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Department of the Treasury Internal Revenue Service

#### **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

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

Open to Public Inspection

| AF                             | or the            | 2011 Calendar year, or tax year beginning and   | a enaing                              |                             |                                 |
|--------------------------------|-------------------|---|---------------------------------------|-----------------------------|---------------------------------|
| Вс                             | heck if           | C Name of organization  |                                       | D Employer identific        | cation number                   |
| a                              |                   | ARIZONA FOUNDATION FOR LEGAL SERVICES   | S                                     |                             |                                 |
|                                | Address<br>change | AND EDUCATION   |                                       | _                           |                                 |
|                                | Name<br>change    | Doing Business As   |                                       | 95-3                        | <u>351710</u>                   |
|                                | initial<br>return | Number and street (or P.O box if mail is not delivered to street address)                   | Room/suite                            | E Telephone numbe           | r                               |
|                                | Termin-<br>ated   | 4201 N. 24TH STREET   | 210                                   | (602                        | )340-7366                       |
|                                | Amende            | City or town, state or country, and ZIP + 4   |                                       | G Gross receipts \$         | 3,109,709.                      |
|                                | Applica-<br>tion  | PHOENIX, AZ 85016   |                                       | H(a) Is this a group re     |                                 |
|                                | pending           | F Name and address of principal officer   | · · · ·                               | for affiliates?             | Yes X No                        |
|                                |                   | SAME AS C ABOVE   |                                       | H(b) Are all affiliates inc |                                 |
| 1.7                            | ax-exen           | npt status X 501(c)(3)  | ) or 527                              | 7 ' '                       | list (see instructions)         |
|                                |                   | :► WWW.AZFLSE.ORG   | /                                     | H(c) Group exemption        | •                               |
|                                |                   | rganization: X Corporation  | I Year                                |                             | A State of legal domicile: AZ   |
|                                |                   | Summary   | <b>L</b>   Out                        | Orioniation 2370 1          | d Clate of legal dominate, 2122 |
|                                |                   | riefly describe the organization's mission or most significant activities ORGA              | ANTZED                                | AND OPERATE                 | <u> </u>                        |
| Governance                     |                   | EXCLUSIVELY FOR CHARITABLE, SCIENTIFIC,   | <del>'</del>                          |                             |                                 |
| īa.                            |                   | · · · · · · · · · · · · · · · · · · ·   |                                       |                             | <del>* </del>                   |
| Ver                            |                   | heck this box I if the organization discontinued its operations or disp                     | osea or mor                           | 1 1                         |                                 |
| Ĝ                              |                   | umber of voting members of the governing body (Part VI, line 1a)                            |                                       | 3                           | 2 <u>4</u><br>24                |
| <b>ಿ</b> ರ                     |                   | umber of independent voting members of the governing body (Part VI, line 1b)                | )                                     | 4                           | 21                              |
| ţ                              |                   | otal number of individuals employed in calendar year 2011 (Part V, line 2a)                 |                                       | 5                           |                                 |
| Activities &                   |                   | otal number of volunteers (estimate if necessary)   |                                       | 6                           | 827                             |
| Ac                             |                   | otal unrelated business revenue from Part VIII, column (C), line 12                         |                                       | 7a                          | 0.                              |
|                                | bИ                | et unrelated business taxable income from Form 990-T, line 34                               |                                       | 7b                          | 0.                              |
|                                |                   |   |                                       | Prior Year                  | Current Year                    |
| e .                            |                   | ontributions and grants (Part VIII, line 1h)  |                                       | 3,079,826.                  | 2,788,971.                      |
| Revenue                        |                   | rogram service revenue (Part VIII, line 2g)   | -                                     | 78,165.                     | 159,398.                        |
| Re                             |                   | vestment income (Part VIII, column (A), lines 3, 4, and 7d)                                 | -                                     | 78,711.                     | 39,796.                         |
|                                |                   | ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                     |                                       | 0.                          | 0.                              |
|                                |                   | otal revenue - add lines 8 through 11 (must egual Particilliscolumn (A), line 12)           | -                                     | 3,236,702.                  | 2,988,165.                      |
|                                |                   | rants and similar amounts paid (Part IX, column (A), lines 1-3)                             |                                       | 1,752,579.                  | 1,441,543.                      |
|                                |                   | enefits paid to or for members இart IXAtophymp (A), line 4) பிற                             |                                       | 0.                          | 0.                              |
| es                             | 15 S              | alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10             | )                                     | 1,252,661.                  | 1,075,350.                      |
| Expenses                       |                   | rofessional fundraising fees (Part IX_column-(A),-line 11e)                                 |                                       | 0.                          | 0.                              |
| x                              | <b>b</b> To       | otal fundraising expenses (Part IX, column (D) ine 25) 7 104, 2                             | 220.                                  |                             |                                 |
| ш                              | <b>17</b> O       | ther expenses (Part IX, column (A), lines 11a-1-1d, 11:24e)                                 |                                       | 691,399.                    | 720,209.                        |
|                                | 18 To             | otal expenses Add lines 13-17 (must equal Part IX, column (A), line 25)                     |                                       | 3,696,639.                  | 3,237,102.                      |
|                                | 19 R              | evenue less expenses Subtract line 18 from line 12  |                                       | <459,937.                   | > <248,937.                     |
| Net Assets or<br>Fund Balances |                   |   | Be                                    | ginning of Current Year     | End of Year                     |
| sets                           | 20 To             | otal assets (Part X, line 16)   |                                       | 1,507,736.                  | 1,119,431.                      |
| AS B                           | <b>21</b> To      | otal liabilities (Part X, line 26)  |                                       | 514,473.                    | 386,167.                        |
| 캶                              | 22 N              | et assets or fund balances. Subtract line 21 from line 20                                   |                                       | 993,263.                    | 733,264.                        |
|                                | rt II             | Signature Block   |                                       |                             |                                 |
| Unde                           | r penalti         | es of perjury, I declare that I have examined this return, including accompanying schedul   | les and statem                        | ents, and to the best of my | y knowledge and belief, it is   |
| true,                          | correct,          | and complete. Declaration of preparer (other than officer) is based on all information of y | which preparei                        | r has any knowledge.        |                                 |
| <u></u>                        |                   | Your Sacres (EU ) July B. My  | Jon, (1                               | 50 8/14//                   | 7                               |
| Sign                           | ,  J              | Signature of officer  | • •                                   | Date                        |                                 |
| Here                           | e                 | LOUINS Ruege, CCO Julie B. Wilson   | n.('Fo                                | 8114112                     |                                 |
| EC.)                           | ļ j               | Type or print name and title  |                                       |                             | AP .VAL                         |
| ^                              | F                 | Print/Type preparer's name Preparer's sign (us)   |                                       | Date Check                  | PTIN                            |
| Ω<br>LiP'aid                   | N/C               | ARK L. LANDY  | 244                                   | 8/2/2 It self-employe       | P00169130                       |
| Prep                           | arer F            | irm's name MILLER, ALLEN & CO., P. C.   | · · · · · · · · · · · · · · · · · · · | Firm's EIN                  | 86-0340489                      |
| Use                            | Only F            | rm's address 5333 N. 7TH STREET, SUITE 100  |                                       |                             |                                 |
| [ ]                            |                   | PHOENIX, AZ 85014-2804  |                                       | Phone no. 6                 | 02-264-3888                     |
| ۱ Mav                          | the IRS           | discuss this return with the preparer shown above? (see instructions)                       |                                       | 17 110110 1102              | X Yes No                        |
| C                              | 1 01-23-          |   | tions.                                |                             | Form <b>990</b> (2011)          |
| U.S.                           |                   | E SCHEDULE O FOR ORGANIZATION MISSION S   |                                       | NT CONTINUA                 |                                 |

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

132002 02-09-12

4e Total program service expenses

Other program services (Describe in Schedule O)

including grants of \$

2,903,509.

Page 3

- 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," complete Schedule A   | 1      | X      | ļ            |
| 2        | Is the organization required to complete Schedule B, Schedule of Contributors?  | 2      | X      |              |
| 3        | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for   |        |        | 77           |
|          | public office? If "Yes," complete Schedule C, Part I  | 3      |        | Х            |
| 4        | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect  |        | 47     |              |
| _        | during the tax year? If "Yes," complete Schedule C, Part II   | 4_     | _X_    |              |
| 5        | 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      |        | X            |
| 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,   | _      |        | ٠,,          |
| _        | 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  |        | 3.5    | 1            |
| _        | Schedule D, Part III  | 8      | Х      | <del> </del> |
| 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.  |        |        |              |
| а        |   |        | 37     |              |
|          | Part VI   | 11a    | Х      |              |
| D        | Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total   |        |        | <b></b>      |
| _        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII  Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total | 11b    |        | X            |
| ·        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  | 11c    |        | Х            |
| 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 16? If "Yes," complete Schedule D, Part IX   | 11d    |        | х            |
| 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    | 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     |        | X            |
| 14a      | Did the organization maintain an office, employees, or agents outside of the United States?   | 14a    | Ţ,     | Х            |
| 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 foreign investments valued at \$100,000  |        |        |              |
|          | or more? If "Yes," complete Schedule F, Parts I and IV  | 14b    |        | X            |
| 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     |        | X            |
| 16       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals  |        |        |              |
|          | located outside the United States? If "Yes," complete Schedule F, 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 Part IX,   |        |        |              |
|          | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  | 17     |        | <u> </u>     |
| 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     |        | <u>X</u>     |
| 19       | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"  |        |        |              |
|          | complete Schedule G, Part III   | 19     |        | _X_          |
|          | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H   | 20a    |        | _X_          |
| <u>b</u> | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  | 20b    | 200    |              |
|          |   | Form ! | 990 (2 | 2011)        |

132003 01-23-12

| •    | ARIZONA FOUNDATION FOR LEGAL SERVICES   |                 |                |       |
|------|---|-----------------|----------------|-------|
| Form |   | <u>-3351710</u> | Р              | age 4 |
| Pa   | rt IV Checklist of Required Schedules (continued)   |                 | , <del>.</del> | ,     |
|      | •   |                 | 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              | ļ     |
| 22   | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Pa      | irt 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 curr     | ent             |                |       |
|      | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete              |                 |                | }     |
|      | Schedule J  | 23              | ł              | X     |
| 24a  | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of         | f the           | Ì              | ļ     |
|      | 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             | ļ              | X     |
| b    | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?                           | 24b             | <u> </u>       |       |
| c    | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeas         | e               |                |       |
|      | any tax-exempt bonds?   | 24c             |                |       |
| d    | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?                     | 24d             |                |       |
| 25a  | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a          |                 |                |       |
|      | disqualified person during the year? If "Yes," complete Schedule L, Part I  | 25a             |                | X     |
| b    | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, ar   | nd              |                |       |
|      | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete       | <b>9</b>        |                | ļ     |
|      | Schedule L, Part I  | 25b             |                | X     |
| 26   | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disc      | qualified       |                | 1     |
|      | person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II                     | 26              |                | X     |
| 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 membe          | r               | 1              |       |
|      | 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             |                | X     |
| b    | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Par      | t /V 28b        | X              |       |
| С    | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an o    | officer,        |                | ĺ     |
|      | 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              | ļ              | 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              | ļ              | X     |
| 31   | Did the organization liquidate, terminate, or dissolve and cease operations?  |                 |                |       |
|      | If "Yes," complete Schedule N, Part I   | 31              |                | X     |
| 32   | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete            |                 |                |       |
|      | Schedule N, Part II   | 32              |                | X     |
| 33   | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations                  |                 |                |       |
|      | sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I   | 33              |                | X     |
| 34   | Was the organization related to any tax-exempt or taxable entity?   |                 |                |       |
|      | If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1   | 34              |                | X     |
| 35a  | Did the organization have a controlled entity within the meaning of section 512(b)(13)?                                     | 35a             |                | X     |

**b** Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of

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 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

If "Yes," complete Schedule R, Part V, line 2

Form 990 (2011)

X

35b

36

2a

b 4a

b

5a

С

b

| ARIZONA FOUNDATION FOR LEGAL SERVICES   |            |     |              |
|---|------------|-----|--------------|
| 990 (2011) AND EDUCATION 95-3351  | 710        | Р   | age 5        |
| t 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           |
| Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 27   |            |     |              |
| Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0   | 1          |     |              |
| Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming                              | Ì          |     |              |
| (gambling) winnings to prize winners?   | 1c         | X   |              |
| 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 2a 21   |            |     |              |
| If at least one is reported on line 2a, did the organization file all required federal employment tax returns?                                  | 2b         | X   |              |
| Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)                                       |            |     |              |
| Did the organization have unrelated business gross income of \$1,000 or more during the year?   | За         |     | х            |
| If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O  | 3b         |     |              |
| 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         |     | x            |
| 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                                   |            |     |              |
| Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   | 5a         |     | X            |
| Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?                                | 5b         |     | X            |
| If "Yes," to line 5a or 5b, did the organization file Form 8886-T?  | 5c         |     |              |
| 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            |
| If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts                            | oa         | -   |              |
| were not tax deductible?  | GL.        |     |              |
|   | 6b         |     |              |
| Organizations that may receive deductible contributions under section 170(c).   | 7-         |     |              |
| Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a         |     |              |
| If "Yes," did the organization notify the donor of the value of the goods or services provided?   | 7b         |     |              |
| Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required                               | <b>-</b> - |     |              |
| to file Form 8282?  | 7c         |     | <del> </del> |
| If "Yes," indicate the number of Forms 8282 filed during the year  Output  Description:   | _          |     | 7.           |
| Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                 | 7e         |     | X            |
| Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?                                    | 7f         |     | Α.           |
| If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?                | 7g         |     |              |
| If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?              | 7h         |     |              |
| Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting                     |            |     |              |
| organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?       | 8          |     | -            |
| Sponsoring organizations maintaining donor advised funds.   |            |     |              |
| Did the organization make any taxable distributions under section 4966?   | 9a         |     |              |
| Did the organization make a distribution to a donor, donor advisor, or related person?  | 9b         |     |              |
| Section 501(c)(7) organizations. Enter  |            |     |              |
| Initiation fees and capital contributions included on Part VIII, line 12  |            |     | ]            |
| Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities   |            |     | ĺ            |
| Section 501(c)(12) organizations. Enter   |            |     |              |
| Gross income from members or shareholders 11a   |            |     |              |
| Gross income from other sources (Do not net amounts due or paid to other sources against  |            |     |              |
| amounts due or received from them)  |            |     |              |
| Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?                                      | 12a        |     | ļ ——         |
| If "Yes," enter the amount of tax-exempt interest received or accrued during the year   |            |     |              |
| Section 501(c)(29) qualified nonprofit health insurance issuers.  |            |     |              |
| 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  |            |     |              |
| Enter the amount of reserves the organization is required to maintain by the states in which the  |            |     |              |
| organization is licensed to issue qualified health plans  | j          |     |              |

14b Form **990** (2011)

14a

Х

12a b 13

c Enter the amount of reserves on hand

14a Did the organization receive any payments for indoor tanning services during the tax year?

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

13b

13c

95-3351710

Form 990 (2011) AND EDUCATION Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

|                  | Check if Schedule O contains a response to any question in this Part VI  |             |                      |            |  | X     |
|------------------|--|-------------|----------------------|------------|--|-------|
| Sec              | tion A. Governing Body and Management  |             |                      |            |  |       |
|                  |  |             |                      |            | Yes  | No    |
| 1a               | Enter the number of voting members of the governing body at the end of the tax year  | 1a          | 2                    | 4          | l  |       |
|                  | 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 committee, explain in Schedule O.  |             |                      |            |  |       |
| b                | Enter the number of voting members included in line 1a, above, who are independent   | 1b          | 2                    | 4          |  |       |
| 2                | Did any officer, director, trustee, or key employee have a family relationship or a business relationsh  | ip with     | any other            |            |  |       |
|                  | officer, director, trustee, or key employee?   |             |                      | _2         | X  |       |
| 3                | Did the organization delegate control over management duties customarily performed by or under the   | ne direc    | t supervision        |            |  | İ     |
|                  | of officers, directors, or trustees, or key employees to a management company or other person?   |             |                      | 3          | ļ  | X     |
| 4                | Did the organization make any significant changes to its governing documents since the prior Form  | 990 wa      | s filed?             | 4          | ļ  | X     |
| 5                | Did the organization become aware during the year of a significant diversion of the organization's as  | sets?       |                      | 5          | <u> </u>   | 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 a  | ppoint      | 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,  | stockho     | olders, or           |            |  |       |
|                  | persons other than the governing body?   |             |                      | 7b         | ļ  | X     |
| 8                | Did the organization contemporaneously document the meetings-held or written actions undertaken during the year  | ar by th    | e following          |            |  |       |
| а                | The governing body?  |             |                      | <u>8a</u>  | X  |       |
| b                | Each committee with authority to act on behalf of the governing body?  |             |                      | 8b         | X  | ļ     |
| 9                | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re   | ached a     | it the               |            |  |       |
| <u></u>          | organization's mailing address? If "Yes," provide the names and addresses in Schedule O  |             |                      | 9          | <del>                                     </del> | X     |
| Sec              | tion B. Policies (This Section B requests information about policies not required by the Internal F  | Revenue     | e Code )             |            | <u> </u>   |       |
| 40               | Delthe assessment a base level should be about a second of the or  |             |                      |            | Yes  | No    |
|                  | Did the organization have local chapters, branches, or affiliates?   | h 4         |                      | 10a        | <u> </u>   | X     |
| р                | If "Yes," did the organization have written policies and procedures governing the activities of such of  | napters     | s, affiliates,       | ۱          |  |       |
| 44-              | and branches to ensure their operations are consistent with the organization's exempt purposes?  | d., b.afa.  |                      | 10b        | Х  |       |
|                  | Has the organization provided a complete copy of this Form 990 to all members of its governing boo   | ay bero     | e filing the form?   | 11a        |  |       |
|                  | Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 |             |                      | 40-        | - v  |       |
|                  | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris   | n to con    | flicts?              | 12a<br>12b | X  |       |
| b                | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "   |             |                      | 120        | <u> </u>   |       |
| ·                | In Schedule O how this was done  | es, ue      | SCIDE                | 12c        | x  |       |
| 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 approve   | al hv in    | dependent            | '          |  |       |
|                  | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  |             | aoponaom             |            |  |       |
| а                | The organization's CEO, Executive Director, or top management official   |             |                      | 15a        | х  |       |
| 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              | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange   | ment w      | ıth 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   | ite its p   | articipation         |            |  |       |
|                  | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic  | nızatıor    | n's                  |            |  |       |
|                  | exempt status with respect to such arrangements?   |             |                      | 16b        |  |       |
| Sec              | tion C. Disclosure   |             |                      |            |  |       |
| 17               | List the states with which a copy of this Form 990 is required to be filed ►AZ   |             |                      |            |  |       |
| 18               | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-  | Γ (Secti    | on 501(c)(3)s only   | availat    | le   |       |
|                  | for public inspection Indicate how you made these available. Check all that apply  X Own website. X Another's website. X Upon request.   |             |                      |            |  |       |
| 19               | Describe in Schedule O whether (and if so, how), the organization made its governing documents, co   | anflict o   | if interest notice a | nd fina    | ncial  |       |
|                  | statements available to the public during the tax year   | Januar C    | torost policy, a     |            | ioiai  |       |
| 20               | State the name, physical address, and telephone number of the person who possesses the books a   | nd reco     | ords of the organia  | ation 🏲    | •  |       |
| _0               | THE ORGANIZATION - 602-340-7366  | 1660        | or the organiz       | ation >    |  |       |
|                  | 4201 N. 24TH STREET, SUITE 210, PHOENIX, AZ 85016  | <del></del> | <del>,-</del>        |            |  |       |
| 132006<br>01-23- |  |             |                      | Form       | 990 (  | 2011) |

#### AND EDUCATION

Form 990 (2011)

95-3351710

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

| Check if Schedule | O conta | uns a response | to any c | ni noitearin | 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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

- · 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

| Name and Title   | (A)                        | (B)      | Ī        |              | ((      | C)       |          |          | (D)             | (E)             | (F)           |
|--|----------------------------|----------|----------|--------------|---------|----------|----------|----------|-----------------|-----------------|---------------|
| No.    |                            |          | l        |              | Pos     | itior    |          |          |                 |                 |               |
| Content   Cont   |                            | 1        | box      | , unle       | ss pe   | rson     | is bot   | th an    |                 | compensation    | amount of     |
| (1) DAN BAGATELL EDARD MEMBER (2) HON. THOMAS J BERNING EDARD MEMBER (3) JEFFREY BRODIN EDARD MEMBER (4) SCOTT EVANS EDARD MEMBER (5) RODNEY GLASSMAN EDARD MEMBER (6) BRAD GAZAWAY EDARD MEMBER (7) MATT FISCHER EDARD MEMBER (8) FAITH C. KLEPPER. ESQ. EDARD MEMBER (9) JOSEPH KREAMER EDARD MEMBER (10) PATRICK MCWHORTOR EDARD MEMBER (11) PATRICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) RODIN R MITCHELL EDARD MEMBER (14) COX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RATHICK MCWHORTOR EDARD MEMBER (11) RATHICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RODIN R MITCHELL EDARD MEMBER (11) ROBIN R MITCHELL EDARD MEMBER (12) OX (13) MEREDITH PEABODY EDARD MEMBER (2) OX (14) LOUINGOS RIBAS SANTOS EDARD MEMBER (2) OX (15) HON. PATRICIA OROZCO EDARD MEMBER (2) OX (16) HELEN PURCELL EDARD MEMBER (2) OX (17) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (4) COX (41) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (5) HOLEN PURCELL EDARD MEMBER (2) OX (4) O. (5) OX (5) OX (6) OX (6) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) OX (7) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) O |                            | week     | $\vdash$ | cerar        | nd a d  | irecto   | or/trus  | stee)    | from            | from related    | other         |
| (1) DAN BAGATELL EDARD MEMBER (2) HON. THOMAS J BERNING EDARD MEMBER (3) JEFFREY BRODIN EDARD MEMBER (4) SCOTT EVANS EDARD MEMBER (5) RODNEY GLASSMAN EDARD MEMBER (6) BRAD GAZAWAY EDARD MEMBER (7) MATT FISCHER EDARD MEMBER (8) FAITH C. KLEPPER. ESQ. EDARD MEMBER (9) JOSEPH KREAMER EDARD MEMBER (10) PATRICK MCWHORTOR EDARD MEMBER (11) PATRICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) RODIN R MITCHELL EDARD MEMBER (14) COX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RATHICK MCWHORTOR EDARD MEMBER (11) RATHICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RODIN R MITCHELL EDARD MEMBER (11) ROBIN R MITCHELL EDARD MEMBER (12) OX (13) MEREDITH PEABODY EDARD MEMBER (2) OX (14) LOUINGOS RIBAS SANTOS EDARD MEMBER (2) OX (15) HON. PATRICIA OROZCO EDARD MEMBER (2) OX (16) HELEN PURCELL EDARD MEMBER (2) OX (17) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (4) COX (41) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (5) HOLEN PURCELL EDARD MEMBER (2) OX (4) O. (5) OX (5) OX (6) OX (6) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) OX (7) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) O |                            | 1 ,      | ector    |              |         |          |          |          | the             | . •             | compensation  |
| (1) DAN BAGATELL EDARD MEMBER (2) HON. THOMAS J BERNING EDARD MEMBER (3) JEFFREY BRODIN EDARD MEMBER (4) SCOTT EVANS EDARD MEMBER (5) RODNEY GLASSMAN EDARD MEMBER (6) BRAD GAZAWAY EDARD MEMBER (7) MATT FISCHER EDARD MEMBER (8) FAITH C. KLEPPER. ESQ. EDARD MEMBER (9) JOSEPH KREAMER EDARD MEMBER (10) PATRICK MCWHORTOR EDARD MEMBER (11) PATRICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) RODIN R MITCHELL EDARD MEMBER (14) COX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RATHICK MCWHORTOR EDARD MEMBER (11) RATHICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RODIN R MITCHELL EDARD MEMBER (11) ROBIN R MITCHELL EDARD MEMBER (12) OX (13) MEREDITH PEABODY EDARD MEMBER (2) OX (14) LOUINGOS RIBAS SANTOS EDARD MEMBER (2) OX (15) HON. PATRICIA OROZCO EDARD MEMBER (2) OX (16) HELEN PURCELL EDARD MEMBER (2) OX (17) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (4) COX (41) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (5) HOLEN PURCELL EDARD MEMBER (2) OX (4) O. (5) OX (5) OX (6) OX (6) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) OX (7) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) O |                            |          | or di    | <sub>8</sub> |         |          | ated     |          | 1               | (W-2/1099-MISC) |               |
| (1) DAN BAGATELL EDARD MEMBER (2) HON. THOMAS J BERNING EDARD MEMBER (3) JEFFREY BRODIN EDARD MEMBER (4) SCOTT EVANS EDARD MEMBER (5) RODNEY GLASSMAN EDARD MEMBER (6) BRAD GAZAWAY EDARD MEMBER (7) MATT FISCHER EDARD MEMBER (8) FAITH C. KLEPPER. ESQ. EDARD MEMBER (9) JOSEPH KREAMER EDARD MEMBER (10) PATRICK MCWHORTOR EDARD MEMBER (11) PATRICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) RODIN R MITCHELL EDARD MEMBER (14) COX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RATHICK MCWHORTOR EDARD MEMBER (11) RATHICK MCWHORTOR EDARD MEMBER (12) OX (13) MEREDRING (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (14) LATHICK MCHORTOR EDARD MEMBER (2) OX (15) RODIN R MITCHELL EDARD MEMBER (10) COX (11) RODIN R MITCHELL EDARD MEMBER (11) ROBIN R MITCHELL EDARD MEMBER (12) OX (13) MEREDITH PEABODY EDARD MEMBER (2) OX (14) LOUINGOS RIBAS SANTOS EDARD MEMBER (2) OX (15) HON. PATRICIA OROZCO EDARD MEMBER (2) OX (16) HELEN PURCELL EDARD MEMBER (2) OX (17) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (4) COX (41) CHRISTINE THOMPSON EDARD MEMBER (2) OX (3) O. (4) O. (5) HOLEN PURCELL EDARD MEMBER (2) OX (4) O. (5) OX (5) OX (6) OX (6) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) OX (7) OX (7) CHRISTINE THOMPSON EDARD MEMBER (2) OX (7) O |                            |          | ustee    | truste       |         | , n      | bens     |          | (W-2/1099-MISC) |                 | T             |
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| COLOR MEMBER   | (1) DAN BAGATELL           | <u> </u> | T_       |              | _       |          |          |          |                 |                 |               |
| C2   HON. THOMAS J BERNING   DOARD MEMBER   Z.00   X   D.   O.   O.   O.   | BOARD MEMBER               | 2.00     | x        |              |         |          |          |          | 0.              | 0.              | 0.            |
| STATE   STAT   | (2) HON. THOMAS J BERNING  |          |          |              |         |          |          |          |                 |                 |               |
| BOARD MEMBER   2.00 X  | BOARD MEMBER               | 2.00     | X        |              |         |          |          |          | 0.              | 0.              | 0.            |
| SCOTT EVANS   BOARD MEMBER   2.00 X   0. 0. 0. 0. 0.   | (3) JEFFREY BRODIN         |          |          | ŀ            |         |          |          |          |                 |                 |               |
| BOARD MEMBER   2.00 X  | BOARD MEMBER               | 2.00     | X        | <u> </u>     |         |          |          |          | 0.              | 0.              | 0.            |
| S   RODNEY GLASSMAN  | (4) SCOTT EVANS            |          |          |              |         |          |          | ŀ        |                 |                 |               |
| BOARD MEMBER   2.00 X   0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0  | BOARD MEMBER               | 2.00     | X        |              |         |          |          | <u> </u> | 0.              | 0.              | 0.            |
| Color  | (5) RODNEY GLASSMAN        |          |          |              |         |          |          |          |                 |                 |               |
| BOARD MEMBER   2.00 X   0. 0. 0. 0. (7) MATT FISCHER   BOARD MEMBER   2.00 X   0. 0. 0. 0. (8) FAITH C. KLEPPER. ESQ.   BOARD MEMBER   2.00 X   0. 0. 0. 0. (9) JOSEPH KREAMER   2.00 X   0. 0. 0. 0. (10) PATRICK MCWHORTOR   BOARD MEMBER   2.00 X   0. 0. 0. 0. (11) ROBIN R MITCHELL   BOARD MEMBER   2.00 X   0. 0. 0. 0. (12) KATHRYN NIX   BOARD MEMBER   2.00 X   0. 0. 0. 0. (13) MEREDITH PEABODY   BOARD MEMBER   2.00 X   0. 0. 0. 0. (15) HON. PATRICIA OROZCO   BOARD MEMBER   2.00 X   0. 0. 0. 0. (15) HON. PATRICIA OROZCO   BOARD MEMBER   2.00 X   0. 0. 0. 0. (16) HELEN PURCELL   BOARD MEMBER   2.00 X   0. 0. 0. 0. (16) HELEN PURCELL   BOARD MEMBER   2.00 X   0. 0. 0. 0. (16) HELEN PURCELL   BOARD MEMBER   2.00 X   0. 0. 0. 0. 0. (17) CHRISTINE THOMPSON   BOARD MEMBER   2.00 X   0. 0. 0. 0. 0. 0. (17) CHRISTINE THOMPSON   BOARD MEMBER   2.00 X   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.   | BOARD MEMBER               | 2.00     | X        |              |         | <u> </u> | <u> </u> | ļ        | 0.              | 0.              | 0.            |
| Column   | (6) BRAD GAZAWAY           |          |          |              |         |          |          | ļ        |                 |                 |               |
| BOARD MEMBER   2.00 X   0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0  | BOARD MEMBER               | 2.00     | X        |              |         |          | ļ        |          | 0.              | 0.              | 0.            |
| (8) FAITH C. KLEPPER. ESQ.  BOARD MEMBER  2.00 X  0.0.0.0.0.0.  (9) JOSEPH KREAMER  BOARD MEMBER  2.00 X  0.0.0.0.0.  (10) PATRICK MCWHORTOR  BOARD MEMBER  2.00 X  0.0.0.0.0.  (11) ROBIN R MITCHELL  BOARD MEMBER  2.00 X  0.0.0.0.0.  (12) KATHRYN NIX  BOARD MEMBER  2.00 X  0.0.0.0.0.  (13) MEREDITH PEABODY  BOARD MEMBER  2.00 X  0.0.0.0.0.  (14) DOMINGOS RIBAS SANTOS  BOARD MEMBER  2.00 X  0.0.0.0.0.  (15) HON. PATRICIA OROZCO  BOARD MEMBER  2.00 X  0.0.0.0.0.  (16) HELEN PURCELL  BOARD MEMBER  2.00 X  0.0.0.0.0.0.  (17) CHRISTINE THOMPSON  BOARD MEMBER  2.00 X  0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0  | (7) MATT FISCHER           |          |          |              |         |          |          |          |                 |                 |               |
| BOARD MEMBER   2.00 X   0. 0. 0.   | BOARD MEMBER               | 2.00     | X        | <u> </u>     |         |          | <u>.</u> |          | 0.              | 0.              | 0.            |
| SOARD MEMBER   SOAR   | (8) FAITH C. KLEPPER. ESQ. |          |          |              |         |          |          |          |                 |                 |               |
| BOARD MEMBER   2.00 X   0. 0. 0.   | BOARD MEMBER               | 2.00     | X        |              |         | ļ        |          | <u> </u> | 0.              | 0.              | 0.            |
| Columbde    | (9) JOSEPH KREAMER         |          |          |              |         |          |          |          | _               |                 |               |
| BOARD MEMBER   2.00 X   0. 0. 0.   | BOARD MEMBER               | 2.00     | X        |              |         | ļ        |          |          | 0.              | 0.              | 0.            |
| Column   C   | (10) PATRICK MCWHORTOR     |          |          |              |         |          | ĺ        | i        |                 |                 |               |
| BOARD MEMBER   2.00 X   0. 0. 0.   | BOARD MEMBER               | 2.00     | X        |              |         | L        |          |          | 0.              | 0.              | <u> </u>      |
| Mathematical Periods   | (11) ROBIN R MITCHELL      |          |          |              |         |          |          |          |                 | _               |               |
| BOARD MEMBER   2.00 X   0. 0. 0.   | BOARD MEMBER               | 2.00     | X        | _            |         |          |          | _        | 0.              | 0.              | <u> </u>      |
| MEREDITH PEABODY   BOARD MEMBER   2.00 X   0. 0. 0.  |                            |          |          |              |         |          | ŀ        |          |                 |                 | _             |
| BOARD MEMBER       2.00 X       0.0.0.0.         (14) DOMINGOS RIBAS SANTOS       0.0.0.0.         BOARD MEMBER       2.00 X       0.0.0.         (15) HON. PATRICIA OROZCO       0.0.0.0.         BOARD MEMBER       2.00 X       0.0.0.         (16) HELEN PURCELL       0.0.0.0.         BOARD MEMBER       2.00 X       0.0.0.0.         (17) CHRISTINE THOMPSON       0.0.0.0.0.         BOARD MEMBER       2.00 X       0.0.0.0.   |                            | 2.00     | Х        | _            |         |          |          | ļ        | 0.              | 0.              | 0.            |
| (14) DOMINGOS RIBAS SANTOS   BOARD MEMBER   2.00 X   0. 0. 0.  |                            |          |          |              |         |          |          |          |                 |                 | _             |
| BOARD MEMBER       2.00 X       0.       0.       0.         (15) HON. PATRICIA OROZCO       0.       0.       0.       0.         BOARD MEMBER       2.00 X       0.       0.       0.       0.         (16) HELEN PURCELL       0.       0.       0.       0.       0.         BOARD MEMBER       2.00 X       0.       0.       0.       0.         (17) CHRISTINE THOMPSON       0.       0.       0.       0.       0.       0.         BOARD MEMBER       2.00 X       0.       0.       0.       0.       0.  |                            | 2.00     | X        |              |         |          | _        |          | 0.              | 0.              | 0.            |
| (15) HON. PATRICIA OROZCO   BOARD MEMBER   2.00 X   0. 0. 0.   | ,,                         | 2 00     |          |              |         |          |          |          |                 |                 |               |
| BOARD MEMBER       2.00 X       0. 0. 0.         (16) HELEN PURCELL       0. 0. 0.         BOARD MEMBER       2.00 X       0. 0. 0.         (17) CHRISTINE THOMPSON       0. 0. 0.         BOARD MEMBER       2.00 X       0. 0. 0.  |                            | 2.00     | X        |              |         |          |          | <u> </u> | 0.              | 0.              | 0.            |
| (16) HELEN PURCELL         BOARD MEMBER       2.00 X       0. 0. 0.         (17) CHRISTINE THOMPSON         BOARD MEMBER       2.00 X       0. 0. 0.   |                            | 2 00     | ,,       |              |         |          |          |          | _               |                 |               |
| BOARD MEMBER         2.00 X         0.         0.         0.           (17) CHRISTINE THOMPSON         0.         0.         0.         0.           BOARD MEMBER         2.00 X         0.         0.         0.         0.   |                            | 2.00     | X        |              |         |          |          |          | 0.              | 0.              | <u> </u>      |
| (17) CHRISTINE THOMPSON BOARD MEMBER 2.00 X 0. 0. 0.   |                            | 2 00     | 7.7      |              |         |          |          |          |                 |                 | 0             |
| BOARD MEMBER 2.00 X 0. 0.  |                            | 2.00     | Λ        |              |         | ļ        |          | _        | 0.              | 0.              | <u> </u>      |
|  |                            | 2 00     | v        |              |         |          |          |          |                 | _               | 0             |
|  |                            | <u> </u> | Λ        | L            |         | لـــــا  | <u> </u> |          | <u> </u>        |                 |               |

Form 990 (2011)

| Name and title  Average Flow's pith Control of Compensation (describe Flow's pith Flow's pith Flow or pith Fl           | Part VII Section A. Officers, Directors,       |                      | mpl          | oyee                        |         |         | High     | es       |                                       | }                  |                  |        |                   |
|--|--|----------------------|--------------|-----------------------------|---------|---------|----------|----------|---------------------------------------|--------------------|------------------|--------|-------------------|
| Novel Spark                | (A)  | (B)                  |              | (C)                         |         |         |          |          | (D)                                   | (E)                |                  | _      | (F)               |
| (General amendation of the phouse for related organization of the organization organization of the organi            | Name and title                                 | ,                    |              | (do not check more than one |         |         |          |          | · ·                                   |                    |                  |        |                   |
| Compensation   Com              |  |                      |              |                             |         |         |          |          | .                                     |                    | '                |        |                   |
| Compensation   Com              |  | 1                    | į            |                             |         |         |          |          |                                       | į.                 | . 1              |        |                   |
| (18) TERT THICHSON-PATIOR  (20) TOW GTALDARY  (20) TOW GTALDARY  SECRETARY  (20) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  (21) TODD LANG  VICE-PRESIDENT  (20) X  (3) RANDALL PAPETTI  TARRASHRER  (20) X  (3) RANDALL PAPETTI  (23) RANDALL PAPETTI  (24) GENER SIDENT  (25) HON. ROXANNE K. SONG ONG  PRESIDENT  (20) X  (3) RANDALL PAPETTI  (20) X  (3) RANDALL PAPETTI  (20) X  (3) RANDALL PAPETTI  (21) GENER SIDENT  (22) GENER SIDENT  (23) RONS ROXANNE K. SONG ONG  PRESIDENT—ELECT  (3) ROXANNE K. SONG ONG  PRESIDENT—ELECT  (4) Catal from continuation sheets to Part VII, Section A  (5) HON. ROXANNE K. SONG ONG  PRESIDENT—ELECT  (5) HON. ROXANNE K. SONG ONG  (6) TOTAL Interpretation from the organization becompensation from the organization from the             |  | hours for            |              |                             |         |         | <br>     |          | 1                                     | _                  | - 1              |        | •                 |
| (18) TERT THICHSON-PATIOR  (20) TOW GTALDARY  (20) TOW GTALDARY  SECRETARY  (20) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  (21) TODD LANG  VICE-PRESIDENT  (20) X  (3) RANDALL PAPETTI  TARRASHRER  (20) X  (3) RANDALL PAPETTI  (23) RANDALL PAPETTI  (24) GENER SIDENT  (25) HON. ROXANNE K. SONG ONG  PRESIDENT  (20) X  (3) RANDALL PAPETTI  (20) X  (3) RANDALL PAPETTI  (20) X  (3) RANDALL PAPETTI  (21) GENER SIDENT  (22) GENER SIDENT  (23) RONS ROXANNE K. SONG ONG  PRESIDENT—ELECT  (3) ROXANNE K. SONG ONG  PRESIDENT—ELECT  (4) Catal from continuation sheets to Part VII, Section A  (5) HON. ROXANNE K. SONG ONG  PRESIDENT—ELECT  (5) HON. ROXANNE K. SONG ONG  (6) TOTAL Interpretation from the organization becompensation from the organization from the             |  |                      | 5            | ustee                       |         |         | ensat    |          | (W·2/1099·MISC)                       | ,                  | ´                | org    | anızatıon         |
| (18) TERT THICHSON-PATIOR  (20) TOW GTALDARY  (20) TOW GTALDARY  SECRETARY  (20) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  SECRETARY  (20) X  (3) TOW GTALDARY  (21) TODD LANG  VICE-PRESIDENT  (20) X  (3) RANDALL PAPETTI  TARRASHRER  (20) X  (3) RANDALL PAPETTI  (23) RANDALL PAPETTI  (24) GENER SIDENT  (25) HON. ROXANNE K. SONG ONG  PRESIDENT  (20) X  (3) RANDALL PAPETTI  (20) X  (3) RANDALL PAPETTI  (20) X  (3) RANDALL PAPETTI  (21) GENER SIDENT  (22) GENER SIDENT  (23) RONS ROXANNE K. SONG ONG  PRESIDENT—ELECT  (3) ROXANNE K. SONG ONG  PRESIDENT—ELECT  (4) Catal from continuation sheets to Part VII, Section A  (5) HON. ROXANNE K. SONG ONG  PRESIDENT—ELECT  (5) HON. ROXANNE K. SONG ONG  (6) TOTAL Interpretation from the organization becompensation from the organization from the             |  | -                    | al trus      | nal tr                      |         | oyee    | E O      | 1        |                                       |                    |                  | an     | d related         |
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| (1.9) KEVIN RUBGE  EXECUTIVE DIRECTOR/CBO  50.00   |  | 2 00                 |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| EXECUTIVE DIRECTOR/CBO   |  | 2.00                 | X            | -                           |         |         |          |          | 0.                                    |                    | <u>0 -  </u>     |        | 0.                |
| (20) POK GIALLANZA   2.00  |  | F0 00                |              |                             |         |         |          |          | 100 000                               |                    | _                |        |                   |
| SECRETARY   2.00   X   0. 0. 0. 0.   |  | 50.00                | $\vdash$     | -                           | X       |         | -        | ┝        | 128,000.                              |                    | 0.               | T      | 0,820.            |
| C21 FORD LANG   X  |  | 2 00                 |              |                             | v       |         |          |          |                                       |                    | _                |        | 0                 |
| VICE_PRESIDENT   2.00  |  | 2.00                 | $\vdash$     |                             | ^       |         | ├        | ├        | 0.                                    |                    | <del>"</del>     |        | <u> </u>          |
| (22) GEORGE LYONS  PAST-PRESIDENT  2.00  | •  | 2 00                 |              |                             |         |         |          |          | 0                                     |                    | ^                |        | 0                 |
| PAST-PERSIDENT 2.00 X 0.0.0.0.0.  (23) RANDALL PAPETTI TERASURER 2.00 X 0.0.0.0.0.  (24) CHRISTINA URIAS PRESIDENT 2.00 X 0.0.0.0.0.  (25) HON. ROXANNE K. SONG ONG PRESIDENT-ELECT 2.00 X 0.0.0.0.0.0.  1b Sub-total 5 0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0  |  | 2.00                 | <del> </del> |                             | _       |         | $\vdash$ | $\vdash$ | 0.                                    |                    | <del>     </del> |        | <u> </u>          |
| (23) RANDALL PAPETTI TREASURER  2.00   |  | 2 00                 |              |                             |         |         |          |          | 0                                     |                    | 0                |        | 0                 |
| TREASURER    2.00   X   0. 0. 0. 0. 0. (24) CHRISTINA URLAS   2.00   X   0. 0. 0. 0. 0. (25) HON, ROXANNE K, SONG ONG   2.00   X   0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.  |  | 2.00                 | ├            |                             | ^       |         |          | $\vdash$ | 0.                                    |                    | 0.               |        | <u> </u>          |
| CARISTINA URIAS   2.00   |  | 2 00                 |              |                             | v       |         |          |          | 0                                     |                    | <u> </u>         |        | 0                 |
| 2.00   |  | 2.00                 | -            |                             | Λ       |         | $\vdash$ | -        | · · · · · · · · · · · · · · · · · · · |                    | <del>• •  </del> |        | 0.                |
| 128,000  |  | 2 00                 |              |                             | Y       |         |          | İ        | 0                                     |                    | ا م              |        | 0                 |
| Total from continuation sheets to Part VII, Section A  |  | 2.00                 |              |                             |         |         |          |          | 0.                                    | <del></del>        | <del>••</del>    |        | <u> </u>          |
| 1b Sub-total c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►  1  |  | 2.00                 |              |                             | v       |         |          |          |                                       |                    | 0                |        | Λ                 |
| c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of indeviduals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Yes   No   | PRESIDENT-EBECT                                | 2:00                 |              |                             | 1       |         |          | -        | · ·                                   |                    | -                |        | <u> </u>          |
| c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of indeviduals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Yes   No   |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization limited to those listed above) who received more than \$100,000 of compensation from the organization limited to those listed above) who received more than \$100,000 of compensation from the organization limited to those listed above) who received more than \$100,000 of compensation from the organization limited to those listed above) who received more than \$100,000 of compensation from the organization limited to those listed above) who received more than \$100,000 of compensation from the organization limited to those listed above) who received more than \$100,000 of compensation from the organization limited to t |  |                      |              |                             |         |         |          |          |                                       |                    |                  | 1      |                   |
| Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization      Yes   No  |  | t VII, Section A     |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization from the organization For than \$100,000 of compensation from the organization or individual for services for individual for services from the organization or individual for services for          |  |                      |              |                             |         |         |          |          |                                       |                    |                  | Т.     | <u>0,820.</u>     |
| Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year  (A)  None  (B)  (C)  Compensation  Compensation  Compensation  Formit is a provided in the provided i          | - · · · · · · · · · · · · · · · · · · ·        |                      | iose         | liste                       | ed al   | DOV     | e) wi    | no r     | received more than \$100              | ,000 of reportable |                  |        | 1                 |
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.   0  | compensation from the organization             |                      |              |                             |         |         |          |          | ·                                     |                    |                  |        | Yes No            |
| For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.   | 3 Did the organization list any former office  | er, director, or tru | uste         | e, ke                       | y er    | nplo    | yee      | , or     | highest compensated ei                | mployee on         | Γ                |        |                   |
| and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization to the organization of compensation from the organization of compensation of compensation from the organization of compensation from the organization of compensati        | line 1a? If "Yes," complete Schedule J fo      | or such individual   |              |                             |         |         |          |          |                                       |                    | L                | 3      | Х                 |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶  0  | 4 For any individual listed on line 1a, is the | sum of reportab      | le co        | omp                         | ensa    | ation   | and      | d ot     | her compensation from                 | the organization   |                  |        |                   |
| rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Report compensation  (B)  Compensation  Compensation  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  0  | and related organizations greater than \$      | 150,000? If "Yes,    | " co         | mple                        | ete S   | Sche    | edule    | e J :    | for such individual                   |                    | L                | 4      | X                 |
| Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  None  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization.  | 5 Did any person listed on line 1a receive     | or accrue compe      | nsat         | ion f                       | rom     | any     | unr/     | elat     | ted organization or indivi            | dual for services  |                  |        |                   |
| 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  0  |  | omplete Schedul      | e <i>J f</i> | or s                        | uch     | pers    | son      |          |                                       |                    |                  | 5      | X                 |
| the organization Report compensation for the calendar year ending with or within the organization's tax year  (A)  (B)  (C)  Compensation  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  0   |  | componented in       | dono         |                             | nt o    | ontr    | coete    |          | that recoved more than                | \$100,000 of comp  |                  |        |                   |
| (A) Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation \(\rightarrow\)  | -  |                      |              |                             |         |         |          |          |                                       | •                  | 101100           | uon n  | OIII              |
| Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  | (C     | :)                |
| \$100,000 of compensation from the organization   0  |  | ess address          | NO           | ONE                         | 2       |         |          |          |                                       | ervices            | Cd               |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       | -                  |                  |        |                   |
| \$100,000 of compensation from the organization   0  |  |                      |              |                             |         |         |          |          |                                       |                    |                  |        |                   |
|  |  | · -                  | ot lır       | nite                        | d to    |         | _        | stec     | d above) who received m               | ore than           |                  |        |                   |
|  | φτιου, σου or compensation from the org        | anization 🟲          |              |                             |         |         |          |          |                                       |                    | r                | -Orm ( | <b>990</b> (2011) |

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Form 990 (2011)

AND EDUCATION

Part VIII Statement of Revenue (D) Revenue (A) (B) (C) Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 1 a Federated campaigns 1a **b** Membership dues 1b 1c c Fundraising events d Related organizations 1d 1e 2,432,013. e Government grants (contributions) f All other contributions, gifts, grants, and 356,958 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 788,971 h Total. Add lines 1a-1f **Business Code** 900099 103,018 <u>103,018</u> 2 a MOCK TRIAL REGISTRATIO 56,380. LAW RELATED EDUCATION 900099 56,380 900099 f All other program service revenue g Total. Add lines 2a-2f 159,398. Investment income (including dividends, interest, and 27,512 27,512. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 133,828. assets other than inventory b Less: cost or other basis 119,700. 1,844 and sales expenses <1,844 c Gain or (loss) 14,128. 12,284. <1,844 14,128. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a All other revenue Total. Add lines 11a-11d 988,165. 157,554 12 Total revenue See instructions. 0. 41,640. 132009 01-23-12 Form 990 (2011)

#### Part IX | Statement of Functional Expenses

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

| Do | Check if Schedule O contains a responsional include amounts reported on lines 6b.  | (A)            | (B)                      | (C)                             | (D)                  |
|----|--|----------------|--------------------------|---------------------------------|----------------------|
|    | 8b, 9b, and 10b of Part VIII.  | Total expenses | Program service expenses | Managèment and general expenses | Fundraising expenses |
| 1  | Grants and other assistance to governments and   |                |                          |                                 |                      |
|    | organizations in the United States. See Part IV, line 21   | 1,416,731.     | 1,416,731.               |                                 |                      |
| 2  | Grants and other assistance to individuals in  |                |                          |                                 |                      |
|    | the United States See Part IV, line 22   | 24,812.        | 24,812.                  |                                 | -,                   |
| 3  | Grants and other assistance to governments,  |                |                          |                                 |                      |
|    | 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  | 138,820.       | 97,174.                  | 20,823.                         | 20,823               |
| 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   | 764,589.       | 620,536.                 | 98,048.                         | 46,005               |
| 8  | Pension plan accruals and contributions (include   |                |                          |                                 |                      |
|    | section 401(k) and section 403(b) employer contributions)  |                |                          |                                 |                      |
| 9  | Other employee benefits  | 103,186.       | 79,246.                  | 17,248.                         | 6,692                |
| 10 | Payroll taxes  | 68,755.        | 55,994.                  | 7,750.                          | 5,011                |
| 11 | Fees for services (non-employees)  |                |                          |                                 |                      |
| а  | Management   |                |                          |                                 |                      |
| b  | Legal  |                |                          |                                 |                      |
| С  | Accounting   | 17,799.        | 13,764.                  | 3,106.                          | 929                  |
| d  | Lobbying   |                |                          |                                 |                      |
| е  | Professional fundraising services. See Part IV, line 17  |                |                          |                                 |                      |
| f  | Investment management fees   |                |                          |                                 |                      |
| g  | Other  | 39,695.        | 34,521.                  | 5,174.                          |                      |
| 12 | Advertising and promotion  |                |                          |                                 |                      |
| 13 | Office expenses  | 78,741.        | 57,423.                  | 15,252.                         | 6,066                |
| 14 | Information technology   | 11,898.        | 7,891.                   | 4,007.                          |                      |
| 15 | Royalties  |                |                          |                                 |                      |
| 16 | Occupancy  | 158,402.       | 121,207.                 | 29,181.                         | 8,014                |
| 17 | Travel   | 165,455.       | 159,035.                 | 5,594.                          | 826                  |
| 18 | Payments of travel or entertainment expenses   |                |                          |                                 |                      |
|    | for any federal, state, or local public officials  |                |                          |                                 |                      |
| 19 | Conferences, conventions, and meetings   | 12,723.        | 2,480.                   | 3,865.                          | 6,378                |
| 20 | Interest   |                |                          |                                 |                      |
| 21 | Payments to affiliates   |                |                          |                                 |                      |
| 22 | Depreciation, depletion, and amortization  | 49,125.        | 37,391.                  | 9,354.                          | 2,380                |
| 23 | Insurance  | 10,272.        | 10,272.                  |                                 |                      |
| 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 0) |                |                          |                                 |                      |
| а  | TRAINING   | 122,902.       | 120,963.                 | 1,939.                          |                      |
| b  | GIFTS AND HONORARIUMS  | 25,295.        | 23,387.                  | 1,517.                          | 391                  |
| С  | DUES AND SUBSCRIPTIONS   | 18,848.        | 12,253.                  | 6,515.                          | 80                   |
| d  | DISTRIC COMPETITION-EXP  | 8,429.         | 8,429.                   |                                 |                      |
| е  | All other expenses   | 625.           |                          |                                 | 625                  |
| 25 | Total functional expenses Add lines 1 through 24e  | 3,237,102.     | 2,903,509.               | 229,373.                        | 104,220              |
| 26 | Joint costs Complete this line only if the 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)   |                |                          |                                 |                      |

132010 01-23-12

Form **990** (2011)

Form 990 (2011)

AND EDUCATION

| Pa                          | rt X | Balance Sheet  |                          |                          |     |                     |
|-----------------------------|------|--|--------------------------|--------------------------|-----|---------------------|
|                             |      | •  |                          | (A)<br>Beginning of year |     | (B)<br>End of year  |
|                             | 1    | Cash - non-interest-bearing                            |                          | 10,562.                  | 1   | 7,204.              |
|                             | 2    | Savings and temporary cash investments                 |                          | 41,276.                  | 2   | 3,135.              |
|                             | 3    | Pledges and grants receivable, net                     |                          |                          | 3   |                     |
|                             | 4    | Accounts receivable, net                               |                          | 280,174.                 | 4   | 202,706.            |
|                             | 5    | Receivables from current and former officers, direct   | ctors, trustees, key     |                          |     |                     |
|                             |      | employees, and highest compensated employees           | Complete Part II         |                          |     |                     |
|                             |      | of Schedule L  |                          |                          | 5   |                     |
|                             | 6    | Receivables from other disqualified persons (as de     | efined under section     |                          |     |                     |
|                             |      | 4958(f)(1)), persons described in section 4958(c)(3    | i)(B), and contributing  |                          |     |                     |
|                             |      | employers and sponsoring organizations of sectio       | n 501(c)(9) voluntary    |                          |     |                     |
|                             |      | employees' beneficiary organizations (see instruct     | ions)                    |                          | 6   |                     |
| Assets                      | 7    | Notes and loans receivable, net                        |                          | 274,516.                 | 7   | 214,322.            |
| Ass                         | 8    | Inventories for sale or use                            |                          |                          | 8   |                     |
| •                           | 9    | Prepaid expenses and deferred charges                  |                          | 41,984.                  | 9   | 21,023.             |
|                             | 10a  | Land, buildings, and equipment, cost or other          | 1                        |                          |     |                     |
|                             |      |  | 10a 343,824.             |                          | }   |                     |
|                             | ь    | Less accumulated depreciation                          | 10ь 279,133.             | 112,460.                 | 10c | 64,691.             |
|                             | 11   | Investments - publicly traded securities               | •                        | 746,764.                 | 11  | 64,691.<br>606,350. |
|                             | 12   | Investments - other securities See Part IV, line 11    |                          |                          | 12  |                     |
|                             | 13   | Investments - program-related See Part IV, line 11     |                          |                          | 13  |                     |
|                             | 14   | Intangible assets                                      |                          |                          | 14  |                     |
|                             | 15   | Other assets See Part IV, line 11                      |                          |                          | 15  |                     |
|                             | 16   | Total assets. Add lines 1 through 15 (must equal       | line 34)                 | 1,507,736.               | 16  | 1,119,431.          |
|                             | 17   | Accounts payable and accrued expenses                  |                          | 284,357.                 | 17  | 200,873.            |
|                             | 18   | Grants payable   |                          |                          | 18  | ·                   |
|                             | 19   | Deferred revenue                                       |                          | 229,875.                 | 19  | 185,244.            |
|                             | 20   | Tax-exempt bond liabilities                            |                          |                          | 20  |                     |
| Ø                           | 21   | Escrow or custodial account liability Complete Pa      | rt IV of Schedule D      |                          | 21  |                     |
| Liabilities                 | 22   | Payables to current and former officers, directors,    |                          |                          |     |                     |
| apı                         |      | highest compensated employees, and disqualified        |                          |                          |     |                     |
| ュ                           |      | of Schedule L  |                          |                          | 22  |                     |
|                             | 23   | Secured mortgages and notes payable to unrelate        | ed third parties         |                          | 23  |                     |
|                             | 24   | Unsecured notes and loans payable to unrelated to      |                          |                          | 24  |                     |
|                             | 25   | Other liabilities (including federal income tax, paya  | bles to related third    |                          |     |                     |
|                             |      | parties, and other liabilities not included on lines 1 | 7-24) Complete Part X of |                          |     |                     |
|                             | Į    | Schedule D   |                          | 241.                     | 25  | 50.                 |
|                             | 26   | Total liabilities. Add lines 17 through 25             |                          | 514,473.                 | 26  | 386,167.            |
|                             |      | Organizations that follow SFAS 117, check here         | and complete             |                          |     |                     |
| S                           |      | lines 27 through 29, and lines 33 and 34.              |                          |                          |     |                     |
| č                           | 27   | Unrestricted net assets                                |                          | 811,797.                 | 27  | 616,156.            |
| ala                         | 28   | Temporarily restricted net assets                      |                          | 181,466.                 | 28  | 117,108.            |
| Ö                           | 29   | Permanently restricted net assets                      |                          |                          | 29  |                     |
| ים.                         |      | Organizations that do not follow SFAS 117, che         | ck here 🕨 🔲 and          |                          |     |                     |
| o<br>L                      |      | complete lines 30 through 34.                          |                          |                          |     |                     |
| ets                         | 30   | Capital stock or trust principal, or current funds     |                          |                          | 30  |                     |
| 386                         | 31   | Paid-in or capital surplus, or land, building, or equi | pment fund               |                          | 31  |                     |
| Net Assets or Fund Balances | 32   | Retained earnings, endowment, accumulated inco         | ·                        |                          | 32  |                     |
| ž                           | 33   | Total net assets or fund balances                      |                          | 993,263.                 | 33  | 733,264.            |
|                             | 34   | Total liabilities and net assets/fund balances         |                          | 1,507,736.               | 34  | 1,119,431.          |

Form **990** (2011)

Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

X За

X Separate basis

Act and OMB Circular A-133?

Consolidated basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **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.

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

ARIZONA FOUNDATION FOR LEGAL SERVICES

OMB No 1545-0047

Open to Public Inspection

Employer identification number

|            |                  | AND EDU                     |  |                         |   |                                       |                    |                      | 95            | -3351        | <u>710</u> |            |
|------------|------------------|-----------------------------|--|-------------------------|---|---------------------------------------|--------------------|----------------------|---------------|--------------|------------|------------|
| Part I     | Reason           | for Public Char             | rity Status (All organiz                 | zations mu              | st complet                              | te this par                           | t) See ins         | tructions            |               |              |            |            |
| The organ  | ization is not a | private foundation          | because it is (For lines                 | 1 through               | 11, check                               | only one b                            | ox)                |                      |               |              |            |            |
| 1 🗔        | A church, cor    | nvention of churche         | s, or association of chur                | ches desc               | ribed in se                             | ction 170                             | (b)(1)(A)(i)       | ).                   |               |              |            |            |
| 2          | A school des     | cribed in section 17        | 70(b)(1)(A)(ii). (Attach Sc              | hedule E)               |   |                                       |                    |                      |               |              |            |            |
| з 🗀        | A hospital or    | a cooperative hosp          | ital service organization (              | described               | ın section                              | 170(b)(1)                             | (A)(iu).           |                      |               |              |            |            |
| 4 🔲        | A medical res    | search organization         | operated in conjunction                  | with a hos              | pital desci                             | ribed in se                           | ction 170          | (b)(1)(A)(ii         | i). Enter th  | e hospital'  | s nam      | ne,        |
|            | city, and stat   | e                           |  |                         |   |                                       |                    |                      |               |              |            |            |
| 5 🔲        | An organizati    | on operated for the         | benefit of a college or ur               | niversity ov            | wned or op                              | perated by                            | a governi          | mental uni           | t describe    | d in         |            |            |
|            | section 170      | (b)(1)(A)(ıv). (Compl       | ete Part II)                             |                         |   |                                       |                    |                      |               |              |            |            |
| 6 <u> </u> | A federal, sta   | ite, or local governm       | ent or governmental uni                  | t describe              | d in sectio                             | n 170(b)(                             | 1)(A)(v).          |                      |               |              |            |            |
| 7 X        | An organizati    | on that normally red        | eives a substantial part                 | of its supp             | ort from a                              | governme                              | ental unit c       | or from the          | general pr    | ublic desci  | ribed i    | n          |
|            | section 170(     | b)(1)(A)(vi). (Comple       | ete Part II)                             |                         |   |                                       |                    |                      |               |              |            |            |
| 8 🗔        | A community      | trust described in s        | section 170(b)(1)(A)(vi).                | (Complete               | Part II)                                |                                       |                    |                      |               |              |            |            |
| 9 🔲        |                  |                             | ceives (1) more than 33                  |                         |   | rom contri                            | butions, n         | nembershi            | p fees, and   | d gross rec  | eipts      | from       |
|            | activities rela  | ted to its exempt fu        | nctions - subject to certa               | aın excepti             | ons, and (2                             | 2) no more                            | than 33 1          | 1/3% of its          | support fi    | rom gross    | ınvest     | ment       |
|            | income and u     | unrelated business t        | axable income (less sect                 | tion 511 ta             | x) from bu                              | sinesses a                            | acquired b         | y the orga           | nization af   | ter June 3   | 0, 197     | <b>'</b> 5 |
|            | See section      | <b>509(a)(2).</b> (Complete | e Part III )                             |                         |   |                                       |                    |                      |               |              |            |            |
| 10 🔲       | An organizati    | on organized and o          | perated exclusively to te                | st for publ             | c safety S                              | See <b>sect</b> ic                    | n 509(a)(4         | <b>4</b> ).          |               |              |            |            |
| 11 🔲       | An organizati    | on organized and o          | perated exclusively for th               | ne benefit (            | of, to perfo                            | orm the fu                            | nctions of,        | or to carr           | y out the p   | urposes o    | f one      | or         |
|            | more publicly    | supported organization      | ations described in secti                | on 509(a)( <sup>-</sup> | 1) or section                           | on 509(a)(2                           | 2) See <b>se</b> c | ction 509(a          | a)(3). Ched   | k the box    | that       |            |
|            | describes the    | type of supporting          | organization and compl                   | ete lines 1             | 1e through                              | 11h                                   |                    |                      |               |              |            |            |
|            | a Type I         | b                           | _ Type II c                              | с 💹 Тур                 | e III - Func                            | tionally in                           | tegrated           |                      | d             | Type III - C | )ther      |            |
| e          | By checking      | this box, I certify tha     | at the organization is not               | controlled              | directly o                              | r indirectly                          | by one o           | r more disc          | qualified p   | ersons oth   | er tha     | n          |
|            | foundation m     | anagers and other t         | han one or more publicly                 | y supporte              | d organiza                              | tions des                             | cribed in s        | ection 509           | 9(a)(1) or se | ection 509   | (a)(2).    |            |
| f          | If the organiz   | ation received a writ       | tten determination from t                | the IRS tha             | at it is a Ty                           | ре I, Туре                            | II, or Type        | e III                |               |              |            |            |
|            | supporting or    | rganization, check th       | his box                                  |                         |   |                                       |                    |                      |               |              |            |            |
| g          | _                |                             | organization accepted ar                 |                         |   | -                                     |                    |                      |               | 1            |            |            |
|            | (i) A persor     | n who directly or ind       | lirectly controls, either al             | lone or tog             | ether with                              | persons o                             | lescribed i        | ın (ıı) and (ı       | ıı) below,    |              | Yes        | No         |
|            | -                | • •                         | upported organization?                   |                         |   |                                       |                    |                      |               | 11g(i)       |            |            |
|            |                  | •                           | n described in (i) above?                |                         |   |                                       |                    |                      |               | 11g(ii)      |            |            |
|            | -                |                             | person described in (i) o                |                         |   |                                       |                    |                      |               | 11g(iii)     |            | L          |
| h          | Provide the fo   | ollowing information        | about the supported or                   | ganization              | (s)                                     |                                       |                    |                      |               |              |            |            |
|            | · · ·            |                             | (III) Type of                            | l                       |   |                                       |                    | (111)                | tha           |              |            |            |
| • •        | of supported     | (ii) EIN                    | organization                             |                         | irganization<br>sted in your            |                                       |                    | Lorganizatio         | on in col.    | (vii) Am     |            | f          |
| orga       | inization        |                             | (described on lines 1-9                  | , , ,                   | document?                               |                                       |                    | (i) organizi<br>U.S. | ed in the     | supp         | ort        |            |
|            |                  |                             | above or IRC section (see instructions)) | Yes                     | No                                      | Yes                                   | No                 | Yes                  | No            |              |            |            |
|            |                  |                             | (occ mendenene)/                         | 103                     | 140                                     | 103                                   |                    | 103                  |               |              |            |            |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
|            |                  |                             |  | <del> </del>            |   |                                       |                    |                      |               |              |            |            |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            | -          |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
|            |                  | <del></del>                 |  | -                       |   |                                       |                    |                      |               |              |            |            |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
|            |                  | <u> </u>                    |  |                         |   | · · · · · · · · · · · · · · · · · · · |                    |                      |               |              |            | -          |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
|            |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
| otal       |                  |                             |  |                         |   |                                       |                    |                      |               |              |            |            |
|            | aperwork Re      | duction Act Notice          | , see the Instructions for               | or                      | · - · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | •                  | Schedule             | e A (Form     | 990 or 99    | 0-EZ)      | 2011       |

132021 01-24-12

Form 990 or 990-EZ.

Schedule A (Form 990 or 990 EZ) 2011 AND EDUCATION

95-3351710 Page 2

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)

| Se   | ction A. Public Support                     |                       |                     |                       |                         |                       |                 |
|------|---|-----------------------|---------------------|-----------------------|-------------------------|-----------------------|-----------------|
| Cale | ndar year (or fiscal year beginning in)     | (a) 2007              | <b>(b)</b> 2008     | (c) 2009              | (d) 2010                | (e) 2011              | (f) Total       |
|      | Gifts, grants, contributions, and           |                       |                     |                       |                         |                       |                 |
|      | membership fees received (Do not            |                       |                     |                       |                         |                       |                 |
|      | include any "unusual grants ")              | 5514643.              | 5015569.            | 3610580.              | 3079826.                | 2788971.              | 20009589.       |
| 2    | Tax revenues levied for the organ-          |                       |                     |                       |                         |                       |                 |
|      | ization'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             | 78,600.               | 46,700.             | 55,500.               | 54,140.                 | 56,140.               | 291,080.        |
| 4    | Total. Add lines 1 through 3                | 5593243.              | 5062269.            | 3666080.              |                         |                       | 20300669.       |
|      | The portion of total contributions          |                       |                     |                       |                         |                       |                 |
|      | by each person (other than a                |                       | ı                   |                       |                         |                       |                 |
|      | governmental unit or publicly               |                       | !                   |                       |                         |                       | 1               |
|      | 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 |                       | <del> </del>        |                       |                         |                       | 20300669.       |
|      | ction B. Total Support                      |                       |                     |                       |                         |                       | 20300005        |
|      | ndar year (or fiscal year beginning in)     | (a) 2007              | <b>(b)</b> 2008     | (c) 2009              | (d) 2010                | (e) 2011              | (f) Total       |
|      | Amounts from line 4                         | 5593243.              | 5062269.            | 3666080.              | 3133966.                |                       | 20300669.       |
|      | Gross income from interest,                 |                       |                     | 3000000               |                         |                       |                 |
| _    | dividends, payments received on             |                       |                     |                       |                         |                       |                 |
|      | securities loans, rents, royalties          |                       |                     |                       |                         |                       |                 |
|      | and income from similar sources             | 202,006.              | 70.415.             | <171,483.             | > 78.711.               | 41,640.               | 221,289.        |
| Q    | Net income from unrelated business          | 202/0001              |                     | 72,2,2001             |                         | 11/0100               | 222/2054        |
| •    | activities, whether or not the              |                       |                     |                       |                         |                       |                 |
|      | business is regularly carried on            |                       |                     |                       |                         |                       |                 |
| 10   | Other income Do not include gain            |                       |                     |                       |                         |                       |                 |
| 10   | or loss from the sale of capital            |                       |                     |                       |                         |                       |                 |
|      | assets (Explain in Part IV)                 | <2,329.               | > 650.              | 3,736.                |                         |                       | 2,057.          |
| 11   | Total support. Add lines 7 through 10       | <u> </u>              | 030.                | 3,730.                |                         | <u> </u>              | 20524015.       |
|      | Gross receipts from related activities,     | etc (see instruction  | one)                |                       |                         | 12                    | 459,637.        |
|      | First five years. If the Form 990 is for    |                       |                     | d fourth or fifth ta  | ly vear as a section    |                       | 400,007.        |
| 13   | organization, check this box and stop       | •                     | inst, second, tili  | a, louitir, or mar ta | ix year as a section    | 11 30 1 (0)(3)        |                 |
| Sec  | ction C. Computation of Publi               |                       | rcentage            |                       |                         |                       |                 |
|      | Public support percentage for 2011 (I       |                       |                     | column (fl)           |                         | 14                    | 98.91 %         |
|      | Public support percentage from 2010         |                       | •                   | oldinin (i))          |                         | 15                    | 98.73 %         |
|      | 33 1/3% support test - 2011. If the o       |                       |                     | n line 13, and line 1 | ا<br>14 اھ 33 1/3% or m | •                     |                 |
| 100  | stop here. The organization qualifies       | =                     |                     |                       | 14 10 00 17070 01 17    | 1010, 011001(11110 01 | <b>▶ X</b>      |
| h    | 33 1/3% support test - 2010. If the o       |                       | =                   |                       | line 15 is 33 1/3%      | or more, check ti     |                 |
| _    | and stop here. The organization quali       | •                     |                     | ·                     | III 10 13 00 17070      | or more, ericen a     | <b>▶</b> □      |
| 17~  | 10% -facts-and-circumstances test           | •                     | • • •               |                       | 13 16a or 16h o         | and line 14 ie 1004   | or more         |
| 11 d | and if the organization meets the "fac      | J                     |                     |                       |                         |                       | •               |
|      | meets the "facts-and-circumstances"         |                       | •                   | •                     | •                       | cry now the organ     | III.alion       |
| 1_   |   |                       |                     |                       |                         | 7a and kas 15 :s      | 10% or          |
| 10   | 10% -facts-and-circumstances test           | J                     |                     |                       |                         | •                     |                 |
|      | more, and if the organization meets the     |                       |                     |                       | •                       |                       | <b>_</b>        |
| 10   | organization meets the "facts-and-circ      |                       |                     |                       | -                       |                       |                 |
| 10   | Private foundation. If the organization     | in did fior check a f | JOX OIT MILE 13, 10 | α, 100, 17α, 01 170   |                         |                       | or 990-EZ) 2011 |
|      |   |                       |                     |                       | 30116                   | Jee 11110 11 7 2100   | , or 330-L&/ &0 |

132022 01-24-12

## Schedule A (Form 990 or 990-EZ) 2011 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

| (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails | s to |
|--|------|
| availed an about the tested below placed permitted Dort II.)   |      |

| Section A. Public Support  | ow, piease comp    | Siete ( art ii )                        |  |                        | <del></del>                           | <del></del>                                      |
|--|--------------------|---|--|------------------------|---------------------------------------|--|
| Calendar year (or fiscal year beginning in)  | (a) 2007           | <b>(b)</b> 2008                         | (c) 2009                               | (d) 2010               | (e) 2011                              | (f) Total  |
| 1 Gifts, grants, contributions, and  |                    |   |  |                        |                                       |  |
| membership fees received (Do not   |                    |   | 1                                      |                        |                                       |  |
| include any "unusual grants ")   |                    |   |  |                        |                                       |  |
| 2 Gross receipts from admissions,  |                    |   |  |                        |                                       |  |
| merchandise sold or services per-  |                    |   |  |                        |                                       |  |
| formed, or facilities furnished in any activity that is related to the               |                    |   |  |                        |                                       |  |
| organization's tax-exempt purpose  |                    |   | }                                      |                        |                                       |  |
| 3 Gross receipts from activities that  |                    |   |  |                        |                                       |  |
| are not an unrelated trade or bus-   |                    |   |  |                        |                                       |  |
| iness under section 513  |                    |   |  |                        |                                       |  |
| 4 Tax revenues levied for the organ  |                    |   |  |                        |                                       |  |
| ization's benefit and either paid to   |                    |   |  |                        |                                       |  |
| or expended on its behalf  |                    |   |  |                        |                                       |  |
| ·  |                    |   | · · · · · · · · · · · · · · · · · · ·  | <del> </del>           | ·                                     |  |
| 5 The value of services or facilities  |                    |   |  |                        |                                       |  |
| furnished by a governmental unit to  |                    |   |  |                        |                                       |  |
| the organization without charge  |                    | <del></del>                             |  | +                      |                                       |  |
| 6 Total. Add lines 1 through 5   |                    |   |  | +                      |                                       | <del>                                     </del> |
| 7a Amounts included on lines 1, 2, and   |                    |   |  |                        |                                       |  |
| 3 received from disqualified persons   |                    | <b></b>                                 |  |                        |                                       |  |
| b Amounts included on lines 2 and 3 received   |                    |   |  |                        |                                       |  |
| from other than disqualified persons that exceed the greater of \$5,000 or 1% of the |                    |   |  |                        |                                       |  |
| amount on line 13 for the year   |                    |   |  |                        |                                       |  |
| c Add lines 7a and 7b  |                    |   |  | <u> </u>               |                                       |  |
| 8 Public support (Subtract line 7c from line 6)                                      |                    |   |  |                        |                                       |  |
| Section B. Total Support   |                    |   |  |                        |                                       |  |
| Calendar year (or fiscal year beginning in) ► 📙                                      | (a) 2007           | <b>(b)</b> 2008                         | (c) 2009                               | (d) 2010               | (e) 2011                              | (f) Total  |
| 9 Amounts from line 6  |                    |   |  |                        |                                       |  |
| 10a Gross income from interest,  |                    |   |  |                        |                                       |  |
| dividends, payments received on  |                    |   | 1                                      |                        |                                       |  |
| securities loans, rents, royalties and income from similar sources                   |                    |   |  |                        |                                       |  |
| <b>b</b> Unrelated business taxable income   |                    | - · - · · · · · · · · · · · · · · · · · |  |                        |                                       |  |
| (less section 511 taxes) from businesses   |                    |   |  |                        |                                       |  |
| acquired after June 30, 1975   |                    |   |  |                        |                                       |  |
| · · · · · · · · · · · · · · · · · · ·  |                    |   |  |                        |                                       |  |
| c Add lines 10a and 10b  11 Net income from unrelated business                       |                    |   |  |                        |                                       | <del></del>                                      |
| activities not included in line 10b,   |                    |   |  |                        |                                       | 1  |
| whether or not the business is   | İ                  |   |  |                        |                                       |  |
| regularly carried on   |                    | •                                       |  |                        |                                       |  |
| 12 Other income Do not include gain or loss from the sale of capital                 |                    |   |  |                        |                                       |  |
| assets (Explain in Part IV)  |                    |   |  |                        |                                       | ļ  |
| 13 Total support (Add lines 9, 10c, 11, and 12)                                      |                    |   |  |                        |                                       |  |
| 14 First five years. If the Form 990 is for t  | he organization's  | s first, second, thir                   | d, fourth, or fifth t                  | ax year as a section   | 501(c)(3) organiz                     | ation,   |
| check this box and stop here   |                    |   |  |                        |                                       | ▶□   |
| Section C. Computation of Public   | Support Pe         | rcentage                                | ······································ |                        | · · · · · · · · · · · · · · · · · · · |  |
| 15 Public support percentage for 2011 (lin   | e 8, column (f) d  | ivided by line 13, o                    | column (f))                            | <u> </u>               | 15                                    | 9  |
| 16 Public support percentage from 2010 S   | Schedule A, Part   | III, line 15                            |  |                        | 16                                    | 9  |
| Section D. Computation of Invest   | ment Incom         | e Percentage                            |  |                        |                                       |  |
| 17 Investment income percentage for 201  | 1 (line 10c, colur | nn (f) divided by lii                   | ne 13, column (f))                     | Ŀ                      | 17                                    | 9  |
| 18 Investment income percentage from 20  | 10 Schedule A,     | Part III, line 17                       |  | Γ-                     | 18                                    | 9  |
| 19a 33 1/3% support tests - 2011. If the o   |                    |   | on line 14, and line                   | _                      |                                       |  |
| more than 33 1/3%, check this box and  |                    |   |  |                        |                                       |  |
| b 33 1/3% support tests - 2010. If the o   | •                  |   | · ·                                    | - · ·                  |                                       | and  |
| line 18 is not more than 33 1/3%, chec   | _                  |   |  |                        |                                       |  |
| 20 Private foundation. If the organization   |                    | · -                                     |  |                        | -                                     |  |
| ZO Frivate foundation. If the organization   | did flot check a   | DOX OF HIR 14, 19                       | a, or 150, Check t                     | I IIS DUX AND SEE MIST | uctions .                             |  |

#### **SCHEDULE C** (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

| •   | Section 501(c)(4), (5), or (6) organiza   | tions Complete Part III   |                         |   |  |
|-----|---|---|-------------------------|---|--|
| Nar | me of organization ARIZONA  | FOUNDATION FOR I  | LEGAL SERVI             | CES Emp   | loyer identification number  |
|     | AND EDU   | CATION  |                         |   | 95-3351710   |
| Pa  | art I-A Complete if the org   | ganization is exempt unde   | er section 501(c)       | or is a section 527 o   | organization.  |
| 2   | Provide a description of the organiz<br>Political expenditures<br>Volunteer hours | zation's direct and indirect politica                                     | al campaign activities  |   | 3  |
| Pa  | art I-B Complete if the org   | ganization is exempt unde   | er section 501(c)       | (3).  | · · · · · ·  |
| 1   | Enter the amount of any excise tax  |   |                         | ▶\$   | )  |
|     | Enter the amount of any excise tax  |   |                         | 5 ▶\$   | 8  |
| 3   | If the organization incurred a section  | on 4955 tax, did it file Form 4720 f                                      | or this year?           |   | Yes No   |
| 4:  | a Was a correction made?  |   |                         |   | Yes No   |
|     | b If "Yes," describe in Part IV   |   |                         |   | (-)(O)   |
|     |   | ganization is exempt unde   |                         |   |  |
|     | Enter the amount directly expended  |   |                         |   | S  |
| 2   | Enter the amount of the filing organ  | nization's funds contributed to oth                                       | er organizations for s  | ection 527  | •  |
| _   | exempt function activities  Total exempt function expenditures                    | Add lines 1 and 2. Enter here or  | od on Form 1120 DOL     |   | )  |
| 3   | line 17b  | s Add lines I and 2 Enter here ar   | id on Form 1120-FOE     |   | <u>.</u>   |
| 4   | Did the filing organization file Form   | 1120-POL for this year?   |                         | •   | Yes No   |
| 5   |   | mployer identification number (EIN<br>ition listed, enter the amount paid | from the filing organiz | zation's funds Also enter th  | ne amount of political   |
|     | political action committee (PAC) If   | • •   |                         | •   | ate segregated fund of a   |
|     | (a) Name  | (b) Address   | (c) EIN                 | (d) Amount paid from<br>filing organization's<br>funds If none, enter -0- | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
|     |   |   |                         |   |  |
|     |   |   |                         |   |  |
|     | · · · · · · · · · · · · · · · · · · ·   |   |                         |   |  |
|     |   |   |                         |   |  |
|     |   |   |                         |   |  |
|     |   |   |                         |   |  |

LHA

Schedule C (Form 990 or 990-EZ) 2011

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

#### ARIZONA FOUNDATION FOR LEGAL SERVICES

| Schedule C (Form 990 or 990-EZ) 2011           | AND E  | DUCATI   | ON                                  | DEGILE DELL'                           | 95-3                           | 351710 Page 2                           |  |  |  |
|--|--|--|-------------------------------------|--|--------------------------------|---|--|--|--|
| Part II-A Complete if the org                  | ganizatio  | n is exe   | mpt under sectio                    | n 501(c)(3) and fil                    | ed Form 5768                   |   |  |  |  |
| (election under sec                            | tion 501   | (h)).  |                                     |  |                                |   |  |  |  |
|  |  | non belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, |                                     |  |                                |   |  |  |  |
| expenses, and sha                              |  |  | . ,                                 |  |                                |   |  |  |  |
| B Check 🕨 💹 if the filing organiza             | tion check   | ed box A a   | nd "limited control" pro            | visions apply                          |                                |   |  |  |  |
|  |  | oying Expe<br>leans amou   | nditures<br>ınts paid or incurred.) | (a) Filing<br>organization's<br>totals | (b) Affiliated group<br>totals |   |  |  |  |
| 1a Total lobbying expenditures to infl         | uence pub  | lic opinion (  | grass roots lobbying)               |  |                                |   |  |  |  |
| b Total lobbying expenditures to infl          | uence a leg  | gislative boo  | dy (direct lobbying)                |  | 4.                             |   |  |  |  |
| c Total lobbying expenditures (add l           | ines 1a and  | d 1b)  |                                     |  | 4.                             |   |  |  |  |
| d Other exempt purpose expenditur              | es   |  |                                     |  | 3,237,098.                     |   |  |  |  |
| e Total exempt purpose expenditure             | il exempt purpose expenditures (add lines 1c and 1d) |  |                                     |  |                                |   |  |  |  |
| f Lobbying nontaxable amount Ent               | er the amo   | unt from th  | e following table in boti           | n columns                              | 3,237,102.<br>311,855.         | *************************************** |  |  |  |
| If the amount on line 1e, column (a)           | or (b) is:   | The lob  | bying nontaxable am                 | ount is:                               |                                |   |  |  |  |
| Not over \$500,000                             |  |  | the amount on line 1e               |  | !                              |   |  |  |  |
| Over \$500,000 but not over \$1,00             | 0.000  |  | 00 plus 15% of the exc              | ess over \$500,000                     |                                |   |  |  |  |
| Over \$1,000,000 but not over \$1,5            | ess over \$1,000,000.                                |  | •                                   |  |                                |   |  |  |  |
| Over \$1,500,000 but not over \$17             |  |  | 00 plus 5% of the exce              |  |                                |   |  |  |  |
| Over \$17,000,000                              | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,              | \$1,000,   | -                                   |  |                                |   |  |  |  |
|  |  | <u> </u>   |                                     |  |                                |   |  |  |  |
| g Grassroots nontaxable amount (er             | nter 25% o   | f line 1f)   |                                     |  | 77,964.                        |   |  |  |  |
| h Subtract line 1g from line 1a. If zei        |  | •  |                                     |  | 0.                             |   |  |  |  |
| i Subtract line 1f from line 1c If zero        |  |  |                                     |  | 0.                             |   |  |  |  |
| j If there is an amount other than ze          | •  |  | line 1i, did the organiza           | ation file Form 4720                   |                                |   |  |  |  |
| reporting section 4911 tax for this            |  |  | , ,                                 |  |                                | Yes No                                  |  |  |  |
|  |  | 4-Year Ave   | eraging Period Under                | Section 501(h)                         |                                |   |  |  |  |
| (Some organiz                                  |  |  | ection 501(h) election              |  | olete all of the five          |   |  |  |  |
| co   | olumns bel   | low. See th  | e instructions for line             | s 2a through 2f on pa                  | ige 4.)                        |   |  |  |  |
|  | Lobb   | ying Expe  | nditures During 4-Yea               | r Averaging Period                     |                                |   |  |  |  |
| Calendar year<br>(or fiscal year beginning in) | (a) 3  | 2008   | (ь) 2009                            | (c) 2010                               | <b>(d)</b> 2011                | (e) Total                               |  |  |  |
| 2a Lobbying nontaxable amount                  |  |  | 366,990.                            | 334,832.                               | 311,855.                       | 1,013,677.                              |  |  |  |
| b Lobbying ceiling amount                      |  |  |                                     |  |                                | 1 500 545                               |  |  |  |
| (150% of line 2a, column(e))                   |  |  |                                     |  |                                | 1,520,516.                              |  |  |  |
| c Total lobbying expenditures                  |  |  | 36.                                 | 67.                                    | 4.                             | 107.                                    |  |  |  |
| d Grassroots nontaxable amount                 |  |  | 91,748.                             | 83,708.                                | 77,964.                        | 253,420.                                |  |  |  |
| e Grassroots ceiling amount                    |  |  |                                     |  |                                | ,                                       |  |  |  |
| (150% of line 2d, column (e))                  |  |  |                                     |  |                                | 380,130.                                |  |  |  |

Schedule C (Form 990 or 990-EZ) 2011

f Grassroots lobbying expenditures

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

| or each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description  | (                       | a)   | (  | b)       |
|---|-------------------------|--|--|----------|
| f the lobbying activity   | Yes                     | No   | Am   | ount     |
| During the year, did the filing organization attempt to influence foreign, national, state or   |                         |  |  |          |
| local legislation, including any attempt to influence public opinion on a legislative matter  |                         |  |  |          |
| or referendum, through the use of.  |                         |  |  |          |
| a Volunteers?   |                         |  |  |          |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  |                         |  | 1  |          |
| c Media advertisements?   |                         |  |  |          |
| d Mailings to members, legislators, or the public?  |                         |  |  |          |
| e Publications, or published or broadcast statements?   |                         | -  |  |          |
| f Grants to other organizations for lobbying purposes?  |                         |  |  |          |
| g Direct contact with legislators, their staffs, government officials, or a legislative body?   |                         |  |  |          |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?   |                         |  | <del> </del>                                     | ·        |
| i Other activities?   |                         |  |  |          |
|   |                         |  | <del>                                     </del> |          |
| j Total Add lines 1c through 1i   |                         |  |  |          |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  | -                       |  | <del> </del>                                     |          |
| b If "Yes," enter the amount of any tax incurred under section 4912   |                         |  |  |          |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912  | 1                       |  |  |          |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  | otion 501(c)            | VE) or o   | oction   |          |
| Part III-A Complete if the organization is exempt under section 501(c)(4), se   | Chon sorte,             | J(S), OF S   | echon  |          |
| 501(c)(6).  |                         |  | Yes  | No       |
|   |                         | l  | res  | No       |
|   |                         |  |  |          |
| 1 Were substantially all (90% or more) dues received nondeductible by members?  |                         | 1  |  | 1        |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?   |                         | 2  |  |          |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), se  |                         | 2<br>3<br>)(5), or so  |  | na 3 is  |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes."  |                         | 2<br>3<br>)(5), or so<br>R (b) Par                             |  | ne 3, is |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes."  1 Dues, assessments and similar amounts from members  | red "No" Of             | 2<br>3<br>)(5), or so  |  | ne 3, is |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of parts)   | red "No" Of             | 2<br>3<br>)(5), or so<br>R (b) Par                             |  | ne 3, is |
| Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?  Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of prescribed processing the process of the section 527(f) tax was paid).  | red "No" Of             | 2<br>3)(5), or so<br>R (b) Par                                 |  | ne 3, is |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), se 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answer answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of perspenses for which the section 527(f) tax was paid).  a Current year   | red "No" Of             | 2<br>3<br>)(5), or so<br>R (b) Par                             |  | ne 3, is |
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#### 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.

QMB No 1545-0047
2011
Open to Public Inspection

Name of the organization

ARIZONA FOUNDATION FOR LEGAL SERVICES

Employer identification number 95-3351710

| ,  | AND EDUCATION  |  |                | 95-3351710                            |  |  |  |  |  |  |  |
|----|--|--|----------------|---------------------------------------|--|--|--|--|--|--|--|
| Pa | rt I Organizations Maintaining Donor Advise  | d Funds or Other Similar Fu            | ınds or A      | ccounts. Complete if the              |  |  |  |  |  |  |  |
|    | organization answered "Yes" to Form 990, Part IV, line   | e 6                                    |                |                                       |  |  |  |  |  |  |  |
|    |  | (a) Donor advised funds                | (1             | b) Funds and other accounts           |  |  |  |  |  |  |  |
| 1  | Total number at end of year  |  |                |                                       |  |  |  |  |  |  |  |
| 2  | Aggregate contributions to (during year)   |  |                |                                       |  |  |  |  |  |  |  |
| 3  | Aggregate grants from (during year)  |  |                |                                       |  |  |  |  |  |  |  |
| 4  | Aggregate value at end of year   |  |                |                                       |  |  |  |  |  |  |  |
| 5  | Did the organization inform all donors and donor advisors in   | writing that the assets held in donor  | advised fun    | ds                                    |  |  |  |  |  |  |  |
| _  | are the organization's property, subject to the organization's   | · ·                                    |                | Yes No                                |  |  |  |  |  |  |  |
| 6  | Did the organization inform all grantees, donors, and donor a  | <del>-</del>                           | an be used o   |                                       |  |  |  |  |  |  |  |
| _  | for charitable purposes and not for the benefit of the donor of  |  |                | •                                     |  |  |  |  |  |  |  |
|    | impermissible private benefit?   |  | ,              | Yes No                                |  |  |  |  |  |  |  |
| Pa |  | panization answered "Yes" to Form 9    | 90. Part IV.   |                                       |  |  |  |  |  |  |  |
| 1  | Purpose(s) of conservation easements held by the organization  |  |                |                                       |  |  |  |  |  |  |  |
| •  |  |  | an historicall | ly important land area                |  |  |  |  |  |  |  |
|    | Preservation of land for public use (e.g., recreation or education) Protection of natural habitat Protection of natural habitat Preservation of a certified historic structure   |  |                |                                       |  |  |  |  |  |  |  |
|    | Preservation of open space   | stone structure                        |                |                                       |  |  |  |  |  |  |  |
| 2  | Complete lines 2a through 2d if the organization held a qualif   | ind consequation contribution in the   | form of a co   | enconviction exception the last       |  |  |  |  |  |  |  |
| 2  | day of the tax year  | led conservation contribution in the   | ionii oi a co  | riservation easement on the last      |  |  |  |  |  |  |  |
|    | day of the tax year  |  |                | Held at the End of the Tax Year       |  |  |  |  |  |  |  |
| _  | Total number of conservation easements   |  |                |                                       |  |  |  |  |  |  |  |
| a  | Total acreage restricted by conservation easements   |  |                | 2a 2b                                 |  |  |  |  |  |  |  |
| b  |  | usturo included in (a)                 |                |                                       |  |  |  |  |  |  |  |
| C  | Number of conservation easements on a certified historic str   | • •                                    | tm .ot. wo     | 2c                                    |  |  |  |  |  |  |  |
| d  | ```  | arter 6/17/06, and not on a historic s | tructure       | اما                                   |  |  |  |  |  |  |  |
| •  | listed in the National Register  | langed autopurphed or terminated h     | au tha araan   | 2d                                    |  |  |  |  |  |  |  |
| 3  | Number of conservation easements modified, transferred, re   | eased, extiliguished, or terminated t  | by the organ   | ization during the tax                |  |  |  |  |  |  |  |
|    | year ▶<br>Number of states where property subject to conservation ea   | coment is legated                      |                |                                       |  |  |  |  |  |  |  |
| 4  | Does the organization have a written policy regarding the per  |  | og of          |                                       |  |  |  |  |  |  |  |
| 5  | violations, and enforcement of the conservation easements in   | <del>-</del> '                         | ig oi          | Yes No                                |  |  |  |  |  |  |  |
| 6  | Staff and volunteer hours devoted to monitoring, inspecting,   |  | nte durina th  |                                       |  |  |  |  |  |  |  |
| 6  | Amount of expenses incurred in monitoring, inspecting, and   |  |                |                                       |  |  |  |  |  |  |  |
| 7  | Does each conservation easement reported on line 2(d) above  |  |                | ·                                     |  |  |  |  |  |  |  |
| 8  | and section 170(h)(4)(B)( $\mu$ )?   | e satisfy the requirements of section  | 1 17 0(1)(4)(6 | Yes No                                |  |  |  |  |  |  |  |
| 0  | In Part XIV, describe how the organization reports conservati  | on agreements in its revenue and ever  | onco etator    |                                       |  |  |  |  |  |  |  |
| 9  | include, if applicable, the text of the footnote to the organization   | •                                      |                |                                       |  |  |  |  |  |  |  |
|    | conservation easements   | non s imanciai statements that desci   | nbes the org   | garlization's accounting for          |  |  |  |  |  |  |  |
| Pa | rt III Organizations Maintaining Collections o   | f Art Historical Treasures             | or Other S     | Similar Assets                        |  |  |  |  |  |  |  |
|    | Complete if the organization answered "Yes" to Form  |  | J, Oth. 1      | a. 7.000101                           |  |  |  |  |  |  |  |
|    |  | <del></del>                            | tatament ar    | ad balance about works of ort         |  |  |  |  |  |  |  |
| ıa | If the organization elected, as permitted under SFAS 116 (AS   |  |                |                                       |  |  |  |  |  |  |  |
|    | historical treasures, or other similar assets held for public ext  |  | trierance or   | public service, provide, in Part XIV, |  |  |  |  |  |  |  |
|    | the text of the footnote to its financial statements that describes accompanies and accompanies of the accom |  | mont and b     | alance about warks of ort. historical |  |  |  |  |  |  |  |
| b  | If the organization elected, as permitted under SFAS 116 (AS   | •                                      |                | ·                                     |  |  |  |  |  |  |  |
|    | treasures, or other similar assets held for public exhibition, ed  | ducation, or research in furtherance   | of public ser  | vice, provide the following amounts   |  |  |  |  |  |  |  |
|    | relating to these items  |  |                | <b>.</b> .                            |  |  |  |  |  |  |  |
|    | (i) Revenues included in Form 990, Part VIII, line 1   |  |                | ► \$<br>► \$                          |  |  |  |  |  |  |  |
| _  | (ii) Assets included in Form 990, Part X   |  |                |                                       |  |  |  |  |  |  |  |
| 2  | If the organization received or held works of art, historical tre-   |  | ancial gain,   | provide                               |  |  |  |  |  |  |  |
|    | the following amounts required to be reported under SFAS 1   | 16 (ASC 958) relating to these items   |                | <b>&gt;</b> 0                         |  |  |  |  |  |  |  |
| a  | Revenues included in Form 990, Part VIII, line 1   |  |                | <b>&gt;</b> \$                        |  |  |  |  |  |  |  |
| b  | Assets included in Form 990, Part X  |  |                | <b>&gt;</b> \$                        |  |  |  |  |  |  |  |

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

Schedule D (Form 990) 2011

ARIZONA FOUNDATION FOR LEGAL SERVICES

| Sche     | dule D (Form 990) 2011 AND EDU                               |                       |               |             |               |             |             |              | 51710        |             | <u> 2</u>   |
|----------|--|-----------------------|---------------|-------------|---------------|-------------|-------------|--------------|--------------|-------------|-------------|
| Pai      | t III Organizations Maintaining C                            | ollections of A       | rt, Histo     | orical Tre  | easures, d    | or Othe     | er Simila   | ar Asse      | ts (continu  | ied)        |             |
| 3        | Using the organization's acquisition, accessi                | on, and other record  | ds, check     | any of the  | following tha | it are a si | gnificant i | use of its   | collection i | tems        |             |
| •        | (check all that apply)                                       |                       |               |             |               |             |             |              |              |             |             |
| а        | X Public exhibition  | d                     | ı Щ∟          | oan or excl | hange progra  | ams         |             |              |              |             |             |
| b        | Scholarly research   | •                     |               | ther        |               |             |             |              |              |             |             |
| С        | Preservation for future generations                          |                       |               |             |               |             |             |              |              |             |             |
| 4        | Provide a description of the organization's co               |                       |               |             |               |             |             | se in Par    | XIV          |             |             |
| 5        | During the year, did the organization solicit or             |                       |               |             | •             | er sımılar  | assets      | _            | 7            |             |             |
| _        | to be sold to raise funds rather than to be ma               |                       |               |             |               |             |             | L            | Yes          | X           | <u>10</u>   |
| Pai      | t IV Escrow and Custodial Arran                              | -                     | lete if the o | organizatio | n answered    | "Yes" to    | Form 990    | , Part IV, I | ine 9, or    |             |             |
|          | reported an amount on Form 990, Par                          |                       |               |             |               |             |             |              |              |             | —           |
| 1a       | Is the organization an agent, trustee, custodi               | an or other intermed  | diary for c   | ontribution | s or other as | sets not    | included    |              | ٦.,          | <u></u> .   |             |
|          | on Form 990, Part X?   |                       |               |             |               |             |             | L            | 」 Yes        | الــا       | No          |
| b        | If "Yes," explain the arrangement in Part XIV                | and complete the fo   | ollowing ta   | able        |               |             |             |              | <b>A</b>     |             | —           |
|          | a contratores  |                       |               |             |               |             |             |              | Amount       |             |             |
| C        | Beginning balance  |                       |               |             |               |             | 1c          |              |              |             |             |
| a        | Additions during the year                                    |                       |               |             |               |             | 1d          |              |              |             | —           |
| e        | Distributions during the year                                |                       |               |             |               |             | 1e<br>1f    |              |              |             |             |
| 20       | Ending balance  Did the organization include an amount on Fo | orm 990 Part Y line   | 212           |             |               |             |             |              | Yes          | $\Box$      | Mo          |
| 2a       | If "Yes," explain the arrangement in Part XIV                | omi 550, rait A, iine | , , ,         |             |               |             |             | L            | J 163        | ш.          | •0          |
| Pai      |  | f the organization ar | nswered "     | Yes" to For | rm 990. Part  | IV. line 1  | 0           |              | <del></del>  |             |             |
| تست      |  | (a) Current year      | <del></del>   | or year     | (c) Two year  |             |             | ears hack    | (e) Four y   | ears ha     | ck          |
| 1a       | Beginning of year balance                                    | (a) carroin your      | 197           | or you.     | (c) ino jour  | o ouon      | (4) /////// | ouro puon    | (0) 1 001 )  | <u> </u>    | <u> </u>    |
| ь        | Contributions  |                       |               |             | <del></del>   |             |             |              |              |             |             |
| c        | Net investment earnings, gains, and losses                   |                       |               |             |               |             |             |              |              |             |             |
| d        | Grants or scholarships                                       | ••                    |               |             |               | -           | ·····       |              |              |             |             |
| e        | Other expenditures for facilities                            |                       |               |             |               |             |             |              | <del></del>  |             |             |
| _        | and programs   |                       |               |             |               |             |             |              |              |             |             |
| f        | Administrative expenses                                      |                       |               |             |               |             |             |              |              |             |             |
| g        | End of year balance  |                       |               |             |               |             |             |              |              |             |             |
| 2        | Provide the estimated percentage of the curr                 | rent year end baland  | ce (line 1g   | , column (a | i)) held as.  |             |             | -            | •            |             |             |
| а        | Board designated or quasi-endowment                          |                       | %             |             |               |             |             |              |              |             |             |
| b        | Permanent endowment  | %                     |               |             |               |             |             |              |              |             |             |
| С        | Temporarily restricted endowment ▶                           | %                     |               |             |               |             |             |              |              |             |             |
|          | The percentages in lines 2a, 2b, and 2c should               | ıld equal 100%        |               |             |               |             |             |              |              |             |             |
| За       | Are there endowment funds not in the posse                   | ssion of the organiz  | ation that    | are held a  | nd administe  | red for th  | ne organiz  | ation        |              |             |             |
|          | by   |                       |               |             |               |             |             |              | _ Υ          | es N        | <u>lo</u>   |
|          | (i) unrelated organizations                                  |                       |               |             |               |             |             |              | 3a(i)        |             |             |
|          | (II) related organizations                                   |                       |               |             |               |             |             |              | 3a(iı)       |             |             |
| b        | If "Yes" to 3a(II), are the related organizations            | •                     |               |             |               |             |             |              | 3b           | L           |             |
| 4        | Describe in Part XIV the intended uses of the                |                       |               |             |               |             |             |              |              |             | —           |
| Pai      | t VI Land, Buildings, and Equipm                             |                       |               |             | <del></del>   |             |             |              |              |             | _           |
|          | Description of property                                      | (a) Cost or o         | l l           | (b) Cost    | I             |             | ccumulate   | d            | (d) Book v   | /alue       |             |
|          |  | basis (investi        | ment)         | basis (     | (otner)       | dep         | preciation  |              |              |             |             |
| 1a       | Land   |                       |               |             |               |             |             |              |              |             | —           |
| b        | Buildings  |                       |               |             | 0 F7C         |             | 10 0        | 76           |              | 7-          |             |
| C        | Leasehold improvements                                       |                       |               | ·           | 9,576.        |             | 10,8        |              |              | 75          |             |
| d        | Equipment  | -                     | +             | 34          | 4,248.        |             | 268,3       | <i>J</i> / • | 22           | <u>, 94</u> | <u>L •</u>  |
| <u>e</u> | Other  | avel Form 000 Port    | · V salum     | n /D\ /mn 1 | 0/61.1        |             |             |              | <i>5.1</i>   | 69          | <del></del> |

Schedule D (Form 990) 2011

| 1.    |        |        | (a) [        | Description of I | iability            | (b) Book value |
|-------|--------|--------|--------------|------------------|---------------------|----------------|
| (1)   | Federa | Lincor | ne taxes     |                  |                     |                |
| (2)   | DUE    | то     | KIDS         | VOTING           | ARIZONA             | 50.            |
| (3)   |        |        |              |                  |                     |                |
| (4)   |        |        |              |                  |                     |                |
| (5)   |        |        |              |                  |                     |                |
| (6)   |        |        |              |                  |                     |                |
| (7)   |        |        |              |                  |                     |                |
| (8)   |        |        |              |                  |                     |                |
| (9)   |        |        |              |                  |                     |                |
| (10)  |        |        |              |                  |                     |                |
| (11)  |        |        |              |                  |                     |                |
| T-4-1 | Caluma | /hl m  | int navial l | Form OOA Dort    | V and (P) line 25 ) | <b>▶</b>   50  |

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

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 2. FIN 48 (ASC 740)

ARIZONA FOUNDATION FOR LEGAL SERVICES

| «<br>Cobo | dule D (Form 990) 2011 AND EDUCATION   | TO DEVATO         | 760              | 95       | 3351710            | Page 4             |
|-----------|--|-------------------|------------------|----------|--------------------|--------------------|
|           | t XI Reconciliation of Change in Net Assets from Form 990 to   | Audited Fin       | ancial State     | men      | <u> </u>           | raye T             |
| 1         | Total revenue (Form 990, Part VIII, column (A), line 12)   |                   | 1                |          | 2,988,             | 165.               |
| 2 .       | Total expenses (Form 990, Part IX, column (A), line 25)  |                   | 2                |          | 3,237,             |                    |
| 3         | Excess or (deficit) for the year Subtract line 2 from line 1   |                   | 3                |          | <248,              |                    |
| 4         | Net unrealized gains (losses) on investments   |                   | 4                |          |                    | 062.>              |
| 5         | Donated services and use of facilities   |                   | 5                |          | -                  | <del></del>        |
| 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                |          |                    | <u>062.</u> >      |
| 10        | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and   |                   | 10               |          | <u>&lt;259,</u>    | <u>999.</u> >      |
|           | t XII Reconciliation of Revenue per Audited Financial Statemen   | nts With Rev      | enue per H       | T        |                    | <u> </u>           |
| 1         | Total revenue, gains, and other support per audited financial statements   |                   |                  | 1        | 3,290,             | 636.               |
| 2         | Amounts included on line 1 but not on Form 990, Part VIII, line 12   | 1 - 1             |                  |          |                    |                    |
| a         | Net unrealized gains on investments  | 2a                | 311,689.         | -        | 1                  |                    |
| b         | Donated services and use of facilities   |                   | 011,009.         | 1        |                    |                    |
| C         | Recoveries of prior year grants  Other (Cearthe in Part VIV.)  | 2c                | <11,062.         |          |                    |                    |
| d         | Other (Describe in Part XIV)   | 2d -              | (11,002)         | 1 :      | 300                | 627                |
| _         | Add lines 2a through 2d  |                   |                  | 2e       | 2,990,             | $\frac{627.}{000}$ |
| 3         | Subtract line 2e from line 1   |                   |                  | 3        | 2,990,             | 009.               |
| 4         | Amounts included on Form 990, Part VIII, line 12, but not on line 1  | 1 4- 1            |                  |          |                    |                    |
| a         | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a                | <1,844.          |          |                    |                    |
| D         | Other (Describe in Part XIV)   | 4b                | <1,044.          | 7        | _1                 | 011 -              |
|           | Add lines 4a and 4b  |                   |                  | 4c       | 2,988,             | <u>844.</u> >      |
| Par       | Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  t XIII Reconciliation of Expenses per Audited Financial Stateme | ents With Fx      | nenses ner       |          |                    | 165.               |
| 1         | Total expenses and losses per audited financial statements   | JING WILL EX      | ponece per       | 1        | 3,550,             | 635                |
| 2         | Amounts included on line 1 but not on Form 990, Part IX, line 25   |                   |                  | <b>-</b> | 3,330,             | 033.               |
| 2         | Donated services and use of facilities   | 2a                | 311,689.         |          |                    |                    |
| a         | Prior year adjustments   | 2b                | 311,003.         | 1        |                    |                    |
| 0         | Other losses   | 2c                | 1,844.           | 1        |                    |                    |
| ď         | Other (Describe in Part XIV)   | 2d                | 1,011.           | 1        |                    |                    |
| -         | Add lines 2a through 2d  | Zu                |                  | 2e       | 313                | 533.               |
| е<br>3    | Subtract line 2e from line 1   |                   |                  | 3        | 3,237,             |                    |
| 4         | Amounts included on Form 990, Part IX, line 25, but not on line 1  |                   |                  |          | 3,23,,             | 102.               |
| -         | Investment expenses not included on Form 990, Part VIII, line 7b   | 4a                |                  |          |                    |                    |
|           | Other (Describe in Part XIV)   | 4b                |                  | 1        | i                  |                    |
|           | Add lines 4a and 4b  | 40                |                  | 4c       |                    | 0.                 |
| _         | Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)   |                   |                  | 5        | 3,237,             |                    |
|           | t XIV Supplemental Information   | <del></del>       | <del></del>      |          | 5/25//             | 1011               |
|           | olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III  | . lines 1a and 4. | Part IV. lines 1 | b and    | 2b. Part V. line 4 | I. Part            |
|           | 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete  |                   |                  |          |                    | ,                  |
|           | T III, LINE 4: THE FOUNDATION'S ART COLLEC   |                   | -                |          | JUSTICE"           | ,                  |
|           |  |                   |                  |          |                    |                    |
| IS        | ON LONG-TERM LOAN AT THE ARIZONA SUPREME O   | COURT DES         | SIGNED T         | OF       | URTHER T           | HE                 |
|           |  |                   |                  |          |                    |                    |
| UNI       | <u>PERSTANDING OF THE VALUES INTEGRAL IN AN EQ</u>   | QUAL JUS!         | CICE SYS         | TEM      | •                  |                    |
|           |  |                   |                  |          |                    |                    |
|           |  |                   |                  |          |                    |                    |
| D = =     | M VII I IND OD OBUDO DO TUCONOSTO  |                   |                  |          |                    |                    |
| PAF       | T XII, LINE 2D - OTHER ADJUSTMENTS:  |                   |                  |          |                    |                    |
| זואדן     | REALIZED LOSS ON INVESTMENTS   |                   |                  |          | _11                | 062.               |
| ~~**      |  |                   |                  |          |                    | <u> </u>           |
|           |  | <u> </u>          |                  | <b></b>  |                    |                    |
|           |  |                   |                  |          |                    |                    |
| PAF       | T XII, LINE 4B - OTHER ADJUSTMENTS:  |                   |                  | C        |                    | .0) 60 : :         |
|           |  |                   |                  | Sched    | dule D (Form 99    | ru) 2011           |

27

132054 01-23-12

Schedule I (Form 990) (2011) 18. 2 Employer identification number 95-3351710 Open to Public OMB No 1545-0047 2011 Inspection (h) Purpose of grant or assistance X Yes 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 if additional space is needed ame and address of organization

(b) EIN

(c) IRC section

(d) Amount of received more than \$5,000 Part II can be duplicated if additional space is needed (g) Description of reach assistance assistance other) 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection 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, 0 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States ▶ Attach to Form 990. SEE ATTACHED SCHED. 1,401,309 ARIZONA FOUNDATION FOR LEGAL SERVICES Enter total number of section 501(c)(3) and government organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table Part | General Information on Grants and Assistance criteria used to award the grants or assistance? AND EDUCATION 1 (a) Name and address of organization SEE ATTACHED SCHEDULE Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part II

| . SERVICES         |           |
|--------------------|-----------|
| FOR LEGAL          |           |
| FOR                |           |
| ARIZONA FOUNDATION | EDUCATION |
| ARIZONA            | AND EDUC  |

Schedule I (Form 990) (2011)

Part III

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 can be duplicated if additional space is needed

Page 2

95-3351710

Schedule I (Form 990) (2011) (f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (d) Amount of non-cash assistance ાં 24,812, (c) Amount of cash grant 30 (b) Number of recipients (a) Type of grant or assistance LOAN FORGIVENESS LOANS 132102 01-27-12

Arizona Foundation for Legal Services and Education 2011 Form 990 - EIN 95-3351710 Schedule I Part II Attachment

|  |  |            |          |                | Amt of Non-  |           | Descript of         |                            |
|--|--|------------|----------|----------------|--|-----------|---------------------|----------------------------|
|  |  |            |          |                | Cash   | Method of | Non-Cash            |                            |
|  |  |            |          | Amount of Cash | Assistance   | Valuation | Assistance          |                            |
| Name (1a)                              | Address (1a)                                 | EIN (1b)   | IRC (1c) | Grant (1d)     | (16)   | (11)      | (19)                | Purpose of Grant (11)      |
|  |  |            |          |                |  |           |                     |                            |
| Against Abuse, Inc                     | 119 N Florence Street Casa Grande, AZ 85222  | 94-2856310 | 501(c) 3 | \$ 16,119      |  |           |                     | Domestic Violence Grant    |
| Catholic Charities Community-SE AZ     | PO Box 1777 Bisbee, AZ 85603                 | 86-0223999 | 501(c) 3 | \$ 16,805      | がいる。   |           |                     | Domestic Violence Grant    |
| Catholic Charities Community-West AZ   | 2 690 E 32nd Ave Yuma, AZ 85365              | 86-0223999 | 501(c) 3 | \$ 15,365      |  |           |                     | Domestic Violence Grant    |
| Community Legal Services               | PO Box 21538 Phx, AZ 85036                   | 86-0166615 | 501(c) 3 | \$ 422,820     | 時の大大な  |           |                     | Legal Services & DV Gran   |
| DNA - People's Legal Services          | PO Box 306, Window Rock, AZ 86515            | 86-0207220 | 501(c) 3 | \$ 156,298     |  |           |                     | Legal Services & DV Gran   |
| EMERGEI Center Against DV              | 2545 E Adams Street, Tucson, AZ 85716        | 86-0312162 | 501(c) 3 | \$ 26,741      |  |           |                     | Domestic Violence Grant    |
| Florence Immigrant & Refugee           | P O Box 654 Florence, AZ 85232               | 86-0658103 | 501(c) 3 | \$ 48,113      |  |           |                     | Legal Services Grant       |
| Interagency Council/Lk Havasu          | 1940 Mesquite Ave Lake Havasu City, AZ 86403 | 86-0516654 | 501(c) 3 | \$ 9,707       | できた。   | ないないないないと | いないない。              | Domestic Violence Grant    |
| Kingman Aid to Abused People           | 2701 E Andy Devine, Kingman, AZ 86401        | 86-0601113 | 501(c) 3 | \$ 18,006      |  |           |                     | Domestic Violence Grant    |
| Mt Graham Safehouse                    | P O BOX 1202 Safford, AZ 85546               | 96-0800990 | 501(c) 3 | \$ 16,479      | が こころが   |           |                     | Domestic Violence Grant    |
| New Hope Ranch                         | PO Box 1589 St Johns, AZ 85936               | 86-0894950 | 501(c) 3 | \$ 9,182       | A STATE OF THE PARTY OF THE PAR | 1000000   |                     | Domestic Violence Grant    |
| Northland Family Help Center           | 320 N Leroux St Surte C Flagstaff AZ 86001   | 86-0351566 | 501(c) 3 | \$ 20,191      |  |           |                     | Domestic Violence Grant    |
| Page Regional Domestic Violence        | 56 6th Avenue, Page, AZ 86040                | 86-0838347 | 501(c) 3 | \$ 19,742      | 港場深地   |           | The transfer of     | Domestic Violence Grant    |
| Sojourner Center                       | PO Box 20156 Phx, AZ 85036                   | 94-2465081 | 501(c) 3 | \$ 34,258      |  | がない。      | 2002 H. W. S. S. S. | Domestic Violence Grant    |
| Southern Arizona Legal Aid             | 64 E Broadway Blvd, Tucson, AZ 85701         | 86-0143449 | 501(c) 3 | \$ 482,082     |  |           |                     | ી Legal Services & DV Gran |
| Time Out                               | P O Box 306 Payson, AZ 85547                 | 86-0723051 | 501(c) 3 | \$ 16,300      |  |           |                     | Domestic Violence Grant    |
| Verde Valley Sanctuary                 | PO Box 595 Sedona, AZ 86339                  | 86-0741314 | 501(c) 3 | \$ 19,453      |  | の語を行うと    |                     | Domestic Violence Grant    |
| William E Morris Institute for Justice | 202 E McDowell Suite 257, Phx, AZ 85004      | 86-0817170 | 501(c) 3 | \$ 53,647      |  |           |                     | Legal Services Grant       |
|  |  |            |          | \$1,401,309    | II   |           |                     |                            |
|  |  |            |          |                |  |           |                     |                            |

#### **SCHEDULE L**

(Form 990 or 990-EZ)

Department of the Treasury

#### **Transactions With Interested Persons**

➤ Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047

Open To Public Inspection

Internal Revenue Service

Name of the organization

ARIZONA FOUNDATION FOR LEGAL SERVICES

Employer identification number

|  | <u>AN</u> D                            | EDUCA                                 | TIO           | N       |                        |                 |                                     |              | 9          | <u> 5-33</u>            | <u>5171</u>          | 0               |             |
|--|--|---------------------------------------|---------------|---------|------------------------|-----------------|-------------------------------------|--------------|------------|-------------------------|----------------------|-----------------|-------------|
| Part I Exces   | s Benefit                              | Transact                              | ions (        | section | 501(c)(                | 3) and sectio   | n 501(c)(4) organizatio             | ns only)     |            |                         |                      |                 |             |
| Complet  | e if the organ                         | nization ans                          | wered '       | "Yes" o | n Form                 | 990, Part IV,   | line 25a or 25b, or Fo              | rm 990-E     | Z, Part    | V, line 40              | )b                   | ,               |             |
| 1 (3)  | Name of disc                           | nualified per                         | son           |         |                        |                 | (b) Description                     | of transa    | iction     |                         |                      | (c) Corr        | ected'      |
| (a)  | Ivanie oi disc                         |                                       |               |         |                        |                 | (b) Description                     |              |            | ····                    |                      | Yes             | No          |
|  |  |                                       |               |         |                        |                 |                                     |              |            |                         |                      | igwdot          |             |
|  |  |                                       |               |         |                        |                 |                                     |              |            | <del>-,</del> -         |                      |                 |             |
|  |  |                                       |               |         |                        |                 |                                     |              |            |                         |                      | [I              |             |
|  |  |                                       | <del></del>   |         |                        |                 |                                     |              |            |                         |                      |                 |             |
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| <ul><li>2 Enter the amount section 4958</li><li>3 Enter the amount</li></ul> | •                                      |                                       |               |         | _                      |                 | ed persons during the               | year un      | der        | <b>▶</b> \$ <b>▶</b> \$ |                      |                 |             |
| Part II Loans  | to and/or                              | From In                               | terest        | ted Pe  | ersons                 | S.              |                                     |              |            |                         |                      |                 |             |
| Complet  | e if the organ                         | nization ans                          | wered '       | "Yes" o | n Form                 | 990, Part IV,   | line 26, or Form 990-E              | Z, Part \    | /, line 38 |                         |                      |                 |             |
| Complete if the orgar  (a) Name of interested person and purpose             | (b) Loan to or fro<br>the organization |                                       | om (c) Origin |         | nal principal<br>nount | (d) Balance due |                                     | In<br>ault?  |            |                         | (g) W<br>agreer      |                 |             |
|  |  | То                                    | To From       |         |                        |                 |                                     | Yes          | No         | Yes                     | No                   | Yes             | No          |
|  |  |                                       |               |         |                        |                 |                                     |              |            | ļ                       |                      |                 |             |
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| otal   |  |                                       |               |         |                        | ▶ \$            |                                     |              |            |                         |                      |                 |             |
| Part III Grants  | or Assist                              | tance Be                              | nefitir       | ng Int  | ereste                 | d Person        | s.                                  |              |            |                         |                      |                 |             |
|  |  | ······                                | wered '       | ·       |                        | 990, Part IV,   |                                     | =            | · 1        |                         |                      |                 |             |
| (a) Name of  | interested p                           | erson                                 |               | (i      | b) Relati              |                 | een interested person<br>ganization | and          |            |                         | ount and<br>assistan | d type of<br>ce |             |
|  |  |                                       |               |         |                        | ···             |                                     |              |            |                         |                      |                 |             |
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2011

| (a) Name of interested person            | "Yes" on Form 990, Part IV, line 28a, 28 (b) Relationship between interested person and the organization | (c) Amount of transaction             | (d) Description of transaction | (e) Sharing of organization's revenues? |    |
|--|--|---------------------------------------|--------------------------------|---|----|
|  |  |                                       |                                | Yes                                     | No |
| HONORABLE JUDGE LARRY WINT               | FAMILY MEMBER OF AN  | 35,000.                               | EMPLOYMENT                     |   | _X |
|  |  | <u>.,</u>                             |                                |   |    |
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|  |  |                                       |                                |   |    |
| Part V Supplemental Information          | durformation for recognition   | on Cabadula I. /aaa                   |                                |   |    |
| Complete this part to provide additional | al information for responses to questions  | on Schedule L (see                    | instructions)                  |   |    |
| SCH L, PART IV, BUSINESS T               | RANSACTIONS INVOLVIN   | G INTEREST                            | ED PERSONS:                    |   |    |
| /-\                                      | 2017   |                                       |                                |   |    |
| (A) NAME OF INTERESTED PER               | SON:   |                                       |                                | · · · · ·                               |    |
| HONORABLE JUDGE LARRY WINT               | HROP - FORMER BOARD  | MEMBER                                |                                |   |    |
|  |  |                                       |                                |   |    |
| (B) RELATIONSHIP BETWEEN I               | NTERESTED PERSON AND   | ORGANIZAT                             | 'ION:                          |   |    |
| FAMILY MEMBER OF AN EMPLOY               | EE.  |                                       |                                |   |    |
| (D) DEGEREDATION OF EDINGS.              | UM TONE TRADE OVERSTANDE   | NIE TYMEDE                            | IMED DEDGOM                    | TO                                      |    |
| (D) DESCRIPTION OF TRANSAC               | TION: EMPLOYMENT - 1   | HE INTERES                            | TED PERSON                     | 15                                      |    |
| FAMILY MEMBER OF AN EMPLOY               | EE THAT HAS A CLERIA   | L POSITION                            | í <b>.</b>                     |   |    |
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#### 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 Open to Public Inspection

Name of the organization

ARIZONA FOUNDATION FOR LEGAL SERVICES AND EDUCATION

Employer identification number 95-3351710

DESCRIPTION OF ORGANIZATION MISSION: FORM 990, PART I, LINE 1. PURPOSES, WHICH INCLUDES CARRYING ON THE FOLLOWING PURPOSES, DIRECTLY AND BY THE APPLICATION OF ASSETS TO THE USE OF THE ARIZONA BAR FOUNDATION, OR TO ANY OTHER CORPORATION, TRUST, FUND OR FOUNDATION WHOSE PURPOSES AND OPERATION ARE CHARITABLE, SCIENTIFIC, LITERACY, OR (A) TO FOSTER AND MAINTAIN THE HONOR AND INTEGRITY OF THE PROFESSION OF THE LAW; (B) TO STUDY, IMPROVE AND TO FACILITATE THE ADMINISTRATION OF JUSTICE; (C) TO PROMOTE THE STUDY OF THE LAW AND THE DIFFUSION OF KNOWLEDGE THEREOF, RESEARCH THEREIN, CONTINUING EDUCATION OF LAWYERS; (D) TO ACT AS A RESOURCE CENTER FOR THE PROMOTION OF LAW-RELATED EDUCATION; (E) TO SUPPORT PROGRAMS DESIGNED TO ASSIST IN THE DELIVERY OF LEGAL SERVICES TO THE MARGINALIZED FOR LAW-RELATED EDUCATION, A PROGRAM DESIGNED TO TEACH YOUNG PEOPLE, EDUCATORS AND OTHER ADULTS ABOUT THE LAW, THE LEGAL PROCESS AND THE LEGAL SYSTEM

SECTION A, LINE 2: EACH YEAR, OUR BOARD SIGNS A PART VI, CONFLICT OF INTEREST STATEMENT OUTLINING THAT IF THERE ARE ANY CONFLICTS DUE TO THEIR RELATIONSHIPS THEY SHOULD DISCLOSE THEM THROUGHOUT THE YEAR. DUE TO SPECIFIC FOCUS OF OUR MISSION (PROMOTING ACCESS TO JUSTICE FOR ALL) IT WOULD BE HIGHLY LIKELY THAT THERE ARE INTERRELATIONSHIPS IN A BOARD CHOSEN FOR THEIR EXPERTISE IN THIS NARROW FOCUS. OUR BOARD IS COMPRISED OF SEVERAL MEMBERS REPRESENTING PUBLIC LAWYERS, PRIVATE LAWYERS, AND PEOPLE WORKING CLOSELY IN ACCESS TO JUSTICE. FOR EXAMPLE, THERE ARE FOUR BOARD MEMBERS WHERE TWO EACH ARE FROM THE SAME FIRM. ALSO, OUR BOARD MEMBERS (LAWYERS OR THEIR LAW FIRMS) MAY APPEAR BEFORE JUDGES (ALSO BOARD MEMBERS). LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2011) 132211 01-23-12

Employer identification number 95-3351710

A BOARD MEMBER (COURT REPORTER) MAY BE ASSIGNED TO A JUDGE AND/OR ATTORNEY
WHO ARE ALSO BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS SUBMITTED TO THE

FINANCE COMMITTEE FOR CLOSE REVIEW AND DISCUSSION. UPON CHANGES MADE AS

NEEDED, APPROVAL, AND RECOMMENDATION OF ACCEPTANCE FROM THE FINANCE

COMMITTEE, FORM 990 COPIES ARE DISTRIBUTED TO THE ENTIRE BOARD MEMBERSHIP

FOR REVIEW. THE BOARD COMMENTS AND CONSENSUS ON APPROVING THE FINANCE

COMMITTEE RECOMMENDATION OR ASKS FOR FURTHER CHANGES/OR CLARIFICATIONS.

FORM 990, PART VI, SECTION B, LINE 12C: THE BOARD MEMBERS ANNUALLY REVIEW

AND SIGN THE CONFLICT OF INTEREST POLICY. THE STAFF REVIEWS THE COMING

AGENDAS AND DISCUSS WITH BOARD MEMBERS WHERE THEY BELIEVE THERE MAY BE A

CONFLICT. CONFLICTS ARE DECLARED AT THE BEGINNING OF THE DISCUSSION AND ANY

ABSTENTIONS ARE NOTED IN THE MINUTES. THE STAFF ALSO SIGNS AND REVIEWS THE

CONFLICT OF INTEREST POLICIES AND THE IMPORTANCE OF ADHERENCE TO THIS AND

OTHER POLICIES ARE THE TOPIC OF AN ALL STAFF MEETING ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15: THE PROCESS FOR DETERMINING

COMPENSATION OF THE ORGANIZATION'S OFFICER INCLUDES A COMPARISON OF OTHER

STATE'S IOLTA DIRECTORS, A REVIEW OF THE ASU LODESTAR CENTER NON-PROFIT

COMPENSATION/BENEFITS REPORT, APPROVAL BY THE EXECUTIVE COMMITTEE, AND THE

DECISION IS PROPERLY DOCUMENTED BY THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS

AVAILABLE TO THE PUBLIC UPON REQUEST AND BY POSTING SUCH INFORMATION ON THE ORGANIZATION'S WEBSITE.

| Schedule O (Form 990 or 990-EZ) (2011)   | Page 2                              |
|--|-------------------------------------|
| Name of the organization ARIZONA FOUNDATION FOR LEGAL SERV   | ICES Employer identification number |
| ` AND EDUCATION  | 95-3351710                          |
| ·  |                                     |
|  |                                     |
|  |                                     |
| FORM 990, PART XI, LINE 5, CHANGES IN NET ASSET  | S:                                  |
|  | 44 060                              |
| NET UNREALIZED LOSSES ON INVESTMENTS:  | -11,062.                            |
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### Form **8868**

(Rev January 2012)
Department of the Treasury
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

| internal Heve               | nue Service           | File a sepa                                 | irate appi  | ication for each return.              |                     |               |                 |             |
|-----------------------------|-----------------------|---|-------------|---------------------------------------|---------------------|---------------|-----------------|-------------|
| ● If vou a                  | re filing for an Auto | omatic 3-Month Extension, complet           | te only Pa  | art Land check this box               |                     |               | <b>▶</b> D      | <u> </u>    |
|                             | -                     | itional (Not Automatic) 3-Month Ex          | -           |                                       | this form           | ١             |                 | <b></b>     |
| •                           | ū                     | ess you have already been granted a         | •           |                                       |                     | •             |                 |             |
|                             | -                     | u can electronically file Form 8868 if y    |             | •                                     | •                   |               | or a corporat   | tion        |
|                             | -                     | or an additional (not automatic) 3-moi      |             |                                       |                     |               |                 |             |
|                             | •                     | ns listed in Part I or Part II with the exc |             | •                                     |                     |               |                 |             |
|                             |                       | which must be sent to the IRS in pap        |             |                                       |                     |               |                 |             |
|                             |                       | ick on e-file for Charities & Nonprofits    |             | (see instructions) To more details (  | JII 1110 CIC        | CHOING IIIII  | g or triis ioni | ',          |
| Part I                      |                       | 3-Month Extension of Time                   |             | submit original (no copies ne         | eded).              |               |                 |             |
|                             |                       | Form 990-T and requesting an auton          |             |                                       |                     |               |                 |             |
| Part I only                 |                       |   |             |                                       |                     |               | ▶ [             | 7           |
| •                           |                       | ling 1120-C filers), partnerships, REM      | ICs. and t  | rusts must use Form 7004 to reques    | st an exte          | nsion of tim  | ne _            |             |
|                             | ome tax returns       |   | ,           |                                       |                     |               |                 |             |
| Type or                     | Name of exemp         | t organization or other filer, see instru   | ctions      |                                       | Employ              | er identifica | tion number     | (EIN) or    |
| print                       |                       | FOUNDATION FOR LEGA                         |             | RVICES                                |                     |               |                 | (2, 0.      |
| print                       | AND EDUC              |   |             |                                       | <b>X</b> 95-3351710 |               |                 |             |
| File by the                 |                       | and room or suite no. If a P.O. box, so     | ee instruc  | tions                                 |                     | ecurity num   |                 |             |
| due date for<br>filing your |                       | 24TH STREET, NO. 21                         |             | 10110                                 |                     | ocamy man     | 1001 (0014)     |             |
| return See<br>nstructions   |                       | st office, state, and ZIP code For a fo     |             | ress see instructions                 | ·                   |               |                 |             |
|                             | PHOENIX,              |   | noight add  | roos, ose mondenone                   |                     |               |                 |             |
|                             | I HODKEN,             | 112 03010                                   |             |                                       |                     |               |                 |             |
| Enter the                   | Return code for the   | e return that this application is for (file | a senara    | te application for each return)       |                     |               | Г               | 0 1         |
| Litter title                | neturn code for the   | e return that this application is for the   | a separa    | te application for each return)       |                     |               | <u></u>         | <u> </u>    |
| Application                 |                       |   | Return      | Application                           |                     |               |                 | Return      |
| • •                         | 511                   |   |             |                                       |                     |               |                 |             |
| ls For                      |                       |   | Code        | Is For                                |                     |               | <u></u>         | Code        |
| Form 990                    |                       |   | 01          | Form 990-T (corporation)              |                     |               |                 | 07          |
| Form 990-                   |                       |   | 02          | Form 1041-A                           |                     |               |                 | 08          |
| Form 990-                   |                       |   | 01          | Form 4720                             |                     |               |                 | _09         |
| Form 990-                   |                       |   | 04          | Form 5227                             |                     |               |                 | 10          |
|                             | T (sec 401(a) or 4    |   | 05          | Form 6069                             |                     |               |                 |             |
| -orm 990-                   | T (trust other than   |   | 06          | Form 8870                             |                     |               |                 | 12          |
|                             |                       | THE ORGANIZATIO                             |             | GUITEE 010 DUOD                       |                     | 35 05         | 016             |             |
|                             |                       | of ▶ 4201 N. 24TH ST                        | CREET       |                                       | NTX,                | AZ 85         | 010             |             |
|                             | one No ► <u>602</u>   |   |             | FAX No 🕨                              |                     |               |                 |             |
|                             | •                     | ot have an office or place of business      |             | •                                     |                     |               | ▶∟              |             |
| If this is                  | s for a Group Retu    | rn, enter the organization's four digit (   | Group Exe   | emption Number (GEN) I                | f this is f         | or the whole  | e group, ched   | ck this     |
|                             |                       | of the group, check this box                |             | -                                     |                     | bers the ex   | tension is for  | <del></del> |
|                             | •                     | 3-month (6 months for a corporation         | •           | •                                     |                     |               |                 |             |
|                             | <u>AUGUST 15</u>      | · · · · · · · · · · · · · · · · · · ·       | t organizat | tion return for the organization name | ed above            | The exten     | sion            |             |
| _                           | r the organization's  |   |             |                                       |                     |               |                 |             |
| اً ح                        | X calendar year       |   |             |                                       |                     |               |                 |             |
| <b>▶</b> L                  | tax year begin        | ning  | , an        | d ending                              |                     |               |                 |             |
|                             |                       |   |             |                                       |                     |               |                 |             |
| 2 If th                     | e tax year entered    | in line 1 is for less than 12 months, cl    | neck reaso  | on Initial return                     | Fınal retu          | rn            |                 |             |
| l                           | J Change in accol     | unting period                               |             |                                       |                     |               |                 |             |
|                             |                       |   |             |                                       |                     |               |                 |             |
| 3a If th                    | is application is for | Form 990-BL, 990-PF, 990-T, 4720, c         | or 6069, ei | nter the tentative tax, less any      |                     |               |                 |             |
| non                         | refundable credits    | See instructions                            |             |                                       | 3а                  | \$            |                 | 0.          |
| b If th                     | is application is for | Form 990-PF, 990-T, 4720, or 6069,          | enter any   | refundable credits and                |                     |               |                 |             |
|                             |                       | ts made Include any prior year overp        | -           |                                       | 3b                  | \$            |                 | 0.          |
|                             |                       | t line 3b from line 3a Include your pay     |             |                                       |                     |               |                 |             |
|                             |                       | ronic Federal Tax Payment System) S         |             | · · · ·                               | Зс                  | \$            |                 | 0.          |
|                             |                       | make an electronic fund withdrawal w        |             |                                       |                     |               | ment instruc    |             |
|                             |                       | Paperwork Reduction Act Notice,             |             |                                       |                     |               | 8868 (Rev       |             |
|                             |                       | ,   |             | · <del></del>                         |                     | . 0111        | . 5550 (100     | 0 ;         |