Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public.

Department of the Treasury ► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2020 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: Address change STATE BAR OF ARIZONA Name change 86-6000294 Doing business as Initial return E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite Final return/ termin-ated 4201 N 24TH STREET 100 602-340-7392 19,466,808. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended return PHOENIX, AZ 85016-6266 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: KATHY GERHART for subordinates? Yes X No SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: 501(c)(3) X 501(c) (527) ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.AZBAR.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1933 M State of legal domicile: AZ Part I Summary Briefly describe the organization's mission or most significant activities: REGULATES ACTIVE ATTORNEYS IN AZ Governance & PROVIDES EDUCATION/DEVELOPMENT FOR THE LEGAL PROFESSION & PUBLIC if the organization discontinued its operations or disposed of more than 25% of its net assets. 26 Number of voting members of the governing body (Part VI, line 1a) 26 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 Activities & 117 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 1760 Total number of volunteers (estimate if necessary) 6 1,203,346. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 75,617. 7h **Prior Year Current Year** 0. Contributions and grants (Part VIII, line 1h) 8 Revenue 16,892,977. 15,796,042. Program service revenue (Part VIII, line 2g) 107,207, 47,419. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 651,958 728,768. 11 17,652,142 16,572,229. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 511,180 225,459. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 9,887,801. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 9,677,767. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 6,644,295. 5,479,572. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 16,833,242. 15,592,832. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 818,900. 979,397. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 21,378,282. 23,202,954. Total assets (Part X, line 16) 4,607,130. 5,452,405. 21 Total liabilities (Part X, line 26) 三年 16,771,152. 17,750,549. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign KATHY GERHART, CHIEF FINANCIAL OFFICER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature AMY A. O'LOUGHLIN 11/16/21 P00869687 Paid self-employed Firm's name CBIZ MHM, LLC 34-1884125 Preparer Firm's EIN ▶ Firm's address 4722 N 24TH ST, STE 300 Use Only Phone no.602-264-6835 PHOENIX, AZ 85016

No

X Yes

May the IRS discuss this return with the preparer shown above? See instructions

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Pai	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	THE STATE BAR OF ARIZONA IS A PRIVATE/NON-PROFIT ORGANIZATION THAT	
	EXISTS TO SERVE AND PROTECT THE PUBLIC WITH RESPECT TO THE PROVISION	
	OF LEGAL SERVICES AND ACCESS TO JUSTICE. CONSISTENT WITH THESE GOALS,	
	THE STATE BAR OF ARIZONA SEEKS TO IMPROVE THE (CONTINUED ON SCH O)	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_		Yes X No
	prior Form 990 or 990-EZ? If "Yes." describe these new services on Schedule O.	162 [NO
2		Vaa 🗆 Na
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes No
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper	nses, and
	revenue, if any, for each program service reported.	
4a)
	REGULATORY - PURSUANT TO RULE 32 OF THE SUPREME COURT OF ARIZONA, THE	
	STATE BAR OF ARIZONA ASSISTS THE COURT WITH THE REGULATION AND	
	DISCIPLINE OF PERSONS ENGAGED IN THE PRACTICE OF LAW. THE STATE BAR	
	RECEIVES, SCREENS, AND INVESTIGATES COMPLAINTS AGAINST ATTORNEYS, WHICH	
	MAY BE DISMISSED, REQUIRE REMEDIAL ACTION OR LEAD TO MORE FORMAL	
	PROCEEDINGS RESULTING IN VARIOUS FORMS OF DISCIPLINE.	
	(0)	
4b	(Code:) (Expenses \$)
	STATE BAR IS CHARGED WITH ENSURING THE COMPETENCY OF LAWYERS.	
	CONSISTENT WITH RULE 44, LEGAL SPECIALIZATION, THE STATE BAR	
	ADMINISTERS A PROGRAM THROUGH THE BOARD OF LEGAL SPECIALIZATION IN	
	ORDER TO IMPROVE THE QUALITY OF LEGAL SERVICES. ADDITIONALLY, IN	
	ACCORDANCE WITH RULE 45, MANDATORY CONTINUING LEGAL EDUCATION, THE	
	STATE BAR ENSURES ACTIVE MEMBERS COMPLETE REQUIRED CONTINUING LEGAL	
	EDUCATION ON AN ANNUAL BASIS. THE STATE BAR ALSO ASSISTS IN PROCESSING	
	PRO HAC VICE ADMISSIONS UNDER RULE 39 AND PROCESSES IN HOUSE COUNSEL	
	REGISTRATIONS UNDER RULE 38.	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$))
	PROFESSIONAL DEVELOPMENT - PURSUANT TO RULE 32 OF THE SUPREME COURT OF	
	ARIZONA, THE STATE BAR IS TO CONDUCT EDUCATIONAL PROGRAMS REGARDING	
	SUBSTANTIVE LAW, BEST PRACTICES, PROCEDURE AND ETHICS AND PROVIDE	
	FORUMS FOR DISCUSSION REGARDING THE ADMINISTRATION OF JUSTICE AND	
	PRACTICE OF LAW. THE STATE BAR IS ALSO RESPONSIBLE FOR FOSTERING IDEALS	
	OF INTEGRITY, LEARNING, COMPETENCE, AND PUBLIC SERVICE AMONG ATTORNEYS	
	AND SERVE THE PROFESSIONAL NEEDS OF ITS MEMBERS. THE STATE BAR FOSTERS	
	PROFESSIONAL DEVELOPMENT OF ATTORNEYS THROUGH OPPORTUNITIES TO SERVE ON	
	ADVISORY GROUPS, COMMITTEES, SECTIONS, AND TASK FORCES, AND BY	
	PROVIDING CONTINUING LEGAL EDUCATION, PRACTICE MANAGEMENT ASSISTANCE,	
	LEGAL RESOURCES AND VARIOUS OTHER MEMBER SERVICES.	
	Other program conjuga (Deceribe on Schodule O.)	
40	Other program services (Describe on Schedule O.)	
4-	(Expenses \$ including grants of \$) (Revenue \$)	
40	Total program service expenses	Form 990 (2020)
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Form 990 (2020) STATE BAR OF ARIZONA Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
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		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	٣		\vdash
U		_		x
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	l _		
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
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		x
٨	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	110		
u		11d		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX		Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	\vdash
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	١	v	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			l
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes."	_ 		
	,	19		x
20a	complete Schedule G, Part III	20a		X
	• •			
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		\vdash
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	۱.,	v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

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Form 990 (2020) STATE BAR OF ARIZONA Part IV Checklist of Required Schedules (continued)

	· (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		res	No
~~	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		—
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) 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		
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	OEL		
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		
26	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
		26		х
27	controlled entity or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part II</i> Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			l
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		v	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		х
35.5	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	JJa		
5	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			لل
			Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 37 Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
b	Enter the number of Forms w-2d included in line 1a. Enter 10-11 not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.	Х	
	(gambling) winnings to prize winners?	1c	Λ	

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

				Yes	No
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 117			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced in the Financi	counts (FBAR).			
5a			5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			v	
	any contributions that were not tax deductible as charitable contributions?		6a	Х	-
b	If "Yes," did the organization include with every solicitation an express statement that such contribution are expressed to the distribution of the state of the			х	
7	were not tax deductible?		6b	Λ	
7	Organizations that may receive deductible contributions under section 170(c).	issa provided to the pover?	7.		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a 7b		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	e required	10		
·	to file Form 8282?	•	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	\ <u>'</u>		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	•	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	 			
а		11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40-		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the				
D	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
	Did the second of the second o	100	14a		х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		x
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		х
	If "Yes," complete Form 4720, Schedule O.				
				200	

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year 26									
	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 on Schedule O.									
b	Enter the number of voting members included on 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	х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
Ū	of officers, directors, trustees, or key employees to a management company or other person?	3		х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		х						
5										
6		5 6	Х	Х						
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	0								
7a		7-	х							
	more members of the governing body?	7a	Λ							
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or		х							
_	persons other than the governing body?	7b	Λ							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	_	77							
a	The governing body?	8a	X							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
<u> </u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
	Did the organization have local chapters, branches, or affiliates?	10a		Х						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
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	Х							
b	Other officers or key employees of the organization	15b	Х							
	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		Х						
b	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								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶ NONE									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s	only)	availal	ble						
	for public inspection. Indicate how you made these available. Check all that apply									
	X Own website Another's website X Upon request Other (explain on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records									
	KATHY L. GERHART, CFO - 602-340-7392									
	4201 N 24TH STREET, NO. 100, PHOENIX, AZ 85016-6266									

Form 990 (2020) STATE BAR OF ARIZONA 86-6000294 Page **7**

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

Check if Schedule O contains a response or note to any line in this Part VII

X

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

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

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

• List all of the organization's **former 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.

See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	box	not c , unle: cer ar	heck i	ition more rson is	than o	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director Institutional trustee Officer Key employee		Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations		
(1) JOEL F ENGLAND	55.00									
CEO/EXEC DIRECTOR	1.00			Х				183,566.	0.	37,060.
(2) MARET VESSELLA	50.00	-						450 400		
CHIEF BAR COUNSEL/DEPUTY E	2.00			Х				178,108.	0.	23,393.
(3) ELIZABETH H. DEANE	50.00	-				,,		152 761	_	22 725
CHIEF MEMBER SERVICES OFFI	3.00					Х		153,761.	0.	22,725.
(4) KATHY L. GERHART CFO	55.00 4.00	-		х				142 052	0.	21 060
(5) AMY REHM	50.00			^				142,952.	0.	31,060.
DEPUTY CHIEF BAR COUNSEL	5.00	-				x		150,599.	0.	21 629
(6) LORI MAXWELL	50.00					_		130,333.	0.	21,629.
CHIEF INFORMATION OFFICER	6.00	-				x		141,820.	0.	27,442.
(7) LISA PANAHI	50.00							111,020.	· ·	27,112.
GENERAL COUNSEL	7.00	1				x		126,556.	0.	38,981.
(8) LISA FONTES	50.00									
ADVERTISING SALES MANAGER	8.00					x		143,592.	0.	9,660.
(9) DENIS M FITZGIBBONS	7.50							,		
PRESIDENT		х		х				0.	0.	0.
(10) JENNIFER R REBHOLZ	7.50									
PRESIDENT-ELECT		х		х				0.	0.	0.
(11) JESSICA S SANCHEZ	7.50									
VICE PRESIDENT		х		х				0.	0.	0.
(12) BENJAMIN P. TAYLOR, II	7.50									
SECRETARY-TREASURER		Х		Х				0.	0.	0.
(13) SANDRA BENSLEY	5.00									
DISTRICT GOVERNOR		Х						0.	0.	0.
(14) JENA DECKER-XU	5.00									
YLD DIVISION PRESIDENT		Х						0.	0.	0.
(15) HECTOR FIGUEROA	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
(16) SHARON A FLACK	5.00	1								
ELECTED GOVERNOR		Х						0.	0.	0.
(17) MARK HARRISON	5.00	1								
ELECTED GOVERNOR		Х						0.	0.	0. Earm 990 (2020)

Form 990 (2020) STATE BAR OF ARIZONA 86-6000294 Page 8

FORM 990 (2020)	K OI IMIZONII								00 000023	Taye •
Part VII Section A. Officers, Directors,	Trustees, Key Emp	oloy	ees,	anc	l Hi	ghes	st C	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unles cer an	ss per	more son i	than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(18) KELSI TAYLOR LANE	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
(19) LETICIA MARQUEZ	5.00									
ELECTED GOVERNOR	5.00	Х						0.	0.	0.
(20) ROBERT J MCWHIRTER ELECTED GOVERNOR	5.00	х						0.	0.	0.
(21) JOHN W MOODY	5.00									
DISTRICT GOVERNOR		х						0.	0.	0.
(22) DAVID B ROSENBAUM	5.00									
DISTRICT GOVERNOR		х						0.	0.	0.
(23) ERIC M. RUCHENSKY	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
(24) D CHRISTOPHER RUSSELL	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
(25) SAMUEL J SAKS	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
(26) TED SCHMIDT	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
1b Subtotal								1,220,954.	0.	211,950.
c Total from continuation sheets to P	art VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)	·····		<u></u>				_	1,220,954.	0.	211,950.
2 Total number of individuals (including	but not limited to th	റടേ	liste	d ah	OVE) wh	o re	ceived more than \$100	000 of reportable	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

Yes No

3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

5 X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
INREACH, 5301 SOUTHWEST PARKWAY, STE 160,	CONTINUING PROF LEGAL	
AUSTIN, TX 78735	EDUCATION WEBSITE	357,580.
PACIFIC OFFICE AUTOMATION, 14747 NW		
GREENBRIER PARKWAY, BEAVERTON, OR 97006	OFFICE SERVICES/COPIER MAINT	141,188.
BONNETT FAIRBOURN FRIEDMAN & BALINT PC,		
2325 E CAMELBACK RD STE 300, PHOENIX, AZ	LEGAL SERVICES	116,188.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization > 3

SEE PART VII, SECTION A CONTINUATION SHEETS

STATE BAR OF ARIZONA 86-6000294 Form 990

Form 990 STATE BAR OF	ARIZONA								86-60002	294
Part VII Section A. Officers, Directors, Tr	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)									
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition	1		Reportable	Reportable	Estimated
	hours	(cl	(check all that apply)				ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_)yee		the	organizations	compensation
	(list any	recto				em plo		organization	(W-2/1099-MISC)	from the
	hours for	ordirector	9.0			sated		(W-2/1099-MISC)		organization
	related organizations	rustee	l trus		ee	npen				and related organizations
	below	Individual trustee	rtiona	L	nploy	stcor	-			Organizations
	line)	Indivi	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JIMMIE DEE SMITH	5.00									
ELECTED GOVERNOR		х						0.	0.	0.
(28) ROBYN M AUSTIN	5.00									
PUBLIC GOVERNOR		Х						0.	0.	0.
(29) JOHN W GORDON	5.00									
PUBLIC GOVERNOR		х						0.	0.	0.
(30) JONATHAN MARTONE	5.00									
PUBLIC GOVERNOR		Х						0.	0.	0.
(31) ANNA C THOMASSON	5.00									
PUBLIC GOVERNOR		Х						0.	0.	0.
(32) DAVID K BYERS	5.00									
AT-LARGE GOVERNOR		Х						0.	0.	0.
(33) LORI A HIGUERA	5.00									
AT-LARGE GOVERNOR		Х						0.	0.	0.
(34) DOREEN MCPAUL	5.00									
AT-LARGE GOVERNOR		Х						0.	0.	0.
(35) BRIAN Y FURUYA (THRU 6/2020)	7.50									
PRESIDENT		Х		Х				0.	0.	0.
(36) AMANDA SALVIONE (THRU 6/2020)	5.00									
YLD DIVISION PRESIDENT		Х						0.	0.	0.
(37) DEE-DEE SAMET (THRU 6/2020)	5.00									
ELECTED GOVERNOR		Х						0.	0.	0.
(38) SARA A SIESCO (THRU 6/2020)	5.00							_	_	_
ELECTED GOVERNOR	-	Х						0.	0.	0.
	+									
	+									
	+									
		•								
		1								
		1								
		L		L	L		L			
Total to Part VII, Section A, line 1c	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u>	<u></u> .	<u> </u>		
									-	

86-6000294

Form 990 (2020) STATE BAR (Part VIII Statement of Revenue

		Check if Schedule O cor	ntains a response o	or note to any lin	e in this Part VIII			
					(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
						iunction revenue	business revenue	sections 512 - 514
SΩ	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues						
2 5		Fundraising events						
fts,								
ig ig								
Sir		Government grants (contribu						
utio	T	All other contributions, gifts, gra						
들 된		similar amounts not included ab						
o d		Noncash contributions included in line						
<u>0</u> <u>e</u>	h	Total. Add lines 1a-1f						
				Business Code	10.000.000	10.000.000		
S	2 a			900099	10,983,223.	10,983,223.		
Program Service Revenue	b	PROFESSIONAL DEVELOPME		900099	3,490,512.	2,389,274.	1,101,238.	
	С			541800	571,777.	571,777.		
ran ev	d			900099	435,952.	435,952.		
Бо	е	REGULATORY	900099	267,803.	267,803.			
4	f	All other program service rev	900099	46,775.	46,775.			
	g	Total. Add lines 2a-2f		>	15,796,042.			
	3	Investment income (includin	g dividends, intere	st, and				
		other similar amounts)			45,455.			45,455.
	4	Income from investment of t						
	5	Royalties			143,901.	41,793.	102,108.	
		ĺ	(i) Real	(ii) Personal				
	6 a	Gross rents 6	500,980.					
			b 27,600.					
			6c 473,380.					
		Net rental income or (loss)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		473,380.			473,380.
		Gross amount from sales of	(i) Securities	(ii) Other	,			,
	, a		a 2,868,943.	(4) 2				
	h	Less: cost or other basis	<u>a</u> =,,					
a l	b		b 2,866,979.					
ther Revenue	_		c 1,964.					
eve		· /	•		1,964.			1,964.
ت ح		Net gain or (loss)			1,301.			1,301.
ŧ.	8 а	Gross income from fundraising						
0		including \$						
		contributions reported on lin	, l					
		Part IV, line 18						
		Less: direct expenses						
		Net income or (loss) from fur		D				
	9 a	Gross income from gaming						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from ga	-	<u> </u>				
	10 a	Gross sales of inventory, les	s returns					
		and allowances 10a						
	b	Less: cost of goods sold	10b					
	С	Net income or (loss) from sa	les of inventory	>				
, [Business Code				
Miscellaneous Revenue	11 a	MISCELLANEOUS		900099	111,487.			111,487.
ane interes	b							
eve	С	:						
isc B	d	All other revenue						
2	е	Total. Add lines 11a-11d		>	111,487.			
	12	Total revenue. See instructions		>	16,572,229.	14,736,597.	1,203,346.	632,286.

032009 12-23-20

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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).

	Check if Schedule O contains a respons of include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to domestic organizations		одропооз	general expenses	одрогиосо
	and demostic governments. Can Dort IV line 01	116,666.			
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	108,793.			
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	596,139.			
	Compensation not included above to disqualified	7 - 11 - 1			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
	Other salaries and wages	7,433,988.			
	Pension plan accruals and contributions (include	, 200, 500,			
	section 401(k) and 403(b) employer contributions)	516,422.			
	Other employee benefits	764,440.			
		576,812.			
	Payroll taxes	3,3,012.			
_	Fees for services (nonemployees):				
	Management	89,761.			
	Legal	43,200.			
	Accounting	8,400.			
	Lobbying	0,400.			
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25,	01/ 180			
	column (A) amount, list line 11g expenses on Sch 0.)	914,189.			
	Advertising and promotion	6,395.			
	Office expenses	712,718. 863,900.			
	Information technology	803,900.			
	Royalties	606 071			
	Occupancy	686,971.			
	Travel	17,858.			
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	674 000			
	Conferences, conventions, and meetings	674,088.			
	Interest	٥.			
	Payments to affiliates	700 275			
	Depreciation, depletion, and amortization	788,275.			
	Insurance	108,750.			
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
	BANK/CREDIT CARD FEES	372,102.			
_	MEMBER RESEARCH TOOL	80,004.			
c	TRAINING AND DEVELOPMEN	71,240.			
	FEDERAL UBIT TAXES	2,120.			
-	All other expenses	39,595.			
	Total functional expenses. Add lines 1 through 24e	15,592,832.			
	Joint costs. Complete this line only if the organization	,2,2,			
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	oddoddonar odripargir and runuralonly obilotation.			1	

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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 4,049,063. 3,613,746. 1 Cash - non-interest-bearing 6,122,140. 8,110,283. 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 74,641. 67,997. Accounts receivable, net 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 52,684. 61,509. Inventories for sale or use 8 Prepaid expenses and deferred charges 558,401. 9 524,768. **10a** Land, buildings, and equipment: cost or other 18,721,242. basis. Complete Part VI of Schedule D ______ 10a 10,498,135. 9,891,779. b Less: accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 Intangible assets 14 14 497,555. 458,535. Other assets. See Part IV, line 11 15 15 21,378,282. 23,202,954. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 1,751,721. 1,600,213. Accounts payable and accrued expenses 17 17 18 18 Grants payable 2,442,416. 3,349,412. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 412,993. 25 502,780. of Schedule D 4,607,130. 5,452,405. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here 🕨 🗓 Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 16,771,152. 17,750,549. 27 Net assets without donor restrictions 27 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 16,771,152. 32 17,750,549. 32 21,378,282. 23,202,954. Total liabilities and net assets/fund balances 33 Form 990 (2020)

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_	rt XI Reconciliation of Net Assets				3-		
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,	572,	229.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,	592,	832.		
3	Revenue less expenses. Subtract line 2 from line 1	3		979,	397.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16,	771,	152.		
5	Net unrealized gains (losses) on investments	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	17,	750,	549.		
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	, , , ,		2b	X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	Separate basis						
С	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?		2c	X			
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	-					
	Act and OMB Circular A-133?		3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000			
			Form	990	(2020)		

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

Section 501(c)(4) (5) or (6) organizations: Complete Part III.

CCCLIC	11 00 1(0)(4), (0), 01 (0) 01ga1112at	iono. Compicto i art iii.			
Name of o	rganization			Emplo	oyer identification number
	STATE BAR (86-6000294
Part I-A	Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 org	ganization.
2 Politi		ation's direct and indirect politic ures gn activities			
Part I-E	Complete if the org	anization is exempt und	er section 501(c)(3).	
2 Enter3 If the4a Was	the amount of any excise tax organization incurred a sectio a correction made?	incurred by the organization und incurred by organization manag n 4955 tax, did it file Form 4720	ers under section 4955 for this year?		Yes No
b If "Ye	es," describe in Part IV.	anization is exempt und	er section 501(c)	except section 501(c)	1/3)
 Enter exem Total line 1 Did tl Enter made contri 	the amount of the filing organ apt function activities exempt function expenditures 7b ene filing organization file Form the names, addresses and ene payments. For each organization received that were professional processes and the payments of the professional filing organization file form the payments.	by the filing organization for se ization's funds contributed to ot	her organizations for se and on Form 1120-POL, N) of all section 527 pol d from the filing organiz a separate political orga	section 527 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Yes No the filing organization amount of political
•	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
		i	i	i	İ

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

032041 12-02-20

Par	t II-A Complete if the org section 501(h)).	anizatio	n is exer	npt under sectior	1 501(c)(3) and file	d Form 5768 (ele	ection under
A CI	neck if the filing organiza	tion belon	gs to an affi	liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and shar	e of exces	s lobbying (expenditures).			
B C	neck 🕨 🔲 if the filing organiza	tion check	ed box A ar	nd "limited control" pro	visions apply.		_
			oying Expe eans amou	nditures ınts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influ	ience publ	ic opinion (grassroots lobbying)			
b	Total lobbying expenditures to influ	ience a leg	islative boo	dy (direct lobbying)			
С	Total lobbying expenditures (add li	nes 1a and	d 1b)				
d	Other exempt purpose expenditure	es					
е	Total exempt purpose expenditure	s (add line	s 1c and 1d)			
f	Lobbying nontaxable amount. Ente	r the amo	unt from the	e following table in both	n columns.		
	If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:		
	Not over \$500,000		20% of	the amount on line 1e.			
	Over \$500,000 but not over \$1,000	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	00,000	\$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,	000,000	\$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
	Over \$17,000,000		\$1,000,	000.			
g	Grassroots nontaxable amount (en	ter 25% of	line 1f)				
h	Subtract line 1g from line 1a. If zero	o or less, e	nter -0				
	Subtract line 1f from line 1c. If zero						
j	If there is an amount other than zer	ro on eithe	r line 1h or	line 1i, did the organiza	ation file Form 4720	ŗ	
	reporting section 4911 tax for this	year?					Yes No
	(Some organizations th		a section 5	eraging Period Under 01(h) election do not l ate instructions for lir	nave to complete all o	of the five columns be	elow.
		Lobi	ying Expe	nditures During 4-Yea	r Averaging Period		
	Calendar year (or fiscal year beginning in)	(a)	2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
	Lobbying nontaxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
c	Total lobbying expenditures						
	Grassroots nontaxable amount						
	Grassroots ceiling amount (150% of line 2d, column (e))						
f	Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2020

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

of the	"Yes" response on lines 1a through 1i below, provide in Part IV a detailed description (a)		<u>, </u>	(b)	
	lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
1	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
a '	Volunteers?			_	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
-	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section	501/0\/5) or co	otion	
	501(c)(6).	1 30 1 (0)(3	, or se	GUOII	
Part				1	No
Part				Vac	
				Yes	
1 '	Were substantially all (90% or more) dues received nondeductible by members?			Yes	х
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "	e prior year? 1 501(c)(5), or se	ction	X X X
1 ' 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes."	e prior year? n 501(c)(5	3), or se b) Part	ction III-A, line	x x x 3, is
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members	e prior year? 1 501(c)(5 'No" OR (3), or se b) Part	ction III-A, line	x x x 3, is
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior year? 1 501(c)(5 'No" OR (3), or se b) Part	ction III-A, line	x x x 3, is
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior year? 1 501(c)(5 No" OR (2 3), or se b) Part	ction III-A, line	x x x 3, is
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year	e prior year? 1 501(c)(5 No" OR (2 3), or se b) Part	ction III-A, line	X X
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? n 501(c)(5 lNo" OR (2 3), or se b) Part	ction III-A, line	x x x 3, is
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year	e prior year? n 501(c)(5 lNo" OR (2 3), or se b) Part 1 2a 2b 2c	ction III-A, line	X X X 3, is 505,424 8,400
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior year? 1 501(c)(5 No" OR (2 3), or se b) Part 1 2a 2b 2c	ction III-A, line	X X X 3, is 505,424 8,400
2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? 1 501(c)(5 No" OR (2 3), or se b) Part 1 2a 2b 2c	ction III-A, line	X X X 3, is 505,424 8,400
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceed the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible lobbying and political carryover to the reasonable estimate of nondeductible l	e prior year? 1 501(c)(5 No" OR (2 3), or se b) Part 1 2a 2b 2c 3	ction III-A, line	X X X 3, is 505,424 8,400
1 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	e prior year? 1 501(c)(5 No" OR (2 3), or se b) Part 1 2a 2b 2c 3	ction III-A, line	x x x 3, is

Schedule C (Form 990 or 990-EZ) 2020

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

STATE BAR OF ARIZONA

Employer identification number $86\!-\!6000294$

Par	t I Organizations Maintaining Donor Advised Fund	s or Other S	imilar Funds or A	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.			
	(,	a) Donor advise	d funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in writing the	at the assets he	ld in donor advised fu	nds
	are the organization's property, subject to the organization's exclusive	legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in	n writing that gra	ant funds can be used	only
	for charitable purposes and not for the benefit of the donor or donor a	dvisor, or for an	y other purpose confe	erring
	impermissible private benefit?			
Par	Complete in the organization		s" on Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization (check		7	
	Preservation of land for public use (for example, recreation or ec	ducation)	7	storically important land area
	Protection of natural habitat		Preservation of a ce	rtified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contrib	ution in the form of a	
	day of the tax year.			Held at the End of the Tax Year
	Total number of conservation easements			
b				
C	Number of conservation easements on a certified historic structure inc			2c
d	Number of conservation easements included in (c) acquired after 7/25.			
•	listed in the National Register			2d
3	Number of conservation easements modified, transferred, released, ex	ttinguisnea, or t	erminated by the orga	inization during the tax
4	year	located •		
4 5	Number of states where property subject to conservation easement is Does the organization have a written policy regarding the periodic more		ion handling of	
3	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling		d enforcing conserva	
Ū	b	or violations, ar	a cincioning consciva	non casements daring the year
7	Amount of expenses incurred in monitoring, inspecting, handling of vio	olations, and en	forcing conservation e	easements during the year
-	▶ \$		ioromig contour ramon i	accome caming and year
8	Does each conservation easement reported on line 2(d) above satisfy	the requirement	s of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation easem			
	balance sheet, and include, if applicable, the text of the footnote to the	e organization's	financial statements	that describes the
	organization's accounting for conservation easements.			
Par	t III Organizations Maintaining Collections of Art, Hi	istorical Tre	asures, or Other	Similar Assets.
	Complete if the organization answered "Yes" on Form 990, Par	t IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958, not to	report in its reve	enue statement and b	alance sheet works
	of art, historical treasures, or other similar assets held for public exhibit	ition, education,	or research in further	ance of public
	service, provide in Part XIII the text of the footnote to its financial state	ements that des	cribes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to repo	ort in its revenue	statement and balan	ce sheet works of
	art, historical treasures, or other similar assets held for public exhibition	n, education, o	research in furtheran	ce of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			
	(ii) Assets included in Form 990, Part X			
2	If the organization received or held works of art, historical treasures, or	r other similar a	ssets for financial gair	ı, provide
	the following amounts required to be reported under FASB ASC 958 re	-		
а	Revenue included on Form 990, Part VIII, line 1			_
	Assets included in Form 990, Part X			
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form	n 990.		Schedule D (Form 990) 2020

9,891,779. Schedule D (Form 990) 2020

172,828.

322,135.

1,883,137,

1,321,452,

e Other

d Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X, column (B), line 10c.)

2,055,965.

1,643,587.

Part VII Investments - Other Securities.			J
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-c	f-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(G)			
(H)			
Part VIII Investments - Program Related.			
	F 000 David IV line	11a Cas Farms 000 Bart V line 10	
Complete if the organization answered "Yes" (a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-c	of-vear market value
	(b) Book value	(c) Wellied of Valuation. Cost of Charle	your market value
		<u> </u>	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶ Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
<u>(1)</u>			
(2)			
(3)			
(4)			
(5)			
(6)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.			
Complete if the organization answered "Yes" (a) Description of liability	on Form 990, Part IV, line	e 11e or 11t. See Form 990, Part X, line 25.	(b) Rook value
			(b) Book value
(1) Federal income taxes (2) TENANT SECURITY DEPOSIT			22 162
<u>(=)</u>			33,162.
(3) DEFERRED COMPENSATION OBLIGATIONS			469,618.
(5) (C)			
<u>(6)</u>			
(7)			
(8)			
(9)	- 05)		502,780.
 Total. (Column (b) must equal Form 990, Part X, col. (B) line Liability for uncertain tax positions. In Part XIII, provide 			· · · · · · · · · · · · · · · · · · ·

Schedule D (Form 990) 2020

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D	(Form 990) 2020	STATE BAR OF ARIZONA				86-600029	4 Page 4
Part XI	Reconciliation of	f Revenue per Audited Fi	inancial Statement	s With Re	evenue per Ret	turn.	
	Complete if the organi	zation answered "Yes" on Form	990, Part IV, line 12a.				
1 Total	revenue, gains, and oth	er support per audited financial	statements			1	16,565,245.
2 Amou	unts included on line 1 b	out not on Form 990, Part VIII, lin	ne 12:				
a Net u	nrealized gains (losses)	on investments		2a			
		facilities		2b			
		ts		2c			
	(Describe in Part XIII.)			2d	27,600.		
e Add l	ines 2a through 2d					2e	27,600.
3 Subtr	act line 2e from line 1					3	16,537,645.
		90, Part VIII, line 12, but not on					
a Inves	tment expenses not incl	uded on Form 990, Part VIII, line	e 7b	4a			
b Other	(Describe in Part XIII.)			4b	34,584.		
						4c	34,584.
5 Total	revenue. Add lines 3 an	nd 4c. (This must equal Form 990). Part I. line 12.)				16,572,229.
Part XII	Reconciliation of	Expenses per Audited F	inancial Statemen	its With E	xpenses per R	leturn.	_
	Complete if the organi	ization answered "Yes" on Form	990, Part IV, line 12a.				
1 Total	expenses and losses pe	er audited financial statements				1	15,585,848.
2 Amou	unts included on line 1 b	out not on Form 990, Part IX, line	25:				
a Dona	ted services and use of	facilities		2a			
				2b			
				2c			
d Other				2d	27,600.		
e Add I	ines 2a through 2d					2e	27,600.
3 Subtr						3	15,558,248.
		90, Part IX, line 25, but not on lir					_
a Inves	tment expenses not incl	uded on Form 990, Part VIII, line	e 7b	4a			
				4b	34,584.		
						4c	34,584.
		and 4c. (This must equal Form 99					15,592,832.
Part XIII	Supplemental In	ormation.	<u> </u>			•	
Provide the	descriptions required for	or Part II, lines 3, 5, and 9; Part II	II. lines 1a and 4: Part IV	. lines 1b an	d 2b: Part V. line 4:	: Part X. line 2:	Part XI.
		2d and 4b. Also complete this pa	•	•	,		,
	,	·					
PART X, I	LINE 2:						
SBA IS OF	RGANIZED AS AN ARI	ZONA NON-PROFIT CORPORA	TION. THE INTERNAL				
REVENUE S	SERVICE HAS DETERM	INED THAT SBA IS EXEMPT	FROM FEDERAL INCO	ME			
TAXES UNI	DER SECTION 501(A)	OF THE INTERNAL REVENUE	E CODE AS AN ORGAN	IZATION			
DESCRIBEI	O IN SECTION 501(C)(6). MANAGEMENT HAS DET	TERMINED THE CPF I	S A			
GRANTOR T	TRUST AND AS SUCH	IT IS DISREGARDED ENTITY	Y TREATED AS A DIV	ISION			
OF SBA SO	DLELY FOR INCOME T	AX PURPOSES. ACCORDINGLY	Y CONTRIBUTIONS T	0			
		•					
EITHER OF	RGANIZATION DO NOT	QUALIFY FOR THE CHARITA	ABLE CONTRIBUTION				
DEDUCTION	N UNDER SECTION 17	0(B)(1)(A). THE COMBINE	D ENTITY IS ANNUAL	LY			
REOUIRED	TO FILE A RETURN	OF ORGANIZATION EXEMPT I	FROM INCOME TAX (F	ORM			
990) WITH	H THE IRS. IN ADDI	TION, THE COMBINED ENTI:	TY IS GENERALLY SU	ВЈЕСТ			
				· - = =			
TO INCOME	E TAX ON NET INCOM	E THAT IS DERIVED FROM I	BUSINESS ACTIVITIE	S THAT			

Schedule D (Form 990) 2020

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for the latest information.

2020
Open to Public Inspection

Schedule I (Form 990) 2020

Name of the organization							Employer identification number
STATE BAR OF A							86-6000294
Part I General Information on Grants a							
1 Does the organization maintain records t							
criteria used to award the grants or assis	stance?						Yes No
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to I	-				ganization answered "Y	'es" on Form 990, Part	IV, line 21, for any
recipient that received more than \$	Γ΄	· ·	T '		(f) Method of	T	T
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ARIZONA FOUNDATION FOR LEGAL							
SERVICES & EDUCATION - 4201 N 24TH							
STREET SUITE 210 - PHOENIX, AZ					RENT REDUCTION		SUPPORT PROBONO LEGAL
85016	95-3351710	501(C)(3)	56,166.	60,000.	PER MOU		\$60,000
2 Enter total number of section 501(c)(3) ar	nd government or	anizations listed in th	ne line 1 table				> 1.
3 Enter total number of other organizations	- '	-					<u> </u>

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

Schedule I (Form 990) 2020 STATE BAR OF ARIZONA 86-6000294 Page 2

Part III Grants and Other Assistance to Domestic Individuals Complete if the organization answered "Yes" on Form 990, Part IV, line 22

AX SECTION SCHOLARSHIP	2	2,000.	0.		
AX SECTION SCHOLARSHIP	2	2,000.	0.		
LIENT PROTECTION FUND (CPF)	18	106,793.	0.		
Part IV Supplemental Information. Provide the information	n required in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.	
ART I, LINE 2:					
. MEMORANDUM OF UNDERSTANDING (MOU) OF SHARED I	NITIATIVES BETWE	EN THE STATE			
AR OF ARIZONA AND THE ARIZONA FOUNDATION FOR L	EGAL SERVICES &	EDUCATION			
AZFLSE) DOCUMENTS THE AGREEMENT REGARDING THE	AMOUNT AND TYPE	OF			
SSISTANCE PROVIDED TO THE ASFLSE.					
ART III					
CHOLARSHIPS WERE SPONSORED BY THE TAX LAW SECT	ION. LAW SCHOOL	ı			
TUDENTS MUST SUBMIT APPLICATIONS OR ESSAYS TO					

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

STATE BAR OF ARIZONA

Employer identification number 86-6000294

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	Х	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant I Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
	The organization?	5a		
b	Any related organization?	5b		
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		
b	Any related organization?	6b		
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958.6(c)?	l a l		i

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

Schedule J (Form 990) 2020

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Derients	(6)(1)(0)	reported as deferred on prior Form 990
(1) JOEL F ENGLAND	(i)	183,231.	0.	335.	13,742.	23,318.	220,626.	0.
CEO/EXEC DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARET VESSELLA	(i)	170,129.	0.	7,979.	12,736.	10,657.	201,501.	0.
CHIEF BAR COUNSEL/DEPUTY E	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) ELIZABETH H. DEANE	(i)	144,498.	0.	9,263.	11,108.	11,617.	176,486.	0.
CHIEF MEMBER SERVICES OFFI	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KATHY L. GERHART	(i)	134,199.	0.	8,753.	10,898.	20,162.	174,012.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) AMY REHM	(i)	149,890.	0.	709.	11,413.	10,216.	172,228.	0.
DEPUTY CHIEF BAR COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LORI MAXWELL	(i)	140,866.	0.	954.	7,856.	19,586.	169,262.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LISA PANAHI	(i)	118,421.	0.	8,135.	10,073.	28,908.	165,537.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) LISA FONTES	(i)	57,697.	84,527.	1,368.	9,660.	0.	153,252.	0.
ADVERTISING SALES MANAGER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Page 2

STATE BAR OF ARIZONA

Part III Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 1A:
SBA HAS WRITTEN WELLNESS PROGRAM TO SUPPORT A HEALTHY LIFESTYLE. SBA WILL
REIMBURSE UP TO \$75 PER QUARTER FOR MONTHLY FEES. ALL EMPLOYEES ARE
ELIGIBLE.

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. 2020
Open to Public Inspection

Internal Revenue Service

Name of the organization

STATE BAR OF ARIZONA

Employer identification number 86-6000294

PART III LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ADMINISTRATION OF JUSTICE AND THE COMPETENCY. ETHICS. AND PROFESSIONALISM OF LAWYERS PRACTICING IN ARIZONA. FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES: IN 2020 THE STATE BAR OF ARIZONA'S OPERATIONS AND FINANCIAL RESULTS WERE IMPACTED BY COVID-19. IT ACTIVELY BEGAN TRANSITIONING TO REMOTE OPERATION IN MARCH 2020. AS A RESULT, THE STATE BAR EXPERIENCED A REDUCTION IN PROFESSIONAL DEVELOPMENT REVENUES. THE REDUCTION WAS MAINLY RELATED TO CONTINUING LEGAL EDUCATION. CONVENTION AND SECTION MEETINGS AND CONFERENCES, AS WELL AS A REDUCTION IN COMPLIANCE REVENUE RELATED TO THE DEFERRAL OF THE MCLE FILING DEADLINES. IN ADDITION, STATE BAR REALIZED SIGNIFICANT SAVINGS IN 2020, LARGELY DUE TO THE CANCELLATION OF IN-PERSON MEETINGS AND TRAVEL. IT PLANS TO CONTINUE TO ADJUST OPERATIONS UTILIZING A HYBRID OPERATIONS MODEL (BOTH ON-SITE AND REMOTE) BASED UPON GUIDANCE AND INFORMATION RECEIVED FROM THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) AND STATE HEALTH OFFICIALS, FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: ACCESS TO JUSTICE PURSUANT TO RULE 32 OF THE SUPREME COURT OF ARIZONA THE STATE BAR MISSION INCLUDES ACCESS TO JUSTICE, WHICH INVOLVES EFFORTS TO IMPROVE ACCESS TO OUR LEGAL SYSTEM FOR ALL ARIZONIANS. THE BAR CARRIES OUT THIS TASK THROUGH ITS PUBLIC SERVICE CENTER BY SUPPORTING VARIOUS LEGAL AID ORGANIZATIONS. ASSISTING WITH ACCESS TO ATTORNEYS. WORKING TO EDUCATE THE PUBLIC ABOUT THE LEGAL PROCESS. AND BY SUPPORTING THE SUPREME COURT'S ACCESS TO JUSTICE COMMISSION.

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

032211 11-20-20

Schedule O (Form 990 or 990-EZ) 2020

PUBLICATIONS: (1) ARIZONA ATTORNEY - MONTHLY MAGAZINE WITH SUBSTANTIVE	
PUBLICATIONS: (1) ARIZONA ATTORNEY - MONTHLY MAGAZINE WITH SUBSTANTIVE	
ARTICLES ABOUT LEGAL ISSUES AND TOPICS THAT AFFECT THE LEGAL	
PROFESSION; (2) ELEGAL - SERIES OF ELECTRONIC NEWSLETTERS UPDATING	
MEMBERS ON LEGAL NEWS, ISSUES, ETHICS OPINIONS AND COURT CASES.	
THE CLIENT PROTECTION FUND OF THE STATE BAR OF ARIZONA IS A TRUST AND,	
AS SUCH, IS TECHNICALLY A SEPARATE LEGAL ENTITY FROM THE STATE BAR OF	
ARIZONA. HOWEVER, BECAUSE THE STATE BAR HAS AN ADMINISTRATIVE ROLE, IT	
IS INCLUDED IN THE STATE BAR'S FEDERAL INCOME TAX REPORTING. THE CLIENT	
PROTECTION FUND EXISTS TO PROMOTE THE PUBLIC CONFIDENCE IN THE	
ADMINISTRATION OF JUSTICE AND THE INTEGRITY OF THE LEGAL PROFESSION BY	
REIMBURSING LOSSES CAUSED BY THE DISHONEST CONDUCT OF LAWYERS ADMITTED	
AND LICENSED TO PRACTICE IN ARIZONA. IN 2020 THE ORGANIZATION PROVIDED	
ASSISTANCE TO 18 CLAIMS FILED WITH THE FUND.	
FORM 990, PART VI, SECTION A, LINE 2:	
MARK HARRISON, ELECTED GOVERNOR & DAVID B. ROSENBAUM DISTRICT GOVERNOR HAVE	
A BUSINESS RELATIONSHIP.	
FORM 990, PART VI, SECTION A, LINE 6:	
AS PROVIDED IN RULE 32 (C) OF THE RULES OF THE SUPREME COURT OF ARIZONA AND	
THE BYLAWS OF THE CORPORATION, MEMBERSHIP IS DIVIDED INTO FIVE CLASSES:	
ACTIVE, INACTIVE, RETIRED, SUSPENDED AND JUDICIAL. EVERY PERSON LICENSED TO	
PRACTICE LAW IN THE STATE OF ARIZONA IS AN ACTIVE MEMBER EXCEPT FOR PERSONS	
WHO ARE INACTIVE, RETIRED, SUSPENDED OR JUDICIAL MEMBERS. ALL PERSONS	
ADMITTED TO PRACTICE IN ACCORDANCE WITH THE RULES OF THE COURT SHALL, BY	
THAT FACT, BECOME ACTIVE MEMBERS OF THE STATE BAR. UPON ADMISSION, THE	Schedule O (Form 990 or 990-FZ) 2020

Name of the organization STATE BAR OF ARIZONA	Employer identification number 86-6000294
APPLICANT MUST PAY A FEE AS REQUIRED BY THE SUPREME COURT AND AN ANNUAL	
MEMBERSHIP FEE TO MAINTAIN MEMBERSHIP STATUS. MEMBERS HAVE LIMITED RIGHTS	
TO VOTE ON CERTAIN ISSUES REGARDING THE GOVERNANCE OF THE ORGANIZATION AND	_
DO NOT RECEIVE ANY OF THE ORGANIZATION'S PROFITS, EXCESS DUES, OR RECEIVE A	
SHARE OF THE ORGANIZATION'S NET ASSETS UPON DISSOLUTION.	_
FORM 990, PART VI, SECTION A, LINE 7A:	
PER RULE 32, (19) ON THE BOARD OF GOVERNORS ARE ELECTED BY MEMBERS IN	
SPECIFIED DISTRICTS, (3) AT-LARGE MEMBERS ARE APPOINTED BY THE SUPREME	
COURT, AND (4) ARE PUBLIC MEMBERS WHO ARE NOT MEMBERS OF THE BAR AND ARE	
APPOINTED BY THE BOARD OF GOVERNORS.	
FORM 990, PART VI, SECTION A, LINE 7B:	
RULE 32 (ORGANIZATION OF THE STATE BAR OF ARIZONA) OF THE RULES OF THE	
ARIZONA SUPREME COURT GOVERN THE MISSION, COMPOSITION OF THE BOARD OF	
DIRECTOR, MEMBERSHIP CLASSES, MEMBERSHIP FEES AND REQUIRE OVERSIGHT BY THE	
ARIZONA SUPREME COURT. MEMBERSHIP FEES ARE ESTABLISHED BY THE BOARD WITH	
THE CONSENT OF THE SUPREME COURT OF ARIZONA.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE CHIEF FINANCIAL OFFICER REVIEWS THE RETURN WITH THE TAX PREPARER. A	
COMPLETE COPY OF THE FINAL FORM 990 IS PROVIDED TO THE CEO/EXECUTIVE	
DIRECTOR AND MEMBERS OF THE BOARD OF GOVERNORS FOR REVIEW PRIOR TO THE	
FILING OF THE RETURN. THE FINANCE AND AUDIT, AND THE SCOPE AND OPERATIONS	
COMMITTEES ARE ALSO PROVIDED WITH A COMPLETE COPY OF THE FINAL FORM 990 FOR	
REVIEW.	

Name of the organization STATE BAR OF ARIZONA	Employer identification number 86-6000294
THE STATE BAR OF ARIZONA HAS A WRITTEN CONFLICT OF INTEREST POLICY. THIS	
POLICY IS DISCUSSED WITH ALL NEW EMPLOYEES AND NEW BOARD MEMBERS. ALL	
EMPLOYEES ARE REQUIRED TO SIGN A WRITTEN STATEMENT THAT THEY HAVE READ THE	
POLICY. IN ADDITION, THE STATE BAR HAS A MANDATORY ANNUAL ETHICS TRAINING.	
EACH EMPLOYEE IS RESPONSIBLE FOR COMING FORWARD WITH A POTENTIAL CONFLICT	
OF INTEREST OR REPORTING POSSIBLE CONFLICTS THAT THEY MAY BE AWARE OF. THE	
DEPARTMENT OR DIVISION HEAD IS RESPONSIBLE FOR REVIEWING POTENTIAL	
CONFLICTS. IF IT INVOLVES A DIVISION HEAD, REVIEW RESIDES WITH THE	
CEO/EXECUTIVE DIRECTOR. IF IT INVOLVES THE CEO/EXECUTIVE DIRECTOR, REVIEW	
RESIDES WITH THE BOARD PRESIDENT.	
ALL BOARD MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSURE	
STATEMENT ON AN ANNUAL BASIS AT THE BEGINNING OF THE BOARD OF GOVERNORS	
TERM YEAR.	
IF A PERSON IS IDENTIFIED WITH A CONFLICT, HE OR SHE IS REMOVED FROM THE	
VETTING AND DECISION-MAKING PROCESS RELATED TO THAT CONFLICT.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE EXECUTIVE COMPENSATION COMMITTEE, WHICH IS COMPRISED OF ACTIVE BOARD	
MEMBERS, SETS AND ADJUSTS THE SALARY OF THE CEO/ED. THE CEO/ED SALARY IS	
REVIEWED ANNUALLY. THE POLICY ALLOWS THE BOARD TO SEEK ASSISTANCE FROM	
OUTSIDE ADVISORS AND CONSULTANTS TO OBTAIN OBJECTIVE AND MARKET-BASED DATA,	
SUCH AS COMPENSATION STUDIES, INDEPENDENT FIRMS, ETC. THE EXECUTIVE	
COMPENSATION COMMITTEE REVIEWS RESEARCH PROVIDED BY AN INDEPENDENT	
CONSULTANT AND MAKES RECOMMENDATIONS TO THE BOARD. THE BOARD THEN VOTES TO	
APPROVE, MODIFY, OR REJECT THE RECOMMENDATION.	
FORM 990, PART VI, SECTION C, LINE 19:	
MUE ODGANIZANTONG ADINIGEO OF INCORDODANTON DV LANG CONFLICT OF INTEREST	

THE ORGANIZATIONS ARITICLES OF INCORPORATION, BY-LAWS, CONFLICT OF INTEREST

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

86-6000294

Part I Identification of Disregarded Entities. Complete	ete if the organization answered "Yes"	on Form 990, Part IV, line 33	3.						
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total ince	ome E	(e) End-of-year assets		ts Direct controlling entity		
CLIENT PROTECTION FUND OF THE STATE BAR OF ARIZONA - 47-6411607, 4201 N 24TH STREET SUITE 100, PHOENIX, AZ 85016	PROMOTE PUBLIC CONFIDENCE IN LEGAL PROFESSION	ARIZONA	456	5,090.	2,597	,974.	STATE BAR O	F ARIZO	DNA
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization a	answered "Yes" on Form 990), Part IV, line 34,	because it	t had one o	or more	related tax-exe	mpt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public status (i	atus (if section		(f) ct controlling entity	(g) Section 512(b)(13) controlled entity?	
				501	(c)(3))			Yes	No

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

STATE BAR OF ARIZONA

Schedule R (Form 990) 2020

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

organizations treated as a partnership during the tax year.											
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)		(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	entity (related, unrelated, income end-of-year amount in accepts amount in accepts allocations?		Code V-UBI amount in box 20 of Schedule	General of managin partner?	Percentage ownership			
		country)		sections 512-514)		4,000,00	Yes	No	K-1 (Form 1065)	Yes No	
-											
							-			\perp	
										1 1	
-											
	1										
								l			

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) Primary 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		tion b)(13) rolled tity?
		country						Yes	No

Page 2

86-6000294 STATE BAR OF ARIZONA Schedule R (Form 990) 2020 Page 3

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

Yes No

1a

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

b	Gift, grant, or capital contribution to related organization(s)				1b	
С	Gift, grant, or capital contribution from related organization(s)				1c	
е	Loans or loan guarantees by related organization(s)				1e	
f	Dividends from related organization(s)				1f	
g	Sale of assets to related organization(s)				1g	
h	Purchase of assets from related organization(s)				1h	
i	Exchange of assets with related organization(s)				1i	
j	Lease of facilities, equipment, or other assets to related organization(s)				. <u>1j</u>	
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	
- 1	Performance of services or membership or fundraising solicitations for related organizations	zation(s)			. 11	
m	Performance of services or membership or fundraising solicitations by related organize	zation(s)			. 1m	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization	n(s)			1n	
0	Sharing of paid employees with related organization(s)				10	
р	Reimbursement paid to related organization(s) for expenses				1p	
q	Reimbursement paid by related organization(s) for expenses				1q	
r	Other transfer of cash or property to related organization(s)				1r	
s	Other transfer of cash or property from related organization(s)				1s	
2	If the answer to any of the above is "Yes," see the instructions for information on who	o must complete th	is line, including covered relati	onships and transaction thresholds.		
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount i	involved	
1)						
2)						
3)						
4)						
5)						
6)						
3216	3 10-28-20	2.5		Schedul	le R (Form	990) 2020

Schedule R (Form 990) 2020 STATE BAR OF ARIZONA 86-6000294 Page **4**

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)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners sec. 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproptionate allocation	Code V-UBI amount in box 2 of Schedule K-	General of managing partner? Yes No	(k) r Percentage ownership
	-									

032165 10-28-20 Schedule R (Form 990) 2020