Form 990

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of I	his return to satisfy state reporting requirements.
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A	For th	e 2011 calen	dar year, or tax year beginning Apx 1	, 2011, an	d endin	g Mar			, 2012
В		apolicable:	C Name of organization ACLU of Arizona				D Emplo	yer lde	ntification Number
	Add	iress change	Doing Business As				86-	020	5157
	Nac	ne change	Number and street (or P.O. box if mail is not delivered to street addr))	Room/s	oliu	E Teleph	one nu	mber
	loit	al return	PO Box 17148				(60	2) (650-1854
	Ten	minuted	City, town or country	State ZIF	code + 4				
	-	ended return	Phoenix	AZ 8	5011		G Gross	receipts	\$ 230,309.
	Ħ	lication pending				H(a) Is this a	a group ralu	m for a	filiales? Yes X No
	L	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Alessandra Soler H PO Box 17148 Phoenix	AZ 8	5011 1	H(b) Are all			Yes No
, 	Tax-e	cempt status		(a)(l) or [527	II INO, I	øllach a list	, (see k	ratifuctions)
j	***************************************		luaz.org	<u> </u>		t(c) Group a	n noitamaxe	umber	>
K			X Corporation Trust Association Other	L Year		n: 1968			legal domicile; AZ
		Summar							
1 - (-	1 E	riefly descrit	be the organization's mission or most significant activities	s; TO D	EFEND	THE (CONSTI	TUT:	ION AND
41	١,		RICA SAFE AND FREE. TO DEFEND INDIV						
Activities & Governance]		LITIGATION, LEGISLATION, AND PUBLIC						
25	"								
o.	2 0	heck this bo	x ► If the organization discontinued its operations of	r disposed	of more	than 25%	% of ils n	et ass	ets.
ণ্ড ক	3 N	lumber of vot	ting members of the governing body (Part VI, line 1a)	.,,.,,,,		• • • • • • • • •		3	30
S	4 N		dependent voting members of the governing body (Part V					4	30
ĝ	5 7		of Individuals employed in calendar year 2011 (Part V, II					5 6	47
₹	6 7		of volunteers (estimate if necessary)d business revenue from Part VIII, column (C), line 12					7a	0.
`	/ " "		business taxable income from Form 990-T, line 34					7b	
	DIN	et un etateu	business taxable income from 1 bith 550*1, line 54	*********		3	ior Year		Current Year
	8 C	antributions :	and grants (Part VIII, line 1h)				177,7	24	227,732.
뢐			ice revenue (Part VIII, line 2g)				~,,,,	~~.	
Revenue		~	come (Part VIII, column (A), lines 3, 4, and 7d)				2,3	09.	2,577.
'n.			(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			,			
			- add lines 8 through 11 (must equal Part Vill, column (180,0	33.	230,309.
		· - 	nilar amounts paid (Part IX, column (A), lines 1-3)			, , , , , , , , , , , , , , , , , , , ,			
			to or for members (Part IX, column (A), line 4)						
			compensation, employee benefits (Part IX, column (A),				139,5	77.	199,514.
8		-	undraising fees (Part IX, column (A), line 11e)						*
Expenses			ng expenses (Part IX, column (D), line 25)		,	10/1/10/02	341/3/8/	36	
苔		•	•			X TA CONTRACTOR	erenana COO	E 3	97,424.
			s (Part IX, column (A), lines 11a-11d, 11f-24e)			····	57,7		
			s. Add lines 13-17 (must equal Part IX, column (A), line				197,3		296,938.
	19 R∈	evenue less e	expenses, Subtract line 18 from fine 12	******			$\frac{.17,2}{}$		-66,629.
920	AB -	tal anata m	5-4 St D == 175		· ·	Beginning	408,4		End of Year
98	20 To 21 To	iai assets (F	Part X, line 16)		• • • • • • • • •		12,1	-	422,533. 92,836.
Not Assette or Fund Balances			•					$\overline{}$	
			und balances. Subtract line 21 from line 20	*********			396,3	46.1	329,697.
	11	Signature							
Unde	r penallies lele. Decla	of panjury, i deci	lare that I have exemined this return, including accompanying schedules ar er (other than officer) is based on all information of which preparer has any	id statements, knowledga.	and to me	best of my	Kuowledge t	and beli	iet, it is Irua, correct, and
		<u> </u>	ENAIDO QUINTANO, PRESID						, , , , , , , , , , , , , , , , , , , ,
OI.		Signalus		5-A-1	· · · · · · · · · · · · · · · · · · ·	Date			
Sig)) 'A	1	must Chartman		2	. = 14	1-13		
1161	G	Type or pr	flot name and title.						
		Print/Type pre		, Data		. 10	neck	if f	PTIN
n. (1	LUMBARD LUSA B. Clumbard	CPA	2/13	tra l	if-employed		P0/502505
Pai	d parer		► LUMBARD & ASSOCIATES, PLLC	1	1		riimioken		, <u>~ [~ [~ [~ [~] ~] ~] ~] ~] </u>
	Only	Firm's name					m'e File 🗠	72-	1548114
	_,y	Firm's address	-	5014-49	155		iona no.	, 4 -	
Mo:	the IDC	dianua this	return with the preparer shown above? (see instructions)		, ., .,	Lai	INIG IJU:		X Yes No
	· · · · · · · · · · · · · · · · · · ·				TEEAOI	01 07/05/	**************************************	<u>, , , , , , , , , , , , , , , , , , , </u>	Form 990 (2011)
PAH	rorra	กลเพกนห น6ต	luction Act Notice, see the separate instructions.		ECEAU!	m1 01103)	**		1 (1111 220 (2011)

Form	1990 (2011) ACLU of Arizona	86-0205157	Page 2
	光川家 Statement of Program Service Accomplishments		
	Check if Schedule O contains a response to any question in this Part III	,	
J	Briefly describe the organization's mission:		
	ADVOCATES FOR THE PRESERVATION OF INDIVIDUALS' LIBERTIES TO		
	KEEP AMERICA SAFE AND FREE. TO DEFEND INDIVIDUAL RIGHTS IN ARIZO	ONA	
	THROUGH LITIGATION, LEGISLATION, AND PUBLIC EDUCATION.		
2	Did the organization undertake any significant program services during the year which were not listed or	n the prior	
	Form 990 or 990-EZ?		X No
	If 'Yes,' describe these new services on Schedule O.	L	_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program ser	rvices? Yes	X No
	If 'Yes,' describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three targest program service section 501(c)(3) and 501(c)(4) organizations and section 494/(a)(1) trusts are required to report the arcothers, the total expenses, and revenue, if any, for each program service reported.	ices, as measured by exp nount of grants and alloc	enses. ations to
4a	(Code:) (Expenses \$ 84,468. Including grants of \$ 0.)	(Revenue \$	0.)
	PUBLIC EDUCATION: THE ACLU OF ARIZONA CONDUCTS PUBLIC EDUCATION	events	
	ON PUBLIC POLICIES AND GOVERNMENT ACTIONS THAT THREATEN CIVIL LI		
	AND MOBILIZES MEMBERS AND SUPPORTERS TO TAKE ACTION ON CIVIL LIE		
	ISSUES AFFECTING ARIZONANS. THE ORGANIZATION RECRUITED 193 NEW M	IEMBERS	
	AS A RESULT OF TARGETED MEMBERSHIP OUTREACH ACTIVITIES, IN ADDII		
	OF ARIZONA PRINTED 4 QUARTERLY NEWSLETTERS AND MAINTAINED A WEBS		
	ATTRACTED 106,097 HITS. ACLU OF ARIZONA STAFF MEMBERS PARTICIPAT		NG
	ENGAGEMENTS THROUGHOUT THE STATE TO RECRUIT NEW MEMBERS AND INFO	RM THE PUBLIC	
	ABOUT GOVERNMENT POLICIES THAT VIOLATE CIVIL LIBERTIES.	.,	
-			
	05 400 Participa annulu at d	D	0 1
	\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"\"	Revenue \$	0.)
_	LEGISLATIVE ADVOCACY: THE ACLU OF ARIZONA LOBBIES ARIZONA LEGISL		
	MEMBERS OF LOCAL GOVERNMENT BODIES, INCLUDING CITY COUNCILS AND		
	TO TAKE ACTION ON PUBLIC POLICIES THAT IMPACT CIVIL LIBERTIES. I		
	AND ACTIONS ON BALLOT MRASURES THAT IMPACT CIVIL LIBERTIES. LOBBYING ACTI		ATEMTING
	AND ANALYZING PROPOSED LAWS, TESTIFYING AT PUBLIC HEARINGS, MEET. LEGISLATORS OR LOCAL GOVERNMENT REPRESENTATIVES AND GRASSROOTS LO		
-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ABBITING	
	OF ITS MEMBERS AND OTHERS, DURING THE 2012 FISCAL YEAR, THE ACLU OF ARIZONA'S LOBBYING RELATED ACTIVITIES INCLUDED		
	APPEARING BEFORE 10 POLICY MAKING BODIES AND SUBMITTING 6 WRITTEN	an and and and and and and and and and a	
	RECOMMENDATION TO POLICYMAKING BODIES, DURING THE 2012 SESSION	<u></u>	
	See Form 990, Page 2, Part III, Line 4b (continued)		
	3301001133011030415010110101010101010101010101010101010	one and the two one and the bird bird bird bird bird	
c (Code:) (Expenses \$including grants of \$) (Fig. 6.1)	Revenue \$	}
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_	و الله الله الله الله الله الله الله الل		
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_	- # # # # # # # # # # # # # # # # # # #	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	
4-4			
h.,			
d O	ther program services, (Describe in Schedule O.)		
	Expenses \$ including grants of \$) (Revenue \$		
	otal program service expenses ► 169,967.		-

20 b

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

P	arely: Checklist of Required Schedules (continued)		· 	
	,		Yes	No
	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 17 If 'Yes,' complete Schedule I, Parts I and II	. 21	ļ	x
	2 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		х
	B Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	. 23		х
24	la 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	. 24a		х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	. 24b		
	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		
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	. 24d		
25	a 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		х
	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		Х
2 6	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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27	योगीर	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	44.6	100 M	
	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
	b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		X
	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Schedule N, Part II	32		x
33	Did the organization own 180% of an entity disregarded as separate from the organization under Regulations sections 301,7701-2 and 301,7701-37 If 'Yes,' complete Schedule R, Part I	33		х
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, Iline 1	34	х	1
	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
1	o Did the organization receive any payment from or engage in any transaction with a controlled ontity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	х	
	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, Ilne 2	36		
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	_	<u>x</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
Α Λ		Form	990 <i>(2</i>	(110)

	86-0205157		Page
Ran V Statements Regarding Other IRS Filings and Tax Compliance			_
Check if Schedule O contains a response to any question in this Part V	************	130	111-
	, EEE	Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- If not applicable	0 25		W
b Enter the number of Forms W-2G included in line Ta. Enter -0- if not applicable	0	Ki C	V
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable (gambling) winnings to prize winners?	e gaming	D 39	EX.
(gambling) Winnings to prize Winners?	3/3/	325	335
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a	0 🔊	N. V.	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
Note, If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see Instructions)	3.4	95.55	1977
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		x
b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	Зъ		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authoritinancial account in a foreign country (such as a bank account, securities account, or other financial account))?	-3.5 p. ε.	X
b If 'Yes,' enter the name of the foreign country: 🕒		territ	
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account	ts. 路費	33.5	# 19 m
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?.	,,,,, <u>5b</u>		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	<u> </u>	ļ
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	ization 6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or girent tax deductible?	fts were 6b		
7 Organizations that may recoive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods at services provided to the payor?	nd 7a		部第 X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was requir	red to file		
Form 8282?		365, FO7 6	X
d If 'Yes,' indicate the number of Forms 8282 filed during the year		器差	總等
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	70		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			Х
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	79	İ	
as required? It the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file			
Form 1098-C?	/ / /	as A60	Te A Con-
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations, supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess busin holdings at any time during the year?	Did the		
holdings at any time during the year?		All Access	2014301
9 Sponsoring organizations maintaining donor advised funds.			景為
a Did the organization make any taxable distributions under section 4966?	9a	-	
b Did the organization make a distribution to a donor, donor advisor, or related person? ,	9b	0.50/612 5	NoArra.
0 Section 501(c)(7) organizations. Enter:			3. V.
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Parl VIII, line 12, for public use of club facilities 10b		海外	W.
1 Section 501(c)(12) organizations. Enter:			
a Gross income from members or shareholders		200	rena. Ma
b Gross income from other sources (Do not net amounts due or pald to other sources against amounts due or received from them.)			Wir.
2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	CD# N	858 K
b If 'Yes,' enter the amount of tex-exempt interest received or accrued during the year			14. T
3 Section 501(c)(29) qualified nonprofit health Insurance Issuers.	CAS.	47.4°	
a is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	8 F .
Note. See the Instructions for additional information the organization must report on Schedule O.			巅.
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		绿绿	
c Enter the amount of reserves on hand	No.	\$\$\\	4
4a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b If 'Yes,' has it filed a Form 720 to report these payments? If 'Wo,' provide an explanation in Schedule O	14b		
A TEEA0105 07/05/11	Form 9	9 9D (2	011)

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For	m '990 (2011) ACLU of Arizona 86-0205157			age
Pa	Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or cha Schedule O. See instructions.	nyes	11 1	
	Check if Schedule O contains a response to any question in this Part VI.		, . ,	Х
Se	ction A. Governing Body and Management		r	
		35555s	Yes	No
1	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
	b Enter the number of voting members included in line 1a, above, who are independent 1bj 34	播遊		
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	29(Y)	X
3	of officers, directors or trustees, or key employees to a management company or other person?	. 3		X.
4	Did the organization make any significent changes to its governing documents	4		x
	since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
G	Did the organization have members or stockholders?	`\		
	a 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?	. <u>7</u> a		X
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	. 7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	a The governing body?	8a 8b	X	
	b Each committee with authority to act on behalf of the governing body?	០០		
9	Is there any officer, director or 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		х
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
		10a	X	110
10	a Did the organization have local chapters, branches, or affiliates?	10.4		
1	olf 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliales, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11:	a Has the prognization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	3-4-755×
1	Describe in Schedule O the process, If any, used by the organization to review this Form 990.	12a	X	graf flags
12:	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	120		
	b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	X	
13	Did the organization have a written whistleblower policy?	13 14	X	
14	Did the organization have a written document retention and destruction policy?	1000		# 15 m
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?	15a		
	a The organization's CEO, Executive Director, or top management official	15b		Х
,	of Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.)		X.	影法
4.5	printer to line to a of top, describe the process in or participate in a loint venture or similar arrangement with a	總接	1977. 1887.	RAL.
167	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		X Mile
	o 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 taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	100	國際 ·
340 37	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filled Arizona			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) ave inspection. Indicate how you make these available. Check all that apply.			blic
	X Own website			
	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available during the law year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organ	zation	ì	
	The Organization PO Box 17148 Phoenix AZ 85011 (6	02) 6	<u>50 ~ 1</u>	
RΔA	TEEA0106 01)23/12	Form:	99U (2011)

Form 990 (2011) ACLU of Arizona	86-0205157	Page 7
Rark VIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Co	mpensated Employee	s, 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	l Employees	

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	n nor any	relate	d or	gani	zati	on cor	nper	nsated any current off	cer, director, or trust	ee.
(A) Neme and tille	(B) Average hours per week	(C) Position (do not check more than one box, unless person is both an officer hours						(D) Reportable compensation from the organization	(E) Reportable compensation from retailed grownizations	(F) Estimated amount of other compensation
	(describe frours for related organiza- tions in Schedule O)	or director	anstitutioned trustee	Officer .	Key employee	Highest compensated employee	FORMER	the organization (W-2/1099-IAISC)	retated organizations (W-2/1099-MISC)	from the organization and rotated organizations
(1) Alessandra Soler Executive Director	40.00			X				0.	78,690.	0.
(2) Roberto Reveles President	1.,00	х		x				0.	0,	0.
(8) Rivko Knox VP-Development	1.00	×		×		·		0,	0.	0.
(4) Jere Humphreys VP-Nominations	1.00	х		х				0.	0.	0.
(5) Bob Meitz VP-Personnel	1.00	X		х				0.	0.	0.
(6) Tom Bean Secretary	1.00	х		х				0.	0.	0.
(7) Tod Zelickson Secretary	1.00	х		х				0.	0.	0.
(8) RJ Shannon Affirmative Action Officer	1,00	х		x				0.	· 0.	. 0.
(9) Steve Lee General Counsel	1.00	х		x				0.	0.	0.
(10) Alice Bendheim Executive Committee	1.00	х						0.	0.	0.
(11) Sam Daughety Executive Committee	1.00	х						0.	0.	0.
(12) Matt Korbeck Executive Committee	1.00	х						0.	0.	0.
(13) Carolyn Trowbridge Executive Committee	1.00	х						0.	0.	0.
(14) Andrea Elikan Board Member	1.00	х						. 0.	0.	. 0.

86-0205157 Form 990 (2011) ACLU of Arizona Page 9 Bart VIII Statement of Revenue (B) Related or (C) Unrelated (D) (A) Total revenue Revenue excluded from tax exempt function business under sections 512, 513, or 514 revenue 1a Federated campaigns 1a 16 b Membership dues..... 173,508 1c c Fundraising events 1d d Related organizations e Covernment grants (contributions) 1e f All other contributions, gills, grants, and similar amounts not included above 54,224 g Noncash contributions included in las 1a-1f: 227,732 h Total. Add Ilnes 1a-1f Business Code PROGRAM SERVICE REVENUE f All other program service revenue .. g Total. Add lines 2a-2f. Investment income (including dividends, interest and other similar amounts) 2,577. 2,577 4 Income from investment of tax-exempt bond proceeds . 5 Royaltles 6a Gross rents b Less: rental expenses. c Rental income or (loss) d Net rental income or (loss) (ii) Other (i) Securities 7a Gross amount from sales of assets other than inventory b Less; cost or other basis and sales expenses . . . c Gain or (loss) d Net gain or (loss) 8a Gross income from fundralsing events OTHER REVENUE (not including . \$_ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses b c Net income or (loss) from fundraising events 9a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses b c Net Income or (loss) from gaming activities . 10 a Gross sales of inventory, less returns and allowances b Less; cost of goods sold b c Net income or (loss) from sales of inventory Business Code Miscellaneous Revenue d All other revenue e Total. Add lines 11a-11d 230,309. 12 Total revenue. See instructions

Partix | 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).

			. I H G Ps. CD2		i i
	Check If Schedule O contains a	response to any question	on in this Part IX		
Di 6k	o not include amounts reported on lines , 7b, 8b, 9b, and 10b of Port Vill.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundralsing expenses
	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	the United States. See Part IV, line 22				
5	Grants and other assistance to governments, organizations, and individuals outside the United States, See Part IV, lines 15 and 16				
4	Benefits paid to or for members			据学员的扩张。 第12章	中的特殊的特別的
5	Compensation of current officers, directors, trustees, and key employees	. 31,930	, 24,912.	5,085	1,933
6	Compensation net included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8)				
7			. 98,218.	20,046.	7,620
8	Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	8,629.	169.	8,460.	0
^	· •			19,857.	
	Other employee benefits			2,393.	805
10		12,886,	9,008,	4,393.	- 005
11	Fees for services (non-employees):		}		1
	a Management	·		4	<u> </u>
	Legal				
	Accounting		0,	8,507.	0
	Lobbying		SENSORESCE ACTUACIONO DE SEN	Barran aras na italian ka ita	
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
9	Other				
12	Advertising and promotion				
13	Office expenses	33,566.	28,406.	4,058.	1,102
14	Information technology			···	
15	Royalties			· · · · · · · · · · · · · · · · · · ·	
16	Occupancy	23,101.	106.	22,995.	0.
17	Travel	7,558.	4,562.	2,910.	86
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings			/ _{1,1} ,1 = 1	
20	Interest		0.	262.	0.
21	Payments to affillates				
22	Depreciation, depletion, and amortization	2,317.	0,	2,317.	0.
23	Insurance	658.	0.	658.	0,
24	Other expenses, Itemize expenses not covered above (List miscellaneous expenses				
	In line 24e, If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	Membership development()	5,668.	0,	72.	5,596.
a		13,262.	1,053.	12,209.	0,
	Board and Volunteer II				
b	Board and volunteer DD	······································	2,525.	0.1	U.
þ	Public education forums	2,525.	2,525.	0.1	<u> </u>
b c d	Public education forumsOO	······································	2,525.	0.	0
b c d e	Public education forums	2,525.			
25 26	Public education forumsOO	······································	2,525. 169,967.	109,829.	17,142.
b c d e 25 26	Public education forums III All other expenses	2,525.			17,142,

	w 	Balance Sheet	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	137,765.	1	66,982.
- 1	2	Savings and temporary cash investments	248,802.	2	346,496.
ı	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
- 1	5	Receivables from current and former officers, directors, trustees, key employees,		5 T	学数别数0 分形
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions).		6	
A SSET	7	Notes and loans receivable, net		7	
§	8	inventories for sale or use		8	
5	9	Prepaid expenses and deferred charges	3,179.	9	5,001.
1		I I buildings and agginments part or other backs			
	h	Less: accumulated depreciation	6,371.	10 c	4,054.
1,	1	Investments – publicly traded securities		11	
1,	,	Investments – other securities. See Part IV, line 11		12	
	3	Investments – program-related, See Part IV, line 11		13	
1	4	Intergraphic assets		14	
1	5	Other assets. See Part IV, line 11	12,347.	15	
1	c	Total assets. Add lines 1 through 15 (must equal line 34)	408,464.	16	422,533
1	7	Accounts payable and accrued expenses	4,828.	17	9,429.
1	Ŕ	Grants payable		18	
1	9	Deferred revenue		19	1,275.
. 2	a	Tax-exempt bond liabilities		20	
i _	1	Secretary or custodial account liability Complete Part IV of Schedule D		21	
2	2	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		100 mg/m/ 22	
[]	2	Secured mortgages and notes payable to unrelated third parties		23	
2	3 4	Unsecured notes and loans payable to unrelated third parties		24	
2	4	Onsection notes and loans payable to another and personal forms tay navables to related third parties.			
2	9	Other liabilities (including federal Income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	7,310.	25	82,132.
2	6	Total liabilities, Add lines 17 through 25	12,138.	26	92,836.
-		Organizations that follow SFAS 117, check here ► X and complete lines			
		27 through 29 and lines 33 and 34.		ile. 9	国际特别的
2	7	Unrestricted net assets	396,326.	27	329,697.
21	Ŗ.	Temporarily restricted net assets		28	
2	9	Permanently restricted net assets		29	
}		Organizations that do not follow SFAS 117, check here - and complete			
30	Λ.	Capital stock or trust principal, or current funds		30_	
	1	Paid-in or capital surplus, or land, building, or equipment fund		31	
31 32 33		Retained earnings, endowment, accumulated income, or other funds		32	
1 34	_	Total net assets or fund balances	396,326.	33	329,697.
3:					

BAA

Form 990 (2011) ACLU of Arizona 86-	<u>0205157</u>		P	age 12
RartXIII Reconciliation of Net Assets				_
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	2	30,	309.
2 Total expenses (must equal Part IX, column (A), line 25)		2	96,	<u>938.</u>
3 Revenue less expenses, Subtract line 2 from line 1	3			629 <u>.</u>
4 Not assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3.	96,	326.
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))		3	29,6	697.
RateXII/ Financial Statements and Reporting				·····
Check if Schedule O contains a response to any question in this Part XII	*******	,,,,,,		. x
1 Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.	•		第二	数数
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X
b Were the organization's financial statements audited by an independent accountant?		2b	X	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?	audit,	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		数 数 数 数		
d if 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued separate basis, consolidated basis, or both:	on a			
Separate basis X Consolidated basis Both consolidated and separate basis			香色	Wie.
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3a		x
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	ed audit	3b		
BAA		Form	990 ((2011)

Form 990

Continuation Sheet for Form 990

OMB No. 1545-8047

2011

Department of the Treasury Internal Revenue Servico

Name of the Organization

Employler Identification number

ACLU of Arizona

RankVIII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title	(B)	Pos	ition		С) k вЯ	that app	ıly)	(D) Reportable	(E) Reportable	(F) Estimaled
ryang and ilua	Average hours per week	individual trustee or director		Ý	Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MSC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of oliver compensation from the organization and related organizations
26 Augustine Romero Board Member	1.00	х_						0.	0.	0.
27 Fred Bevins Board Member	1.00	х						0.	0.	0.
28 Mohur Sidhwa Board Member	1.00	х						0.	0.	0.
29 Jason Green Board Member	1,00	х						0.	0.	0.
30 Marilyn Freed Board Member	1.00	х			,			0.	0.	0,
31 Laura Dent Board Member	1.00	х						0.	0.	0,
	-									
	· · ·							-		
									A110-4-1	
and the same of th										
								19 \$24 to 4000		
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\$100 \$100 \$100 \$100 \$100 \$100 \$100 \$100										
					[-					
					_		_			
										Form 998 Copt 2011

SCHĚDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

ZUII

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Complete If the organization is described below.

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

Openito Public Inspection

(()(c))10)	Trevenue del vice		FF 7 131 II 40 40	. 105 I manusatus Anthe	Mary thou
If the	organization answered 'Yes	s,' to Form 990, Part IV, line 3, or Form 990	EZ, Part V, line 46 (P	onucai Campaign Activ	mas), men
• St	ection 501 (c)(3) organization	ns: Complete Parts I-A and B. Do not comp	ete Part IrU.	Da not samplete Dart I I	.
• \$6	ection 501 (c) (other than see	ction 501(c)(3)) organizations: Complete Pa	arts 1-A and C below.	Do not comblete barr 1-1),
	ection 527 organizations: Co	omplete Part I-A only.	EZ B.410 B.4574	abbular Adhiblash the	m
# Se	ection 501(c)(3) organization	s, to Form 990, Part IV, line 4, or Form 990 ns that have filed Form 5768 (election unde	r section 501(h)): Cor	nplete Part II-A. Do not	complete Part II⋅B.
Pa	art li-A.	ns that have NOT filed Form 5768 (election			
If the	organization answered 'Yes	s,' to Form 990, Part IV, line 5 (Proxy Tax) o	r Form 990-EZ, Part	/, line 35a (Proxy Tax), (iton
		organizations: Complete Part III.		Employer identific	allan annikan
Name o	l organization				
ACLI	J of Arizona		ron.	86-020515	
Part	KAR Complete if the c	organization is exempt under sect	ion but(c) or is a	Section 527 organi	Zauon.
1 1	Provide a description of the	organization's direct and indirect political c	ampaign activities in	Part IV.	
2 1	Political expenditures				
3 \	Volunteer hours				
Rait	B Complete if the c	organization is exempt under secti sise tax incurred by the organization under	ion 501(c)(3).		
1 (Enter the amount of any exc	ise tax incurred by the organization under	section 4955		
2 1	Enfer the amount of any exc	ise tax incurred by organization managers	under section 4965		
3 1	f the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes No
4a \	Was a correction made?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*********		Yes No
Part	LC Complete if the o	rganization is exempt under secti	on 501(c), excep	t section 501(c)(3)	· · · · · · · · · · · · · · · · · · ·
1 E	nier the amount directly ex	pended by the filing organization for section	n 527 exempt function	ractivities≻\$	
2 5	Enter the amount of the filing	g organization's funds contributed to other	organizations for sect	on 527 exempt	. <u></u>
		ditures. Add lines 1 and 2. Enter here and	an Earm 1100 DAI		
) 	the filler executestion file	e Form 1120-POL for this year?			Yes No
-4 [No the hing organization in	and ampleyer Identification number (FIN)	if all section 527 polit	ical organizations to Whi	ich the filing
5 E 0 2 8	inter the names, addresses organization made payments imount of political contributi egregated fund or a politica	and employer Identification number (EIN) on the earth organization listed, enter the anons received that were promptly and directly a committee (PAC). If additional space	nount paid from the fil y delivered to a sepa ce is needed, provide	ing organization's funds rate political organization information in Part IV.	. Also enter the n, such as a separate
	(a) Name	(b) Addross	(e) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(o) Amount of political contributions received and promptly and directly delivered to a separate political organization. It none, enter -0
(1)					
(2)					
(3)					
(4)		74 PRO POS DOS COM			
(5)	111)		
(6)					
BAA F	or Paperwork Reduction Act Notic	co, see the Instructions for Form 990 or 990-EZ.		Schedule C (For	m 990 or 990-EZ) 2011

Schedula C (Form 990 or 990-EZ)	2011 ACLU of Ar:	izona		86-02	
Rait IFAE Complete I section 50	f the organization (h)).	n is exempt under s			
A Check ► if the fi				h affiliated group membe	er's name,
		d share of excess lobbying			
B Check ► If the fi	ling organization che	cked box A and 'limited co	ntrol' provisions apply.		
•	m 'expanditures' mo	ying Expenditures ans amounts paid or incu		(a) Filing organization's tolals	(b) Affilialed group lotals
1 a Total lobbying expendi	itures to influence pu	blic opinion (grass roots le	bbying)	•	
		egisiative body (direct lobi			
		nd 1b)			

e Total exempt purpose	expenditures (add lin	es 1c and 1d)			
f Lobbylng nontaxable a both columns.	mount. Enter the am	ount from the following tal	ole in		
If the amount on line Te, co	olumn (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 exces	over \$500,000.		
Over \$1,000,000 but not over	\$1,500,000	\$175,000 plus 10% of the exces-	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,		MANAGARA SA
Over \$17,000,000		\$1,000,000.		STATE TO SELECT THE SE	新版器(III 称为"数字"
		of line 1f)			
		, enter -0			
Subtract line 1f from line	ne 1c. If zero or less,	enter -0			
j If there is an amount of section 4911 tax for this	ther than zero on eili	ner line 1h or line 1i, did ti	e organization file Forn	n 4720 reporting	Yes No
(Sol	me organizations tha	4-Year Averaging Period it made a section 501(h) e is below. See the instruct	Under Section 501(h) lection do not have to ons for lines 2a throug	complete all of the five th 2f.)	
***************************************	Lobb	ying Expenditures During	4-Year Averaging Per	lod	
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying non-taxable amount		•			
b Lobbying celling amount (150% of line 2a, col⊭mn (e))					······································
c Total tobbying expenditures					
d Grassroots nontaxable amount	and a visit of the second section of the second		Augustulaktussä päivike	ANNOUS DESCRIPTIONS STATE STATE	
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					*
BAA				Schedule C (Forn	n 990 or 990·EZ) 2011

Schedure C (form 990 or 990-EZ) 2011 ACLU of Arizona			5157 Page \$
图 Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	1 1116	u roi	m 5768
	(a)	(b)
For each 'Yes' response to lines 1a through 11 below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers?			
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements?	·		
d Mallings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
1.08		*****	
1 Total Add lines to through 11	dA See	1377	**************************************
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	1.3200	10% N	新疆的特征公司
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	- 7. g	$\tilde{z}_{2}^{12}/\tilde{p}$	and dealthy institute rates have a series
A It the bling emanication inclined a section 4912 lax, up it life i vita 4740 io and year			的时间是多数位约 约
Partilization Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or	
section 501(c)(6).			Yes No
2 to a second of the second of			
1 Were substantially all (90% or more) dues received nondeductible by members?	.,,,,,	,	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			3 X
Rankill Bill Complete if the organization is exempt under section 501(c)(4), section 501501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' O answered 'Yes.'	r (D)	or s Part	ection III-A, line 3, is
1 Dues, assessments and similar amounts from members		1 989.8	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year	اا	2a	
b Carryover from last year		2b	
c Total		20	
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?	al	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	1	5	
Partity의 Supplemental Information	II. At a	ad Da	vi II.D. Ilna 1
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part Also, complete this part for any additional information.	. II-A; a		

· · · · · · · · · · · · · · · · · · ·	en 1-4 1-4 1		, , , , , , , , , , , , , , , , , , ,
Caba	dula C	(Forn	1 990 or 990 FZ1 2011

Schedult C (Form 99) or 990-EZ) 2011 ACLU of Arizona Part IV Supplemental Information (continued)	86-0205157	Page 4
Rangival Supplemental information (continued)	Annala 	
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		·

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Hame of the organization

Supplemental Financial Statements

➤ Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 15450047

Open to Rubilc Inspection Employer kientification number

86-0205157 ACLU of Arizona Rank Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (b) Funds and other accounts (a) Donor advised funds 1 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 funds are the organization's property, subject to the organization's exclusive legal control? No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Partill Conservation Easements. Complete if the organization answered 'Yes' to Form 990, Part IV, line 7 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2aa Total number of conservation easements 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) acquired after 8/17/06, and not on a historic structure listed in the National Register..... 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► Number of states where property subject to conservation easement is located ► Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(li)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Pantill: Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1 a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items; (ii) Assets included in Form 990, Part X≻\$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items; a Revenues included in Form 990, Part Vill, ilne 1......⊁\$

Schedule D (Form 990) 2011 ACLU Rate IIIs Organizations Mainta	of Arizo	ona	e of Avt Hic	torical	Treasures	or Ot	86-020 her Similar As:		contin	Page 2 ued)
	ining Con	action:	than records of	ork one	of the following	that a	are a significant us	e of its	collecti	on
Using the organization's acquisititierns (check all that apply):	on, accession	1, 800 0	mer recoros, cr	eck any	OI (IIB IOIIOMIII)	g urar s	ite a signmeant by	O OI NO	CONCOL	0.1
a Public exhibition			d Loar	ı or exch	ange programs	5				
b Scholarly research			e L Othe	r						
c Preservation for future gener 4 Provide a description of the organ	ations	lactions	and evolain ho	w they fo	riher the organ	ization	's exempt purpose	in		
Part XIV										
5 During the year, did the organiza assets to be sold to raise funds r	tion solicit or ather than to	receive be main	donalions of ar tained as part	t, histori of the on	cal treasures, o ganization's col	or other Hection	r similar 17	Ye	3	No
Rand W Escrow and Custodia line 9, or reported an	l Arrangen	nents.	Complete if	the or	ganization a	nswe	red 'Yes' to Fo	rm 99	0, Par 	t IV,
1a is the organization an agent, trus included on Form 990, Part X?.	tee, custodiar	n, or oth	ner intermediary	for conf	ributions or oth	er ass	ets not	Yes	f	No
included on Form 990, Part X? .		. i					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	∐ Yes	3 [_ NO
b if 'Yes,' explain the arrangement	in Part XIV a	nd com	piete the followi	ng table		Г		Amous	nt	
c Beginning balance							1c			
d Additions during the year			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				1 d			
e Distributions during the year							1e			
f Foding balance							11]	····		——————————————————————————————————————
2a Did the organization include an a	mount on For	m 990, l	Pørt X, line 217					Yes	, [No
b if 'Yes,' explain the arrangement	in Past XIV.				1 No. 1 to Es		On Clark IV line	3 10		
Patt V Endowment Funds. Co	implete if t	he org	anization ar		Yes to ro	w	(d) Three years back	3 10.	Four year	rs back '
	(a) Current		(h) Prior ye	ar	(c) Two years bad	GN	(ii) Tilled Acolo Dory		100 100	
1a Beginning of year balance				$\overline{}$						
b Contributions									1020	
c Net Investment earnings, gains, and losses										
d Grants or scholarships								82000 80000		and South
e Other expenditures for facilities and programs						\perp				ele control
f Administrative expenses						_		- 1200		
g End of year balance						L		16年音		是研究政
2 Provide the estimated percentage	of the curren	it year e	end balance (lin	e ig, coi	umn (a)) neid a	as:				
a Board designated or quasi-endow	ment -		5							
b Permanent endowment			ę.							
c Temporarily restricted endowment The percentages in lines 2a, 2b, a	and Sc should	enual 1	° 00%.							
				that ara	nimbe bae blad	nictoror	for the			
3a Are there endowment funds not in organization by:									Yes	No
(i) unrelated organizations								3a(l)		
(ii) related organizations							,	3a(ii)		ļ
b If 'Yes' to 3a(il), are the related or	ganizations it	isted as	required on Sc	hedule R	i?. <i></i>		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	36		
4 Describe in Part XIV the Intended	uses of the o	rganiza	tion's endowine	nt tunas art V 1	ine 10					
Particul Land, Buildings, and E	<u> 1 quipment</u>	(a) Cost	t or other basis	(b) C	ost or other	fc)	Accumulated	(d)	Book va	lue
Description of property		(a) Cosi	vestment)	bas	sis (other)	1 7	tepreciation I			
1a Land						1865				
b Buildings						-				
c Leasehold Improvements					6,950.	<u> </u>	2,896.			,054.
d Equipment			·		6,350.	 	2,050.			. <u> </u>
e Other	a (d) must ear	ial Form	990, Parl X. o	olumn (h	3), line 10(c).) .				4,	054.
BAA	, thy mane oge				<u> </u>		Sched	ule D (F	Form 99	0) 2011

Schedule D (Form 990) 2011 ACLU of Arizona		86-0205157 Page	e 3
Par VIII Investments - Other Securities. See F	orm 990, Part X,	line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(including name of security) (1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
		•	
(A)			,
(B)			
(0)			
(E)			<i>•</i>
(F)			
(G)			
(H)			
(1)			<u>~</u>
Total. (Column (b) must equal Form 930 Part X, column (B) line 12.)	V June 1	Eng 10	1877
Paravill Investments - Program Related, See	orm 990, Part X,	ING 13.	
(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	— .
(1)			
(2)			
(3)			
(4)			
_(5)			
(6)			_
(7)			
(8)		<u></u>	_
(9)		2 '	
(10)			Ų.
Total. (Column (b) must equal Form 990, Part X, column (b) line 13.) F Part X Other Assets. See Form 990, Part X, lin	ne 15.		
(a) Desc	riplion	(b) Book value	
(1)			
(2)			_
(3)		`	
(4)			
(5)			
(6)		4	
(7)			
(8)			
(9)			→
(10)		.	
Total. (Column (b) must equal Form 990, Part X, column (B),	line 15.)		
PartX Other Liabilities. See Form 990, Part X	/N Pook volue		3.1
(a) Description of liability	(b) Book value		À.
(1) Federal income taxes	48,76	n	
(2) Due to related entities			À
(3) Due to American Civil Liberties Union, Inc. and ACLU Found	33)37		2
(4)			
(5)	···		4
(6)			41
(7)			97.
(8)			
(9)			
(10)			ş
(11) Total. (Column (b) must equal Form 990, Part X, column (b) line 25.)	82,13	2. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	띂
2 FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of torganization's liability for uncertain tax positions under FIN 48	the foolnote to the orga	anization's financial statements that reports the	
organization's liability for uncertain tax positions under FIN 48	(ASC 740).	Schedule D (Form 990) 201	 11

Sch	edule D (Form 990) 2011 ACLU of Arizona	86-02051	57 Page 4
Da	表別 Reconciliation of Change in Net Assets from Form 990 to Audited Financial Si	tatements	
<u>। वयस्य</u>	Total revenue (Form 990, Part VIII, column (A), line 12)		230,309.
2	Total expenses (Form 990, Part IX, column (A), line 25)		296,938.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		-66,629.
4	Net unrealized gains (losses) on investments		
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other Describe in Part XIV.)		
9	Total adjustments (net), Add lines 4 through 8	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
10	Expans or (deficit) for the year per audited financial statements, Combine lines 3 and 9	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-66,629.
D	(Exit) Reconciliation of Revenue per Audited Financial Statements W	ith Revenue per Return	
1	Total revenue, gains, and other support per audited financial statements		230,309.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	基	
ŧ	Net unrealized gains on investments	1985次段	
ŀ	Donated services and use of facilities	120,522	
٠,	Recoveries of prior year grants		
	Other (Describe in Part XIV.)		
6	Add lines 2a through 2d	ze	000 200
3	Subtract line 2e from line 1	3	230,309.
4	Amounts Included on Form 990, Part VIII, line 12, but not on line1:		
8	Investment expenses not included on Form 990, Part VIII, line 7b		
ž.	Other (Describe in Part XIV.)		
¢	Add lines 1a and 4b	.,	220 200
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	All Francisco nou Deturn	230,309.
Par	XIII Reconciliation of Expenses per Audited Financial Statements	With Expenses per Neturn	296,93B.
1	Total expenses and losses per audited financial statements	表演:	230,336.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	13300	
b	Prior year adjustments	(Caraca)	
¢	Other losses	in the second	
d			
e	Add lines 2a through 2d	3	296,938.
3	Amounts included on Form 990, Part IX, line 25, but not on line 1:	533	
4	Amounts included on Form 990, Part IX, line 20, but not on line 15 Investment expenses not included on Form 990, Part VIII, line 7b		
ន	Other (Describe in Part XIV.)	C pu	
_	Add lines As and Ah	4c	<u>,</u>
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	296,938.
4117	EVANTA Cumplemental Information		
Comp Part any a	Diete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, II v, IIne 4; Part X, Iine 2; Part XI, Iine 8; Part XII, Ilnes 2d and 4b; and Part XIII, Iines 2d idditional information.	nes 1a and 4; Part IV, lines 1b and and 4b. Also complete this part to	1 20; provide
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Schedule D (Form 990) 2011 ACIJI of Arizona	86-0205157	Page 5
Schedule D (Form 990) 2011 ACLU of Arizona PartXIV: Supplemental Information (continued)		
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RAA TEEA3305 05/25/11	Schedule D (Form	990) 2011

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SCHËDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

2011

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

➤ Attach to Form 990 or 990-EZ.

2011
Open to Public Linspection

Name of the organization ACLU of Arizona		86-0205157
Pt VI, Line 11a	Draft copies are distributed in advance to membe	rs of
	the Finance Committee.	
Pt VI, Line 12c	The conflict of interest policy is included in t	he new
22_444_2222	board member orientation manual and all board me	
	must sign a copy of the the conflict of interest	
	annually to affirm	
DL III The II	The Personnel Committee of the Board of Director	s shall
Pt VI, Line 15	make recommendations to the Board of Directors r	
	Executive Director's compensation within the boar	
		
	salary range for this position. Only those member	
	Personnel Committee who are free of conflicts of	
	may be involved in recommendation of the Executive	
	compensation. The Personnel Committee shall cons	
	data as to comparability prior to making its reco	
سه الله من الله منه عند عنو عنو علو عليه عليه عليه عليه عليه	for example the ACLU Salary Survey and the ASU No	
	Compensation and Benefits Report for Maricopa and	
ينو وينه هم هم منو ويم ويم بين سند مند مند سند سند سن سند ويم	The Personnel Committee shall document its bases	
	the proposed compensation is reasonable. The Comm	itte shall
	place such data and reasons for its recommendation	m in the
	Personnel Committee Report.	
Pt VI, Line 19	Audited financial statements are available for pu	blic
	inspection on the website, www.acluaz.org, for 5	years.
	Form 990s are available on the website, as well.	Other
	governing documents and policies are available up	on request.
Pt_XII, Line 2c	The Finance Committee is responsible for approvin	g the annual
	budget and submitting it to the full Board of Dir	ectors for

Schedule O (Form 990 or 9	990·EZ) 2011	Page 2
Name of the organization ACLU of Arizona		Employer identification number 86-0205257
MONO OF AFTEONIA	May and a second a	
	approval, conducting quarterly internal audits	to review revenues
	and expenses and ensure that there are adequate	internal controls.
	reviewing and approving the annual tax form (990	2)
	and audited financial statements and appointing,	evaluating
	and retaining the independent auditor. One repre	sentative
	from the Finance Committee participates in the i	nterview
	process of potential auditors.	ال الله المراوضة وما فيت فيت فيت الله في الله ويه ويه ويما ويما ويما أما ويما ويما
		ng gan
		و الله المنظ
		- المحمد خمية منه جنها جنها عمد مدد المحمد المحم - المحمد الم
	سے بھی جنو وہو وہو میں جنو جنہ منہ سے بنے بنے بنے وہو وہو وہو ہم منہ سے بنے بنے بنے بنے بنے بنے بنے بنے بنے بن	ة شيو بين الان وجو بين النف النف النف النف النف النف الحد بين بين شية الله الله ال
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and note that you was you and have find you good york york, and		
		ted dad left that they hap you very just you you are dead and they just to
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ACLU of Arizona

86-0205157

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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4b (continued)

OF THE ARIZONA LEGISLATURE, THE ACLU OF ARIZONA TRACKED 70 BILLS, AND ASSISTED IN DEFEATING AND/OR AMENDING 13 BILLS THAT WOULD HAVE THREATENED CIVIL LIBERTIES.

SCHEDULE R (Form 990)

Department of the Treasury internal Revenue Service

Name of the organization

ACLU of Arizona

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Ø,

OMB No. 1545-0047

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.

(f) Direct controlling entity Employer Identification number 86-0205157 (e) End-of-year assets <u>眼部体影</u> identification of Disregarded Entities (Complete if the organization answered 'Yes' to Form 990, Part IV, line 33.) (d) Total income (c) Legal domicíle (state or foreign country) (b) Primary activity (a) Name, address, and EIN of disregarded entity

(g) Sec 512(b)(13) controlled entity? No 限部的 Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Yes × (f) Direct controlling entity ACLU Of AZ (e)
Public charity status
(if section 501 (c)(3)) 509a2 (d) Exempt Code section 50103 (c) Legal domicile (state or foreign country) Defend and preserve rights and freedoms AZ (b) Primary activity BAA For Paperwork Reduction Act Notice, see the instructions for Form 990. (1) ACLU Foundation of Arizona 23-7238580 (a) Name, address, and ElN of related organization থ্ 0 €

Schedule R (Form 990) 2011

TEEA5001 09/08/11

Direct controlling and by Predictions 12-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-]	related orga (c)		ed as a partner (e)	ilzations treated as a partnership during the tax year.) (d) (e) (e) (f) (f) (h) (h)	(ax year.)	(H)	e	2 6	*
n of Related Organizations Taxable as a Corporation or Trust (Complete if the organization ariswered Yes' to Form 990, Paralle of the organization or trust during the tax year.) (a) A Finary activity Legal Corporation or trust during the tax year.) (b) Primary activity Legal Corporation or trust during the tax year.) (c) Trust) Sport. (c) Trust Sport. (c)	Name, address, and Ein of Primary activity related organization	Legal domicile (state or foreign country)	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule (Form, 1063)	Genera manag partna	(k) Percentage ownership
axable as a Corporation or Trust (Complete if the organization answered Yes' to Form 990, Particular or trust during the ax year.) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	- 000						2	t office toods	Yes	
axable as a Corporation or Trust (Complete if the organization answered Yes' to Form 990, Part of organizations treated as a corporation or trust during the tax year.) The organizations treated (Complete if the organization answered Yes' to Form 990, Part (Complete if the organizations treated as a corporation or trust (Complete if the organizations treated in the organizations treated in the organization or trust (Complete if the organization answered Yes' to Form 990, Part (Complete if the organizations treated in the organization or trust (Complete if the organization answered Yes' to Form 990, Part (Complete if the organization or trust (Complete ii the organization o		,	the second							
axable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Paradorganizations treated as a corporation or trust during the tax year.) Primary activity Legal (conniction of trust) (conn. Soop. Soop.) Share of total income sassets of trust) (conn. Soop. Soop.)										
axable as a Corporation or Trust (Complete if the organization answered Yes' to Form 990, Pau organizations treated as a corporation or trust during the tax year.) Primary activity, Legal dornicile or foreign controlling entity (Coop., Soop., contrust) Corfust) Share of total income sasets assets										
axable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Pal compositions treated as a corporation or trust during the tax year.) (b) (c) (c) (d) (d) (d) (e) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d									,,,,,,	
axable as a Corporation or Trust (Complete if the organization answered Yes' to Form 990, Part of organizations treated as a corporation or trust during the tax year.) (b) (c) (d) Type of entity (state or foreign controlling entity (Coop. Scorp. Coop.) (c) (d) Type of entity (state or foreign controlling entity (Coop. Scorp.) (c) (d) Type of entity (Coop. Scorp.)										
axable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Paled organizations treated as a corporation or trust during the tax year.) (b) (c) (d) (d) (d) (d) (d) (e) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	I									
axable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Para organizations treated as a corporation or trust during the tax year.) (b) Primary activity Legal domicile Direct (State or fresign controlling entity (Coops of entity) or trust) (c) Type (P) Ty	<u> </u>		•		-		-			
Primary activity (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	tification of Related Org 34 because it had one o	anizations more relat	Taxable as a Ced organization	crporation or or rested as a	Trust (Complete corporation or t	if the organiz	ation answer	ed 'Yes' to Fo	ım 990, Pa	ñ ≷,
(State or foreign controlling entity (Corp. Source) and intome assets country) or trust) or trust)	(a) ddress, and EIN of related orga	nization	(b) Primary activity	(c) V Legal domicile	(a) Direct	Two of entity	(C)	č	(ā)	Ξ
	A STATE OF THE STA				ontroiling entity	(C corp. S corp. or trust)			f end-of-year ssets	Percentage ownership
		1								
										
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Page 4

Schedule R (Form 990) 2011 ACLIT of Arrigona

াচরাম্প্র্যাঞ্জ Unrelated Organizations Taxable as a Partnership (Complete if the organization answered Yes' to 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.

(3)	3	100 H 10	4		to elect of the or					
Name, address, and EIN of entity	Primary activity	Legal (contoile (state or foreign country)	Predominant income (related, unre-	(e) Are all partners section 501(c)(3) organizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Dispropor- fionate allocations?	Code V-UBI amount in box 20 of Schedule	General or managing partner?	Percentage ownership
			Section 512-514)		 ,			Form (1065)		
				\$			Yes No		Yes No	
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(4)										
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٠.	Schedule R (Form 990) 2011 ACLU of Arizona	86-0205157	Page !
	PartVIII Supplemental Information		
	Complete this part to provide additional information for responses to question (see instructions).	is on Schedule R	_
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В	SAA TEEA5005 05/25/11	Schedule R (Form 99	0) 2011

ARIZONA FORM Arizona Exempt Organization Annual Information Return 2011

99

For the D calendar year 2011 or M fiscal year beginning 10,410, 1(2,0, 1, 1) and ending 10,3(3, 1)2,0,1,2).

CHE	ECK ONE:		Please	Name ACLU of Arizona						Em	Employer Identification number (EIN)		
Original 🔀	Amer	nded 🔲	Турф	Number and street or PO Box							86-0205157		
Business telephone number			or	PO Box 17148						AZ	AZ transaction privilege tex number		
			Print	City or town, state	and ZIP code								
(602) 650-	854			Phoenix			AZ	850	11				
68 Cho	ck bo	ox lf: 🔲	This is a	first return 🔲 Nan	1e change [∃ Ac	idress change	;	CHECK			n filed under ext	***
A Date Arizona operations began <u>09/12/1968</u>						82	3·mos. F 82 C		6-mos. AZ - Fe 82 F 🔀	₿ď			
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Atta	ch a c	copy of th	e organiz	ation's federal retu	rn.								
Sources	1		sales or re	ceipls from busines	s activities	1		00					
of	2		_	ods sold or of operat									
Income				statement		2	ļ	00	4		ĺ		
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Administrative		Compac	neallon of	d lines 3 through 11 . officers, directors, tr	telege eta		*********************	13	***************************************	n.	12	<u> </u>	00
Expenses	14			es – other than emou				}	 -	00	⊣		
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	16	Taves	***********	, 4. * 4. * 4. * 4. * 4. * 4. * 4. * 4.						00	┥		
	17	Rent ex	nense.		U T			. 17		01	-1		
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	19			onses - alla nitemi					T	00			
	20			dd lines Ci hrough					•d		20	1	00
Disbursements	21	Dues, as	sessmen	ls, etc. affiliated o	orporations			. 21	1	00		· I	
From Current	22			, grants, etc., paid						00	4		
Income for the	23			o or for members or				. 1=:-			3		
Organization's		•	•	s, hospitalization, dis	-			238	1	00]		
Exempt				**************						00	1		
Purposes	24	Dividend:	s and othe	r distributions to men	bers, shareho	ders,	, or depositors	24		00	1		
	25	Other	***********					25		00	1		
	26	Total - ad	id lines 21	through 26	***************		<u>1-9,221) ((60)</u> 4984888842	-1541414141			26		00
Disbursements	27			s, etc., to affiliated o						00			
From Principal	28	Contribut	ions, gifts	, grants, etc., pald	•••••			28		00			
for the	29	Benefit p	ayments f	o or for members or	their depende	enis:							
Organization's		a, Death	, sickness	, hospitalization, dis	ability, or pena	sion b	eneliks	29a		00			
Exempt		b. Other	benefits		, , , , , , , , , , , , , , , , ,		***************************************	29b		00			
Purposes	30	Dividends	and other	distributions to mem	bers, sharehol	ders,	or depositors			00			
	31							31	<u> </u>	00			·
	32			through 31							32		00
Other	33			ls not itemized abov							33		00
	34			ome in current year			•				34		00
of Income	35			ome at beginning of	•					3	35		00
Daniel :	36			ome at end of year -							36		00
Penalty	37			g or incomplete filing							37		00]
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AZ Éc	onn 99 (2011) Name: ACLU of Arizona	·		EIN: 86-020	5157	Page 2 of 2
Sch	edule A - Balance Shoot					
NO	E: Amounts used in attached schedules and in this colu	nn should be end ol	year amounts.	(a) Beginning of year		(b) End of year
	Assets					
A1	Cash			J _n	0 A1	00
	Accounts receivable		00			
,	b Less: allowance for doubtful accounts		00			
	c Line A2a less line A2b. Enter difference in co			8	0 A2c	00
A3a	Other notes and loans receivable - attach schedule		00	······································	ـــاستونيتايـــ	
	b Less: allowance for doubtful accounts,	A3b	00			
	a Line A3a less tine A3b. Enter difference in co	lumn (b)	.,,	0) A3c	00
A4	Inventories	************	*****	01) A4	00
A5	Investments (securities) - attach schedule			00) A5	00
A 6	Investments (other) - attach schedule		**************	0	A6	og
A7a	I, and, buildings, and equipment; basis	A7a	00			
	b Less: accumulated depredation - attach schedule	. A7b	00	A		
	c Line A7a less line A7b. Enter difference in col	uma (b)		00	A7c	
8 A	Other assets - describe				A8	00
A9	Total assets - add fines A1 through A8			00	A9	00
	Liabilities			00 00 00 00		
				1/10	 _	
A10	Accounts payable and accrued expenses			00	A10	00
	Mortgages and other notes payable - attach sci		<u>لكو</u>	00	A11	00
	Other liabilities - describe		······	00	A12	00
A13	Total liabilities - add lines A10 through A12	.,,	······································	1 00	A13	00
	Net Assets		70/A	******		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(ے ا			
A14	Capital stock or trust principal		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	00	A14	00
	Paid-in or capital surplus			00	A15	00
	Retained earnings or accumulated income				A16	00
A17	Total net assets - add lines A14 through A16.			00	A17	00
			 		1)	
A18	Total liabilities and not assets - add line	and A17			A18	00
Certifi	ication Under penalties of perjury, I declar	e that I have ex	amined this rete	urn, including accompany	ina sche	edules and statements.
~ vi (ii)	and to the best of my knowledge a	and belief, it is	a true, correct a	and complete return, mad	le in god	od faith, for the taxable
	year stated pursuant to the income	tax laws of th	e State of Arizo	na.	_	
Please	Touch	Aran		19-14-1	≥	P
Sign F	lere MANUTO CANA	Vacc.				TRESIDENT
	Officer's signature			Date Title	9	
Paid	. P. D. P.			. 1		
Prepar	er's Juic B. Jumh	rod C	PA	1 <i>2/13/13</i> P	015/	22505
Use O		vous ci	<u> </u>	Date Pre	parer's E	IN, PTIN or SSN
vad VI				•	•	•
	Lumbard & Associates, PLLC		······································		<u>-15481</u>	
	Firm's name (or preparer's, if self-employ	red)		Flm	rs EXIE	EN or □ssN
	4143 North 12th Street			85014 (60	2) 274-9	966
	Firm's address					one number
				•	•	