

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490





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Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black

OMB No. 1545-0047 2011

lung benefit trust or private foundation) Open to Public

		nue Service	endar year, or tax		innina	a copy or a	ina return to		011, and end		Hents	, 20		
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_ a	plicable				exas ACC	ess to	JUSTICE	- rot	undation	_	-	dentification num っち	ner	
Н	idress o	-	Doing Busines						T	74-23				
Н	ame cha	-	Number and street (f mail is not deliver	red to street add	iress)		Room/Suite	E Telep				
∐'n	tıal retu	ım	PO Box 12			 .				(512)	320	-0099		
∐ਾ	minate	ed	City or town, st		-	+ 4				G Gross				
<u>N</u> 4	nended	retum	Austin TX							recei	ots \$	22,878,69	1	
∐ A	plicatio	on pending	F Name and a			er			H(a) is this a	group return f	or affiliate	s? Yes	X No	
			See attac	hment	#1				H(b) Are all	affiliates includ	ed?	∐ Yes	∐ No	
		empt status	X 501(c)(3)	501(c)() ∢ (insert n	o) 4947	(a)(1) or	527	If `No,	attach a list (see instru	ctions)		
JW	ebsit/	te: ▶ WWW	.teajf.or	g					H(c) Group	exemption num	ber	<u> </u>		
K F	rm of o	rganization	Corporation	Trust	Association	Other ▶		LYea	r of formation	1984	M Sta	ate of legal domicile	TX	
Pa	rt I	Summa	ıry											
	1	Briefly des	scribe the organiza	ition's mis	sion or most s	significant a	ctivities							
Α	Se	<u>e atta</u>	.chment #2	<u> </u>										
A C C														
YE	2	Check this	Check this box ▶ If the organization discontinued its operations or disposed of more than 25% of its net assets											
ŤŅ	3	Number o	f voting members	of the gov	erning body (f	Part VI, line	1a) .				3		9	
ES	4	Number o	f independent voti	ng membe	ers of the gove	erning body	(Part VI, line	e 1b) .	•		4		9	
S	5	Total num	ber of individuals	employed	ın calendar ye	ear 2011 (P:	art V, line 2a) .			5			
& -	6	Total num	ber of volunteers (estimate i	f necessary)	Γ	· 101-12	31 - 1			6			
•	7a	Total unre	ber of volunteers (elated business rev	enue fron	n Part VIII, col	umn (C),∫lin	ie_12/1\(\)\(\)\(\)\(\)	jen	15n	7	7a			
	b		ated business taxa					-		,.]	7b		0	
_					-	12	Nov	57 1	2012 9	Prior Yea	r	Current Yea	or	
R E V	8										88	6,327,66	2	
Ž	9	Program s	service revenue (P	art VIII, lir	ne 2g)	1	DAR							
E N	10	Investmer	nt income (Part VII	l, column	(A), lines 3, 4,	and 7d)	UGD	EM.	115	522,83	24	320,97	5	
U E	11	Other reve	enue (Part VIII, col	umn (A), i	ines 5, 6d, 8c	, 9c, 10c, ar	nd 11e)			230,2	22	450,82	6	
	12	Total reve	nue add lines 8	through 1	1 (must equal	Part VIII, co	olumn (A), lir	ne 12)	. 8	,486,9	34	7,099,46	i3	
	13	Grants an	d sımılar amounts	paid (Par	IX, column (A	A), lines 1-3)		7	,789,1	31	5,401,92	0	
F	14													
EXPERSES	15	Salaries, o	other compensatio	n, employ	ee benefits (F	art IX, colu	mn (A), lınes	5-10)		706,9	14	748,68	8	
E	16a	Profession	nal fundraising fee	s (Part IX,	column (A), I	ıne 11e)								
N	b	Total fund	raising expenses ((Part IX, c	olumn (D), line	e 25) 🕨								
Ĕ	17	Other exp	enses (Part IX, col	lumn (A), i	lines 11a-11d	, 11f-24e)			.	673,6	84	458,37	9	
5	18	Total expe	enses. Add lines 13	3-17 (mus	t equal Part IX	K, column (A	A), line 25)		9	,169,7	29	6,608,98	7	
	19	Revenue	less expenses Su	btract line	18 from line	12 .				-682,7	95	490,47	6	
OR FUZD	Ŗ						· · · · · · · · · · · · · · · · · · ·		Beginn	ing of Current	Year	End of Yea	r	
Å E	Ĺ 20	Total asse	ets (Part X, line 16))					15	,233,9	43	13,584,48	8	
ξú	ပ္ပုံ 21	Total liabi	lities (Part X, line 2	26)					5	,563,8	66	3,415,34	5	
ŞΒ	ই 22	Net assets	s or fund balances	Subtract	line 21 from l	ine 20			9	,670,0	77	10,169,14	3	
	rt II		ıre Block											
Under	penalti	es of perjury, I d	leclare that I have exami	ned this retur	n, including accon	nying ched	ules and stateme	ents, and	to the best of m	y knowledge ar	nd belief,	it is true,		
сопес	a, and c	complete. Declar	ation of preparer (other t	nan oπicer) i	s based/on all inio	nation of the	poreparar-nas a	пу кломі	leage					
		 	4 111	in								11/5/2	<u> </u>	
Sig		▼ Sigi	nature of officer		- 1							Date /		
Hei	e		chard L.	<u>Tate</u>			В	oar	<u>d Chai</u>	r		·		
			e or print name an								, ,			
D - •			/Type preparer's n			er's signatur	~/	∕∕ Da		Check		PTIN		
Pai			othy F Sc					n 10	-17-12			<u>d</u> ₽0035981	5	
	pare		n's name ▶ RUF		ASSOC		PC/			Firm's EIN	▶74	-2701650		
US	Onl		n's address ▶ 10		ANCHAC.	A RD				Phone no				
		AUS	TIN TX 78	748						(512)2	282-			
May	the IF	RS discuss t	his return with the	preparer s	shown above?	(see instru	ctions)					. X Yes	No	

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2011)

Form	990 (2011) Texas Access to Justice Fo 74-2354575	Page 2
Pa	t III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	
1		
	See attachment #3	
2	Did the organization undertake any significant program services during the year which were not listed on	
-	the prior Form 990 or 990-EZ?	X N
	If ``Yes," describe these new services on Schedule O	F
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	
	services?	X N
	If ``Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 5,739,983 including grants of \$ 5,401,920) (Revenue \$	
	See attachment #4	
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$	<u></u>
		
	• •	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$	
	· · · · · · · · · · · · · · · · · · ·	
4.4	Other was an used (December & Cabadula O.)	
4d	Other program services (Describe in Schedule O)	
	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses > 5,739,983	

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Form **990** (2011)

. . . .

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		37	
2	complete Schedule A	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			-
•	candidates for public office? If ``Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	-		<u> </u>
•	election in effect during the tax year? If ``Yes," complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments,	-		A
•	or similar amounts as defined in Revenue Procedure 98-19? If ``Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the	<u> </u>		
•	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		Х
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		Х
10	Did the organization, 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, VIII, IX,			
	or X as applicable.			İ
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," 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		Х
С	Did the organization report an amount for investments program related in Part X, line 13 that is 5% or more of its total		i	١
_	assets reported in Part X, line 16? If ``Yes," complete Schedule D, Part VIII	11c		X
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			.,
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	37	Х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Χ	
'	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	446		v
122	Did the organization obtain separate, independent audited financial statements for the tax year? If ``Yes," complete	11f		X
120	Schedule D, Parts XI, XII, and XIII	12a	Х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes." and if	120		
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	12b		Х
13	Is the organization a school described in section 170/b\/1\/A\/\\\)2.15 "Voc." complete School le E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			 -
	business, investment, & program service activities outside the United States, or aggregate foreign investments			
	valued at \$100,00 or more? 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			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	_ 16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If ``Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,			
	lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Χ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			1
	If ``Yes," complete Schedule G, Part III	19	_	Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	
JVA	11 9903 TWF 990 Copyright Forms (Software Only) - 2011 TW	Form 1	990 ((2011)

Checklist of Required Schedules (continued)

Part IV

			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 19 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 2? If ``Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's			
	current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes,"			
••	complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of			
	the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			٠,
	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? N/A	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24-		
4	any tax-exempt bonds?	24c 24d		
	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a	240		
ZJa	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year.	234		
-	and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes,"			
	complete Schedule L, Part I	25b		Х
26		- 35		
	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		Х
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,			
	Part IV	28b		X
С	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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If ``Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			.,
20	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			3.7
34	sections 301.7701-2 and 301.7701-3? If ``Yes," complete Schedule R, Part I	33		X
34	III N/ and V bund	34		v
352	B.H	35a		X
	Did the organization have 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	334		
	within the 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-chantable related	335		- 1
	organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If ``Yes," complete Schedule R, Part VI	37	}	Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		1	
	Note. All Form 990 filers are required to complete Schedule O	38	Х	

Part	V Statements Regarding Other IRS Filings and Tax Compliance	_		
	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			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? N/A	2b	- !	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	'	Х
b	If `Yes," has it filed a Form 990-T for this year? If ``No," provide an explanation in Schedule O N/A	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	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		Х
b	If "Yes," did 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).			$\overline{}$
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<i>x</i> %	
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If ``Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? N/A	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? N/A	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.			Ī.
	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	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		
10	Section 501(c)(7) organizations.Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations.Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? . N/A	12a		
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.	1		
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 Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			1
	the organization is licensed to issue qualified health plans			1
С	Enter the amount of reserves on hand	1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O N/A	14b		

JVA

Texas Access to Justice Fo 74-2354575 Form 990 (2011) Governance, Management, and DisclosureFor each "Yes" response to lines 2 through 7b below, and for a "No" response to

	Check of Schedule O centure a response to any question in this Part VI			\boxtimes
Socti	Check if Schedule O contains a response to any question in this Part VI			M
Secu	on 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 9		162	
	If there are material differences in voting rights among members of the governing body,	┨ ┃		
	or if the governing body delegated broad authority to an executive committee or similar			
b	committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1 1		
-	officer, director, trustee, or key employee?	2		Х
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		Х
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		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,			
	or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			
	by the following:			
а	The governing body?	8a	Χ	
b	Each committee with authority to act on behalf of the governing body?	8b	Χ	
9	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
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
·			Yes	
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? . N/A	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	Χ	
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	Χ_	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	40.	37	
42	describe in Schedule O how this is done	12c	X	<u> </u>
13	Did the organization have a written whistleblower policy?	13		<u> </u>
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?			
	7	15a	Х	
a b	Other officers or key employees of the organization	15a	X	
U	If ``Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	100		
16a				
	with a taxable entity during the year?	16a		Х
b	If ``Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	100		
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
	the organization's exempt status with respect to such arrangements?	16b		1
Secti	on C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (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 ▶ See attachment #5			

Form 990 (2011)

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

(A) (B) (C) (D) (E) Name and Title Average (do not check more than one hours per hour	
Name and Title Average Fusicion Demodelle Demodelle Demodelle	(F)
Name and Title Average (do not check more than one hours per box, unless person is both an compensation compensation are	stimated
week Tollier and a director/rustee) from related	nount of other
//decarbol N.B. I. F. I. F. M. I. O. M. I. O. I.	pensation
hours for I S E I S I C O E E O E (W-2/1099-MISC) organization organiz	om the
related v T C T T C O E E O E Organization (W-2/1099-MISC) organization (W-2/1099-MISC) organization (W-2/1099-MISC)	anization
	d related anizations
Schedule L R N E O Orga	11128110115
G. Joseph Barrientos	
Director 2.00 X 0 0	
Margarita Sanchez	
Director 2.00 X 0 0	
Jon D. Levy	
Director 2.00 X 0	
Lamont A. Jefferson	
Director 2.00 X 0	
Rose Wilson Director 2.00 X 0 0	
Director 2.00 X 0 0 0 Roland Johnson	
Director 2.00 X 0 0	
Andrew L. Kerr	
Director 2.00 X 0 0	
Richard L. Tate	
Chair 2.00 X X D 0 0	
Deborah G. Hankinson	
Vice President 3.00 X X D 0 0	
Ray Farabee	
Secretary 3.00 X X 0 0	
Rep. Pete Gallego	
Treasurer 3.00 X X 0 0	
Betty Balli Torres	
Executive Director 40.00 X X 119,185 0 24,07	72

rait	Jection A. Officers	, Director	s, musi	ees, r	rea Ei	iipioye	ees, and	ı mığıı	est Compensated t	unbiolegiconninge	٠
	(A) Name and title	(B) Average		(do not	Pos check m	C) Ition lore than	one		(D) Reportable	(E) Reportable	(F) Estimated
		hours per		box, uni	ess pers	son is bo	th an		compensation	compensation	amount of
		week	ITD	J. T		-	HCE	F	from	from related	other
		(describe	INIIR	N R S T	O F F	K E E M Y P	I OM G M P H P L	R	the	organizations	compensation
		hours for related	VIC	RUSTEE	CE	P	HPL	M E	organization	(W-2/1099-MISC)	from the
		organiza-	DEO	ΨĖ	E R	OY E	E E Y T S E	R	(W-2/1099-MISC)		organization
		tions in	U R	ON N		E	1 1				and related
		Schedule O)	ĽR	Å L			Ė D				organizations
				İ							
				1							
]								
					1						
1b	Sub-total						<u> </u>	▶	119185	0	24072
С	Total from continuation sh		art VII, S	ectio	n A			>			
d	Total (add lines 1b and 1c						<u>.</u>		119185		24072
2	Total number of individuals	(including l	out not li	mited	to thos	se liste	ed above) who	received more than	\$100,000 of reportab	ole compensation
	from the organization >										Yes No
3	Did the organization list any	former of	ficer, dır	ector,	or trus	tee, ke	ey emplo	yee, c	or highest compensa	ted employee	100 110
	on line 1a? If ``Yes," comple	te Schedu	le J for s	uch in	dıvıdu	al .					3 X
4	For any individual listed on I	=		•		•			•		
	organization and related org										4 X
5	Did any person listed on line				-		-		-		
Section	services rendered to the org		ir yes	com	piete	scheal	ule J for	sucn p	person	• •	5 X
1	Complete this table for your		st compe	ensate	d inde	pende	nt contra	actors	that received more to	han \$100.000 of	
	compensation from the orga	_									tax year
		(A)	•	-			-		(B)		(C)
	Name and	d business	address					L	Description of se	ervices	Compensation
											<u>-</u> .
								-			
				-				 	 		
2	Total number of independer	nt contracto	rs (ınclu	ding b	ut not	limited	to thos	e liste	d above) who receive	ed more than	······································
	\$100,000 of compensation f	rom the or	ganızatio	on 🕨							
JVA	11 9908 TWF 990 C	opynght Form	s (Software	Only) -	2011 TV	٧					Form 990 (2011

Part	: VIII	Statement of Reve	nue						
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
CIT	1a	Federated campaigns		1a					
OFH	ь	Membership dues		1b					
NTE	С	Fundraising events		1c					
RGS				1d					
I R M		Government grants (contri		1e	5,576,770		_		
ρķΓ		-			3,370,770				
S-M-LAR GRANTS:	T	All other contributions, gift similar amounts not includ		1f	750 000				
OAA	_		- 1	\$	750,892				
0 A A A B D T	_	Noncash contributions included in I	ines 1a-1r	Ф					
	п	Total. Add lines 1a-1f	• •		<u> </u>	6,327,662			
P R	_				Business Code	~			ļ
റട	2a								
G E	b								
R R R	С								
MIV	d								
C E	е								
E N	f	All other program service i	revenue .			·			
E	g	Total. Add lines 2a-2f	_•						
	3	Investment income (includ	ıng dividends,	intere	st, and				
		other similar amounts)			.	317,609			317,609
	4	Income from investment of	f tax-exempt bo	ond pr	oceeds .				
	5	Royalties .			.		_	_	
			(ı) Real		(II) Personal				,
	6a	Gross Rents			· · · · · · · · · · · · · · · · · · ·		٠,	i.	. [
	ь	Less rental expenses							į,
		Rental income or (loss)				, "	,	i i	. !
		Net rental income or (loss))		. •				
		,	(i) Securition	es ·	(II) Other				
	7a	Gross amount from sales	(,,======		(1)		, ,	`	
		of assets other than inventory	15,782,594			•	1		!
	h	Less cost or other basis	13,732,331						Ψ,
		and sales expenses	15,779,228						
0	_	Gain or (loss)	3,366						,
Т									
H		Net gain or (loss)			· · · · · · ·	3,366			3,366
E R	0a		ising			1			
ĸ		events (not including \$	- 1 4->						
R		of contributions reported o	•						,
E		See Part IV, line 18	• • • • •	a	450,826				1
٧		•		. b	<u> </u>		l		
E		Net income or (loss) from	-		· · •	450,826			450,826
N U	9a	Gross income from gaming	g activities. Sei	9					;
Ē				а					,
		Less: direct expenses	• ••	b		-			
		Net income or (loss) from		es	<u> </u>				
	10a	Gross sales of inventory, le	ess						
		returns and allowances		а					
		Less: cost of goods sold		b			_		
	င	Net income or (loss) from		ory					
		Miscellaneous Re	venue		Business Code		į		
	11a								
	Ь								
	C	AB all and a second							
	d		• •	• •					
		Total, Add lines 11a-11d		•					
	12	Total revenue. See instru	ictions .		<u>.</u>	7,099,463	I	Ī	771,801

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).

	Check if Schedule O contains a response to any question		· · ·		
	t include amounts reported on lines 6b, , 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		- CAPCILOGO	general expenses	Скрепосо
	organizations in the United States. See Part IV, line 21	4,610,985	4,610,985		
2	Grants and other assistance to individuals in	., 520, 500	1,020,300		·
	the United States See Part IV, line 22	790,935	790,935	1	
3	Grants and other assistance to governments,	100,000		 	 .
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	132,198		132,198	
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	473,756	202,948	270,807	
8	Pension plan accruals and contributions (include section	110,100	20275.0	210,001	
-	401(k) and 403(b) employer contributions)	37,767	12,695	25,073	
9	Other employee benefits .	55,176	17,087	38,089	
10	Payroll taxes	49,791	21,505	28,286	
11	Fees for services (non-employees)	127132		=57=55	
а	Management				
b	Legal				
С	Accounting	15,230		15,230	
d	Lobbying			· · · · · · · · · · · · · · · · · · ·	
е	Professional fundraising services See Part IV, line 17			*	
f	Investment management fees	27,911		27,911	·····
g	Other	57,883	43,412	14,471	
12	Advertising and promotion	43,689		43,689	
13	Office expenses	35,089		35,089	
14	Information technology	51,442		51,442	
15	Royalties		·		
16	Occupancy .	57,360		57,360	
17	Travel	68,714	30,921	37,793	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	91,380		91,380	·
23	Insurance .	6,005		6,005	· · · · · · · · · · · · · · · · · · ·
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)				
а	Grant Oversight	38,000	38,000		
b	Miscellaneous	-5,819		-5,819	
С	Projects	-28,505	-28,505		
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	6,608,987	5,739,983	869,004	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

JVA

JVA

Part X **Balance Sheet** (A) (B) Beginning of year End of year 215,602 1 Cash - non-interest-bearing 2,087,957 2 Savings and temporary cash investments 952,217 2 3 Pledges and grants receivable, net 3 Accounts receivable, net . . . 556,639 4 695,412 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 5 Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations ASSETS 6 of section 501 (c)(9) voluntary employees' beneficiary organizations (see instructions) Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 3,674 9 3,674 10 a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D 10a 531,470 b Less: accumulated depreciation ... 10b 473,574 146,157 10c 57,896 11 Investments -- publicly traded securities 11 13,247,108 10,651,440 12 Investments -- other securities. See Part IV, line 11 12 13 Investments -- program-related. See Part IV, line 11 13 14 14 Intangible assets . 15 Other assets See Part IV, line 11 112,546 15 88,109 **Total assets.** Add lines 1 through 15 (must equal line 34) 16 15,233,943 13,584,488 Accounts payable and accrued expenses 283,921 17 148,879 18 Grants payable . 5,091,701 18 2,994,444 19 Deferred revenue . 19 20 20 Tax-exempt bond liabilities . 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Ε 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 188,244 25 272,022 26 Total liabilities. Add lines 17 through 25 5,563,866 26 3,415,345 Organizations that follow SFAS 117, check here ▶ 🂢 and complete lines 27 through 29, and lines 33 and 34. N E T 27 Unrestricted net assets 8,834,129 27 9,426,923 U N D 28 Temporarily restricted net assets ... 835,948 28 742,220 29 Permanently restricted net assets . 29 ASSETS В Organizations that do not follow SFAS 117, check here ▶ A L A N and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 C E 0 32 32 Retained earnings, endowment, accumulated income, or other funds . . . R 33 Total net assets or fund balances . . . 9,670,077 33 10,169,143 34 Total liabilities and net assets/fund balances 15,233,943 34 13,584,488

Form	990 (2011)				Pag	e 12		
Par	t XI	Reconciliation of Net Assets							
		Check if Schedule O contains a response to any question in this Part XI		<u> </u>	<u> </u>		X		
1	Total	revenue (must equal Part VIII, column (A), line 12)	1	7,	099,	463			
2	Total	expenses (must equal Part IX, column (A), line 25)	2	6,	5,608,987				
3	Reve	nue less expenses Subtract line 2 from line 1	3		490,476				
4	Net a	9,	9,670,077						
5	Other	changes in net assets or fund balances (explain in Schedule O)	5		8,	591			
6	Net a	ssets or fund balances at end of year: Combine lines 3, 4, and 5 (must equal Part X, line 33,							
	colun	nn (B))	6	10,	169,	143			
Pai	t XII	Financial Statements and Reporting							
		Check if Schedule O contains a response to any question in this Part XII					\Box		
		<u> </u>				Yes	No		
1	Acco	unting method used to prepare the Form 990: $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$							
	If the	organization changed its method of accounting from a prior year or checked ``Other," explain							
	ın Sc	nedule O					,		
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
b	Were	the organization's financial statements audited by an independent accountant?			2b	Х			
С	If "Ye	es" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of the						
	audıt,	review, or compilation of its financial statements and selection of an independent accountant?			2c		Х		
	If the	organization changed either its oversight process or selection process during the tax year, explain in							
	Sche	dule O			ľ				
d	If "Ye	es" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is:	ued on						
	a sep	arate basis, consolidated basis, or both							
	Se	parate basis Consolidated basis Both consolidated and separate basis							
За	As a	result of a federal award, was the organization required to undergo an audit or audits as set forth in							
	the S	ingle Audit Act and OMB Circular A-133?			3a		Х		
b	if "Ye	es," 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

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SCHEDULE'A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No 1545-0047 2011

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization

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

Inspection Employer identification number

rе	хa			Foundation					4-235	45/5			
Pa	ırt l	Reason	for Public Chari	ty Status (All organ	izations mi	ist comple	ete this par	t) See ins	tructions.				
The	org	anization is not a	a private foundation be	ecause it is: (For lines 1	through 1	i, check o	nly one bo	x)					
1		A church, conve	ention of churches, or	association of churche	s described	in sect	tion 170(b)(1)(A)(i).					
2		A school descri	ibed in section 170(b)(1)(A)(ii). (Attach Sche	edule E.)								
3		A hospital or a	cooperative hospital s	ervice organization des	scribed in	section 1	70(b)(1)(A	()(iii).					
4		A medical resea	arch organization ope	rated in conjunction wit	h a hospita	l descnbe	d in sect	ion 170(b)(1)(A)(iii)	Enter the	hospita	al's nai	me,
		city, and state											
5			n operated for the ben	efit of a college or unive	ersity owne	d or opera	ted by a g	overnmen	tal unit des	scribed in	sect	ion	
	_). (Complete Part II.)	ŭ	•	· ·	, ,						
6	Г			or governmental unit d	escnbed in	section	170/b)/1)	(A)(v).					
7	X	1	. •	•					m the aen	eral publi	c descr	ıbed ır	1
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)													
8	Г	1		on 170(b)(1)(A)(vi).(C	omplete Pa	art II)							
9	\vdash	·		es: (1) more than 33 1/3		•	n contributi	ons. mem	bership fe	es. and o	ross		
-	_	. •	•	exempt functions-subje									
				e and unrelated busine									
		acquired by the	e organization after Jui	ne 30, 1975 See sect	ion 509(a)((2).(Compl	lete Part III	.)					
10	Г	An organization	n organized and opera	ited exclusively to test f	or public sa	afety See	section	509(a)(4).					
11	H	-	-	ited exclusively for the	-	-			carry out	the			
	_	, –	•	ported organizations de	•	•		•	•		ion		
				es the type of supporti									
		a Type I	b ∏ Type	ell c 🗀 1	Гуре III-Fur	nctionally i	ntegrated		di∏⊺	vpe III-O	ther		
e	Г	, 🖵 ''	□ ''	e organization is not cor	= -		_	ne or mor		,,			
Ī	L.		_	gers and other than one		-					on		
		509(a)(1) or se		•	•		,	•					
f													
•		organization, cl		actornination from the									Г
g		-		nization accepted any g	off or contr	bution fro	m any of th	ne.		-			_
3		following perso	_	, 5	,		,						
				y controls, either alone	or togethe	r with pers	ons descr	bed in (ii)				Yes	No
			•	dy of the supported orga	_	٠.				[11g(i)		
		(ii) A family me	ember of a person des	scribed in (i) above?							11g(ii)		
		(iii) A 35% con	trolled entity of a pers	on described in (i) or (ii	scribed in (i) or (ii) above?								
h		, ,	•	out the supported organ	="								
		 	1	<u> </u>	T			·	(vi)	la tha		-	
(i)		ne of supported	(ii) EIN	(iii) Type of organization	(iv) is the or	_	(V) Did you		organization	lsthe ⊪n col (i) ' '	Amou	
	or	ganization		(described on lines 1-9	in col (i) lis		organization		organize	-	′ s	upport	
				above or IRC section (see instructions))	governing de	xument r	of your su	фронт	Us	S ?			
					Yes	No	Yes	No	Yes	No			
			-										
			1				1						
							1						
										1			
			1				[
						l.							
					1								
											†		
T۵	tal												

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b)2008	(c) 2009	(d)2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any ``unusual grants.")	20,627,976	13,308,704	7,048,917	7,733,888	6,327,662	55,047,147
		20,027,370	13,308,704	7,040,317	7,733,888	0,327,002	33,047,147
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	20,627,976	13,308,704	7,048,917	7,733,888	6,327,662	55,047,147
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						55,047,147
Sec	tion B. Total Support						
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c)2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	20,627,976	13,308,704	7,048,917	7,733,888	6,327,662	55,047,147
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	651,341	1,098,779	698,040	522,824	320,976	3,291,960
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
0	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						:
11	Total support. Add lines 7 through 10						58,339,107
12	Gross receipts from related activities, etc. (se	ee instructions)		•		12	
3	First five years. If the Form 990 is for the or organization, check this box and stop here			ourth, or fifth tax	year as a section	on 501(c)(3)	▶ [
	tion C. Computation of Public Sup	•					
14	Public support percentage for 2011 (line 6, c		=	mn (f))	•	14	94.36 %
15	Public support percentage from 2010 Sched					15	94.55 %
16a	33 1/3 % support test 2011. If the organiand stop here. The organization qualifies a				14 is 33 1/3 % oi	more, check thi	s box . ▶ [∑
b	33 1/3 % support test - 2010. If the organic box and stop here. The organization qualifity				l line 15 is 33 1/3	% or more, che	ck this ▶ [
17a	10%-facts-and-circumstances test – 2011 more, and if the organization meets the ``facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts-and-circumstant facts facts facts facts for the facts facts facts facts for the facts facts facts facts for the facts facts facts facts for the facts facts facts for the facts facts facts for the facts facts facts facts facts for the facts facts facts facts for the facts	ts-and-circumsta	inces" test, chec	k this box and	stop here.Expl	ain in Part IV hov	
b	10%-facts-and-circumstances test - 2010 more, and if the organization meets the ``facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts-and-circumstant' facts facts facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant facts for a fact of the circumstant factor facts for a fact of the circumstant factor facts for a fact of the circumstant factor fac	ts-and-circumsta	inces" test, chec	k this box and	stop here.Expl	ain in Part IV how	
18	Private foundation. If the organization did n		-	•			ons b
JVA		oftware Only) - 2011 T		55, 175, 01 176,			0 or 990-EZ) 20

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.

OMB No. 1545-0047

2011

Open to Public Inspection

	e of the organization		ployer ic ·2354	dentificat	ion num	ber
	kas Access to Justice Foundation			3/3		
Par		comple	te if			
	the organization answered "Yes" to Form 990, Part IV, line 6					
	(a) Donor advised funds	a)) Funds a	and other	accounts	
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advi	sea		г	7	□ v.
_	funds are the organization's property, subject to the organization's exclusive legal control?			L	Yes	∐ No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be		-			
	for chantable purposes and not for the benefit of the donor or donor advisor, or for any other purpose	comen	ing	г	7 v	
D	t II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part	N / 1		<u> </u>	Yes	No
		iv, iine	′			
1	Purpose(s) of conservation easements held by the organization (check all that apply).	on of a	n histori	بمصرينالمم	ortont lon.	d araa
	Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Preservation or education) Preservation or education)					u area
		ion or a	certined	mistoric s	structure	
2	Preservation of open space	of a a				
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	oracc	nservau	.ON		
	easement on the last day of the tax year			d at the End	of the Tay V	
•	Total number of conservation easements	2		d at the End	of the Tax Y	ear
a	Total acreage restricted by conservation easements	2				
	Number of conservation easements on a certified historic structure included in (a)	2				
	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic	<u> </u>	-			
u	structure listed in the National Register	٠,	.d			
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the			during the		
•	year •	io orga	III LUCIOII	adming the	,	
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	violatio	ons. and			
-	enforcement of the conservation easements it holds?			Γ	Yes	□ No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements of	lurına ti	he vear		٠ لـ	□
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during	•	•	. —	-	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 17	•	•			
	and section 170(h)(4)(B)(ii)?			Γ	Yes	☐ No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expens	se state	ement, a	nd		
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statem	ents th	at descri	ibes		
	the organization's accounting for conservation easements.					
Pai	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar As	sets.				
	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 state art, historical treasures, or other similar assets held for public exhibition, education, or research in fur	ement a	nd balar ce of pub	nce sheet olic servic	works of e, 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 stateme historical treasures, or other similar assets held for public exhibition, education, or research in further 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	•	_	\$		
2	If the organization received or held works of art, historical treasures, or other similar assets for finance following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	ial gain	, provide	the		
а	Revenues included in Form 990, Part VIII, line 1		•	\$		
	Assets included in Form 990, Part X		_	\$ ——		
		• • •		·		

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Page 2

Fai	t III Organizations Maintain	ning Conect	ions or	Art, historical i	reasu	res, or Other Sim	illar A	Assets(continued)			
3	Using the organization's acquisi	tion, accession	on, and	other records, ch	eck ar	ov of the following	that a	re a significant use o	f its coi	lection	
	items (check all that apply):	, , , , , , , , , , , , ,		,		.,		-			
а	Public exhibition				dП	Loan or exchange	nrog	rams			
b	Scholarly research				\vdash	Other	p.og.				
c	Preservation for future gene	rations			-			 			
4	Provide a description of the orga		llections	s and evoluin how	u they	further the organiz	ation	'e evemnt numoce in			
7	Part XIV	anization s co	nections	s and explain nov	willey	iditilei tile organiz		s exempt purpose in			
5		ation collect o		a danations of or	t bioto	moal transcures or	athar	a.m.lar			
3	During the year, did the organiza									V	
Da	t IV Escrow and Custodial								·	Yes	No.
Гаі		_		-		n answered res	lo F	orm 990,			
	Part IV, line 9, or reporte	ed an amoun	on For	m 990, Part X, III	1e 2 i						
4.	le the average transcription or accept two				.						
1a	Is the organization an agent, trus	stee, custodii	an or ou	ner intermediary	tor cor	ithbutions or other	asse	ts not	\Box	.,	п.,
	included on Form 990, Part X?									Yes	∐ No
b	If "Yes," explain the arrangement	nt in Part XIV	and co	mplete the follow	ing tal	ole		Τ			
	_							An	nount		
C	Beginning balance			• •			1c				
d	Additions during the year	•		• • • •	•	•	1d				
e	Distributions during the year		•				1e				
f	Ending balance		•				1f				
2a	Did the organization include an a			, Part X, line 21?	•					Yes	∐ No
<u>b</u>	If "Yes," explain the arrangement										
Pa	T V Endowment Funds. Co	mplete if the	organiz	ation answered	`Yes"	to Form 990, Part	IV, lin	e 10.			
	<u>_</u>	(a) Current	year	(b) Prior yea	ar	(c)Two years ba	ck	(d) Three years back	(e) Fo	our year	s back
1a	Beginning of year balance										
b	Contributions .						\neg				
C	Net investment earnings,										
	gains, and losses										4
d	Grants or scholarships										
e	Other expenditures for										
	facilities and programs .										:
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage	e of the curr	ent year	end balance (lin	e 1g, d	column (a)) held as	 3.				
а	Board designated or quasi-endo		•	.%	-	. ,,					
b	Permanent endowment		%								
С	Temporarily restricted endowme	ent 🕨		%							
	The percentages in lines 2a, 2b,		ld equa	_							
3a	Are there endowment funds not		•		that a	e held and admini	stere	d for the			
	organization by			o. g						Ye	es No
	(i) unrelated organizations								3	a(i)	-
	(ii) related organizations	• •	• • •			•			⊢	a(ii)	+-
b	If "Yes" to 3a(ii), are the related	organization	s listed			le R?		• •	⊢	3b	
4	Describe in Part XIV the intende	•					٠.		L.	30	ــــــــــــــــــــــــــــــــــــــ
_	't VI Land, Buildings, and					us.		- 1			
1 61	Description of property	Lquipment		st or other basis)Cost or other		c) Accumulated	/d\i	Book va	
	Description of property				•		١ .	· 1	(u)	SOUR VA	nue
1-	Lond		(11	nvestment)		oasis (other)		depreciation			
1a	Land	•									
b	Buildings	•			<u> </u>						
C	Leasehold improvements .	• •			ļ <u>.</u>	50.001					
d	Equipment				<u> </u>	50,994		45,044		5,95	
<u>е</u>	Other				L	480,476	l	428,530		51,94	
	i accountage la tatacolata 10 (CANIN	DEL 1711 SDC+117	י יפווטי	- Orm you Dam Y	COLLIN	nn (R) UNA 7/1/4))		- 1		~ / U (. 4 6

Part VII	'Investments - Other Securities. See Fo	orm 990, Part X, line 12.		
` ((a) Description of security or category	(b) Book value	(c) Method of valuat	
	(including name of security)		Cost or end-of-year mark	et value
	I derivatives			
	held equity interests			
(3) Other _				
(A) (B)				
(C)				
(D)		-		
(E)				
(F)				
(G)			-	
(H)			, ,	
(I)				
Total. (Colum	in (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments Program Related. See Fe	orm 990, Part X, line 13		
	(a) Description of investment type	(b) Book value	(c)Method of valuat	on
-	<u> </u>		Cost or end-of-year mark	et value
	· · · · · · · · · · · · · · · · · · ·			
(2)		-	<u> </u>	
(3)				
<u>(4)</u>		- 		
(5)				
(7)				···
(8)		<u> </u>		
(9)				
(10)	-			
	nn (b) must equal Form 990, Part X, col (B) line 13)	•	*	*
Part IX	Other Assets. See Form 990, Part X, line	15.		
		Description		(b) Book value
	rued Interest			88,109
(2)				
(3)				<u> </u>
(4)				
(5)				
(6)				
(8)				
(9)				
(10)				
	ımı (b) must equal Form 990, Part X, col (B) lir	ne 15)		88,109
Part X	Other Liabilities. See Form 990, Part X, III			
1.	(a) Description of liability	(b) Book value		
(1) Federa	I income taxes			
(2) Stud	dent Loan Repayment Plan	272,022		
(3) Paya	able			
(5)				
(6)				
(7)				
(8)				
(9)		 		
(10)		 		
(11)	(h) must small Earn 000 Bad V and (0) bad 05	1 22 22		
	in (b) must equal Form 990, Part X, col (B) line 25)	272,022	proteon's financial statements that	to the eventual at

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 liability for uncertain tax positions under FIN 48 (ASC 740)

	dule D (Form 990) 2011 Texas Access to Justice Fo 74-235457.	5	Page 4
Pai	T XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	7,099,463
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,608,987
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	490,476
4	Net unrealized gains (losses) on investments	4	8,591
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	8,591
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	499,067
Par	T XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return		
1	Total revenue, gains, and other support per audited financial statements	1	7,108,054
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	7	
c	Recovenes of prior year grants . 2c	7	
	Other (Describe in Part XIV)	7	
е		2e	8,591
3	Subtract line 2e from line 1	3	7,099,463
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	 -	7,033,100
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b		1 1	
	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,099,463
Par	T XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return	1 -	7,000,100
1	Total expenses and losses per audited financial statements	1 1	6,608,988
	Amounts included on line 1 but not on Form 990, Part IX, line 25		0,000,000
	Donated services and use of facilities		
	Prior year adjustments 2b	1	
	Other losses 2c	1	
	Other (Describe in Part XIV.)	1	
	Add lines 2a through 2d	2e	_1
	Cubtroot line 3e from line 4	26	-1

Part XIV Supplemental Information

b Other (Describe in Part XIV)

c Add lines 4a and 4b

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

5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

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 Changes in net assets – increase of \$8591 based on unrealized gains. Additional investment income reported in audit audited statements: \$8590. Additional income due to rounding: \$1 Reduction of expenses due to rounding: \$1.

4a

4b

11 990D4

TWF 990

6,608,989

4c

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if

2011

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

the organization entered more than \$15,000 on Form 990-EZ, line 6a. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open to Public Inspection

Name of the organization					ntification number
Texas Access to Jus				74-23545	/5
Part I Fundraising Activities. Form 990-EZ filers are no		_	rea Yes" to Form 990, I	Part IV, line 17	
1 Indicate whether the organization			lowing activities. Check:	all that annly	
a Mail solicitations	raises raines un		citation of non-governme		
b Internet and email solicitations	3		citation of government gi		
c Phone solicitations		—	cial fundraising events		
d In-person solicitations		- بـ ا			
2a Did the organization have a writte or key employees listed in Form 9					. ∏ Yes ⊠ N
b If "Yes," list the ten highest paid to be compensated at least \$5,00			pursuant to agreements	under which the fundraise	er is
(i) Name and address of individual	(ii) Activity	(iii) Did fundraiser	(iv) Gross receipts	(v) Amount paid to	(vi) Amount paid to
or entity (fundraiser)	, , , , , , , , , ,	have custody	from activity	(or retained by) fund-	(or retained by)
, ,		or control of contributions?	1	raiser listed in col (i)	organization
		Yes No			
1					
2					
3					
4	 				
5					
6					
7					
8					
9					
10					
		<u> </u>			<u> </u>
Total		nd or boorpood to as	Net contributions of her	hoon political it is suggested	from
List all states in which the organizergistration or licensing	zation is registere	ed or licensed to so	DIICIT CONTRIBUTIONS OF NAS	been notified it is exempt	trom
		-			
					
					
					

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Pa	rt II		=		•	
		than \$15,000 of fundraising event co	ntributions and gross inc	ome on Form 990-EZ, lır	nes 1 and 6b List events	with
_		gross receipts greater than \$5,000				
			(a) Event #1	(b) Event #2	(c)Other events	(d) Total events
_			Veterans Gal			(add col. (a)through
R E			(event type)	(event type)	(total number)	col. (c))
V			150 006			1.50.006
E	1	Gross receipts	450,826			450,826
U	2	Less Chantable				
Ε	_	contributions				
	3	Gross income (line 1	450 006			450 006
		minus line 2)	450,826			450,826
	4	Cash prizes				
D	~	Casii piizes				
D	5	Noncash prizes				
R	-					
E	6	Rent/facility costs .				
Т						
Ε	7	Food and beverages				
Х		-			"	
P E	8	Entertainment				
N						
SES	9	Other direct expenses				
S						
	10	Direct expense summary Add lines 4 thr			•	()
_	11	Net income summary Combine line 3, co			<u> </u>	450,826
Pa	rt II			m 990, Part IV, line 19,	or reported more	
		than \$15,000 on Form 990-EZ, line 6	ia.	//-> - · · ·	<u> </u>	1 (4) 7 - 4-1 (-44
R E V			(a) Bingo	(b) Pull tabs/instant	(c)Other gaming	(d) Total gaming (add
Ĕ				bingo/progressive bingo		col. (a)thru col. (c))
EXUE	1	Gross revenue				ı
	H					
- 1	2	Cash prizes .				
R E C T						
	3	Noncash prizes				
X		•				
P E	4	Rent/facility costs .				
EXPEZOEO						-
S	5	Other direct expenses				
			Yes %	Yes%	Yes %	,
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		🕨	()
				_		
	8	Net gaming income summary. Combine	line 1, column d, and line		<u></u> ▶	<u>L </u>
_	_					
9		ter the state(s) in which the organization of		. —		Yes No
a		the organization licensed to operate gamin	ig activities in each of the	ese states /		∐ Yes ∐ No
b	ıī	`No," explain				
	_					
10a	W	ere any of the organization's gaming licens	ses revoked suspended	or terminated during the	tax vear?	Yes No
b		'Voc " ovnlore			,	🗀 🗀 🚻 🚻
_						
				··· · · · · · · · · · · · · · · · · ·	· ·	
	_					

JVA

ched	ule G (Form 990 or 990-EZ) 2011	Page 3
11	Does the organization operate gaming activities with nonmembers? Yes	∏ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity	
	formed to administer charitable gaming?	∐ No
13	Indicate the percentage of gaming activity operated in	
а	The organization's facility	%
b	An outside facility	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	
	Name ▶	
	Address ▶	
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. □ No
b	If ``Yes," enter the amount of gaming revenue received by the organization▶ \$ and the amount	
	of gaming revenue retained by the third party \$	
С	If "Yes," enter name and address of the third party	
	Name ▶	
	Address ▶	
16	Gaming manager information	
	Name ▶	
	Gaming manager compensation ▶ \$	
	Description of services provided ▶	
	☐ Director/officer ☐ Employee ☐ Independent contractor	
17	Mandatory distributions	

Is the organization required under state law to make charitable distributions from the gaming proceeds to

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions)

JVA

Yes No

retain the state gaming license?

in the organization's own exempt activities during the tax year ▶ \$

egal Services Legal Services egal Services egal Services Legal Services legal Services OMB No 1545-0047 2 (h)Purpose of grant Open to Public **Employer identification number** or assistance Inspection 2011 Yes \boxtimes 74-2354575 Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Check this box if no one recipient received more than \$5,000 Part II can be duplicated non-cash assistance (g) Description of Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, Complete If the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Attach to Form 990. (d) Amount of cash grant 85,659 249,250 264,802 86,287 170,934 252,431 (c) IRC section if applicable 501 (c) (3) 501(c)(3) 501 (c) (3) 501 (c) (3) 501 (c) (3) General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Texas Access to Justice Foundation 4-2578266 54-1563619 4-1237609 4-1109733 5-2745221 4-1109743 (p) EIN Immigrant Legal Assistance If additional space is needed San Casa de Proyecto Libertad 1 (a) Name and address of organization 314 Highland Mall Blvd Catholic Charities of Catholic Charities of Boat People SOS. Inc San Antonio TX 78212 11025 Bellaire Blvd Cabrinı Center for Harlingen TX 78550 202 W French Place 113 N First Street or government Houston, TX 77172 5415 Maple Avenue American Gateways Houston TX 77266 Austin TX 78752 Dallas TX 75235 Name of the organization PO Box 66508 Department of the Treasury Internal Revenue Service SCHEDULE Antonio (Form 990) Dallas Part I Part II

Enter total number of other organizations listed in the line 1 instructions For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Enter total number of section 501(c)(3) and government organizations listed in the line 1 instructions

501 (c) (3)

Diocesan Migrant & Refugee

1117 North Stanton

Services, Inc

Schedule I (Form 990) (2011)

Legal Services

Schedule I (Form 990) 2011

Part III can be duplicated if additional space is needed

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) non-cash assistance (d) Amount of 258,000 532,935 (c) Amount of cash grant (b) Number of recipients 123 Student Loan Repayments (a) Type of grant or assistance Fellowships

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Pt 1 Line 2, Criteria for Grants:

already funded by another entity or in place of other funds available for The Board of Directors has promulgated grant criteria policies that are funds granted by the Foundation may not be used to duplicate a service the same purpose. To be eligible, an applicant must submit a grant application that includes: * Proof of professional liability insurance consistent with Supreme Court Rules. Such criteria provides that the

- * Proof of non profit status * List of Board of Directors * Board minutes for the previous 12 months
- Plans to address services to meet the need, Colaborative partners, and A narrative portion including: Identification of the need, identifiable outcomes.
- Board of Directors. Additionally, the staff reviews current programs and new requests to ascertain how best to distribute services statewide to anticipated fund from other sources, and anticipated in-kind support. TAJF staff reviews each application and provides a summary for the TAJF recommendations to the TAJF Board. The Board conducts interviews of new submits its recommendations to the Texas Supreme Court for their review * A data collection portion including: Project budget with explanation, applicants to obtain any additional information they need. The Board votes on each grant application by region. Finally, the TAJF Board achieve optimal services throughout the State. The staff makes

Schedule I (Form 990) (2011)

990 - Sch I - Part I, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

L.	For Calendar year 2011, or tax	1, or tax year period beginning	inning		and ending	Ď,	
Name of the organization Texas Access to Justice	e Foundation	uo				Employer identification number 74-2354575	fication number 7.5
lσ⊢		c)IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
El Paso TX 79902	74-2723627	501(c)(3)	283,393				
Equal Justice Center 510 S Congress Ave Austin TX 78704	74-3002521	501(c)(3)	236,977				Legal Services
Family Violence Prevention Services, Inc.							Legal Services
San Antonio TX 78209	74-1994151	501(c)(3)	25,000				פסינעיים? [פהם]
	75-1564061	501(c)(3)	000'69				
Center PO Box 8669	000000000000000000000000000000000000000	, (, ,), (,)	, , ,				
Oficina Legal del Pueblo Unido, Inc TCRP	000100000000000000000000000000000000000	(0) (0) 100	F00 01				Legal Services
1405 Montopolis Dr Austin TX 78741 ProBar - ABA Fund for Justice	74-1995879	501(c)(3)	845,056				Legal Services
301 E Madison Ave Harlingen TX 78550 Refugee & Immigrant Center	36-6110299	501(c)(3)	40,125				Legal Services
1305 N Flores San Antonio TX 78207 Southern Disability Law	74-2436920	501(c)(3)	166,608				Legal Services
1307 Payne Avenue Austin TX 78757 St Mary's University	37-1738244	501(c)(3)	61,425				Legal Services

L0601F

990 - Sch I - Part I, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

	For Calendar year 2011, or tax	1, or tax year period beginning	guiuui		and ending	Ď.	
Name of the organization Texas Access to Justice	e Foundation	uo				Employer identification number 74-2354575	fication number 7 5
ທ ≽	ŀ	c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h)Purpose of grant or assistance
Clinical Program One Camino Santa Maria San Antonio TX 78228 Texas Legal Services	74-1143128	501(c)(3)	91,307				Legal Services
Center 815 Brazos, Ste. 1100 Austin TX 78701 Texas RioGrande Legal Aid,	74-2220750	501(c)(3)	259, 639				Legal Services
S Texas Blvd aco TX 78596 ersity of Houstor	74-1675230	501(c)(3)	779,375				Legal Services
100 Law Center, Room 56 Houston TX 77024 Volunteer Legal Services	74-6001399	501(c)(3)	105,251				Legal Services
816 Congress Ave Austin TX 78701 YMCA International Services	74-2168895	501(c)(3)	58,925				Legal Services
PO Box 740425 Houston TX 77274 Cathedral Justice Project	74-1109737	501(c)(3)	166,324				Legal Services
Houston TX 77002 Community Justice	71-0933434	501(c)(3)	24,500				Legal Services
lorosa, ntonio Bend La	32-0092986	501(c)(3)	22,000				Legal Services
1403 A Main St Richmond TX 77469	20-4370198	501(c)(3)	24,500				

L0601F

990 - Sch I - Part I, Continuation of Grants and Other Assistance to Governments and Organizations in the United States

Ĭ.	or Calendar year 201	For Calendar year 2011, or tax year period beginning	חוחחו		and ending	бı	
Name of the organization Texas Access to Justice	e Foundation	uc				Employer identifical	Employer identification number 74-2354575
	1	c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Houston Bar Foundation 1001 Fannin St Suite 1300 Houston TX 77002 Jefferson County Bar	76-0029594	501(c)(3)	60,000				Legal Services Legal Services
Foundation 1001 Pearl, Room 202 Beaumont TX 77701 Legal Aid of NW Texas	76-0556487	501(c)(3)	22,000				Legal Services
400 North Beach St Fort Worth TX 76111 Tarrant County Bar	75-0856086	501 (c) (3)	324,733				Legal Services
1315 Calhoun St Fort Worth TX 76102 Disability Rights of Texas	75-0782505	501(c)(3)	22,000				Legal Services
7800 Shoal Creek Blvd Austın TX 78757	74-1916289	501(c)(3)	87,500				

L0601F

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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

2011

Open to Public Inspection

Name of the organization

Texas Access to Justice Foundation

Employer identification number

74-2354575

Part VI, Line 11:

The Foundation's Board of Directors receives a draft of the Form 990 for review. They have a few weeks to return any questions or comments on the return. Upon agreement of the Board of Directors, the Form 990 is approved for final submission.

Part VI, Line 12c:

The Foundation requires the Board and all staff to annually read and sign the conflict of interest policy. During each board meeting when a vote is on the floor for approval, the chair will ask if anyone has a conflict and if so that board member abstains from voting.

Part VI, Line 15:

The Executive Director is evaluated annually by the Board of Directors. Comparability data and a written report are placed in the personnel file. The Executive Director performs evaluations of other managers. Copies of the evaluations are placed in the manager's personnel file.

Part VI, Line 19

The Foundation's governing documents, all policy documents, and financial statements are available upon request from an individual or organization to the Foundation.

Part XI, Line 5:

Diffrence due to changes in unrealized gains resulting from an independent audit.

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2011

Department of the Treasury

Attachment	
Sequence No.	179

	See separate i	nstructions.	<u> </u>	ttach to y	our tax return	<u>. </u>		Sequence No. 1/9		
Name(s) shown on return Texas Access to Justice FoundaFOR FORM 990								Identifying number 74-2354575		
Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.										
1 Maximum amount (see instructi	ons)						1			
2 Total cost of section 179 proper	•	ce (see instruction	ons)				2			
3 Threshold cost of section 179 p	• •	•	•	ctions)			3			
4 Reduction in limitation Subtract			=				4	-		
5 Dollar limitation for tax year Su										
see instructions	500,000									
	300,000									
6 (a) Description of property (b) Cost (busin use only) (c) Elected cost										
7 Listed property Enter the amou	int from line 29		·		7					
8 Total elected cost of section 179		•			<u> </u>		8	n of Boson one as we so so suggested speed a security cope.		
9 Tentative deduction. Enter the s			ii (c), iii (c) c				9			
10 Carryover of disallowed deducti			1.4562		• • •		10			
11 Business income limitation. Ent		-		zero) or li	 ine 5 /eee inetr	uctions)	11	500,000		
12 Section 179 expense deduction					e 5 (366 iii3ti	ucaons)	12	300,000		
13 Carryover of disallowed deducti					3		12			
Note: Do not use Part II or Part III b							_			
Part II Special Deprecia		<u> </u>		tion (De	notinalista lia	tod prop	o entre V	(Coo motmustians)		
14 Special depreciation allowance						itea prop	erty.)	(See instructions.)		
during the tax year (see instruct		sity (Ouler diali)	isted property) piaceu iii	Service		4.4			
15 Property subject to section 168(,	•				•	14	·		
		•	•		• • • •	ŀ	15			
Part III MACRS Deprecia						-,	16			
Part III MACRS Deprecia	ation (Do not in	ciude listed prop		structions.))					
47 MACDS deductions for secrets	dagad in somuse ii	- +avaa-a ba	Section A	1011			4=	01 200		
17 MACRS deductions for assets p		-	•			1	17	91,380		
18 If you are electing to group any		service during th	e tax year into	one or mo	ore	▶ 🏻				
general asset accounts, check t		· · · · · ·	0044 T V-							
Section B A	Assets Placed in		Janu T		ne General De			stem		
(a) Classification of property	year placed in service	an placed if (business/investment use parad Canada		(f) Met	hod	(g) Deprectation deduction				
19a 3-year property							_			
b 5-year property	7									
c 7-year property	7									
d 10-year property	1									
e 15-year property]									
f 20-year property	7									
g 25-year property	7		2	25 yrs		S/L				
h Residential rental			2	7 5 yrs.	MM	S/L				
property				7 5 yrs.	ММ	S/L				
i Nonresidential real										
property					MM	S/L				
Section C Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System										
20a Class life			T .			S/L				
b 12-year	12 yrs S/L							-		
c 40-year	40 yrs MM S/L									
Part IV Summary (See instructions.)										
21 Listed property Enter amount from line 28										
22 Total. Add amounts from line 1:				 n (a), and l	ine 21. Enter h	ere				
and on the appropriate lines of y	22	91,380								
23 For assets shown above and pla			-	750 11511 00		·		91,300		
enter the portion of the basis att		_	,,	23						

	990 PRINCIPAL OFFICE	ER NAME AND ADDR	ESS				
Attachment	1: Form 990 Page 1, Line F						
Open to Public	T. roim 990 rage 1, hille r						
Inspection	For calendar year 2011, or tax period beginning	, and ending					
Name of Organization		, and analig	Employer Identification Number				
-	ss to Justice Foundation	74-2354575					
990, Page 1, Line F							
Principal officer nam	ne,	Richard L Tate					
Business Name ⁻							
Street Address		PO Box 12886					
U S Address:							
	78711 City Austin	Sta	te <u>TX</u>				
or Foreign Address							
City .	· · · · · · <u>- · · · · · · · · · · · · ·</u>						
Province or	State						
Country .			<u> </u>				
Postal code							

990 PRIMARY EXEMPT PURPOSE

Attachment 2: Form 990 Page 1, Part I

Open to Public

Inspection For calendar year 2011 or tax period beginning

, and ending

Name of Organization

Texas Access to Justice Foundation

Employer Identification Number

74-2354575

Primary Purpose

The Texas Access to Justice Foundation (TAJF) is a nonprofit corporation organized as a funding source for legal services to indigent Texans in civil matters. The funding is primarily generated by interest earned on lawyers' trust accounts (IOLTA), contributions and attorney's volunteering contributions in the State Bar of Texas dues statements. As of July 1, 1989, Texas attorneys are ordered to participate in the Texas IOLTA Program if they maintain nominal and/or short-term funds in trust for clients.

990 PRIMARY EXEMPT PURPOSE

Attachment 3: Form 990 Page 2, Part III

Open to Public

Inspection For calendar year 2011 or tax period beginning , and ending

Name of Organization

Texas Access to Justice Foundation

Employer Identification Number

74-2354575

Primary Purpose

The Texas Access to Justice Foundation (TAJF) is a nonprofit corporation organized as a funding source for legal services to indigent Texans in civil matters. The funding is primarily generated by interest earned on lawyers' trust accounts (IOLTA), contributions and attorney's volunteering contributions in the State Bar of Texas dues statements. As of July 1, 1989, Texas attorneys are ordered to participate in the Texas IOLTA Program if they maintain nominal and/or short-term funds in trust for clients.

	990 PART	III - STATEMEN	IT OF PRO	GRAM SE	RVICE AC	COMPLISHME	ENT
- 1	4 5	000 0	D 1 TT	-			
	4: Form	990 Page 2,	Part II.	<u> </u>			
Open to Public		- 2011			and and	_	
Inspection Name of Organization		r 2011, or tax period be	gurning		, and ending	Employer Identifica	tion Number
		tice Founda	tion			74-2354575	
		vice Accomplishment				71 233 13 73	
Code.	Exper			ng Grants of	5,401,9	20 Revenue	
_	,			se Achievement			
During 201	1, TAJF m	ade grants				arious 501(c) (3)
		ther charit	ies that	provide	legal s	services to	qualified
individual	.S.						
							İ
JVA Copyright Form	s (Software Only) - 201	1 TW L0531F	<u> </u>				11_EO22

990 BOOKS ARE IN CARE OF														
Attachment	5:	Form	990	Page	6, Pa	rt VI	, Sect	tion C	. Line	20				
Open to Public									<u> </u>			_		
Inspection	For cal	endar yea	r 2011 o	r tax pen	od beginnin	ng		, ar	nd ending					
Name of Organization											Identification	n Number		
Texas Access to Justice Foundation								74-2354575						
Part VI - Line 20														
Individual Name .		-					Abel	Rosas	5					
Business Name.					_									
Street Address							1601	Rio (Grande	Suite	e 351			
U.S. Address:														
Zıp code or Foreign Address	<u>7870</u>	1	_	City	<u>Austin</u>	<u> </u>		<u>-</u>	State	e <u>TX</u>				
City									· · · · · · · · · · · · · · · · · · ·					
Province or	State	• •						-						
Country .														
Postal code										_				
Phone Num	ber		•							-	(512)3	20-0099		
Fax Number	г									-				