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Department of the Treasury

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

The construction may have be use a copy of the return to satisfy state reporting requirements

Open to Public

merr	iai "ieven	the organization may have to use a copy of this return to satisfy sta	ite reporting requ	irements	Inspection
<u>A</u>	For the	e 2011 calendar year, or tax year beginning , and ending			
В	Check if ap	pplicable C Name of organization		D Employ	ver identification number
	Address cl	hange IOWA ACADEMY OF TRIAL LAWYERS			
$\overline{\Box}$	Name cha	Doing Business As		42-	6095281
		Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephe	one number
□ '	Initial retur	^m 218 SIXTH STREET		515	-282-9477
	Terminate				
\Box	Amended	return DES MOINES IA 50309-0411		G Gross rece	espts\$ 150,509
\equiv		F Name and address of principal officer		G GIOSS JECC	
Ш [,]	Application	LEON SPIES	H(a) Is this a g	group return for a	affiliates? Yes X No
		218 SIXTH STREET	H(b) Are all a	ffiliates include	d? Yes No
		DES MOINES IA 50309			(see instructions)
					,
		mpt status 501(c)(3) X 501(c) (6) ◀ (insert no) 4947(a)(1) or 527	┥		
	Website		H(c) Group e		
		organization Corporation Trust X Association Other ► L	Year of formation	.962	M State of legal domicile IA
<u> </u>	art I	Summary			
	1 E	Briefly describe the organization's mission or most significant activities.			
e)		SEE SCHEDULE O			
ă					
ē		ш.			
Š	2 (Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than	25% of its net as	sets	
∞ ∞	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	17
es	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	17
Activities & Governance	5 7	Total number of individuals employed in calendar year 2011 (Part V, line 2a)		5	3
Ę	6 1	Total number of volunteers (estimate if necessary)		6	0
Q	1	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0
20	l	Net unrelated business taxable income from Form 990-T, line 34		7b	0
(REVARIVE/COS		Total and a defined a state of the state of	Prior Ye		Current Year
38	8 0	Contributions and grants (Part VIII, line 1h)	8	3,790	85,050
	9 F	Program service revenue (Part VIII, line 2g)		7,410	65,370
6	10 1	investment income (Part VIII, column (A), lines 3, 4, and 7d)		521	89
Œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	•	0	0
	l .	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	16	1,721	150,509
<u>-</u>	1	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		3,150	4,200
-7 ~	1 1	Benefits paid to or for members (Part IX, column (A), line 4)		0	0
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7	9,618	87,825
્ર ∑ે			—	0	0,,029
Supplemental Suppl		Professional fundralsing fees (Part IX, column (A), line 11e) Tôtal fundralsing expénsés (Part IX, column (D), line 25) ▶ 0			
₩.			12	1 020	77 142
_	1 17 15	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,828	77,142
		Total expenses: Add lines 13-17 (must equal Part IX, column (A), line 25)		4,596	169,167
. 0	19 4	Revenue less expenses Subtract line 18 from line 12		2,875	-18,658
Net Assets or Fund Balances		Total access (Dark V. Ivan 40)	Beginning of Cu	4,210	End of Year
SSe	20	Total assets (Part X, line 16)			72,321
T d	21	Total liabilities (Part X, line 26)		4,666	41,435
		Net assets or fund balances Subtract line 21 from line 20	4	9,544	30,886
	art II	Signature Block			
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and state			owledge and belief, it is
	ue, corre	ect, and complete Declaration of preparer (other than officer) is based on all information of which prepare	er nas any knowled	ge T	
		Davin			17/0/2
Sig	jn 💮	Signature of officer		Date	•
He	re				
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Date	Check	If PTIN
Paid	d	NEAL R. SMITH, CPA	05/02	2/12 self-em	ployed P00291482
Pre	parer	Firm's name POLLARD & COMPANY, PC		Firm's EIN ▶	42-1361546
Use	Only	5650 JOHNSTON DR STE A			
		Firm's address JOHNSTON, IA 50131		Phone no	515-251-8520
May	the IR	RS discuss this return with the preparer shown above? (see instructions)			Yes No
		work Reduction Act Notice, see the separate instructions.			Form 990 (2011)
DAA					Form 330 (2011)

		OF TRIAL LAWYERS	42-6095281	<u> </u>	Page 2
		Service Accomplishments			
		ontains a response to any question	in this Part III		X_
-	e the organization's miss	sion			
SEE SCHE	DOTE O				
2 Did the organi	zation undortalis anu su		h -h 1 1 1	· - · · · -	
prior Form 990		nificant program services during the year w	nich were not listed on the		Yes X No
	ribe these new services o	on Schodulo O			Yes A NO
		, or make significant changes in how it cond	lusto, any program		
services?	zation dease conducting	, or make significant changes in now it conc	lucis, any program		Yes X No
	ribe these changes on So	hedule O			1es 2E 140
	-	ervice accomplishments for each of its three	largest program services	as measured by	
		c)(4) organizations and section 4947(a)(1) tr			
		tal expenses, and revenue, if any, for each	·	ne amount of	
granto anto ant		ar expenses, and revenue, if any, for each	program service reported		
4a (Code) (Expenses \$	169,167 including grants of \$	4,200) (Revenue \$	<u> </u>
		CES FOR LAWYERS, JUDG			,
ADMINIST		,	,		
4b (Code) (Expenses \$	including grants of \$) (Revenue \$	······································
12 (0000) (Expended Ψ	including grants or \$) (Hevenue w	,
		 			
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
4d Other program	n services. (Describe in S	Schedule O)			
(Expenses \$	•	including grants of \$) (Revenue \$)
	n service expenses 🕨	169,167			
					

	``		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	, i		
_	complete Schedule A	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 campaign activities on behalf of or in opposition to			v
4	candidates for public office? If "Yes," complete Schedule C, Part I	3_		<u>x</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
5	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		-
3	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
•	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
•	complete Schedule D, Part III	8		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 temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			_
	VII, VIII, IX, or X as applicable			ŀ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			S
	complete Schedule D, Part VI	11a	x	
b	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	11b		x
С	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 167 If "Yes," complete Schedule D, Part VIII	11c		X
d	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 167 If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	<u> </u>	X
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	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
14a	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, investment, and program service activities outside the United States, or aggregate			l
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<u> </u>	X.
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		1	
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	-	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		1	۱
	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 fundraising services on		ļ	
	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	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
00-	If "Yes," complete Schedule G, Part III	19	-	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	X
0	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	<u> </u>	1

Form 990 (2011) IOWA ACADEMY OF TRIAL LAWYERS

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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 29 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 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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	() () () () () () () () () ()	05-		
b	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
	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	25h		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	25b		
	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 employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? 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		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		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			v
34	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,	33		X
-	IV, and V, line 1	24		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	33a		36
_	meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	330		-
	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	- 55		-
	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
			m 990	

_ Pa	Try Statements Regarding Other IRS Filings and Tax Compliand				
	Check if Schedule O contains a response to any question in this	Part V		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a 1	<u> </u>	168	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	_		
c	Did the organization comply with backup withholding rules for reportable payments to ven		_		
	reportable gaming (gambling) winnings to prize winners?		1c		Ì
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1	1.5		
	Statements, filed for the calendar year ending with or within the year covered by this return	n 2a 3			
b	If at least one is reported on line 2a, did the organization file all required federal employments		2b	×	İ
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see				
За	Did the organization have unrelated business gross income of \$1,000 or more during the		3a		x
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Scheduli	•	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature				
	over, a financial account in a foreign country (such as a bank account, securities account,	or other financial			
	account)?		4a		X
b	If "Yes," enter the name of the foreign country ▶				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank an	d Financial Accounts		1	
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 she	elter transaction?	5b		X
С	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		X
b	If "Yes," did the organization include with every solicitation an express statement that such	h contributions or			
_	gifts were not tax deductible?		6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).		`		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and	d partly for 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 provide		7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for	r which it was			
	required to file Form 8282?	1 1	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a person		7e	ļ <u>.</u>	 -
g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal bif the organization received a contribution of qualified intellectual property, did the organization received a contribution of qualified intellectual property.		7f		
9 h	If the organization received a contribution of qualified intellectual property, did the organization received a contribution of cars, boats, airplanes, or other vehicles, did to	· · · · · · · · · · · · · · · · · · ·	7 <u>g</u> 7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) s		- ///-		-
•	organizations. Did the supporting organization, or a donor advised fund maintained by a				
	organization, have excess business holdings at any time during the year?	Sportsoring	8		
9	Sponsoring organizations maintaining donor advised funds.				
а	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	<u>-</u>	 -
10	Section 501(c)(7) organizations. Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	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			
b	Gross income from other sources (Do not net amounts due or paid to other sources				
	against amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in	lieu of Form 1041?	12a	<u> </u>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			l	
а	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 Sche	dule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which	ch .			
	the organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year	7	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation				

Form	1 990 (2011) IOWA ACADEMY OF TRIAL LAWYERS 42-6095281		P	age 6
Pa	irt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below,	and f		
	"No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in S			
	O. See instructions. Check if Schedule O contains a response to any question in this Part VI			\mathbf{X}
<u>Sec</u>	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 1a 17	1		
	If there are material differences in voting rights among members of the governing body, or	1		
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O	1		
b	Enter the number of voting members included in line 1a, above, who are independent 1b 17	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		<u>x</u>
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		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	l		
_	stockholders, or persons other than the governing body?	7b		<u> </u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	X	
р 9	Each committee with authority to act on behalf of the governing body?	8b	<u> </u>	
3	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co			
	ANOTHER PROPERTY DE L'ANGE	uc.,	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	.,,,,	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	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).			
16a	9			
_	with a taxable entity during the year?	16a		X
р	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u>~~</u>	organization's exempt status with respect to such arrangements?	16b		Щ.
				
17 18	List the states with which a copy of this Form 990 is required to be filed NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made 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 made its governing documents, conflict of interest policy,			
. •	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			

organization **BILL RICHARDSON**

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
- 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 organization nor any related organizations compensated any current officer, director, or trustee (A) (D) (F) Name and Title Average Position Reportable Reportable Estimated compensation from hours per (do not check more than one compensation amount of related other week box, unless person is both an from organizations officer and a director/trustee) compensation (describe the organization (W-2/1099-MISC) from the hours for related ndividual trustee ey employee ighest compensated imployee (W-2/1099-MISC) organization stitutional trustee organizations and related in Schedule organizations O) (1) MAX KIRK 0.00 X 0 0 0 DIRECTOR (2) JAMES MC GUIRE 0.00 X 0 0 0 DIRECTOR (3) PAUL LUNDBERG 0.00 X 0 0 0 DIRECTOR (4) KRISTOPHER MADSEN X 0 0 0 0.00 DIECTOR (5) CONNIE DIEKEMA 0.00 X 0 0 0 DIRECTOR (6) PATRICK ROBY DIECTOR 0.00 X 0 0 0 (7) MARTHA SHAFF 0.00 X 0 0 0 DIECTOR (8) R L FEHSEKE JR 0 0 0.00 X 0 DIECTOR (9) LEX HAWKINS X 0 0 0 0.00 DIRECTOR (10) JAMES HAYES 0.00 X 0 0 0 DIRECTOR (11) KIRKE QUINN 0 0 0.00 x DIRECTOR (12) DAVID DUTTON x 0 0.00 0 DIRECTOR (13) JAKI SAMUELSON DIRECTOR 0.00 X 0 0 0 (14) LARRY SPIES 0.00 X 0 0 PRESIDENT 0

Par	t VII Section A. C	officers	, Directors, Tru	stee	s, K	еу Е	mpl	oyee	8,	and Highest Compensated	Employees (continued)				
	(A) Name and title		(B) Average hours per week (describe hours for	bo	x, unle	Pos heck ss pe	rson	than o	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)		(F) Estima amoun othe compens	t of r ation	
			related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former	(W-2/1099-MISC)	(ł	organiza and rela organiza	ition ited	
(15) F	RANDALL SHAN	KS													
	T PRESIDENT		0.00	_	_	X		ļ	L	0	0				0
- ,	CAND WONIO											<u> </u>			_
	E PRESIDENT		0.00	_	<u> </u>	X	_	<u> </u>	<u> </u>	0	0	-			0
	DAVID BROWN		0 00			.			1		_				^
(18)	RETARY/TREASUR	CER	0.00			X	-	 	H	0	0				0
(19)															
(20)															
(21)															
(22)								ļ	-						
(23)				-					┢						
(24)	,			ļ					-						
(25)									T						<u>.</u>
1b	Sub-total		ato to Doub VIII	04			<u> </u>	1,	>						
c d	Total from continuati Total (add lines 1b ar		ets to Part VII,	Sect	ion i	4						 			
2		duals (in	_			thos	se lis	ted a	abo	ve) who received more than	\$100,000 in	1			
	reportable compensati	OH_HOH	the organization						-					Yes	No
3	Did the organization lisemployee on line 1a?	st any fo If "Yes."	ormer officer, di	recto dule	r, or J foi	trust	tee, h ind	key e	emp ual	ployee, or highest compensa	ated		3		х
4	For any individual liste organization and relate	d on line	e 1a, is the sum	of re	port	able	con	npen	sat	ion and other compensation complete Schedule J for su					
5										iny unrelated organization of	r individual		4		X
Sec	for services rendered t tion B. Independent C			res,	COIT	piet	e 50	neat	ile .	J for such person			5		<u> </u>
1	Complete this table for	r your fiv	ve highest comp							ntractors that received more		ear			
			(A) business address	• • • •					T		(B) otion of services		C	(C) mpensat	100
						-	-		T	Descrip	non-or-services		~	трепзас	
									T						
							_		\dagger	 	 				
									\dagger						
2	Total number of indeperence of the state of				-					•				·	
	.coon ou more than \$1	30,000	o. compensatio			, 010	jui liZ	auul			0		L		

<u>Pa</u>	rt V	III Staten	nent of Reve	nue						_
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts	1a	Federated can	nnaigns	1a				Tevende		312, 310, 01 314
F	b	Membership d	-	1b		85,050				
ΩĔ		Fundraising ev		1c		037030				
ifts P	d			1d						
25	u	3								
Program Service Revenue Contributions, Gifts, Grants		Government grants	•	1e						
	1	All other contribution and similar amounts								
뜮				1f						
29	g		ns included in lines 1a-	·1f	\$					
<u>၁ ह</u>	<u>h</u>	Total. Add line	es 1a-1f			<u> </u>	85,050			<u> </u>
Ĩ	!					Busn Code				
eve	2a	PROGRAM	SERVICE REV	ENUE			65,370	65,370		
e R	b									
Š	С					ļ				
Se	d					Ĺ				
шш	е									
ğ	f	All other progr	am service reve	nue						
<u>-</u>	9	Total. Add line	es 2a-2f			•	65,370			
	3	Investment inc	come (including	dıvıder	nds, intere	est,				
		and other similar amounts)				•	89	89		
	4					roceeds ►				
	5	Royalties				•				
		·	(ı) Real		(n) F	Personal				
	6a	Gross rents			_					
	ь	Less rental exps								
	c	Rental inc or (loss)								
	d	Net rental inco	· · · · · · · · · · · · · · · · · · ·			•			~	
	7a	Gross amount from	(i) Securities		(11)	Other .			· · · · · · · · · · · · · · · · · · ·	
		sales of assets			1	, 6.1.6.				
		other than inventory							;	
	ן ו	Less cost or other								
	_	basis & sales exps			 					
		Gain or (loss)			<u> </u>			-		
	d	Net gain or (lo				<u> </u>				
ne	8a		om fundraising eve	nts						
ē		(not including \$								
è			reported on line 1c)						
<u>-</u>		See Part IV, line		а						
Other Revenue	b		•	b						
•	С		(loss) from fund		events					
	9a		om gaming activitie	s						
		See Part IV, line	19	а						
	b	Less direct ex	φenses .	b			!			
	С	Net income or	(loss) from gam	ning ac	tivities	•				
	10a	Gross sales of	f inventory, less							
		returns and all	lowances	а						
	ь	Less cost of g	goods sold	b						
		-	(loss) from sale	s of in	ventory	—				
			cellaneous Revenue			Busn. Code				
	11a							ľ		
	b									
	c									
	d	All other reven	nue							
	e	Total. Add line								
	12		See instruction	25			150,509	65,459	0	
	٠.	- otal leveline	Occ manucilor	ıJ.			+30,309	03,439		0

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

cqu	Check if Schedule O contains a response	e to any question in this Par	t IX		
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and		expenses	general expenses	ехрепаса
•	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	4,200			
3	Grants and other assistance to governments,		· · · · · · · · · · · · · · · · · · ·		
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	79,490			
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	2,086			
10	Payroll taxes	6,249			
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting	1,600			
d	Lobbying	15,000			
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	655			
12	Advertising and promotion		·		
13	Office expenses	8,431			
14	Information technology				
15	Royalties				
16	Occupancy	6,133		·····	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	37,583			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,310			
23	Insurance	2,978			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)	2 22			
a	TELEPHONE	2,236			
ь	CONTRIBUTIONS MISCELLANEOUS	1,000			
C	WISCERTIMEOUS	210			
d	All other expenses			 -	
e 25	All other expenses	160 167			
25 26	Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	169,167	0	0	0
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

	art X		LAWIERS		-6093261		Page 11
	`				(A) Beginning of year		(B) End of year
	1	Cash—non-interest bearing			51,103	1	44,591
	2	Savings and temporary cash investments			38,246	2	8,335
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net	[3,376	4	3,376	
	5	Receivables from current and former officers, directors,	trustees, key				
		employees, and highest compensated employees. Com	plete Part II of				
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined	under section	ſ		_	
		4958(f)(1)), persons described in section 4958(c)(3)(B),	and contributing				1
		employers and sponsoring organizations of section 501	(c)(9) voluntary		-		1
ţ		employees' beneficiary organizations (see instructions)				6	
Assets	7	Notes and loans receivable, net		[7	
4	8	Inventories for sale or use		[8	
	9	Prepaid expenses and deferred charges			4,312	9	5,500
	10a	Land, buildings, and equipment cost or	1				
		other basis. Complete Part VI of Schedule D	10a	61,023	000 0 A0 TO 0 100		1
	b	Less accumulated depreciation	10b	50,504	7,173	10c	10,519
	11	Investments—publicly traded securities				11	
	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 3	4)		104,210	16	72,321
	17	Accounts payable and accrued expenses]	1,922	_17	2,141
	18	Grants payable	ļ	1,694	18	1,694	
	19	Deferred revenue		51,050	19	37,600	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV		······································	21		
es	22	Payables to current and former officers, directors, truste	ees, key				
≣		employees, highest compensated employees, and disq	ualified persons.	:			
Liabilities		Complete Part II of Schedule L				22	ļ <u></u>
_	23	Secured mortgages and notes payable to unrelated thir	•			23	
	24	Unsecured notes and loans payable to unrelated third p	arties			24	
	25	Other liabilities (including federal income tax, payables		ì			
		parties, and other liabilities not included on lines 17-24)	Complete Part X				}
	l	of Schedule D		ļ		25	
	26	Total liabilities. Add lines 17 through 25			54,666	_26	41,435
S	l	Organizations that follow SFAS 117, check here ▶	and complete				
Š		lines 27 through 29, and lines 33 and 34.			**		
Net Assets or Fund Balances	27	Unrestricted net assets				27	
ĕ	28	Temporarily restricted net assets				_28	
Ĕ	29	Permanently restricted net assets				_29	· · · · · · · · · · · · · · · · · · ·
LL.		Organizations that do not follow SFAS 117, check h	ere ▶X and	ļ	, , , , , , , , , , , , , , , , , , , ,		
S		complete lines 30 through 34.			3 x + 1/4		•
se	30	Capital stock or trust principal, or current funds		 	_30		
ţ À	31	Paid-in or capital surplus, or land, building, or equipmer			10 = 11	31	
Se	32	Retained earnings, endowment, accumulated income, o	or other funds		49,544	32	30,886 30,886
	33	Total net assets or fund balances		ļ	49,544	_33	30,886
	34	Total liabilities and net assets/fund balances			104,210	34	72,321

Form **990** (2011)

Form	990 (2011) IOWA ACADEMY OF TRIAL LAWYERS 42-6095281			Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	* Check if Schedule O contains a response to any question in this Part XI				\prod
	Table of the state	1 . 1	4.5		
1	Total revenue (must equal Part VIII, column (A), line 12)	1			509
2	Total expenses (must equal Part IX, column (A), line 25)	2			167
3	Revenue less expenses Subtract line 2 from line 1	3			<u>658</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4	19,5	<u> 544</u>
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	3	30,8	<u>886</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response to any question in this Part XII				<u> </u>
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			l	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			İ	
	Schedule O			l	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O		1 1	ŀ	I
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			ŀ	, I
	issued on a separate basis, consolidated basis, or both				
	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			I	ı
	the Single Audit Act and OMB Circular A-133?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Forn	n 990	(2011)

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
 Attach to Form 990.
 See separate instructions.

2011
Open to Public Inspection

Name of the organization Employer identification number IOWA ACADEMY OF TRIAL LAWYERS 42-6095281 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6, (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be 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? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990. Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

<u>Sche</u>	dule D (Form 990) 2011	EMY OF TR.	LAL :	LAWYERS		42-6	095281	Page 2
Pa	rt III Organizations Maintaining	Collections of	Art, F	listorical Tr	easures,	or Othe	r Similar Assets	(continued)
3	Using the organization's acquisition, accession collection items (check all that apply).	n, and other record	s, checl	any of the foll	owing that ar	e a signıfı	cant use of its	
а	Public exhibition	d 🗍	Loan or	exchange prog	grams			
b	Scholarly research	e	Other		-			
С	Preservation for future generations							
4	Provide a description of the organization's col	lections and explain	n how th	ey further the o	organization's	s exempt p	ourpose in Part	
	XIV							
5	During the year, did the organization solicit or	receive donations	of art, h	istorical treasui	res, or other :	sımılar		
	assets to be sold to raise funds rather than to							Yes No
Pa	rt IV Escrow and Custodial Arra				nization and	swered '	'Yes" to Form 99	90, Part IV,
	line 9, or reported an amoun	t on Form 990,	Part X	, line 21.				
1a	Is the organization an agent, trustee, custodia	in or other intermed	lary for	contributions o	r other asset	s not		
	included on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table				
								Amount
C	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 Fo	orm 990, Part X, line	21?					Yes No
	If "Yes," explain the arrangement in Part XIV.							
Pa	rt V Endowment Funds. Compl	ete if the organi	zation	answered "	Yes" to Fo	<u>rm 990,</u>	Part IV, line 10.	
	<u> </u>	(a) Current year	ļ	(b) Prior year	(c) Two yea	irs back	(d) Three years back	(e) Four years back
	Beginning of year balance		<u> </u>		<u> </u>			
	Contributions		<u> </u>				 	
С	Net investment earnings, gains, and							
	losses		 					
	Grants or scholarships		ļ					
е	Other expenditures for facilities and		İ					
	programs							
f	Administrative expenses		ļ					
g	End of year balance			,		_		_L
2	Provide the estimated percentage of the curre	-	e (line 1	lg, column (a))	held as:			
а	Board designated or quasi-endowment	%						
b	Permanent endowment ► %							
С	Temporarily restricted endowment ▶	%						
_	The percentages in lines 2a, 2b, and 2c should							
За	Are there endowment funds not in the posses	ssion of the organiz	ation tha	at are held and	administered	d for the		[]
	organization by							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations		0.1	-1 1- D 0				3a(ii)
_	If "Yes" to 3a(ii), are the related organizations							
4 Da	Describe in Part XIV the intended uses of the				- 10			
Pa	rt VI Land, Buildings, and Equi							
	Description of property	(a) Cost or other (investment)		(b) Cost or o			Accumulated epreciation	(d) Book value
4 -	Lond	(mvesiment)	·	- (oth	··,	O.	production	
	Land			+		· · · · · · · · ·		
	Buildings			+				
	Leasehold improvements			 	61,023		50,504	10 610
	Equipment Other		_	 	01,043		30,304	10,519
	I. Add lines 1a through 1e (Column (d) must e	gual Form 990 Pa	rt X coli	umn (B) line 1		<u> </u>	-	10,519
	(a) mast c	geer com acc, ra	,		U(U) /		-	TO, JIJ

Part VII	Investments—Other Securities. See Form 99	90, Part X, line 12.			
•	(a) Description of security or category	(b) Book value	(c) Method of valuation		
·	(including name of security)		Cost or end-of-year market value		
(1) Financial derivatives					
	eld equity interests				
(3) Other					
(A)					
(B)					
(C) (D)			 		
(E)			 		
(- 7 (F)		·	· · · · · · · · · · · · · · · · · · ·		
(G)					
(H)					
(1)					
	_ \ 	>			
Part VIII	Investments—Program Related. See Form 9	990, Part X, line 13.	· · · · · · · · · · · · · · · · · · ·		
	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value		
(1)					
(2)					
(3)					
_(4)					
(5)					
(6)					
(7)					
(8)			<u> </u>		
(9) (10)			· · · · · · · · · · · · · · · · · · ·		
	in (b) must equal Form 990. Part X. col. (B) line 13.)	>	~ ^2 * #		
	(-)	>	V /2 4		
Total. (Colum	Other Assets. See Form 990, Part X, col (B) line 13) Other Assets. See Form 990, Part X, line 15. (a) Description	>	(b) Book value		
Total. (Colum	Other Assets. See Form 990, Part X, line 15.	>			
Part IX (1) (2)	Other Assets. See Form 990, Part X, line 15.				
Part IX (1) (2) (3)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4) (5)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. See Form 990, Part X, line 15.				
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15. (a) Description				
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15.		(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1.	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability		(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal	Other Assets. See Form 990, Part X, line 15. (a) Description in (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2	25.	(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability	25.	(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability	25.	(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability I income taxes	25.	(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability	25.	(b) Book value		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability I income taxes	25.	(b) Book value		
Total. (Column Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column Part X 1. (1) Federal (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability I income taxes	25.	(b) Book value		
Total. (Colum Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability I income taxes	25.	(b) Book value		
Total. (Colum Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability I income taxes	25.	(b) Book value		
Total. (Colum Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability I income taxes	25.	(b) Book value		
Total. (Colum Part IX (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum Part X 1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Assets. See Form 990, Part X, line 15. (a) Description In (b) must equal Form 990, Part X, col (B) line 15.) Other Liabilities. See Form 990, Part X, line 2 (a) Description of liability Income taxes	25.	(b) Book value		

organization's liability for uncertain tax positions under FIN 48 (ASC 740).

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Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements						
1	1 'Total revenue (Form 990, Part VIII, column (A), line 12)					
2	Total expenses (Form 990, Part IX, column (A), line 25)					
3	3 Excess or (deficit) for the year Subtract line 2 from line 1					
4	Net unrealized gains (losses) on investments		4			
5	5 Donated services and use of facilities					
6	6 Investment expenses					
7 Prior period adjustments						
8 Other (Describe in Part XIV)						
9	Total adjustments (net). Add lines 4 through 8	9	 			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a	10				
Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return						
1	Total revenue, gains, and other support per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12					
а	Net unrealized gains on investments	2a				
þ	Donated services and use of facilities	2b				
C	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV)	2d				
e Add lines 2a through 2d			2e			
3 Subtract line 2e from line 1			3			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV)	4b				
С	c Add lines 4a and 4b					
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5				
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return						
1	Total expenses and losses per audited financial statements		1			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	4 1				
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
C	Other losses	2c				
d	Other (Describe in Part XIV.)	2d				
е	e Add lines 2a through 2d					
3	Subtract line 2e from line 1	1 1	3			
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	4a				
	Other (Describe in Part XIV)	4b				
	Add lines 4a and 4b		4c			
Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5			
Pa	Part XIV Supplemental Information					

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2011 IOWA ACADEMY OF TRIAL LAWYERS

Part XIV : Supplemental Information (continued)

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal 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.

2011
Open to Public Inspection

IOWA ACADEMY OF TRIAL LAWYERS

Employer identification number 42-6095281

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE IATL SPONSORS EDUCATIONAL CONFERENCES TO EDUCATE LAWYERS, JUDGES,

CLERKS AND COURT ADMINISTRATORS. THE IATL ALSO MAINTAINS A LEGISLATIVE

INFORMATION SERVICE FOR CLIENTS AND INFORMS ITS MEMBERS OF PUBLIC POLICIES

WHICH IMPACT IOWA TRIAL PRACTICES. THE ACADEMY ALSO PROVIDES EDUCATIONAL

ASSISTANCE THROUGH SCHOLARSHIPS TO LAW SCHOOLS IN THE STATE OF IOWA.

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS
THE ORGANIZATION HAS MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS THE MEMBERS ELECT THE GOVERNING BODY.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC