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			V		
-	. (990	Return of Organization Exempt From Incom	е Тах	OMB No 15/15-0047
For	n -	330	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exce		2010
			benefit trust or private foundation)	prolack rong	
		f the Treesury			Open to Public
		nue Service	► The organization may have to use a copy of this return to satisfy state reporting		Inspection' A
_			ar year, or tax year beginning 07-01 , 2010, and en	ding 06	-30 ,20 11
		applicable,	C Nama of organization ARKANSAS TRIAL LAWYERS ASSOCIATION	·····	D Employer identification no
	iaaress Isme ch	change	Doing Business As		51-0189104
	ndial rel		Number and street (or P.O. box if mail in not dollvered to street address) 1400 WEST MARKMAM	Room/sults	E Telephone number
ď	erminal		City or town, state or country, and ZIP • 4	307	(501)376-2852 614,788
		d raturn	LITTLE ROCK, AR 72201		G Gross receipts \$
		on pending	F Namo and address of principal officer LLOXD W KITCHENS	T	G Gross racerpts 2
	- Private (1	ponding	500 PLEASANT VALLEY DR STE C, AR 72227	H(a) le this a group affiliates?	return for Yes 🔀 No
1 7	BX-0X9	mpt status.	501(c)(3) ☑ 501(c) (6) ◀ (insort no) ☐ 4947(e)(1) or ☐ 527	H(b) Are all affiliate:	
	/ebsite;		FLA , ORG	If "No," attach	e Included? Yes No a list. (see Instructions) on number
K, F	orm of	organization 🗴			gal domicilo. AR
Pai		Summar			
	1	Briefly describ	e the organization's mission or most significant activities: ATLA SERVES ITS MEN	MBERSHIP BY PRO	VIDING
		-	THROUGH CONTINUING LEGAL EDUCATION PROGRAMS AND PUBLICATIONS IN		
Ç G		PHASES OF			
t o				-	
y c	2	Check this bo	x 🕨 📙 if the organization discontinued its operations or disposed of more than 25% of its	net assets.	
t n	3		ting members of the governing body (Part VI, line 1a)		34
1 3	4		dependent voting members of the governing body (Part VI, line 1b)	4	34
5 C	5		of Individuals employed in calendar year 2010 (Part V, line 2a)	5	5
& °	6		of volunteers (estimate if necessary)	6	
	7a			78	32,590
	ь	Net unrelated	business taxable income from Form 990-T, line 34 D acceived EUC	75	1
			d business revenue from Part VIII, column (C), line 12 business taxable income from Form 990-T, line 34 Received EOCA	Prior Year	Current Year
R	8	Contributions	and grants (Part VIII, line 1h)	428,44	
v	9	December of	ice revenue (Part VIII, line 2g)	1.50 50	
n	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)	1 68	
п	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1160 S. OGGETT,	<u> </u>	6,437
-	12	Total revenue	correvenue (Part VIII, Inite 2g) come (Part VIII, column (A), lines 3, 4, and 7d) e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 1) - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	592,66	612,952
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)		0
_	14		to or for members (Part IX, column (A), line 4)		0
E	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	284,30	312,547
p a	16a		undraising fees (Part IX, column (A), line 11e)		0
n	1		Ing expenses (Part IX, column (D), line 25)		المراكات وأراك المراكات
8	17		es (Part IX, column (A), lines 11a-11d, 11f-24f)	264,97	
8	18		es. Add lines 13-17 (must equal Part IX, column (A), line 25) مرا المنظمة الم	549,28	591,434
	19		expenses. Subtract line 18 from line 12	43,38	21,518
Net			DEO 4 0 204/	eginning of Current Year	End of Year
Assets	20	Total assets (Part X, (ine 16)	116,98	149,368
und	21	Total liabilities	(Part X, line 26)	19,31	
iai- nces	22		fund balances Subtract line 21 from line 20	97,67	
Par	t II	Signatu	re Block IKO UGEET, O 1741		
nder	penaitie	es of perjury, I dr	clare that I have examined this return including accompanying achedules and statements, and to the h id complete. Declaration of property (shorthan officer) is based on all information of which proparer h	est of my knowledge	
na be	uler, it i	s true, correct, a	nd complete. Declaration of preparer (other than officer) is brised on all information of which preparer hi	as any knowledge.	1 - 1.
		MATTH	EW HASS		<i>\ \</i> }8 1
ìlgr)	Signatur	o of officer	Da	te
tere	•	MATTH	EW HASS, EXECUTIVE DIRECTOR		
			print name and title	~~~	
		Print/Type pr	aparer's namo Dete	Check X II	PTIN
Paid		1	T KINNEMAN / SAMMAN 11-28-2011	self-employed	PO1233523
Prep	arer	Firm's name		Firm's EIN 73-0	822916
-	Only		500 0 0000	Phone no	501-223-3581
			LITTLE ROCK AR 72211		l
May t	ne IRS	discuss this re	turn with the preparer shown above? (see instructions)		X Yes No
For P	aperw	ork Reductio	n Act Notice, see the separate Instructions.	EEA	Form 990 (2010)

	990-T (2010) ARKANSAS TRIAL LAWYERS ASSOCIATION	51	-018	9104	F	age 2
Par	t'III Tax Computation					
35	Organizations Taxable as Corporations. See instructions for tax computation. Controlled group		٠.			
	members (sections 1561 and 1563) check here	- 1	٠,			
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)		- i-			
	(1) \$ (2) \$ (3) \$	İ				
þ	Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$					
	(2) Additional 3% tax (not more than \$100,000)		- 1			
C	Income tax on the amount on line 34		35c			
36	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on	ſ	, , ,			-
	the amount on line 34 from. 🔲 Tax rate schedule or 🔲 Schedule D (Form 1041)	▶	36			
37	Proxy tax. See instructions		37			
38	Alternative minimum tax	1	38			
39	Total. Add lines 37 and 38 to line 35c or 36, whichever applies		39			•
Par	IV Tax and Payments					
40a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 40a					
ь	Other credits (sec Instructions)		'			
C	General business credit, Attach Form 3800					
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		~			
e	Total credits. Add lines 40a through 40d		40e			
	Subtract line 40e from line 39		41	** · · · ···		
42	Other taxes: Chack if from, Form 4255 Form 8811 Form 8697 Form 8866 Other (attack	h sabadula)	42			
43	Total tax. Add lines 41 and 42	11 11/10/21/14)	43			
	Payments: A 2009 overpayment credited to 2010	[-	- 			
	2010 estimated tax payments					
c	Tax deposited with Form 8868		, ,			
	Foreign organizations: Tax paid or withheld at source (see Instructions) 44d	 ,				
	Backup withholding (see instructions)		'			
	• · · • · · · · · · · · · · · · · · · ·]			
		—— `	.			
, <u>,</u>			" [
45						
	Total payments. Add lines 44a through 44g		45			
	Estimated tex penalty (see instructions). Check if Form 2220 is attached		46	_		
	Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed		47	_		
	Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid		48			
	Enter the amount of line 48 you want: Credited to 2011 astimated tax		49			
Par		ictions)				
	At any time during the 2010 calendar year, did the organization have an interest in or a signature				Yes	No
	or other authority over a financial account (bank, securities, or other) in a foreign country?					, *\r\
	If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and			,		
	Financial Accounts. If YES, enter the name of the foreign country here					
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a f	oreign trust?	,			
	f YES, see instructions for other forms the organization may have to file.					14 (4
	Enter the amount of tax-exempt interest received or accrued during the tax year \$				للنن	
	dule A - Cost of Goods Sold. Enter method of Inventory valuation					
1	nvcntory at beginning of year 1 6 Inventory at end of year	, , ,	6			
	Purchases					
3	Cost of labor	d	۱. ۱			
4a	Additional section 263A costs In Part I, line 2	[7			
	attach schedule)	th respect to			Yes	No
b	Other costs (attach schedule) 4b property produced or acquired fi	-		ľ	Ţ	, Y ; Y ,
5	Total. Add lines 1 through 4b 5 to the organization?				-	
	Under penalties of perjury, I declare that I have examined this return, including accompanying schoolins and statements	and to the be-	ım ia te	knowledge	and	
Sign	belief, it is true, corrected a complete Declaration of proparer (other than laxpayer) is based on all information of which	preparer has a	ny kno	windga,		
Here	11/28/11 EXECUTIVE DIRECTOR			IRS discus		
	Signature of officer Date Title			tructions) 📝		No
	Print/Type proporer's name / Print/Type proporer's name Date	Chrok X i		PTIN	168	140
Paid	WILLIAM T KINNEWAN WILLIAM T KINNEWAN 11-28-2011	self-employed		P012335	24	
Prepar	Signis name			822916	~ -	
Use O		T HIN & LIII	13-0			
	LITTLE ROCK AR 72211	Phone no		501-22	3_2=	ÀΊ

	m 990 (2010) Arkansas trial lawyers association	51-0189104	Page 2
Pa	Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III		<u> L.</u>
1	Bnefly describe the organization's mission.		
	ATLA SERVES ITS MEMBERSHIP BY PROVIDING TRAINING THROUGH CONTINUING LEGAL EDUCATION PROC	irams	
	AND PUBLICATIONS IN ALL FIELDS AND PHASES OF ADVOCACY.		
2	Did the organization undertake any significant program services during the year which were not listed on	_	_
	the prior Form 990 or 990-EZ?	L Yes	x No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	_	
	services?	🗌 Yes	x No
	If "Yes," describe these changes on Schedule O.		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and		
	allocations to others, the total expenses, and revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 562,873 Including grants of \$) (Revenue	\$)
	PROVIDED SEMINARS AND OTHER SERVICES TO THE ARKANAS LEGAL COMMUNITY.		 '
			
4b	(Code:) (Expenses \$28,561 including grants of \$) (Revenue	\$)
	QUARTERLY PUBLICATION CALLED THE DOCKET.		
			_
			
4c	(Code:) (Expenses \$including grants of \$) (Revenue	\$)
	, , , , , , , , , , , , , , , , , , , ,	"	
		,	
			· · · · · · · · · · · · · · · · · · ·
			
4d	Other program services. (Describe in Schedule O.)	- · · · · · · · · · · · · · · · · · · ·	
	(Expenses \$ including grants of \$) (Revenue \$	1	
te	Total program service expenses 591,434		
	EEA		m 990 (2010)
	EEV	r-Qr	··· 654 (FO IO)

ستسا				
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<u> </u>	Yee	No
_		1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campalgn activities on behalf of or in opposition to	ŀ		1
	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, or have a section 501(h)			1
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5		-		+
•	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,		l	
_	or similar amounts as defined in Revenue Procedure 98-19? 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	1		1
	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,	<u> </u>		+
•	the environment, historic land areas, or historic structures? if "Yes," complete Schedulo D, Part II	l _	i	35
	Did the component, riscone tartia areas, or miscone structures rin 195, complete schedulo D, Part II	7		X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ľ		
	complete 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 nogotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		$ \mathbf{x} $
10				<u> </u>
	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	If the organization's enswer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	1 .	1.64	44.7.4
	VII, VIII, IX, or X as applicable.	1 6	15 6	
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	i l		, "
	Schedule D, Part VI	11a	х	
,	b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more	118	_^	
•	to the digatization 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	11b		X
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			ļ
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	'	X
(Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			T -
	reported In Part X, line 167 If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		37	-^-
		11e	X	
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	l i		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	i 1		
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
_	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	125		x
13		12b		
	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		Х
14a	A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	14a		X
b		i		
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes." complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	3		
	to individuals learned a visited as a Link Chairm (A), mile 3, more triant 35,000 or aggregate grants or assistance	i I		4.5
47	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundralsing services			1
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	=	40	- 1	Х
19		18		-A.
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
٠.	If "Yes," complete Schedule G, Part III	19		<u>X</u>
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a]	X
þ	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited (prencial statements (and leaterstice))	20b		
	state of the state			

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	the diganization own 100% of an entity disregarded as separate from the organization under Regulations	'	, ,	1	
	sections 301,7701-2 and 301 7701-3? If "Yes," complete Schedulc R, Part I	33		X	
	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		X	
Is any related organization a controlled entity within the meaning of section 512(b)(13)?					
	Did the organization receive any payment from or engage in any transaction with a				
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R.			i	

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

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,

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

conservation contributions? If "Yes," complete Schedule M

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 Form 990 (2010)

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Х

	Check if Schedule O contains a response to any question in this Part V	. <u></u>		. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	760		
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	7. 7.	1.	11/2
	gaming (gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1, 1, 5,	J. 1. 1. 1. 1.
	Statements, filed for the calendar year ending with or within the year covered by this return 2a	, · š		45%
ь	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, (see instructions)			3 3
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	_X_	
b	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 authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	1	ĺ	ļ
	account)?	4a		X
b	If "Yes," enter the name of the foreign country:		,	1.17
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	,	12.03	ימי ומי
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	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		\mathbf{x}_{-}
ь	If "Yes," dld the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	.; (1 1
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	, -	' '-'	إنول ا
	and services provided to the payor?	7a		
ь	If "Yes." did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 82827	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	-	1,1	15,15,3
ę	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of care, boats, airplanes, and other vehicles, did the organization file a Form 1098-0?	7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7	de 6	4 .7
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		. 3	1.5
	organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.	.5	16.35	1 ⁵ E. She
a	Did the organization make any taxable distributions under section 4966?	9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:	100		181
a	Initiation fees and capital contributions included on Part VIII, line 12		<u> </u>	1, 7, 1
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			F 771
11	Section 501(c)(12) organizations. Enter:		13,	13. 4
а	Gross income from members or shareholders ,		15	1
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		` ' ' '
	amounts due or received from them.)		de e	11
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
þ	If "Yes," enter the amount of tax-exempt Interest received or accrued during the year 12b		10	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			7 44
a	is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional Information the organization must report on Schedule O.		,' ", <i>'</i>	W. V
þ	Enter the amount of reserves the organization is required to maintain by the states in which		٧. ٦	協能な
	the organization is licensed to issue qualified health plans	i;.	وأجاله وا	
Ç	Enter the amount of reserves on hand			31
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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rmn.	MMI 1	LADIU:	•

	990 (2010) ARKANSAS TRIAL LAWYERS ASSOCIATION 51-018910)4	F	⊃age 6
Par	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			_
	Check if Schedule O contains a response to any question in this Part VI			. X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year] ; ;	1.13	
þ	Enter the number of voting members included in line 1a, above, who are independent	1 "	100	1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	7.	. · ·	
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3_		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4_	<u> </u>	Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	<u></u>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a_	X	
þ	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b_	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1,1	. 1
	the year by the following.	,		100,035
а	The governing body?	8a_	Х	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	is thore any officer, director, trustee, or key employee listed in Part VII, Section Λ, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	ion B. Policies (This Section B requests Information about policies not required by the Internal Revenue Code.)			
	_		Yee	No
	Does the organization have local chapters, branches, or affiliates?	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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filling the			
	form?	11a_	X	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	100 g	والأراد	५ क्
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	_X_	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
	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	
	Does the organization have a written whistleblower policy?	13	X	
	Does the organization have a written document retention and destruction policy?	14	X	
	Did the process for determining compensation of the following persons include a review and approval by		. 2	No.
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	55	55.46	
	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See Instructions.)	, ,	, " , '	345
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	``		5 4 (11 mg)
	with a taxable entity during the year?	16a		X
	if "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	- 4. /		
	ts participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	1		1
	the organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
	list the states with which a copy of this Form 990 is required to be filed			
81	Section 8104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply.			
	☑ Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
1	olicy, and financial statements available to the public.			
	State the name, physical address, and telephone number of the person who possesses the books and records of the			
(organization: ORGANIZATION (501)376-2852			
	1400 WEST MARKHAM STE 307 LITTLE ROCK, AR 72201			

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ARKANSAS TRIAL LAWYERS ASSOCIATION

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

Chack If Schedule O contains a response to any question in this Part VII

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

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

Check this box if neither the creatization per say related organizations compensated any current officer, director, or

Name and Titio	Check this box if neither the organization nor any relate	od organizations	compe	ะกรถ	ted a	iny (current	offic	er, director, or truste	e	· ·
Pour park Pour	(A)	(E)			(C)			(10)	(E)	(F)
GOVERNOR	Name and Titlo	hours por work (describe hours for related organizations in Schedula			0	Key of plove	Homping and the second	F O I	compensetion from the organization	componsation from related organizations	amount of other componsation from the organization and rolated
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

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
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- Ust 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.

Name and Title	Average hours per work (doscribe hours for related organizations	Posi I I d n r i d u r i a e v i c	1 1	0		that app		Reportable	Raportable	Estimated
	in Schodule	4 6 6	6	[] []	Key cap-ayee	to mploynest od	F O r M O r	compensation from the organization (W-2/1099-MISC)	compensation from rolated organizations (W-2/1089-MISC)	emount of other compensation from the organization and related organizations
ROBERT H EDWARDS						<u> </u>	\vdash			
GOVERNOR	1.00	_X_	_	_	ļ			0	D	0
ROBIN C SMITH		7,		}						
GOVERNOR RUTHANNE MURPHY	1.00	X		-	<u> </u>	<u> </u>	-	0	0	0
GOVERNOR	1.00	х						,		
SACH OLIVER	1.00		-		-			0	•	
GOVERNOR	1.00	X						o	o	c
SANDRA C BRADSHAW			\vdash							
GOVERNOR	1.00	Х						O	0	Ç
TIM CULLEN										
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)				_	_		_			

3	Did the organization list any former officer, director or trustee, key employee, or highest compensated	75	ļ	100
	employee on line 1a? If "Yes," complete Schedule J for such individual	3		X_
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from	, ⁴ 1	31	14, 13
	the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such		, '> '.	
	Individual	4		X_
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual		. ' .",	10.54
	for services rendered to the organization? If "Yes," complete Schedule J for such person	5		Х
_				

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of
compensation from the organization.

(A)	(B)	(C)
 Nemo and business addross	Description of services	Compensation
 Total number of independent contractors (including but not limited to those listed above) who received	<u> </u>	44.44.13

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization

Form 990 (2010)

Yes No

Part"	VIII	Statement of Revenue					51-01891	04 Page
					(A) Total ravanua	(B) Rolated or exempt function revenue	(C) Unrelated business ravenue	(D) Revonus sxcluded from tax under scotlons 512, 513, or 514
Contri- butions,	1a b	Membership dues	. 1a . 1b					
grants and other similar amounts	e f	Government grants (contributions) .	. 1d . 1e	152,614				ر از استوراد از استوراد از
in adding	g	Noncash contributions included in lines	1a-1f: \$		(4.3.9)		13 (JA)	
		Total: Add lines (a-1)	<u> </u>	Business Code	152,814			
	2a	SEMINAR & MEETING		541100	116,932	116,932		[''
Program	b	MISC ADVOCACY ACTIV		541100	17,502	17,502		
Service	C .	PUBLICATION ADVERTISING		541800	32,590		32,590	
Revenue	d	MEMBER DUES		541100	285,640	285,640		
	e	All						
	f	- ·	• • • •					
		Total. Add lines 2a-2f			452,664		711-	g . Pille ask w
		Investment income (Including dividends, in other similar amounts)			1,037	1,037		
	4 5	Income from investment of tax-exempt be						
	ə	Royalties					 	
i	A -		Roal	(II) Personal	, ,,,,		7 100	
		Gross Rents) - (· · · · · · · · · · · · · · · · · ·	1 元 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1 · 1
1		Less: rental expenses		·		- 2		
ļ		Rental income or (loss)			4 10 10 -1			5 k
				· · · · · · · · ·				
	7a	Gross amount from sales of assets other than inventory	curitles	(ii) Other				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1		Less: cost or other basis			<u>'</u>		la l	
0		and sales expenses						
<u>t</u>		Gain or (loss)			• • • • • • • • • • • • • • • • • • • •		· '*	The state of the s
n		Net gain or (loss)	,	<u> ▶</u>				
ř		Gross Income from fundraising events (not including \$						
R		of contributions reported on line 1c).				,		ر در
e		See Part IV, line 18	, a	8,273				الأراديم المحدد الم معدد المحدد
ė		Less: direct expenses	ь	1,836				
n		Net income or (loss) from fundraising ever	,		6,437			6,437
e		Gross income from gaming activities	``` `		1 1 1 1			7. 51 15 16 16 16 16 16
		See Part IV, Ilne 19	a l				7 (7 (7 (7 (7 (7 (7 (7 (7 (7 (
1		Less: direct expenses			'}	S		137
-		Net income or (loss) from garning activities			•	•	` '	, , , , , , , , , , , , , , , , , , , ,
	10a	Gross sales of inventory, less returns and allowances					- 11 - 12 - 13 - 13 - 13 - 13 - 13 - 13	
	b	Less: cost of goods sold	Б					a Sobjeterija
<u> </u>	<u> </u>	Miscellandous Revenue	· · · · · · · · · · · · · · · · · · ·	Business Code		"		
- 	11a	мізсеньнавич кечапиа	·	Business Code			· ' '	11
- 1	b				 -			
1	ç		 }					
-	_	All other revenue						
		Total. Add lines 11a-11d					y 70 y 1	The Table of the Table of
1.		Total revenue, See instructions						18.
	-	Total tevaling, Sea Maingions		· · · · · · · · · · · · · · · · · · ·	612,952	421,111	32,590	6,437

51-0189104

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 not include amounts reported on lines 6b, (A) Total expenses (B) Program servinn 7b, 8b, 9b, and 10b of Part VIII. Menagemont and Fundraising OXPORS99 genoral expenses Grants and other assistance to governments and охрапавв organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 78,031 78,031 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 190,027 190,027 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 9 22,393 22,393 10 22,096 22,095 Fees for services (non-employees). a Management , , , , 12,575 12,575 54,000 54,000 Professional fundralsing services, See Part IV, line 17 12 Advertising and promotion Office expenses 13 17,411 1.7,411 14 Information technology 285 285 15 16 55,372 55,372 17 2,961 2,961 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 3,350 3,350 23 Insurance 2,271 2,271 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) BANK CREDIT CARD FEES 6,721 6,721 h AUTO 5,831 5,831 c PUBLICATION EXPENSE 28,561 28,561 d SEMINARS AND MEETINGS 60,969 60,969 LEGISLATIVE EXPENSE 12,377 12,377 16,203 16,203 Total functional expenses, Add lines 1 through 24f. 591,434 591,434 0 0 Joint Costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

	990 (2 rt X	THE PROPERTY OF THE PROPERTY O		51-07	.89104 Page 1
Pa	πX	Balance Sheet			.89104 Page 1
			(A) Beginning of year		(B) End of year
	1 1	Cash - non-interest-bearing	8,337	1	End or year
	2	Savings and temporary cash investments	87,715	2	100 001
	3	Pledges and grants receivable, net	67,7,63	3	109,096
	4	Accounts receivable, not	11,984	4	20.500
	5	Receivables from current and former officers, directors, trustees, key	71.	1 -	29,880
		employees, and highest compensated employees. Complete Part II of		J	
	١	Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section	7 (A)	1 -	1 1 4 1 W 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
A		4958(f)(1)), persons described in section 4958(d)(3)(B), and contributing		1 .:	
5		employers and sponsoring organizations of section 501(c)(9) voluntary		1 . 4	
s ė		employees' beneficiary organizations (see instructions)	.]	6	
ť	7	Notes and loans receivable, net		7	
5	8	Inventories for sale or use		8	·· · · · · · · · · · · · · · · · ·
	9	Prepaid expenses and deferred charges	1,833	9	4,039
	10a	Land, buildings, and equipment: cost or		-	
		other basis. Complete Part VI of Schedule D 10a 69,845		13.5	
	ь	Less: accumulated depreciation 10b 63,492	7,116	10c	6,353
	11	Investments - publicly traded securities		11	0,333
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	***************************************	15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	116,985	16	149,368
	17	Accounts payable and accrued expenses		17	6,104
	18	Grants payable	2,0,0	18	3,201
	19	Deforred revenue	1,877	19	10,745
_	20	Tax-exempt bond liabilities		20	20,715
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
,	22	Payables to current and former officers, directors, trustees, key	1	-	等[w] (14.15) (4.15)
		employees, highest compensated employees, and disqualified		111	
. [persons. Complete Part II of Schedule L	<u>'</u>	22	111 1 1 1 1010
	23	Secured mortgages and notes payable to unrelated third parties		23	
•	24	Unsecured notes and loans payable to unrelated third parties		24	
'	25	Other liabilities. Complete Part X of Schedule D	14,765	25	13,328
	26	Total liabilities. Add lines 17 through 25	19,312	26	30,177
Ī		Organizations that follow SFAS 117, check here	1.11	_	10 30 30 10
F		complete lines 27 through 29, and lines 33 and 34.		· '	
u n	27	Unrestricted net assets	97,673	27	119,191
d	28	Temporarily restricted net assets ,		28	
В	29	Permanently restricted net assets		29	
a		Organizations that do not follow SFAS 117, check here	Water Company of the Company		1. Sept. 31 18 18 18 18 18 18 18 18 18 18 18 18 18
Ŀ		and complete lines 30 through 34.	-1, 1		
a n	30	Capital stock or trust principal, or current funds	,	30	1 1 1 1 1 1 1 1
c	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
e s	32	Retained earnings, endowment, accumulated income, or other funds	****	32	
٦	33	Total net assets or fund balances	97,673	33	119,191
I	34	Total llabilities and net assets/fund balances	116,985	34	149,368

EEA

Form 990 (2010)

	n 990 (2010) ARKANSAS TRIAL LAWYERS ASSOCIATION	51-0189	9704	г	Page 12
Pa	Reconciliation of Net Assets	<u> </u>	7203	<u></u>	uge 12
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		612,	952
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		591,	434
3	Revenue less expenses. Subtract line 2 from line 1	. 3		21,	518
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	. 4		97,	673
5	Other changes in net assets or fund balances (explain in Schodule O)	. 5			0
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,				
, T	column (B))	. 6		119,	191
ra	TXII Financial Statements and Reporting		·		
	Check if Schedule O contains a response to any question in this Part XII			<u></u>	
				Yes	No
ו	Accounting method used to prepare the Form 990:		Ì.		1:53
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		{		
	Schedule O.				· [**/ [84]
2a	Or manage the state of the stat		2		X
	Were the organization's financial statements audited by an independent accountant?		<u>2</u> t	<u> </u>	ļ
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		1		}
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		20	2 X	
	If the organization changed either its oversight process or selection process during the tax year, explain in] .	15 July 3.	
	Schedule O.		- l		
ď	If "Yes" to line 2a or 2b, check a box below to Indicate whether the financial statements for the year were				和。遵
	issued on a separate basis, consolidated basis, or both				
	Separate basis				47.14
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in		ļ	1	1.
	the Single Audit Act and OMB Circular A-133?		32	<u> </u>	X
þ	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3t		<u></u>
	REA		Fo	rm 990	(2010)

SCHEDULE C (Form 990 or 990-EZ)

b If "Yos," describe in Part IV.

For Paperwork Reduction Act Notice, see the Instructions for 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.

OMB No. 1545-0047 2010

Department of the Treasury Internal Revenue Service

Open to Public

, oct separate insodelions.	inspection in
If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, 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 Section 527 organizations: Complete Part I-A only. 	te Part I-B.
If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbyli	na Activities) then
 Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part 	Do not complete Part II R
f the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, Ilne	35a (Provu Tax), then
 Section 501(c)(4), (5), or (6) organizations: Complete Part III. 	out is taky toky, their
dame of organization	Employer Identification number
ARRANSAS TRIAL LAWYERS ASSOCIATION	51-0189104
Part I-A Complete if the organization is exempt under section 501(c) or is a s	section 527 organization.
1 Provide a description of the organization's direct and indirect applications as a second in the control of the organization	
Part IPB Complete if the organization is exempt under section 501(c)(3).	
	\$
	s
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	Yes No

Enter the amount directly expended by the filing organization for section 527 exempt function

Enter the amount of the filing organization's funds contributed to other organizations for section

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

4 5	ine 17b Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV									
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if nond, enter •G•	(e) Amount of political contributions received and promptly and directly delivored to a separate political organization if none, other -0					
(1)										
(2)										
(3)										
(4)										
(5)										
(6)										

Schedule C (Form 990 or 990-EZ) 2010

8ch	edule C (Form 990 or 990-EZ) 2010 ARKANSAS TRI	AL LAWYERS ASSO	CIATION		51-01891	04 Page 2
P	art II-A Complete if the organizat	ion is exempt u	nder section 50	1(c)(3) and filed	Form 5768 (elec	tion under
	section sort(n)).				(4122	
	Check if the filling organization belongs t	o an affiliated group.				
<u> </u>	Check if the filling organization checked	box A and "limited con	troi" provisions apply	,		
	Limits on Lo	bbying Expenditure	5		(a) Filing	(b) Affiliated
1a	(The term "expenditures"	' means amounts pa	ld or incurred.)		organization's totals	group totals
/a		pinion (grass roots lob	bying) , , ,			
c	A contraction of experimental religious and the contraction of the con	itive body (direct lobby	ing)	· . <i></i>		
d	. And the Build exhaustrates (and littles in girl) if)				
e	out exempt purpose expenditures					
f	And evening backage exhaugithtee (and littles, to					
•	coppying norwayable amount, Effer the amount	from the following table	e in both			
	columns.					
	If the amount on line 1e, column (a) or (b) is Not over \$500,000		nontaxable amour	ıt is :	11 11 11 11	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			ount on line 1c			
	Over \$500,000 but not over \$1,000,000		15% of the excess of			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	ver \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000		5% of the excess over	er \$1,500,000.		and the state of the
	Over \$17,000,000	\$1,000,000.				١٠ ٢٠٠
g h		•	• • • • • • • • • •	• • • • • • • •		
i	Subtract line 1g from line 1a If zero or less, enter Subtract line 1f from line 1c If zero or less, enter		· · · · · · · · · · ·			
i	If there is an amount other than zero on either line	-U				
,	reporting section 4911 tax for this year?					п., п.,
	reporting section for the year?				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	U Yes U No
	(Some organizations that	4-Year Averaging Po t made a section 50' ow. See the instruct	l(h) election do not	have to complete al	l of the five	
	Lob	bying Expenditures	During 4-Year Aver	aging Period		
			,,,		1	
	Calendar year (or fiscal year beginning in)	(a) 2007	(6) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying nontaxable amount					
ь	Lobbying ceiling amount (150% of line 2a, column (e))			12.		
С	Total lobbying expenditures		-			
d	Grassroots nontaxable amount					
0	Grassroots celling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					
.,		——————————————————————————————————————	EG	Α	Schedule C (Form	990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 ARKANSAS TRIAL LAWYERS ASSOCIATION Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 51-0189104 Page 3 (election under section 501(h)). (a) (b) Yes No Amount 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: Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? h Railles, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV Total. Add Ilnes 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 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? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6), Yes No Were substantially all (90% or more) dues received nondeductible by members? Х 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Х Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 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, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes." Dues, assessments and similar amounts from members 406,233 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 61,631 b Carryover from last year 2h 13,868 2c 75,499 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 61.,765 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 13,733 Taxable amount of lobbying and political expenditures (see instructions) 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-C, line 5; and Part II-B, line 1I. Also, complete this part for any additional information

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete If the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

2010

Department of the Transury Internal Rovenue Bervice

▶ Attach to Form 990. ▶ See separate instructions.

Open to Public Inspection

AF	KANSAS TRIAL LAWYERS ASSOCIATION	Employer identification number
P	irt V Organizations Maintaining Donor Advised Funds of Other Similar Funds	51-0189104
	Organizations Maintaining Donor Advised Funds or Other Similar Funds of the organization answered "Yes" to Form 990, Part IV, line 6,	or Accounts. Complete if
_		
1	Total number at end of year	(b) Funds and other accounts
2	Aggregate contributions to (during year)	
3	Aggregate grants from (duning year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised	
-		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be	Yes No
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other	
	purpose conferring impermissible private benefit?	П., П.,
(Pa	rt III. Conservation Easements. Complete If the organization enswered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organization (check all that apply).	/, line /.
	Preservation of land for public use (e.g., recreation or education) Preservation of an historical	Defining when the order of the control of the contr
	Protection of natural habitat Preservation of a certified hi	
	Preservation of open space	storic structure
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation	ration
	easement on the last day of the tax year.	AUSTIC
	, , , , , , , , , , , , , , , , , , , ,	Held at the End of the Tax Year
а	Total number of conservation easements	
b	Total acreage restricted by conservation easements	
c	Number of conservation easements on a certified historic structure included in (a)	
d	Number of conservation easements included in (c) acquired after 8/17/06 and not on a historic	
	structure listed in the National Register.	. 2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization	ion during
	the tax year	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	<u>_</u>
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year	ear
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year	
_	\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section	m., n.,
	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statemen	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that de-	scribes
105	the organization's accounting for conservation easements. Conservation easements. Conservation easements. Conservation easements.	har Dimilar Acada
- [[Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	ner Simnar Assets.
18	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and but	planes choot works of
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of p	
	provide, in Part XIV, the text of the footnote to its financial statements that describes these items.	addire del Alce,
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balan	ine sheet works of art
_	historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public	c sendee
	provide the following amounts relating to these items;	9 351 AIGE
	(i) Revenues included in Form 990, Part VIII, line 1	> s
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provi	ide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
a	Revenues included in Form 990, Part VIII. line 1	> s
þ	Assets Included in Form 990, Part X	
		· · · · · · · · · · · · · · · · · · ·

collection iter a Public ex b Scholarly c Preserve 4 Provide a des	Organizations Maintaining anization's acquisition, accession, and (check all that apply); hibition research flon for future generations conpition of the organization's collections.	and other records, ch	eck any of the follow can or exchange prother	ing that are a si	ignificent	ner Similar As	Sét s (conti	nued)
a Public ex b Scholarly c Preserve 4 Provide a des	ns (check all that apply); hibition research Non for future generations	d Co	an or exchange pro		ignilicent (use of its		
a Public ex b Scholarly c Preserve 4 Provide a des	hibition research Non for future generations	е Ц о		orams				
c Preserva 4 Provide a des	lon for future generations	е Ц о						
4 Provide a des				g, a, 1 12				
4 Provide a des				Th				
	-	ions and explain bow	they further the ara	anization's ever	mhi numo	no io		
Part XIV			aroj miner me org	611128110(13 BAE)	npi porpo	SC III		
5 During the ye	ar, did the organization solicit or rec	eive donations of art.	historical treasures	Or other eimilar	•			
assets to be s	old to raise funds rather than to be	maintained as part of	f the organization's o	ollection?	l		. 🗌 Yes	□ No
Part IV	scrow and Custodial Am	angements. Co	implete if organization	n answered "Y	es" to For	m 990.	160	
P	art IV, line 9, or reported an amount	on Form 990, Part X	(, line 21,					
1a is the organiz	ation an agent, trustee, custodian o	other intermediary f	or contributions or of	ther assets not				
included on F	orm 990, Part X?						. 🗌 Yes	□ No
b If "Yes," expla	in the arrangement in Part XIV and	complete the following	ng table:					
						Am	ount	
c Beginning bal	ance				1c			
d Additions duni	ng the year				1d			
e Distributions d	uring the year		• • • • • • • • • • • • • • • • • • • •		1e			
f Ending balanc	e , , , <i>, , , , , ,</i> , , , , ,		, , ,		1f			
2a Did the organi	zation include an amount on Form (990, Part X. line 21?					. Yes	No
b if "Yes," expla	n the arrangement in Part XIV,							
Part V Er	dowment Funds. Complete		nswered "Yes" to Fo	rm 990, Part IV,	line 10		.,	
4- D1	t-k	(a) Current year	(b) Prior year	(c) Two yes	rs back	(d) Three years back	(e) Four yes	rs back
1a Beginning of y							12 1 1 1 1 C	100
								
	t earnings, galns, and losses .	·				<u> </u>	<u> </u>	111111
d Grants or scho		<u> </u>					"	<u> (95 k</u>
	ures for facilities				Ì			
	expenses						h	<u> </u>
	•					The state of the s	11.00	<u> </u>
•	lance		<u> </u>				W	· • • • • • • • • • • • • • • • • • • •
	ted or quasi-endowment	palance neid as.						
b Permanent en								
c Term endowm								
	wment funds not in the possession	of the organization t	hat are hold and ode	almineannal fan ek.	_			
organization by		Of the Organization to	iataie iieo aiio aoi	nimistered for th	e		Ye	No
-	organizations						3a(l)	3 140
	janizations				· · · · ·		3a(I)	
), are the related organizations lister						3b	
•	rt XIV the intended uses of the orga	•					<u> </u>	
	ind, Buildings, and Equip							
	escription of investment	(a) Cost or of	thor basis (b) C	iost or other		ecumulated preciation	(d) Book val	no.
1a Land			DE DE	ou (emel)	,	proclation		
	rovements				-			
				69,845		63,492		6,353
	through 1e. (Column (d) must equ		X, column (B), line	10(c).)		▶		6,353

Part:VII Investments - Other Securities	LAWYERS ASSOCIATION	51-0189104	Page
	See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Malhad of valuation	
(1) Financial derivatives		Cost of and-of-year market value	
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
_(G)			
(H)			
_(i)			
Total. (Column (b) must equal Form 990, Part X, cot (B) line 12.)			
Part VIII Investments - Program Related.	See Form 990, Part X, line 13.		
(a) Description of invostment typo	(b) Book value	(c) Mothod of valuation: Cost or and-of-year market valua	
(1)		CO-1 OF HIG-OF-YOR TRAIRED VAIDA	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)		<u> </u>	· · · · · · · · · · · · · · · · · · ·
Total. (Column (b) must equal Form 880, Part X, col. (6) line 13.)			7. 3. 4. 3. A. A.
Part IX Other Assets. See Form 990, Part X, line	15		
	Description	(b) E	Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line		<u> , , , , , , , , , , , , , , , ,</u>	
Part X Other Liabilities. See Form 990, Part X,	ine 25.		
1. (a) Description of liability	(b) Amount		
(1) Federal income taxes			
(2) ACCRUED EXP AND WITHHOLDINGS	13,328	⊒្នៃក្នុង ខេត្ត ដែលប្រជាជា	
(3)			
(4)			
(5)			S. C. Brand
(6)			골목학생
(7)		耳った またる としられ 静竹	3 11 13 18
(8)			11,000 h
(9)			
(10)			2.5 电流流流
(11)	- 		
Total. (Calumn (b) must equal Form 990, Part X, col. (B) lina 26.)	13,328	Just the same of the same of the same of the	and a factor off.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's finality for uncertain tax positions under FIN 48 (ASC 740)

	20010 D (Form 990) 2010 ARKANSAS TRIAL LAWYERS ASSOCIATION	51-0189104	Page 4
i P.a	Reconciliation of Change in Net Assets from Form 990 to Audited Financial S	latements	
1	Total revenue (Form 990, Part VIII, column (A), Ilne 12)	1	612,952
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	591,434
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	21,518
4	Net unrealized gains (losses) on investments	4	21,516
5	Donated services and use of facilities	5	
6	Investment expenses	— -	
7	Pnor period adjustments	6	
8	Other (Describe in Part XIV)	7	
9	Total adjustments (net). Add lines 4 through 8	8	
10		9	
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 It XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	10	21,518
	The state of the s	er Return	
1	Total revenue, gains, and other support per audited financial statements	. 1	612,952
2	Amounts included on line 1 but not on Form 990. Part VIII, line 12.		
a	Net unrealized gains on investments	' ,	
þ	Donated services and use of facilities	\neg	
¢	Recoveries of prior year grants	<u> </u>	
d	Other (Describe in Part XIV)		
ę	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	612,952
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	· -3-	012,332
а	Investment and an artifact of the second and the se		
b			
¢		-	
		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	612,952
	Partition of the control of the cont	per Return	
1	Total expenses and losses per audited financial statements	. 1	591,434
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
2	Donated services and use of facilities		
þ	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV.)	7 1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1		591,434
4	Amounts Included on Form 990, Part IX, line 25, but not on line 1:	,	
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIV.)	\dashv \mid \mid	
c	Add lines 4a and 4b	- <u>,</u> ,	
_			
<u>5</u>	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	591,434
	rt XIV Supplemental Information		
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4, Part IV, lines 1b		
	2b; Part V, Ilne 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 p	ent to provide any additional information.		
			
		<u> </u>	

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding **Fundraising or Gaming Activities**

Complete if the organization enswered "Yes" to Form 990, Part M, lines 17, 16, 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.

Soo superate instructions.

OMB No. 1515-0047

2010

Open to Public Inspection

Internal Rovenus Service Name of the organization Employer Identification number ARKANSAS TRIAL LAWYERS ASSOCIATION 51-0189104 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e U Solicitation of non-government grants Internet and small solicitations þ f Solicitation of government grants Phone solicitations □ Special fundraising events d In-person solicitations 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes ☐ No b If "Yes," list the ten highest paid Individuals or entitles (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (fi) Activity (III) Did fundralagi heve (IV) Gross receipts (v) Amount paid to (vi) Amount paid to or ontity (fundralser) custody or control of from activity (or retained by) (or retained by) contributions? fundralser listed in organization col. (I) Yes No 2 3 4 6 7 8 9 10 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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		3 (Form 990 or 990-EZ) 2010 ARK	ANSAS TRIAL LAWYER	ASSOCIATION	51;	-0189104 Paga 2
<u> </u>	art:li	Fundraising Events. Co than \$15,000 of fundraising gross receipts greater than	event contributions ar	ion answered "Yes" to Fo nd gross income on Form	orm 990, Part IV, line 1 1 990-EZ, lines 1 and 6	8, or reported more b List events with
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
Ŕ			(event type)	(event type)	(total number)	Add col. (a) through
v e	1	Gross receipts				
n	2	Less: Charitable				
e		contributions				
	3	Gross Income (line 1 minus line 2)				
	4	Cash prizes				
D	5	Noncash prizes				
r e C	6	Rent/facility costs				
t _	_					
EXD	7	Food and beverages				
р е п	8	Entertainment				
\$ 0 S	9	Other direct expenses				
	10	Direct expense summary. Add lines 4			, , , , , , , , , ,	
	11 rt 111	Net income summary Combine line 3			<u> </u>	
"F a	i C III	Gaming. Complete if the than \$15,000 on Form 990		"Yes" to Form 990, Part	IV, line 19, or reported	more
R						
Š			(a) Bingo	(b) Pull labs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Reverse	1	Gross revenue			(c) Other gaming	
	2	Gross revenue			(c) Other gaming	
חרפטת					(c) Other gaming	
D-רפטד שאספנ	2	Cash prizes			(c) Other gaming	
ם-רפטד שאספ	3 4	Cash prizes			(c) Other gaming	
D-רפטד שאספנ	2 3 4 5	Cash prizes			(c) Other gaming Yes%	
D-רפטד שאספנ	2 3 4 5	Cash prizes	(a) Bingo	bingo/progressive bingo		
D-רפטד שאספנ	2 3 4 5	Cash prizes	Yes% No through 5 in column (d)	Yes%		
ם-רפטד שאספנ	2 3 4 5 6 7 8 Entities the list the	Cash prizes	(a) Bingo Yes % No through 5 in column (d) ne line 1, column d, and line n operates gaming activitie	bingo/progressive bingo Yes % No 8.		
D-rect Expenses	2 3 4 5 6 7 8 Entities the list the	Cash prizes	(a) Bingo Yes % No through 5 in column (d) ne line 1, column d, and line n operates gaming activitie	bingo/progressive bingo Yes % No 8.		cal (a) through col. (c))
D-rec Expenses	2 3 4 5 6 7 8 Entitif "N	Cash prizes	(a) Bingo Yes % No through 5 in column (d) ne line 1, column d, and lin n operates gaming activitie ming activities in each of the	Yes % No No No	Yes %	cal (a) through col. (c))

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Schedule G (Form 990 or 990-EZ) 2010

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Informal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ,

OMB No 1545-0047

2010

Open to Public

Employer kientification number

ARCANSAS TRIAL LAWYERS ASSOCIATION	51-0189104
01. Unrelated business income explanation (Part V, line 3b)	
ADVERTISING REVENUE IS GENERALTED IN THE ORGANIZATION'S QUARTERLY PUBLICATION, TO	HE DOCKET.
02. Members or stockholder classes and rights (Part VI, line 6)	
THE ORGANIZATION HAS A STATEWIDE (ARKANSAS) MEMBERSHIP OF APPROXIMATELY 1000.	
03. Member election for additional mombers (Part VI, line 7a)	
THE BOARD OF GOVERNORS IS ELECTED BY THE ENTIRE MEMBERSHIP. A SLATE OF OFFICERS I	s
PRESENTED BY THE EXECUTIVE COMMITTEE TO BE VOTED ON BY THE MEMBERS AT LARGE.	
04. Governing body decisions (Fart VI, line 7b)	
CHANGES TO THE BY-LAWS ARE SUBJECT TO APPROVAL OF MEMBERSHIP.	
05. Form 990 governing body review (Part VI, line II)	
THE ORGANIZATION PROVIDES A DRAFT OF THE 990 AT THE ANNUAL MEMBERSHIP FOR APPROVA	L PRIOR
TO FILING.	
06. Conflict of interest policy compliance (Part VI, line 12c)	
ORGANIZATION HAS A CONFLICT OF INTEREST POLICY COVERING OFFICERS THE EXECUTIVE CO	MMITTEE
AND OTHER VOLUNTEER LEADERS OF THE ORGANIZATION. COVERED PERSONS ARE REMINDED OF	THE
POLICY AT EACH MEETING.	
THE POLICY SPECIFIEDS PROCEDURES FOR ADDRESSING A CONFLICT OF INTEREST AND FOR	
DETERMINING IF A MORE ADVANTAGEOUS TRANSACTION IS FEASIBLE. IF A VIOLATION OCCUR	s, the
MEMBER IN VIOLATION WILL BE OFFERED AN OPPORTUNITY TO EXPLAIN THE FAILURE TO DISC	LOSE THE
TRANSACTION AND THE EXECUTIVE COMMITTEE WILL DETERMINE THE APPROPRIATE ACTION TO	BE TAKEN.

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

Schedule O (Form 990 or 190-EZ) (2010)

EEA

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization	Page
ARKANSAS TRIAL LAWYERS ASSOCIATION	Employer identification number 51-0189104
07. CEO, executive director, top management comp (Part VI, line 15a)	
THE BOARD OF GOVERNORS REVIEWS THE SALARY OF THE EXECUTIVE DIRECTOR	The record of a substitute
OF THE EXECUTIVE DIRECTORS OF VARIOUS OTHER STATE LAWYER ORGANIZATION	NS. THE DECISION
MAKING PROCESS IS INCLUDED IN MINUTES FOR THE MEETING.	
08. Other officer or key employee compensation (Part VI, line 15b	
SALARIES OF OTHER EMPLOYEES ARE REVIEWED ANNUALLY BY THE EXECUTIVE CO	MMITTEE.
09. Governing documents, etc, available to public (Part VI, line 19)	
THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF I	NTEREST POLICY, AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.	
	79.52.11.005.18.41. 4
EA	Schedule D (Form 990 or 990-EZ) (2010)