compensation of the following persons include a review and approve	il by independent				
_	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				٠,	
	The organization's CEO, Executive Director, or top management official			15a	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			15b		<u>X</u>
16-	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arranger	nont with a				
·va	taxable entity during the year?	nent with a			- 1	v
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eval	uata ita nadioination	H	16a		<u>X</u>
J	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization to evaluate the organization to evaluate the organization to evaluate the organization to evaluate the organization adopted a written poincy of procedure requiring the organization to evaluate the organization adopted a written poincy of procedure requiring the organization to evaluate the organization adopted a written poincy of procedure requiring the organization to evaluate the organization adopted a written poincy of procedure requiring the organization to evaluate the organization adopted a written poincy of procedure requiring the organization to evaluate the organization adopted a written poincy of procedure requiring the organization to evaluate the organization and the organization adopted a written poincy of procedure requiring the organization adopted a written poincy of procedure requiring the organization and the organization adopted a written poincy of procedure requiring the organization and the organization and the organization adopted a written poincy of procedure requiring the organization and the o	• •				
	exempt status with respect to such arrangements?	inization s		.c.	l	
Sec	tion C. Disclosure	· · · · · · · · · · · · · · · · · · ·		16b		
17	List the states with which a copy of this Form 990 is required to be filed ► NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(501(c)(3)s only) avail	lable fo	nr.		
-	public inspection. Indicate how you make these available. Check all that apply	((-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(-)(••		
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	onflict of interest polic	v and	fina	acial	
	statements available to the public	st or interest polic	,, and	mia	·Ciai	
20	State the name, physical address, and telephone number of the person who possesses the books are	nd records of the orga	ınızatıo	n 🕨		
	THE ORGANIZATION - 501-376-2852	soc. ac or the orga				
	1400 WEST MARKHAM, SUITE 307, LITTLE ROCK, AR 722	01		-		
						

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 organization'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 employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did not c		y cu	rren	_		, dıre	ecto			
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average			Pos				Reportable	Reportable	Estimated
	hours	(cl	neck	all	that	app	ly)	compensation	compensation	amount of
	per	횮	}				ļ	from the	from related	other
	week	rdire				ed Ed		organization	organizations (W 2/1099-MISC)	compensation from the
		stee c	ruste		١.,	SE		(W·2/1099 MISC)	(** 27 1000 111100)	organization
	;	al tru	onal t		ploye	E 8		(· = · · · · · · · · · · · · · · · · ·		and related
	,	Individual trustee or director	Institutional trustee	Officer	y em	Highest compensated employee	Former			organizations
		=	=	0	×	Ξ 5				
LLOYD W. TRE' KITCHENS								0		
PRESIDENT		ļ	ļ	Х		 	_	0.	0.	0.
M. CHAD TRAMMELL						ł		•		
VICE PRESIDENT		ļ		Х		<u> </u>		0.	0.	0.
DON R. ELLIOTT, JR.		İ				ļ		0		
SECRETARY - TREASURER		_		X		<u> </u>		0.	0.	0.
MICHAEL BOYD				٠,,				0		0
PRESIDENT-ELECT			-	Х	<u> </u>		H	0.	0.	0.
CHRIS HEIL								•	0	
IMMEDIATE PAST PRESIDENT		-	_	Х	-	┢		0.	0.	0.
MATTHEW HASS	40.00							70 700		2 106
EXECUTIVE DIRECTOR	40.00	-	<u> </u>	X			<u> </u>	70,700.	0.	2,196.
				1		}				
						\vdash	\vdash			
						├─				
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	l	L_								

Part VII Section A. Officers, Directors, T	rustees, Key E	mplo	yee	s, a	nd ł	High	est	Compensated Employ	ees (continued)	
` (A)	(B)				C)			(D)	(E)	(F)
Name and title	Average	١,,		sition that apply)			Reportable	Reportable	Estimated	
	hours per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated O		compensation from the organization (W 2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
							-			
				<u>.</u>		-	<u> </u>		·····	
		<u> </u>	<u> </u>			Ļ	<u>_</u> _	70 700		- 106
 Total Total number of individuals (including but compensation from the organization 	not limited to th	nose	liste	ed al	bove	e) wh	10 re	70,700. ecceived more than \$100		2,196
 Did the organization list any former office line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the sand related organizations greater than \$1 Did any person listed on line 1a receive of the organization? If "Yes," complete Schedule John Line 1a 	such individual sum of reportab 50,000? If "Yes, accrue compe	le co " co nsat	ompi <i>mple</i> ion f	ensa ete S	atior Sche	n and	d oth e <i>J f</i>	her compensation from for such individual	the organization	Yes No 3 X 4 X 5 X
Section B. Independent Contractors										
Complete this table for your five highest of the organization NONE	ompensated in	depe	ende	ent c	onti	racto	ors t		\$100,000 of compe	
(A) Name and busines	s address							(B) Description of s	ervices	(C) Compensation
							1			
		-					+			
Total number of independent contractors \$100,000 in compensation from the organ		not lu	mite	d to		se lis	sted	l above) who received n	nore than	
										Form 990 (2009

Form 990 (2009)

Form 990 (2009) ARKANSAS TRIA Part IX Statement of Functional Expenses

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

`	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).							
	not include amounts reported on lines 6b, 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		<u> </u>					
	organizations in the U.S See Part IV, line 21				·			
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 US							
	See Part IV, lines 15 and 16							
4	Benefits paid to or for members							
5	Compensation of current officers, directors,							
	trustees, and key employees	77,000.						
6	Compensation not included above, to disqualified							
	persons (as defined under section 4958(f)(1)) and							
	persons described in section 4958(c)(3)(B)	1.55 1.55						
7	Other salaries and wages	165,467.	· · · · · · · · · · · · · · · · · · ·					
8	Pension plan contributions (include section 401(k)							
_	and section 403(b) employer contributions)	20 065						
9	Other employee benefits	20,865.		 				
10	Payroll taxes	20,973.						
11	Fees for services (non-employees)							
	Management			 				
	Legal Legal Accounting	7,800.						
	Lobbying	59,500.						
	Professional fundraising services. See Part IV, line 17	37,300.						
f	Investment management fees							
g	Other	18,000.	· · · · · · · · · · · · · · · · · · ·					
12	Advertising and promotion							
13	Office expenses	32,235.						
14	Information technology	4,008.						
15	Royalties							
16	Occupancy	49,167.						
17	Travel	14,660.						
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials	,						
19	Conferences, conventions, and meetings	37,368.						
20	Interest	 						
21	Payments to affiliates			ļ				
22	Depreciation, depletion, and amortization	3,783.						
23	Insurance	3,823.	·					
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.)							
а	PRINTING & PUBLICATIONS	23,284.						
b	LEGISLATIVE EXPENSE	3,399.						
С	MEMBERSHIP EXPENSES	2,389.	· · · · · · · · · · · · · · · · · · ·					
d	PROPERTY TAXES	1,576.						
е	CANDIDATE TRAINING EXPE	1,445.						
f	All other expenses	2,542.						
<u>25</u>	Total functional expenses Add lines 1 through 24f	549,284.		ļ				
26	Joint costs. Check here							
	SOP 98-2. Complete this line only if the organization							
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation			L	<u> </u>			

Part X | Balance Sheet (A) (B) Beginning of year End of year 70,863. 8,337. 1 Cash - non-interest-bearing 87.715. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 4 984. Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 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 Notes and loans receivable, net 7 Assets Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 69,520. basis Complete Part VI of Schedule D 10a 10,899. 62,404 7,116. 10b 10c b Less accumulated depreciation Investments - publicly traded securities 11 11 12 Investments - other securities See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 Intangible assets 14 14 3,100. 1,833. 15 15 Other assets See Part IV, line 11 Total assets. Add lines 1 through 15 (must equal line 34) 84,862. 116,985. 16 16 Accounts payable and accrued expenses 17 17 18 Grants payable 18 4,935. 1,877. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Liabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 17,435. 25 Other liabilities. Complete Part X of Schedule D 44,467 25 49,402 26 19,312. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 35,460. 97,673. 27 Unrestricted net assets 27 28 Temporarily restricted net assets 28 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117, check here

and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 32 Retained earnings, endowment, accumulated income, or other funds 32 35,460. 97,673. 33 Total net assets or fund balances 33 84,862 116,985. Total liabilities and net assets/fund balances

Form **990** (2009)

Form	990 (2009) . ARKANSAS TRIAL LAWYERS ASSOCIATION 51-018	<u> 1104</u>	Pag	je 12
Pa	t 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			
2 a	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	
С	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	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		٦ .	
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			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit	1		
	Act and OMB Circular A-133?	3a		X
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_		
		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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below.

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

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2009

- 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
 - 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-B

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

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III			
Nan	ne of organization			Emp	oloyer identification number
	ARKANSA	S TRIAL LAWYERS	ASSOCIATION	<u> </u>	51-0189104
Pa	art I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527	organization.
1	Provide a description of the organiz	ation's direct and indirect politic	cal campaign activities	in Part IV	
2	Political expenditures			>	\$
3	Volunteer hours				
Pa	art I-B Complete if the org	janization is exempt und	der section 501(c))(3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	>	
2	Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5	\$
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
-	Was a correction made?				Yes No
	of "Yes," describe in Part IV		lav apatian E01/a)	avaant saatian EO	(/a\/2)
		janization is exempt und		•	````
	Enter the amount directly expended	, ,	•		\$
2	Enter the amount of the filing organ	ization's funds contributed to of	ther organizations for s		
_	exempt function activities				\$
3	Total exempt function expenditures	Add lines 1 and 2. Enter here a	and on Form 1120-POL	•	•
	line 17b			•	\$
4	0 0	•			Yes No
5	Enter the names, addresses and er	• •	,	_	• •
	For each organization listed, enter t that were promptly and directly deli	•	•	•	
	(PAC) If additional space is needed	•	amzation, odon do a oc	sparate segregated tand of	a pointed action committee
		(b) Address	(c) EIN	(d) Amount paid from	(a) Amount of political
	(a) Name	(b) Address	(C) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0-	promptly and directly
					delivered to a separate political organization
					If none, enter 0-
		-			
					1

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

LHA

Schedule C (Form 990 or 990-EZ) 2009 Part II-A Complete if the org	ARKANSAS 1 ganization is exe	RIAL LAWYE	RS ASSOCIATION 501(c)(3) and file	ON 51-0 ed Form 5768	0189104 Page 2
(election under sec	tion 501(h)).	•			
A Check ► ☐ If the filing organiza	tion belongs to an aff	lliated group	· · · · · · · ·		
B Check 🕨 🔲 if the filing organiza	ation checked box A a	nd "limited control" pi	ovisions apply		
	ts on Lobbying Expe ditures" means amo		l.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to infl	uence a legislative bo	dy (direct lobbying)		-	
c Total lobbying expenditures (add I	ines 1a and 1b)				
d Other exempt purpose expenditur	es				
e Total exempt purpose expenditure	es (add lines 1c and 1	d)			
f Lobbying nontaxable amount Ent	er the amount from th	e following table in bo	th columns		
If the amount on line 1e, column (a) o	or (b) is. The lot	bying nontaxable an	nount is:		
Not over \$500,000	20% of	the amount on line 1	e		
Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the ex	cess over \$500,000		
Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the ex	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exc	ess over \$1,500,000		
Over \$17,000,000	\$1,000,	000			
g Grassroots nontaxable amount (er	nter 25% of line 1f)				
h Subtract line 1g from line 1a If zer					
i Subtract line 1f from line 1c If zero	o or less, enter 0-				
j If there is an amount other than ze	ro on either line 1h or	line 1i, did the organi	zation file Form 4720		
reporting section 4911 tax for this	year?				Yes No
	ations that made a s		r Section 501(h) on do not have to comp es 2a through 2f on pa		
	Lobbying Expe	nditures During 4-Ye	ear Averaging Period	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable 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))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990 EZ) 2009 ARKANSAS TRIAL LAWYERS ASSOCIATION 51-0189104 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

		(a)	(1	o)
		Yes	No	Am	ount
1	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			•	i
	or referendum, through the use of				1
а	Volunteers?			~	•
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				*
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	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?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
ı	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)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<u>_ d</u>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion 501(c)(5), or se	ction	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		X
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		3	X	
1	"Yes." Dues, assessments and similar amounts from members		1	418	3,525.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	ıcal			
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	63	3,350.
b	Carryover from last year		2b		1,223.
С	Total		2c	97	7,573.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	83	3,705.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	political			
	expenditure next year?		4	13	3,868.
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I C, line 5, a	nd Part II B, I	ine 1ı Also	, complete	this part
or a	ny additional information				
					·

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

Open to Public Inspection

Name of the organization

ADVANCAC MOTAL LAWVEDC ACCOUTAMION

Employer identification number 0189104

Pa	rt I Organizations Maintaining Donor Advise		or Accounts Complete if the
	organization answered "Yes" to Form 990, Part IV, line		or Accounts. Complete if the
	organization answered Tes to Form 990, Fait IV, IIII	(a) Donor advised funds	(b) Funds and other accounts
_	Total mumb as at and afternal	(a) Bener advised fands	(b) runds 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 donor advisors in	•	
_	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor a	5 5	•
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	
Pa	impermissible private benefit?		Yes No
		· · · · · · · · · · · · · · · · · · ·	Part IV, line /
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or p		storically important land area
	Protection of natural habitat	Preservation of a cert	afied historic structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	lied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		
	-		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
Ç.	Number of conservation easements on a certified historic str	• •	2c
d	Number of conservation easements included in (c) acquired		
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	e organization during the tax
_	year >		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per	• • • • • • • • • • • • • • • • • • • •	
_	violations, and enforcement of the conservation easements if		☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	•	
7	Amount of expenses incurred in monitoring, inspecting, and		-
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170	
_	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservati		
	include, if applicable, the text of the footnote to the organizationservation easements	non's imancial statements that describes	the organization's accounting for
Pa	rt III Organizations Maintaining Collections o	f Art Historical Treasures or O	ther Similar Assets
تت	Complete if the organization answered "Yes" to Form		(i) (i) (ii) (ii) (ii) (ii) (ii) (ii) (
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	alance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	the footnote to its financial statements that describes these i		one service, provide, in Part XIV, the text of
b	If the organization elected, as permitted under SFAS 116, to		an about works of ort, butterioal transures
U	or other similar assets held for public exhibition, education, o		
	these items	research in furtherance of public service	e, provide the following amounts relating to
	(i) Revenues included in Form 990, Part VIII, line 1		. •
	(ii) Assets included in Form 990, Part X		S S S S S S S S S S
0		agurag or other similar assats for finner	
2	If the organization received or held works of art, historical treating following amounts required to be reported under SEAS 1.		ıı gaiii, provide
_	the following amounts required to be reported under SFAS 1	ro relating to these items	• •
a	Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X		\$ \$ * * * * * * * * * *
b	Assets included in Form 330, Part A		> \$

		S TRIAL LA	WYER	S ASSO	CIATIO	<u>N</u>		<u>51-01</u>	<u>89104</u>	. Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, e	or Othe	er Simil	ar Asse	ts (contir	nued)
.3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following that	at are a s	gnificant	use of its	collection	items
	(check all that apply)									
а	Public exhibition	C	, .	Loan or exc	hange progra	ams				
b	Scholarly research	6	, 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	in how th	ney further tl	he organizati	ion's exe	mpt purpo	ose in Par	t XIV	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m	aintained as part of	the orga	nization's co	ellection?				Yes	☐ No
Par	t IV Escrow and Custodial Arran	gements. Compl	ete if org	janization ar	nswered "Ye	s" to For	m 990, Pa	rt IV, line	9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table						
	, ,	•	Ū						Amount	
С	Beginning balance						1c			,
d	Additions during the year						1d			·
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	212				ا		Yes	No
	If "Yes," explain the arrangement in Part XIV									
Par			nswered	"Yes" to Fo	rm 990, Part	IV, line 1	0			
		(a) Current year		rior year	(c) Two yea		(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions							-	-	
C	Net investment earnings, gains, and losses				i					
d	Grants or scholarships				,					
e	Other expenditures for facilities									
_	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year	r end balance held	as		· · · · · · · · · · · · · · · · · · ·					
а	Board designated or quasi-endowment		%							
b	Permanent endowment ▶	%								
c	Term endowment	 %								
За	3a Are there endowment funds not in the possession of the organization that are held and administered for the organization									
	by.	•					-		Ţ.	Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required o	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Building	gs, and Equipm	ent. Se	e Form 990	, Part X, line	10				
	Description of investment	(a) Cost or o	ther	(b) Cost	or other	(c) A	ccumulate	ed	(d) Book	value
		basis (investi	ment)	basis	(other)	de	oreciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment			6	9,520.		62,4	04.	7	,116.
	Other									
Total	. Add lines 1a through 1e (Column (d) must e	qual Form 990. Part	X, colur	nn (B), line 1	0(c))			>	7	,116.

Schedule D (Form 990) 2009

ARKANSAS	TRIAL	LAWYERS	ASSOCTAT	TON

(a) Description of security or category (including name of security)	(b) Book value	Со	(c) Method of value st or end-of-year ma	
Financial derivatives				
Closely-held equity interests				
Other				
			·	
				·
				··
Total (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, I	ine 13		
(a) Description of investment type	(b) Book value		(c) Method of value	
(a) Description of investment type	(b) Book value	Со	st or end-of year ma	rket value
				· · · · · · · · · · · · · · · · · · ·
			<u> </u>	
				····
Total (Col (b) must equal Form 990, Part X, col (B) line 13.)				· · · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, Part X, III	ne 15			· · · · · · · · · · · · · · · · · · ·
()	a) Description			(b) Book value
	-			
		· · · · · · · · · · · · · · · · · · ·		
Total. (Column (b) must equal Form 990, Part X, col (B) li	ne 15)	·	>	
Part X Other Liabilities. See Form 990, Part 3	X, line 25			
1 (a) Description of liability		(b) Amount		
Federal income taxes				
ACCRUED VACATIONS	·	10,658.		
ACCRUED EXPENSES		2,670.		
P/R TAXES WITHHELD & ACCRUED		4,107.		
]	
]	
]	
]	
Total. (Column (b) must equal Form 990, Part X, col (B) li	ne 25)	17,435.		
2. FIN 48 Footnote. In Part XIV provide the text of the fe			- 414 41 41	

uncertain tax positions under FIN 48 932053 02-01-10

	ARKANSAS TRIAL LAWYERS ASSOCIATION			89104 Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Fin	ancial St	atements	
`1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		611,497.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		549,284.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		62,213.
4	Net unrealized gains (losses) on investments	4		
5	Donated services and use of facilities	5		
6	Investment expenses	6		
7	Prior period adjustments	7		
8	Other (Describe in Part XIV)	8		
9	Total adjustments (net) Add lines 4 through 8	9		0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 rt XII Reconciliation of Revenue per Audited Financial Statements With Rev	10	w Dotum	62,213.
		enue pe		C14 000
1	Total revenue, gains, and other support per audited financial statements		1	614,982.
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 2c	2 40	_	
d	Other (Describe in Part XIV)	3,48		2 405
е	Add lines 2a through 2d		2e	3,485.
3	Subtract line 2e from line 1		3	611,497.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)			^
C	Add lines 4a and 4b		4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) rt XIII Reconciliation of Expenses per Audited Financial Statements With Ex	22222	5 Deturn	611,497.
		penses p		
1	Total expenses and losses per audited financial statements		1	552,769.
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 2c	2 40	-	
d	Other (Describe in Part XIV)	3,48		2 405
е	Add lines 2a through 2d		2e	3,485.
3	Subtract line 2e from line 1		3	549,284.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)			^
	Add lines 4a and 4b		4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) rt XIV Supplemental Information	•	5	549,284.
		D- + 0/ 1 -	41	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4,			
X, III	e 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to	provide any	additional inf	ormation
ם א כו	OM VII IINE OD OMUED ADIHOMENMO.			
PAI	RT XII, LINE 2D - OTHER ADJUSTMENTS:			
אוזים	NDRAISING EXPENSES - FUNDRAISING REVENUE INCLUDED	.m 1112m	. 2405	
<u> </u>	NDRAISING EXPENSES - FUNDRAISING REVENUE INCLUDED A	TI NET	: 3465.	
PAF	RT XIII, LINE 2D - OTHER ADJUSTMENTS:			
FUN	NDRAISING EXPENSES - FUNDRAISING REVENUE INCLUDED A	ላጥ ለንድጥ	: 3485	
	TOTAL TITLE THE TOTAL TO	14H L	· 2407.	
			·-	

SCHEDULE.G

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

2009

Open To Public Inspection

Name of the organization

Employer identification number

	<u>S TRIAL LAWYERS AS</u>				51-0189	
Part I Fundraising Activities required to complete this par	Complete if the organization answ t	ered "`	es" to	o Form 990, Part IV, I	ine 17 Form 990-EZ	filers are not
 1 Indicate whether the organization rais a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written of key employees listed in Form 990, P b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicita f Solicita g Specia or oral agreement with any individua art VII) or entity in connection with providuals or entities (fundraisers) pure	ition of ition of I fundra I (inclui profess	non g gover alsing ding o lonal f	overnment grants inment grants events fficers, directors, trus fundraising services?	stees orYes	
(i) Name of individual or entity (fundraiser)	(ii) Activity	(III) fund have c or cor contrib	Did aiser ustody itrol of utions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
					<u> </u>	
		 				
Total						
3 List all states in which the organization	n is registered or licensed to solicit	funds	or has	been notified it is ex	empt from registrati	on or licensing
		-				
					<u> </u>	
			_			

Schedule G (Form 990 or 990 EZ) 2009 ARKANSAS TRIAL LAWYERS ASSOCIATION 51-0189104 Page 2 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a List events with gross receipts greater than \$5,000 (a) Event #1 (c) Other events (b) Event #2 (d) Total events GOLFSILENT NONE (add col (a) through TOURNAMENT AUCTION col (c)) (event type) (event type) (total number) 6,170 16,148 22,318. Gross receipts 2 Less Charitable contributions 6,170. 16,148 Gross income (line 1 minus line 2) 22,318. Cash prizes 4 Noncash prizes 1,826 1,826. Direct Expenses 6 Rent/facility costs Food and beverages Entertainment 245. 1,413 1,658. Other direct expenses 3,484 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Combine line 3, column (d), and line 10 18,834, Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a (b) Pull tabs/instant (d) Total gaming (add (a) Bingo Revenue (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes % Yes 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Combine line 1, column (d), and line 7 Yes No Enter the state(s) in which the organization operates gaming activities a is the organization licensed to operate gaming activities in each of these states? 9a b If "No," explain 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? 10a b if "Yes," explain 11 Does the organization operate gaming activities with nonmembers? 11 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Sch	edule G (Form 990 or 990 EZ) 2009 ARKANSAS TRIAL LAWYERS ASSOCIATION 51-018	<u>910</u>	4 Pa	age 3
			Yes	No
13	Indicate the percentage of gaming activity operated in			
а	The organization's facility 13a %	[
b	An outside facility 13b %			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	,		
	Name N			
	Name]
	Address ▶	-	۰	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party > \$			
C	If "Yes," enter name and address of the third party			
	Name			
	Address ►			
16	Gaming manager information			
	Name			
	Gaming manager compensation ▶ \$,	
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions			,
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	17a		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year 🕨 \$			

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

ARKANSAS TRIAL LAWYERS ASSOCIATION

Employer identification number 51-0189104

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PUBLICATIONS, IN ALL FIELDS AND PHASES OF ADVOCACY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROVIDING TRAINING IN ALL FIELDS AND PHASES OF ADVOCACY.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS A STATEWIDE
MEMBERSHIP OF APPROXIMATELY 1,000 LAWYERS.
FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF GOVERNORS IS ELECTED
BY THE ENTIRE MEMBERSHIP. A SLATE OF OFFICERS IS PRESENTED BY THE EXECUTIVE
COMMITTEE TO BE VOTED ON BY THE MEMBERS AT LARGE.
FORM 990, PART VI, SECTION A, LINE 7B: CHANGES TO THE BY-LAWS ARE SUBJECT TO APPROVAL BY THE MEMBERS.
FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION PROVIDES A DRAFT
COPY OF ITS FORM 990 TO THE MEMBERS OF THE BOARD OF GOVERNORS PRIOR TO ITS
FILING FOR THEIR APPROVAL.
FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY
COVERS OFFICER MEMBERS OF THE BOARD OF GOVERNORS, EXECUTIVE COMMITTEE OR
OTHER VOLUNTEER LEADERS OF THE ORGANIZATION.
THE POLICY SPECIFIES PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST AND

DETERMINING IF A MORE ADVANTAGEOUS TRANSACTION IS FEASIBLE. IF A VIOLATION LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. 932211 02-03-10

Schedule O (Form 990) 2009

SCHEDULE 0

Department of the Treasury

Internal Revenue Service

(Form 990)

932211 02-03-10 Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

ARKANSAS TRIAL LAWYERS ASSOCIATION

Employer identification number 51-0189104

Schedule O (Form 990) 2009

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PUBLICATIONS, IN ALL FIELDS AND PHASES OF ADVOCACY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
PROVIDING TRAINING IN ALL FIELDS AND PHASES OF ADVOCACY.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS A STATEWIDE MEMBERSHIP OF APPROXIMATELY 1,000 LAWYERS.
FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF GOVERNORS IS ELECTED BY THE ENTIRE MEMBERSHIP. A SLATE OF OFFICERS IS PRESENTED BY THE EXECUTIVE
COMMITTEE TO BE VOTED ON BY THE MEMBERS AT LARGE.
FORM 990, PART VI, SECTION A, LINE 7B: CHANGES TO THE BY-LAWS ARE SUBJECT TO APPROVAL BY THE MEMBERS.
FORM 990, PART VI, SECTION B, LINE 11: THE ORGANIZATION PROVIDES A DRAFT
COPY OF ITS FORM 990 TO THE MEMBERS OF THE BOARD OF GOVERNORS PRIOR TO ITS
FORM 990, PART VI, SECTION B, LINE 12C: THE CONFLICT OF INTEREST POLICY
COVERS OFFICER MEMBERS OF THE BOARD OF GOVERNORS, EXECUTIVE COMMITTEE OR
OTHER VOLUNTEER LEADERS OF THE ORGANIZATION.
THE POLICY SPECIFIES PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST AND
DETERMINING IF A MORE ADVANTAGEOUS TRANSACTION IS FEASIBLE. IF A VIOLATION

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

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization **Employer identification number** 51-0189104 ARKANSAS TRIAL LAWYERS ASSOCIATION OF THE POLICY OCCURS, THE MEMBER IN VIOLATION WILL BE OFFERED AN OPPORTUNITY TO EXPLAIN THE FAILURE TO DISCLOSE THE TRANSACTION AND THE EXECUTIVE COMMITTEE WILL DETERMINE THE APPROPRIATE ACTION TO BE TAKEN. FORM 990, PART VI, SECTION B, LINE 15A: IN DETERMINING THE SALARY OF THE EXECUTIVE DIRECTOR. THE BOARD OF GOVERNORS REVIEWED THE RESULTS OF A SURVEY CONDUCTED AMONG VARIOUS STATE TRIAL LAWYER ORGANIZATIONS. THE DECISION MAKING PROCESS IS INCLUDED IN MINUTES FOR THE MEETING. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return

OMB No 1545-0172

2009

Attachment Sequence No 67

Name(s) shown on return Identifying number ARKANSAS TRIAL LAWYERS ASSOCIATION, 51-0189104 Business or activity to which this form relates All Business Activities Election To Expense Certain Property Under Section 179 Part I Note: If you have any listed property, complete Part V before you complete Part I Maximum amount. See the instructions for a higher limit for certain businesses. 1 1 250,000 2 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 3 800,000 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions Part II Special depreciation allowance for qualified property (other than listed property) placed in service during 14 the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) 16 3.782 MACRS Depreciation (Do not include listed property.) (See instructions) Part III Section A 17 17 MACRS deductions for assets placed in service in tax years beginning before 2009 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B-Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recover (f) Method (g) Depreciation deduction (a) Classification of property ar placed in (business/investment use (e) Convention period only-see instructions) service 19a 3-year property b 5-year property 7-year property d 10-year property 15-year property 20-year property S/L 25-year property S/L Residential rental 27 5 yrs MM property MM 27 5 yrs S/L MM 39 yrs S/L Nonresidential real property MM S/I Section C-Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life 12-year 12 yrs S/L ММ S/L 40 yrs 40-year Summary (see instructions) Part IV 21 21 Listed property Enter amount from line 28 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here 22 and on the appropriate lines of your return Partnerships and S corporations--see instructions 22 3,782 For assets shown above and placed in service during the current year, 23 23 enter the portion of the basis attributable to section 263A costs

Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 4-2009)

Print File by the due date for filing your return. See mindstuctions ARKANSAS TRIAL LAWYERS ASSOCIATION Number, street, and room or suite no. If a P.O. box, see instructions. 1400 WEST MARKHAM, SUITE 307 City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed(file a separate application for each return): Form 990	internal Revenue Service	
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 980-T). However, you cannot file Form 8866 electronically file form 980-Th, However, you cannot file Form 8866 electronically file you want the additional find automatic) 3-month extension of (2) you file Form 990-TI, However, you cannot file Form 980-TI, natead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit warms of Exempt Organization File by the due date for the for Charlines & Nonprofiles. Type or value and electronic filing of this form, visit ARKANSAS TRIAL LAWYERS ASSOCIATION Employer identification numbe print File by the due date for the form of Exempt Organization File by the due date for the form of Exempt Organization ARKANSAS TRIAL LAWYERS ASSOCIATION Employer identification numbe 51–0189104 ARKANSAS TRIAL LAWYERS ASSOCIATION 51–0189104 ARKANSAS TRIAL LAWYERS ASSOCIATION 51–0189104 City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed (file a separate application for each return): X Form 990 Form 990-E Form 990-E Form 990-F	• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file nome tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file none of the returns noted below (8 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional flort automatic) 3-month extension or (2) you file Forms 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional flort automatic) 3-month extension or (2) you file Forms 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional flort automatic) 3-month extension of time to file for Charles & Romprofits. Type or warm set in the care of ▶ 1400 west marked and set of the form 14720 flort and 1400 west marked flort and 1400 west marked flort and 1400 west marked flort and 1400 west marked flort and 1400 west marked flort flort and 1400 west marked flort flort and 1400 west marked flort	Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Electronic Filing (e-file). Generally, you can electronically file Form 9868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL. (508), or 8870, group returns, or a composition or consolidated form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Type or Type or Name of Exempt Organization ARKANSAS TRIAL LAWYERS ASSOCIATION Sumber, street, and room or suite no. If a P.O. box, see instructions. 1400 WEST MARKHAM, SUITE 307 City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed (file a separate application for each return): X Form 990 Form 990-E Form 990-F Form 990-F Form 990-F Form 990-F Form 990-F Form 1041-A The books are in the care of 1400 WEST MARKHAM, SUITE 307 - LITTLE ROCK, AR 72201 Telephone No. 501-376-2852 FAX No. Form 8870 The organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for part of the group, check this box And attach a list with the names and EliNs of all members the extension will cover of the organization's return for the organization named above. The extension is for the organization's return for a carporation required to file Form 990-T) extension of time until FEBRUARY 155, 2011 I request an automatic 3-month (6-months for a corporation required to file Form 990	A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete
noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8668 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6096, or 8870, group returns, or a composite or consolidated Form 990-TI. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on a-file for Charities & Nonprofits. Type or Name of Exempt Organization ARKANSAS TRIAL LAWYERS ASSOCIATION ARKANSAS TRIAL LAWYERS ASSOCIATION LITTLE ROCK, AR 72201 City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed (file a separate application for each return): X Form 990 Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 990-E Form 990-PF Form 1041-A The Drian State of the group, check this box If it is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2011 I to file the exempt organization return for the organization named above. The extension is for the organization's return for: X and ending JUN 30, 2010	All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an	extension of time
Print File by the due date for filing your return. See minstructions ARKANSAS TRIAL LAWYERS ASSOCIATION Number, street, and room or suite no. If a P.O. box, see instructions. 1400 WEST MARKHAM, SUITE 307 City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed(file a separate application for each return): Form 990	noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or collyou must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file	cally if (1) you want the additional assolidated Form 990-T. Instead,
ARKANSAS TRIAL LAWYERS ASSOCIATION ARKANSAS TRIAL LAWYERS ASSOCIATION 51-0189104	Type or Name of Exempt Organization	Employer identification number
Number, street, and room or suite no. If a P.O. box, see instructions. 1400 WEST MARKHAM, SUITE 307 City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed (file a separate application for each return): Form 990	` l	E1 0100104
City, town or post office, state, and ZIP code. For a foreign address, see instructions. LITTLE ROCK, AR 72201 Check type of return to be filed (file a separate application for each return): X Form 990	File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions.	51-0189104
Form 990	return. See Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5227 Form 990-EZ Form 990-T (trust other than above) Form 6069 Form 990-PF Form 1041-A Form 8870 THE ORGANIZATION • The books are in the care of ▶ 1400 WEST MARKHAM, SUITE 307 - LITTLE ROCK, AR 72201 Telephone No. ▶ 501-376-2852 FAX No. ▶ • If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group, check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is for part of the group check this box If it is form for the group check this	Check type of return to be filed (file a separate application for each return):	
 The books are in the care of ▶ 1400 WEST MARKHAM, SUITE 307 - LITTLE ROCK, AR 72201 Telephone No. ▶ 501-376-2852	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 60	227 069
FEBRUARY 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: Calendar year or X tax year beginning JUL 1, 2009 , and ending JUN 30, 2010 .	 The books are in the care of ► 1400 WEST MARKHAM, SUITE 307 - LITTLE R Telephone No. ► 501-376-2852 FAX No. ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this 	
2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting periods	FEBRUARY 15, 2011 , to file the exempt organization return for the organization named a is for the organization's return for: Calendar year or	
	2 If this tax year is for less than 12 months, check reason: Initial return	Change in accounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	
nonrefundable credits. See instructions. 3a \$		3a \$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$	•	3b ¢
tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		3D 4
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		
See instructions. 3c \$ N/A		

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868**

, (Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you	are filing for an Automatic 3-Month Extension, complete only Part I and check this box	form).	▶ □
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A corpo	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	. .
	r corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an come tax returns.	exten	sion of time
noted b (not aut you mu	nic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension elow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic omatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cost submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file gov/efile and click on e-file for Chanties & Nonprofits.	cally if nsolida	(1) you want the additional ated Form 990-T. Instead,
Type or	Name of Exempt Organization	Empl	oyer identification number
print	ARKANSAS TRIAL LAWYERS ASSOCIATION	5	1-0189104
File by the due date t filing your return. Se	Number, street, and room or suite no. If a P.O. box, see instructions.		1 0107104
instruction			
• The Tele	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 52 Form 990-EZ Form 990-T (trust other than above) Form 66 Form 990-PF Form 1041-A Form 88 THE ORGANIZATION books are in the care of ► 1400 WEST MARKHAM, SUITE 307 - LITTLE Rephone No. ► 501-376-2852 FAX No. ► e organization does not have an office or place of business in the United States, check this box	069 370 COCK	r the whole group, check this
is	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unto MAY 15, 2011, to file the exempt organization return for the organization named a for the organization's return for: calendar year or X tax year beginning JUL1, 2009, and ending JUN30, 2010 this tax year is for less than 12 months, check reason: Initial return Final return	above.	The extension Change in accounting period
3a If	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
_	onrefundable credits. See instructions.	3a	s 0.
	this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
_	ax payments made. Include any prior year overpayment allowed as a credit. Salance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b	\$ 0.
	eposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	7.53 i	
s	ee instructions	3c	\$ 0.

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