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DLN: 93493319043242

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2011

OMB No 1545-0047

Open to Public

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

Check if appliaded Address change Name change Initial return	11 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 C Name of organization		
Address change Name change Initial return		D Empl	oyer identification number
Name change Initial return	COLORADO LAWYER TRUST ACCOUNT FOUNDATION		250921
_ Initial return _	Doing Business As	_	hone number
_		(303)863-7221
Terminated	Number and street (or P O box if mail is not delivered to street address) Room/suit 1900 GRANT STREET	е —	receipts \$ 1,264,477
_		_	
Amended retu —	DENVER, CO 80203		
Application pe	ending		
	F Name and address of principal officer	H(a) Is this a grou	
		affiliates?	⊤Yes ▼ No
		H(b) Are all affiliates	s included?
		If "No," attac	h a list (see instructions)
Tax-exempt	status	H(c) Group exemp	tion number ►
Website: 🕨	► WWW COLTAF ORG		
Form of organ	nization 🔽 Corporation 🦳 Trust 🦳 Association 🦳 Other 🕨	L Year of formation 1	982 M State of legal domicile Co
Part I	Summary	•	
1 Bri	efly describe the organization's mission or most significant activities		
	NDING OF LEGAL SERVICES, PRO-BONO AND LEGAL EDUCATION PROJ	ECTS	
2 Cho 3 Nui 5 Tot 6 Tot			
<u> </u>			
2 Ch	eck this box 🛌 if the organization discontinued its operations or disposed of	more than 25% of it	s net assets
3 Nu	mber of voting members of the governing body (Part VI, line 1a)		3 16
i 4 Nu	mber of independent voting members of the governing body (Part VI, line 1b)		4 15
5 Tot	tal number of individuals employed in calendar year 2011 (Part V, line 2a)		5 (
6 Tot	tal number of volunteers (estimate if necessary)		6 25
7a Tot	tal unrelated business revenue from Part VIII, column (C), line 12		7a (
	t unrelated business taxable income from Form 990-T, line 34		7b
		Prior Year	Current Year
8 0	Contributions and grants (Part VIII, line 1h)		,000 398,958
ou I	Program service revenue (Part VIII, line 2g)	1,277	
10 I	Investment income (Part VIII, line 2g)		,397 46,257
- P	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	89	,397 40,237
l l	Fotal revenue—add lines 8 through 11 (must equal Part VIII, column (A.), line		
	12)	1,381	,635 1,264,477
13 0	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,079	,500 1,473,000
14 E	Benefits paid to or for members (Part IX, column (A), line 4)		0
, 15 S	Salaries, other compensation, employee benefits (Part IX, column (A), lines	125	514
σi	5-10)	125	,514 127,730
<u>क</u> 16a ਸ	Professional fundraising fees (Part IX, column (A), line 11e)		0
	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		,393 30,313
1	Fotal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,244	
1	Revenue less expenses Subtract line 18 from line 12	-862	,772 -366,566
19 R		Beginning of Curre	_
19 R		Year	ent End of Year
19 R	Fotal assets (Part X, line 16)		End of Year
19 R	Fotal assets (Part X, line 16)	2,762	,544 2,049,999
19 R	Fotal assets (Part X, line 16)		,544 2,049,999 ,363 859,384

May the IRS discuss this return with the preparer shown above? (see instructions) $\ \ .$

1 0111	1 3 3 0 (2 0 1 1)				Page Z
Par		ent of Program Service A chedule O contains a response	Accomplishments to any question in this Part III		୮
1	Briefly describe	the organization's mission			
- FUN	DING OF LEGAL S	SERVICES, PRO-BONO AND L	EGAL EDUCATION PROJECTS		
2			rogram services during the year wh		es 🗸 No
	If "Yes," describe	e these new services on Schedu	le O		
3		ion cease conducting, or make	significant changes in how it condu		es 🔽 No
	If "Yes," describe	e these changes on Schedule O			
4	expenses Section	on 501(c)(3) and 501(c)(4) org	omplishments for each of its three anizations and section 4947(a)(1) ses, and revenue, if any, for each p	trusts are required to report th	
	(Code) (Expenses \$	1,473,000 including grants of \$) (Revenue \$)
	FUNDING OF LEGAL	SERVICES, PRO-BONO AND LEGAL ED	UCATION PROGRAMS		
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4 c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	0.44		0.)		
4d	Other program s (Expenses \$	services (Describe in Schedule) (Revenue \$)
				/ (Nevenue p	,
<u>4e</u>	iotai program s	ervice expenses►\$	1,473,000		

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
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		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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		No
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	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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		No
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	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		N o
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Νo
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
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		No
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		No
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	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		Fo	orm 990	(2011)

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•		
			Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		Νo
a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		No
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		No
а	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 or securities account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		Νo
a	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		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		No
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		Νo
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
	required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Νo
	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		No
а	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		No
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
ם ס	Section 501(c)(7) organizations. Enter			,,,,
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		Νo
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		No
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			
c	Enter the aggregate amount of reserves on hand			
	13c			_
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
L	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an evaluation in Schodule O	1/16	ı	NI a

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

Se	ection 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			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	•		•
Re	venue Code.)			1
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		No
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b		No
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	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 arrangement with a taxable entity during the year?	16a		No
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			···•
-	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		No
Se	ection C. Disclosure	_		
	List the States with which a copy of this Form 990 is required to be filed▶			
	Section 61.04 requires an organization to make its Form 1.023 (or 1.024 if applicable), 990, and 990-T (501(c)			

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website 🔽 Another's website 🔽 Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► VICKI CAPEK

1900 GRANT STREET SUITE 1112

DENVER,CO 80203 (303)863-7221

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

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

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

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) A verage hours per week (describe	Position more unles an	on (d e thai	C) o no n one son er ar	t che e bo: is bo nd a stee)	eck x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related
	Highest compensated employee Key employee Officel Institutional Trustee or director schedule schedule Schedule		Former		11130)	organizations				
(1) JENNIFER M VAGHER Director	1 00	Х						0	0	0
(2) KEITH NEWBOLD Director	1 00	х						0	0	0
(3) WILLIAM R NEFF Director	1 00	х						0	0	0
(4) VICTORIA E LOVATO Director	1 00	х						0	0	0
(5) KIMBERLY E LORD Director	1 00	х						0	0	0
(6) LESLIE LAWSON Director	1 00	х						0	0	0
(7) SUSAN P KLOPMAN Director	1 00	х						0	0	0
(8) THOMAS J FLANAGAN JR Director	1 00	х						0	0	0
(9) LISA M DAILEY Director	1 00	Х						0	0	0
(10) WILLIAM A BIANCO Director	1 00	х						0	0	0
(11) CHRISTOPHER P BEALL Director	1 00	Х						0	0	0
(12) JONATHAN D ASHER Director	4 00	х						0	0	0
(13) JAY B ZAJICEK Treasurer	4 00	х		Х				0	0	0
(14) MARK A HERMUNDSTAD Secretary	4 00	Х		Х				0	0	0
(15) KATINA C BANKS Vice President	4 00	х		Х				0	0	0
(16) PHILIP E JOHNSON President	4 00	х		Х				0	0	0
(17) DIANA POOLE EXECUTIVE DIRECTOR	40 00				Х			0	83,230	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	Name and Title A verage hours per week (describe hours an officer and a director/trustee)								(D) ortable ensation m the ration (W- 9-MISC)	from related /- organizations) (W- 2/1099-		on amount of d compensa is from th - organizatio	
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		relati organiza	I .
1b	Sub-Total							▶						
С	Total from continuation sheets t	to Part VII, Sec	tion A			•		•						
2	Total (add lines 1b and 1c) . Total number of individuals (inclusion),000 of reportable compens					ted	above) who	receive	d more tha	83,2 an	30		
3	Did the organization list any form on line 1a? <i>If</i> " <i>Yes,"</i> complete Sch								r highes	t compens	ated employee		Yes	No
4	For any individual listed on line 1 organization and related organization and related organization.	.a, is the sum of	report	able	com	pens	sation	and o				4		No
5	Did any person listed on line 1a services rendered to the organize	ation? <i>If</i> "Yes," (or individual for •	5		No
	Complete this table for your five		ested :	ındar	ond.	ant a	contra	ctorc	that ra-	alved me	e than			
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax you	the organizatio ear									ng with			
	Nam	(A) ne and business add	dress							Desc	(B) ription of services		(C Comper	
												_		
	Fotal number of independent conti \$100,000 of compensation from t			ot lin	nited	d to	those	liste	d above)	who recei	ved more than			

						Page 9
Part V	<u> </u>	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
## ## ## ## ## ## ## ## ## ## ## ## ##	1a	Federated campaigns 1a				
ig in	ь	Membership dues 1b				
S, Ç	c	Fundraising events 1c				
<u>≅</u> ,	d	Related organizations 1d				
n ¥i∭	e	Government grants (contributions) 1e				
ntio er s	f	All other contributions, gifts, grants, and 1f 398,958 similar amounts not included above				
^듩	g	Noncash contributions included in				
Contributions, gifts, grants and other similar amounts		Innes 1a-1f \$ Total. Add lines 1a-1f	398,958			
<u>O 46</u>	h		330,330			
ē	3-	TRUST ACCOUNT INCOME Business Code	0.10, 0.50	040.050		
ever	2a b	TROST ACCOUNT INCOME	819,262	819,262		
Program Serwoe Revenue	, c					
Ş	d					
<u>3</u>	e					
<u>6</u>	f	All other program service revenue				
္နိ						
	g 3	Total. Add lines 2a-2f ▶ Investment income (including dividends, interest	819,262			
		and other similar amounts)	46,257			46,257
	4	Income from investment of tax-exempt bond proceeds	0			
	5	Royalties	0			
		(ı) Real (ıı) Personal				
	6a	Gross rents				
	Ь	Less rental expenses				
	C	Rental income or (loss)				
	d	Net rental income or (loss)	0			
		(I) Securities (II) Other Gross amount				
	7a	from sales of assets other				
		than inventory				
	Ь	Less cost or other basis and				
	_c	sales expenses Gain or (loss)				
	d	Net gain or (loss)	o			
	8a	Gross income from fundraising				
Other Revenue		events (not including \$				
₹		of contributions reported on line 1c)				
æ		See Part IV, line 18				
her	ь	Less direct expenses b				
₹	c	Net income or (loss) from fundraising events	0			
	9a	Gross income from gaming activities				
		See Part IV, line 19				
	ь	Less direct expenses b				
	c	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less returns and allowances .				
	ь	Less cost of goods sold b				
	С	Net income or (loss) from sales of inventory 🕨	0			
		Miscellaneous Revenue Business Code				
	11a					
	b					
	С					
	d	All other revenue				
	e	Total. Add lines 11a-11d	0			
	12	Total revenue. See Instructions	1,264,477	819,262		46,257

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)

<u>c</u>	heck if Schedule O contains a response to any question in this Part IX	<u> </u>		<u>l .</u>	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	1,473,000	1,473,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	40,801		40,801	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	61,685		61,685	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	4,767		4,767	
9	Other employee benefits	12,091		12,091	
10	Payroll taxes	8,386		8,386	
11	Fees for services (non-employees)	, :-		, -	
a	Management	0		 	
b	Legal	0			
c	Accounting	4,582		4,582	
		4,362		4,362	
d	Lobbying	-			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	2,662		2,662	
12	Advertising and promotion	0			
13	Office expenses	715		715	
14	Information technology	0			
15	Royalties	0			
16	Occupancy	8,947		8,947	
17	Travel	216		216	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	651		651	
23	Insurance	0			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	TELEPHONE	1,776		1,776	
b	Postage and Shipping	1,687		1,687	
С	MISCELLANEOUS EXP	1,245		1,245	
d	INSURANCE	3,103		3,103	
e	COMPUTER SERVICES	3,799		3,799	_
f	All other expenses	930		930	
25	Total functional expenses. Add lines 1 through 24f	1,631,043	1,473,000	158,043	0
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1/001/010	2,110,000	130,010	<u> </u>
	ryy				rm 990 (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 0 1 1 1.458.456 1,416,799 2 2 3 3 0 102.492 4 132,505 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 0 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 0 0 7 0 8 0 9 250 9 Prepaid expenses and deferred charges 10a 7,371 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 6,683 b Less accumulated depreciation 1,339 10c 688 7 11 11 1,200,000 500,000 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 14 0 14 15 0 15 2,762,544 2.049.999 16 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 5,863 5,514 17 17 Accounts payable and accrued expenses . 18 1.199.500 18 853,000 19 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 870 D 26 1,205,363 26 859,384 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 1,557,181 27 1,190,615 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 1.557.181 33 1.190.615 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 2.762.544 2.049.999 34

Par	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1,2	264,477
2	Total expenses (must equal Part IX, column (A), line 25)	2			31,043
3	Revenue less expenses Subtract line 2 from line 1	3			366,566
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,5	557,181
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,1	.90,615
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain its Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were in a separate basis, consolidated basis, or both	ssued			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		Νo

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

COLORADO LAWYER TRUST ACCOUNT FOUNDATION Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) lis your gove docume	e Ion In ted In Frning	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su			1		Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

Part III Support Schedule for Organizations Described in IRC 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 to qualify under the tests listed below, please complete Part II.)

Se	ection A. Public Support	ation rails to qu	danily under the	e tests listed be	iow, piease coi	iipiete Part II.)	
	ndar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	ın)	(a) 2007	(b) 2008	(6) 2009	(u) 2010	(e) 2011	
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	15,678	15,000	15,000	15,000	396,958	457,636
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	4,191,620	2,473,605	1,691,268	1,277,238	819,262	10,452,993
3	Gross receipts from activities that are not an unrelated trade or						0
4	business under section 513 Tax revenues levied for the organization's benefit and either						0
	paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2,	4,207,298	2,488,605	1,706,268	1,292,238	1,216,220	10,910,629
74	and 3 received from disqualified persons						0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed						0
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
8	Add lines 7a and 7b Public Support (Subtract line 7c from line 6)						10,910,629
Se	ection B. Total Support						
	ndar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	In) A mounts from line 6	4,207,298	2,488,605	1,706,268	1,292,238	1,216,220	10,910,629
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	193,084	108,575	99,033	54,868	46,257	501,817
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						0
c	Add lines 10a and 10b	193,084	108,575	99,033	54,868	46,257	501,817
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						0
13	Total support (Add lines 9, 10c, 11 and 12)	4,400,382	2,597,180	1,805,301	1,347,106	1,262,477	11,412,446
14	First Five Years If the Form 990 is for check this box and stop here	or the organization	on's first, second,	thırd, fourth, or fi	fth tax year as a	501(c)(3) organi:	zation,
	ection C. Computation of Publ						
15	Public Support Percentage for 2011	•		13 column (f))		15	95 600 %
16	Public support percentage from 201	J Schedule A, Pa	art III, line 15			16	96 170 %
Se 17	ection D. Computation of Inve Investment income percentage for 2				(f))	4	
		•			(1))	17	4 400 %
18 19a	Investment income percentage from 33 1/3% support tests—2011. If the				line 15 is more +	18 han 33 1/3% and	3 830 % line 17 is not
b	more than 33 1/3%, check this box a 33 1/3% support tests—2010. If the 18 is not more than 33 1/3%, check	and stop here. Th organization did	ie organization qu not check a box	ialifies as a public on line 14 or line	cly supported org 19a, and line 16	anization is more than 33 :	▶ ✓ 1/3% and line

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
	Explanation							

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493319043242

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

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, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of t	the orga	ınızatı	on		
COLORADO	LAWYER	TRUST	ACCOUNT	FOUNDATIO	NC

Employer identification number

74-2250921

Part I-A	Complete if the organization is exempt u	ınder section 501(c) or is	s a section 527 organization.

- in opposition to candidates for public office in Part IV Political expenditures
- Volunteer hours
- Part I-B Complete if the organization is exempt under section 501(c)(3).
- Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- ┌ Yes 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made? Yes √ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

		. 49
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 576	3 (election
	under section 501(h)).	

Α	Check		If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		_	expenses, and share of excess lobbying expenditures)

}	Check If the filing organization checked box	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar	•	(a) Filing Organization's Totals	(b) Affiliated Group Totals
la	Total lobbying expenditures to influence public o	ppinion (grass roots lobbying)	1,716	5
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	53,951	-
c	Total lobbying expenditures (add lines 1a and 1i	o)	55,667	,
d	Other exempt purpose expenditures		1,575,376	5
e	Total exempt purpose expenditures (add lines 1	c and 1d)	1,631,043	3
f	Lobbying nontaxable amount Enter the amount f	from the following table in both	231,552	2
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		

g Grassroots nontaxable amount (enter 25% of line 1f)

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

┌ Yes ┌ No

57,888

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total			
2a	Lobbying non-taxable amount	300,278	278,468	262,220	231,552	1,072,518			
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,608,777			
c	Total lobbying expenditures	75,471	49,286	37,643	55,667	218,067			
d	Grassroots non-taxable amount	75,070	69,617	65,555	57,888	268,130			
e 	Grassroots ceiling amount (150% of line 2d, column (e))					402,195			
f	Grassroots lobbying expenditures	8,919	49,286	5,896	1,716	65,817			

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		((a)		b)
		Yes	No	Am	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	O ther activities? If "Yes," describe in Part IV				
j	Total lines 1c through 1i		_		
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

efile GRAPHIC print - DO NOT PROCESS

DLN: 93493319043242

OMB No 1545-0047

Inspection

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization **Employer identification number** COLORADO LAWYER TRUST ACCOUNT FOUNDATION 74-2250921 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ☐ Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ✓ Yes conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area

	Protection of natural habitat	Preservation of a certific	ed historic structure
	☐ Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified of easement on the last day of the tax year	conservation contribution in the form of a c	onservation
			Held at the End of the Year
а	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic	structure included in (a) 2c	
d	Number of conservation easements included in (c) acquire	ed after 8/17/06 2d	
3	Number of conservation easements modified transferred	released extinguished or terminated by t	he organization during

3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization du	rıng		
	the taxable year ►			
4	Number of states where property subject to conservation easement is located 🛌			
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?	┌ Yes	┌	٧o
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🛌			
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year			
	▶ \$			
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section $170(h)(4)(B)(I)$ and $170(h)(4)(B)(II)$?	┌ Yes	┌	ю
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, an balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes arganization's presentation assembly.			

the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items
- If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art. historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Schedule D (Form 990) 2011 Cat No 52283D

g the organization's accession and other (check all that apply) Public exhibition Scholarly research Preservation for future generations de a description of the organization's control If the year, did the organization solicity is to be sold to raise funds rather than Escrow and Custodial Arrang Part IV, line 9, or reported an air e organization an agent, trustee, custoded on Form 990, Part X? The estimates of explain the arrangement in Part XI in the sum of the year reported and the year in the during the year in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization include an amount on Figure 2 arrangement in Part XI in the organization in Part XI in the organization in the organization include an amount on Figure 2 arrangement in Part XI in the organization in	or receive donation to be maintained as gements. Complemount on Form 94 dian or other interm	d e ain how s of ar part c ete if 90, Pa ediary	t, histof the the cart X	Loan or exch Other further the or torical treasur organization's organization , line 21. ontributions of	ange progranganization's es or other secollection?	exempt p Imilar 'Yes" to	Form 990	Yes	┌ No
Preservation for future generations de a description of the organization's of XIV ag the year, did the organization solicity to be sold to raise funds rather than Escrow and Custodial Arrang Part IV, line 9, or reported an air e organization an agent, trustee, custoded on Form 990, Part X? es," explain the arrangement in Part XI nning balance tions during the year ributions during the year ag balance the organization include an amount on F	or receive donation to be maintained as gements. Compl mount on Form 90 dian or other interm	e s of ar part o ete if 90, Pa	t, history the the cart X	Other further the or torical treasur organization's organization , line 21. ontributions of	rganization's res or other s collection? answered	exempt p imilar 'Yes" to	Form 990	Yes	_
Preservation for future generations de a description of the organization's of XIV orgethe year, did the organization solicity to be sold to raise funds rather than Escrow and Custodial Arrange Part IV, line 9, or reported an aire organization an agent, trustee, custoded on Form 990, Part X? es," explain the arrangement in Part XI nning balance tions during the year ributions during the year ing balance the organization include an amount on F	or receive donation to be maintained as gements. Compl mount on Form 90 dian or other interm	s of ar part o ete if 90, Pa ediary	t, history the the cart X	further the or torical treasur organization's organization , line 21. ontributions of	res or other s collection? answered	ımılar 'Yes" to	Form 990	Yes	_
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ded on Form 990, Part X? es," explain the arrangement in Part XI nning balance tions during the year ributions during the year ng balance he organization include an amount on F					r other asset	s not	Γ		□ No
nning balance tions during the year ributions during the year ng balance he organization include an amount on F	IV and complete the	follow	ıng ta	able					
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ng balance he organization include an amount on F					16	+			
he organization include an amount on F					1f	+			
-		- 245			_ 11			V = -	
	•	e 21 /					ı	Yes	│ No
es," explain the arrangement in Part XI					000 D	TV	10		
Endowment Funds. Complete	(a)Current Year)Prior Y			d)Three Ye)Four Y	ears Back
nning of year balance	(a) carrette rear	(2)	, , ,,,,,,	(6)1110	rears back (a y 1 c c c	ALIS BUCK (C	<i>y</i> . ou	ears back
ributions									
stment earnings or losses								-	
r expenditures for facilities									
inistrative expenses									
of year balance									
de the estimated percentage of the year	ar end balance held	as		•	•				
d designated or quasi-endowment 🕨									
anent endowment 🕨									
endowment ▶									
	ession of the organiz	ation	that a	re held and ac	lmınıstered fo	or the		Yes	No
nrelated organizations							. 3a(i)		
-							3a(ii)	<u> </u>	<u> </u>
	•						. 3b	<u> </u>	<u></u>
Land, Buildings, and Equipm	ent. See Form 99	90, Pa			1			\top	
Description of property								(d) E	Book value
		•						—	
ngs		•						↓	
hold improvements								Щ	
		•			7,3	71	6,683	3	688
ment								1	
	<u> </u>								
	er expenditures for facilities or grams	er expenditures for facilities or organs	ts or scholarships	ts or scholarships	ts or scholarships	ts or scholarships re expenditures for facilities broograms inistrative expenses of year balance det the estimated percentage of the year end balance held as didesignated or quasi-endowment anent endowment there endowment there endowment funds not in the possession of the organization that are held and administered for initiation by interested organizations es" to 3a(ii), are the related organizations listed as required on Schedule R? there in Part XIV the intended uses of the organization's endowment funds Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of property hold improvements hold improvements	ts or scholarships	ts or scholarships	te or scholarships

Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(2)20011 14140	Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
o their			
	500.000		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
		(c) Metho	d of valuation
(a) Description of investment type	(b) Book value	Cost or end-o	f-year market value
	<u> </u>		
	1		
Total (Column (h) should equal Form 990, Part X, col.(R) line 13.)			
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(h) Poek velve
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
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Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.) , line 25. (b) Amount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25. (b) Amount	, , , , , , , , , , , , , , , , , , ,	(b) Book value
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 19 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.) , line 25. (b) Amount		(b) Book value

Par	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,264,477
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,631,043
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-366,566
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-366,566
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,264,477
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,264,477
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
С	Add lines 4a and 4b	4 c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,264,477
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	1,631,043
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
С	Other losses	1	
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	1,631,043
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)	1	
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,631,043
Par	t XIV Supplemental Information		
	1		h

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

Identifier	Return Reference	Explanation
Part XI, Line 8	Part XI, Line 8 Other Changes in	PRIOR YEAR UNREALIZED GAIN \$ -0
	Net Assets or Fund Balances	

Additional Data

Software ID: 11000144

Software Version: 2011v1.2

EIN: 74-2250921

Name: COLORADO LAWYER TRUST ACCOUNT FOUNDATION

Form 990, Special Condition Description:

Special Condition Description

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

COLORADO LAWYER TRUST ACCOUNT FOUNDATION

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No 1545-0047

2011

DLN: 93493319043242

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Attach to Form 990

Inspection
Employer identification number

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II 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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	OLORADO LAWIER IRUST A	CCCOUNT FOUNDAT	1010				74-2250921	
Type Describe in Part the origination is procedure for monitoring the use of grant funds in the United States Type							•	
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. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (a) Name and address of organization organization of the part of the p	the selection criteria used Describe in Part IV the or	d to award the grants or ganızatıon's procedur	or assistance? es for monitoring the use	of grant funds in the U	nited States			┌ Yes ┌
Organization or government or depricable of assistance of	Form 990, Part I	V, line 21 for any r	ecipient that received	more than \$5,000.	Check this box if no	one recipient recei	ved more than \$5,00	00. Use
SERVICESPO BOX 1283 GREELEY, CO. 86323 (2) UNCOMPAHORE VOI. LEGAL AID INC 300 N CASCADE AVE MONTROSE, CO. 81401 (3) SAN LUIS BAR ASSOCIATIONPO BOX 22 ALAMOSA, CO. 81101 (4) PRO BONO PROJECT OF MESA COUNTY20 N 6TH ST GRAND JUNCTION, CO. 81.501 (6) JERS PEAK PRO BONO PROJECT 1524 NORTH TEJON COLORADO SPRINGS, CO. 80903 (6) LARIMER COUNTY BAR ASSOC PROSE TO VOI. LAWYERS1905 SHERMAN ST DENVER, CO. 80203 (8) COLORADO LEGAL SERVICES 90803 84-0402702 509(a)(1) 1,316,633 C) COLORADO CER ON SERVICES 90803 84-1264154 509(a)(1) 70,000 0 0 0 0 0 0 0 0 0 0 0	organization	(b) EIN	1		cash	valuation (book, FMV, appraisal,	non-cash assistance	(h) Purpose of grant or assistance
LEGAL AID INC300 N CASCADE AVE MONTROSE, CO. 81401 (2) SAN LUIS BAR ASSOCIATIONPO BOX 22 ALAMOSA, CO. 81101 (4) PRO 80 NO PROJECT OF MESA COUNTY200 N 6TH ST GRAND JUNCTION, CO. (5) PIKES PEAK PRO BONO PROJECT ISL24 NORTH TEJON COLORADO SPRINGS, CO. 80903 84-1090041 501(C)(6) 85-00 0 0 0 0 0 0 0 0 0 0 0 0	SÉRVICESPO BOX 1283	84-0937054	509(a)(1)	14,000	0			
ASSOCIATIONPO BOX 22 ALAMOSA, CO 81101 (4) PRO BONO PROJECT OF MESA COUNTY 200 N 6TH ST GRAND JUNCTION, CO 81501 (5) PIKES PEAK PRO BONO PROJECT 1524 NORTH TEJON COLORADO SPRINGS, CO 80502 (6) LARIMER COUNTY BAR ASSOCMETRO VOLLAWRENSHOOD STRINGS, CO 805022 (7) DEN BAR ASSOCMETRO VOLLAWRENSHOOD SHERMAN ST DENVER, CO 80203 (8) COLORADO LEGAL SERVICES SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAW STORE SHERMAN ST DENVER, CO 80203 (10) ALPINE LEGAL SERVICES ABATELLO CUTTY PO BOX 1890 84-1061991 509(a)(1) 10,860 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	LEGAL AID INC300 N CASCADE AVE	84-1203569	509(a)(1)	14,450	0			
MESA COUNTY200 N 6TH ST GRAND JUNCTION, CO 81501 (S) PIKES PEAK PRO BOND PROJECT IS24 NORTH TEJON COLORADO SPRINGS, CO 80903 (6) LARIMER COUNTY BAR ASSOCMETRO NOLLINS, CO 80522 (7) DEN BAR ASSOCMETRO VOLLAWYERS1905 SHERMAN ST DENVER, CO 80203 (8) COLORADO LEGAL SERVICES 1905 SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAWW & POLICY789 SHERMAN ST DENVER, CO 80203 (10) ALDINE LEGAL SERVICES GARFIELD CNTY PO BOX 1905 (10) ALDINE LEGAL SERVICES GARFIELD CNTY PO BOX 1905 (10) ALDINE LEGAL SERVICES GARFIELD CNTY PO BOX 1905 (10) ALPINE LEGAL SERVICES CNTY PO BOX 1905 (10) ALPINE LEGAL SERVICES CNTY PO BOX 1905 (10) ALPINE LEGAL SERVICES CNTY PO BOX 1905 (10) ALP	ÀSSOCIATIONPO BOX 22	74-2492781	501(C)(6)	8,000	0			
PROJECT 1524 NORTH TEJON COLORADO SPRINGS,CO 80903 (6) LARIMER COUNTY BAR ASSOCPO BOX 781 FORT COLLINS, CO 80522 (7) DEN BAR ASSOCMETRO VOL LAWYERS1905 SHERMAN ST DENVER, CO 80203 (8) COLORADO LEGAL SERVICES 1905 SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAW & POLICY POSS SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAW & POLICY POSS SHERMAN ST DENVER, CO 80203 (10) ALPINE LEGAL SERVICES GARFIELD CNTY PO BOX 1890 SERVICES CNTY	MESA COUNTY200 N 6TH ST GRAND JUNCTION,CO	84-1039329	509(a)(1)	6,250	0			
AŚSOCPO BOX 781 FORT COLLINS, CO 80522 (7) DEN BAR ASSOCMETRO VOL LAWYERS1905 SHERMAN ST DENVER, CO 80203 (8) COLORADO LEGAL SERVICES1905 SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAW & POLICY789 SHERMAN ST DENVER, CO 80203 (10) ALPINE LEGAL SERVICES GARFIELD CNTY PO BOX 1890 GLENWOOD SPRINGS, CO	PROJECT I524 NORTH TEJON COLORADO SPRINGS,CO	27-4331236	509(a)(1)	12,705	0			
VOL LAWYERS1905 SHERMAN ST DENVER, CO 80203 (8) COLORADO LEGAL 84-0402702 509(a)(1) SERVICES1905 SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAW & POLICY789 SHERMAN ST DENVER, CO 84-1264154 509(a)(1) 70,000 SHERMAN ST DENVER, CO 80203 84-1061991 509(a)(1) 10,860 GLENWOOD SPRINGS, CO 84-1061991 509(a)(1) 10,860 0	ASSOCPO BOX 781	84-1090041	501(C)(6)	8,500	0			
SERVICES1905 SHERMAN ST DENVER, CO 80203 (9) COLORADO CTR ON LAW & POLICY789 SHERMAN ST DENVER, CO 80203 (10) ALPINE LEGAL SERVICES GARFIELD CNTY PO BOX 1890 GLENWOOD SPRINGS, CO	VÓL LAWYERS1905 SHERMAN ST	84-0389860	501(C)(6)	11,600	0			
LAW & POLICY789 SHERMAN ST DENVER, CO 80203 (10) ALPINE LEGAL SERVICES GARFIELD CNTY PO BOX 1890 GLENWOOD SPRINGS, CO	SERVICES1905 SHERMAN ST	84-0402702	509(a)(1)	1,316,635	0			
SERVICES GARFIELD CNTY PO BOX 1890 GLENWOOD SPRINGS, CO	LAW & POLICY789 SHERMAN ST	84-1264154	509(a)(1)	70,000	0			
	SERVICES GARFIELD CNTY PO BOX 1890 GLENWOOD SPRINGS,CO	84-1061991	509(a)(1)	10,860	0			

Enter total number of other organizations listed in the line 1 table

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistanc

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier Return Reference

Explanation

Schedule I (Form 990) 2011

Software ID: 11000144

Software Version: 2011v1.2

EIN: 74-2250921

Name: COLORADO LAWYER TRUST ACCOUNT FOUNDATION

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WELD COUNTY LEGAL SERVICESPO BOX 1283 GREELEY,CO 80632	84- 0937054	509(a)(1)	14,000	0			
UNCOMPAHGRE VOL LEGAL AID INC300 N CASCADE AVE MONTROSE, CO 81401	84- 1203569	509(a)(1)	14,450	0			

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAN LUIS BAR ASSOCIATIONPO BOX 22 ALAMOSA,CO 81101	74- 2492781	501(C)(6)	8,000	0			
PRO BONO PROJECT OF MESA COUNTY 200 N 6TH ST GRAND JUNCTION, CO 81501	84- 1039329	509(a)(1)	6,250	0			

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIKES PEAK PRO BONO PROJECT I 524 NORTH TEJON COLORADO SPRINGS, CO 80903	27- 4331236	509(a)(1)	12,705	0			
LARIMER COUNTY BAR ASSOCPO BOX 781 FORT COLLINS, CO	84- 1090041	501(C)(6)	8,500	0			

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DEN BAR ASSOCMETRO VOL LAWYERS1905 SHERMAN ST DENVER,CO 80203	84- 0389860	501(C)(6)	11,600	0	other)		
COLORADO LEGAL SERVICES1905 SHERMAN ST DENVER.CO 80203	84- 0402702	509(a)(1)	1,316,635	0			

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLORADO CTR ON LAW & POLICY 789 SHERMAN ST DENVER, CO 80203	84- 1264154	509(a)(1)	70,000	0			
ALPINE LEGAL SERVICES GARFIELD CNTYPO BOX 1890 GLENWOOD SPRINGS, CO 81602	84- 1061991	509(a)(1)	10,860	0			

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As Filed Data -

DLN: 93493319043242

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 to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization
COLORADO LAWYER TRUST ACCOUNT FOUNDATION

Employer identification number

74-2250921

ldentifier	Return Reference	Explanation
Form 990, Part VI, Line 19	Form 990, Part VI, Line 19 Other Organization Documents Publicly Available	THOSE ARE MADE AVAILABLE UPON REQUEST
Form 990, Part VI, Line 12c	Form 990, Part VI, Line 12c Explanation of Monitoring and Enforcement of Conflicts	COLTAF PROVIDES A COPY OF THE POLICY TO ALL RESPONSIBLE PERSONS ON AN ANNUAL BASIS EACH RESPONSIBLE PERSON IS REQUIRED TO DISCLOSE ANY CONFLICT AS SOON AS THEY BECOME AWARE OF IT
Form 990, Part VI, Line 11	Form 990, Part VI, Line 11 Form 990 Review Process	EXECUTIVE DIRECTOR REVIEWS THE RETURN BEFORE IT IS FILED
Form 990, Part VI, Line 6	Form 990, Part VI, Line 6 Explanation of Classes of Members or Shareholder	LICENSED LAWYERS PRACTICING IN COLORADO WHO OR WHOSE LAW FIRM PARTICIPATE IN COLTAF

DLN: 93493319043242

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

2011

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization COLORADO LAWYER TRUST ACCOUNT FOUNDATION	Employer identification number
	74-2250921
Part I Identification of Discogarded Entities (Complete of the organization answered "Ves" on Form 990, Part IV	/ line 33)

			•	<u> </u>	
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions (Complete If	the organization a	nswered "Yes'	' on Form 990, F	Part IV, line 34 because it had one

or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 5 conti organ	g) 12(b)(13) rolled ızatıon
(1) COLORADO BAR ASSOCIATION						Yes	No
	MEMBERSHIP ORG FOR LAWYERS	СО	501(C)(6)		NO		No
(2) LEGAL AID FOUNDATION OF COLORADO							
1900 GRANT ST SUITE 1112	CHARITABLE FUNDRAISING	со	501(C)(3)	509(A)(1)	NO		No
DENVER, CO 80203 74-2182277							
(3) COLORADO LEGAL SERVICES							
1905 SHERMAN ST SUITE 400	LEGAL AID PROVIDER	СО	501(C)(3)	509(A)(1)	NO		No
DENVER, CO 80203 84-0402702							

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	,	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Gene mana parti	ral or nging	(k) Percentage ownership
							Yes	No		Yes	No	
												i

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

No

Sche	dule R (Form 990) 2011		Ρa	age 3
Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b	Yes	
c	Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d	Loans or loan guarantees to or for related organization(s)	1d		No
е	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f		No
g	Purchase of assets from related organization(s)	1g		No
h	Exchange of assets with related organization(s)	1h		No
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from related organization(s)	1j	Yes	
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations by related organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m		No
n	Sharing of paid employees with related organization(s)	1n	Yes	
o	Reimbursement paid to related organization(s) for expenses	10	Yes	†
р	Reimbursement paid by related organization(s) for expenses	1 p		No
•				
q	Other transfer of cash or property to related organization(s)	1q		No

2	If the answer to any of the above is "Yes	" see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

r Other transfer of cash or property from related organization(s)

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved	
(1) COLORADO BAR ASSOCIATION	J	8,947	ACTUAL AMOUNT	
(2) COLORADO BAR ASSOCIATION	С	85,848	ACTUAL AMOUNT	
(3) LEGAL AID FOUNDATION OF COLORADO	o	34,818	ACTUAL AMOUNT	
(4) LEGAL AID FOUNDATION OF COLORADO	n	102,486	ACTUAL ALLOC	
(5) COLORADO LEGAL SERVICES	b	1,316,635	ACTUAL AMOUNT	
(6)				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No	
				·									

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011