DLN: 93493193000218

2016

OMB No 1545-0047

Form **990** 

Department of the Treasury

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

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

Do not enter social security numbers on this form as it may be made public
 ▶ Information about Form 990 and its instructions is at <a href="www.IRS gov/form990">www.IRS gov/form990</a>

Open to Public

							Inspection
			alendar year, or tax year beginning 09-01-2016 , and ending 08-31  C Name of organization	-2017	D. F		
		pplicable change	American Bar Association		36-07231		ication number
☐ Name change ☐ Initial return Final			Doing business as		30 07231	.50	
Final Deturn/terminated		nınated		E Telephone	numher		
☐ Amended return ☐ Application pending			Number and street (or P O box if mail is not delivered to street address) Room/suit 321 N Clark Street	(312) 988-5000			
⊔ Ар	plicatio	on pending	City or town, state or province, country, and ZIP or foreign postal code Chicago, IL 60654				
			E Name and address of principal officer		<b>G</b> Gross rece	•	58,947,943 ————————————————————————————————————
			F Name and address of principal officer Jack L Rives	H(a) Is this		rn for	
			321 N Clark St	subord <b>H(b)</b> Are all	inates? subordinate:	s	□Yes ☑No
T Ta	x-exem	npt status	Chicago, IL 60654	include	·d?		☐ Yes ☐No
			501(c)(3) ✓ 501(c)(6) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 527	If "No," <b>H(c)</b> Group			instructions)
JW	ebsite	e:► ww	w americanbar org	rice) Group	exemption n	umber	•
<b>K</b> Forr	m of or	ganızatıon	☑ Corporation ☐ Trust ☐ Association ☐ Other ►	<b>L</b> Year of format	ion 1905	<b>M</b> State	of legal domicile IL
Pa	rt I	Sum	mary				
Governance	т	To serve e	scribe the organization's mission or most significant activities equally the members of the legal profession and the public by defending liber ative of the legal profession and to promote public good	rty and deliver	ing justice a	s the n	ational
Ē	-						
e Ke	-	61 1 11	□	350/			
<u> </u>			is box $ ightharpoons \square$ if the organization discontinued its operations or disposed of more for $\square$ of voting members of the governing body (Part VI, line 1a) $\dots$ . $\square$ . $\square$		of its net ass	sets   <b>3</b>	44
Activities &	1		of independent voting members of the governing body (Part VI, line 1b)		ı	4	41
#Je	1		nber of individuals employed in calendar year 2016 (Part V, line 2a)			5	835
€	6	Total nun	nber of volunteers (estimate if necessary)			6	8,500
∢	7a	Total unr	elated business revenue from Part VIII, column (C), line 12			7a	3,303,480
	ь	Net unrel	lated business taxable income from Form 990-T, line 34			7b	175,281
				Prio	r Year		Current Year
Q,	8	Contribut	cions and grants (Part VIII, line 1h)		7,664,87	'7	8,545,096
Ravenue	9	Program	service revenue (Part VIII, line 2g)	113,098,11	.5	111,648,259	
Rÿ	10	Investme	8	17,606,649			
	1		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,454,25		9,648,424
	<del>                                     </del>		enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		149,226,61	_	147,448,428
	1		nd similar amounts paid (Part IX, column (A), lines 1–3 )		1,189,55	57	11,571,013
	1	•	paid to or for members (Part IX, column (A), line 4)			_	0
Expenses	1		other compensation, employee benefits (Part IX, column (A), lines 5–10)		81,369,78	32	70,477,376
£	l .		anal fundraising fees (Part IX, column (A), line 11e)			+	0
Ä	1		raising expenses (Part IX, column (D), line 25) ▶0 penses (Part IX, column (A), lines 11a-11d, 11f-24e)		77,022,76	1	71,570,742
	1	·	penses Add lines 13–17 (must equal Part IX, column (A), line 25)		159,582,10		153,619,131
	1		less expenses Subtract line 18 from line 12		-10,355,48	+	-6,170,703
<u>გ</u> ფ		Revenue	1005 expenses Substitute Ite Hollin line Ite I i I I I I I I I I I I	Beginning o	of Current Yea		End of Year
Net Assets or Fund Balances			ets (Part X, line 16)		210 ==: :		
Ass I Ba	1		318,580,02	+	319,040,810		
₩ E	1		ulities (Part X, line 26)		179,036,52	+	164,300,125
			s or fund balances Subtract line 21 from line 20		139,543,49	ادا	154,740,685
Undei know		alties of pa and belie	<b>ature Block</b> erjury, I declare that I have examined this return, including accompanying s if, it is true, correct, and complete Declaration of preparer (other than office				
		Signati	ure of officer	2018 Date	-07-11		
Sign Here		1,		Duce			
	-		Rives Executive Director COO r print name and title				
		17	rint/Type preparer's name Preparer's signature Da	te I		IN	
Paid	4	[ ]	Topal a significant	Chec	k 📙 ıf 📗		
	<sub>u</sub> pare	er	irm's name		employed s EIN ►		
	On	1 =	irm's address ▶	Phon	e no		
		· <b>y</b> _					
May t	he IR	S discuss	this return with the preparer shown above? (see instructions)			Y	'es ☑ No

Form	990 (2016)				Page <b>2</b>
Par	t IIII Staten	nent of Program Service Acc	complishments		
	Check If	Schedule O contains a response of	note to any line in this Part III .		🗹
1	Briefly describe	the organization's mission			
legal	erve equally the r profession, to ap bers of the Bar	members of the legal profession an oply the knowledge and experience	d the public by defending liberty and of the profession to promote the pul	delivering justice as the nationa blic good and to encourage cordia	l representative of the al discourse among the
2	Did the organiz	ation undertake any significant pro	gram services during the year which	were not listed on	
	the prior Form	990 or 990-EZ?			🗌 Yes 🗹 No
		oe these new services on Schedule			
3	Did the organiz	ation cease conducting, or make si	gnificant changes in how it conducts,	, any program	
	services? .				🗌 Yes 🗹 No
	If "Yes," describ	oe these changes on Schedule O			
4	Section 501(c)(		nplishments for each of its three larg required to report the amount of gr service reported		
4a	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	See Additional Da	ta			
4b	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
					<u> </u>
4c	(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
	-				
	0.1	(5 ) (1 ) (1 ) (1 )			
4d	Other program (Expenses \$	services (Describe in Schedule O )		) (Revenue \$	)
4-		<u>_</u> _	J	, (	
<u>4e</u>	Total program	ı service expenses ▶			

Section 501(c)(3) organizations.

or X as applicable

Yes

Page 3

**No** No

Nο

Nο

No

Nο

No

Nο

No

Nο

Nο

Nο

Nο

Νo

Nο

Nο

Nο

Nο

No

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Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**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 . . . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

**14a** Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🛸

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

Did the organization receive or hold a conservation easement, including easements to preserve open space.

Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . . . . . . . . .

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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Yes

Yes

Yes

Yes

Yes

Yes

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Par	t IV Checklist of Required Schedules (continued)					
			Yes	No		
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule $H$	20a		No		
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b				
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes			

Yes

Νo

Νo

No

Νo

Nο

Nο

No

Nο

Nο

Nο

Nο

23

24a

24b

24c

24d

25a

25b

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28a

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28c

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35a

35b

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Yes

Yes

Yes

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Yes

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," 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

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛸

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

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

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . . .

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Par	990 (2016)			Page
	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 430	4		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	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	-		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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 Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds.  Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
0-	Did the spensoring organization make any taxable distributions under section 49662	9a		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
	Section 501(c)(7) organizations. Enter	90		
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  10b	1		
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them )			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for			
а	additional information the organization must report on Schedule O  Enter the amount of reserves the organization is required to maintain by the states in	13a		
b	which the organization is licensed to issue qualified health plans			
b c		14a		No

Form	m 990 (2016)			Page <b>6</b>
Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.		onse to l	_
	Check if Schedule O contains a response or note to any line in this Part VI			✓
Se	Section A. Governing Body and Management			
1a	La Enter the number of voting members of the governing body at the end of the tax year la	44	Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	b Enter the number of voting members included in line 1a, above, who are independent 1b	41		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with officer, director, trustee, or key employee?	any other 2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct of officers, directors or trustees, or key employees to a management company or other person?	t supervision 3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	s filed?		No
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?	. 5	Yes	
6	5 Did the organization have members or stockholders?	6	Yes	
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint of members of the governing body?	one or more <b>7a</b>	Yes	
b	<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockho persons other than the governing body?	olders, or 7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the following	the year by		
а	a The governing body?	. <b>8</b> a	Yes	
b	<b>b</b> Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached organization's mailing address? If "Yes," provide the names and addresses in Schedule O			No
Se	Section B. Policies (This Section B requests information about policies not required by the Interi	nal Revenue Cod	e.)	
			Yes	No
10a	Da Did the organization have local chapters, branches, or affiliates?	. 10a		No
b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, and branches to ensure their operations are consistent with the organization's exempt purposes?	, affiliates,		
11a	A Has the organization provided a complete copy of this Form 990 to all members of its governing body befor form?	re filing the 11a	Yes	
b	<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990 $\cdot$ $\cdot$ $\cdot$			
12a	a Did the organization have a written conflict of interest policy? If "No," go to line 13	. 12a	Yes	
b	<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could g conflicts?	ve rise to	Yes	
С	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," de Schedule O how this was done	escribe in	Yes	
13	B Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by inc persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	dependent		
а	a The organization's CEO, Executive Director, or top management official	15a	Yes	<u></u> _
b	<b>b</b> Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	ia Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement taxable entity during the year?	with a 16a		No
b	<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its properties in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization status with respect to such arrangements?			
Se	Section C. Disclosure	<u> </u>		
17				
18	available for public inspection. Indicate how you made these available. Check all that apply	c)(3)s only)		
	Own website Another's website 🗹 Upon request 🗆 Other (explain in Schedule O)			
19	policy, and financial statements available to the public during the tax year			
20	<ul> <li>State the name, address, and telephone number of the person who possesses the organization's books and</li> <li>William K Phelan 321 N Clark Street Chicago, IL 60654 (312) 988-5000</li> </ul>	records		

Form 990 (2016)									
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								
Section	A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
La Complete	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's	tax							

year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's current key employees, if any See instructions for definition of "key employee" • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

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

(B)

(A)

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

(C)

(D)

Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations from the for related 2/1099-MISC) (W- 2/1099organization and Highest compensated employee Individual trustee or director Former organizations MISC) related Institutional Trustee below dotted employee organizations line) See Additional Data Table

(F)

(E)

PO Box 932441 Cleveland, OH 44193

compensation from the organization ▶ 56

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

Page 8

	(A) Name and Title	(B) Average hours per week (list any hours	than c	ne b	ox, u in off	t cha unle: ficer	eck moss pers r and a	son	Repo compe fror organiza	(D) (E)  ortable ensation m the ation (W-  organizations (W-  organizations (W-  organizations (W-  organizations (W-			w-	Estima amount o compens from	ated of other sation the
		for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	9-MISĊ		2/1099-MISC	)	organizati relat organiza	ed
See Additional Data Table															
													+		
													$\dashv$		
-											$\dashv$		$\dashv$		
													+		
													+		
													+		
													_		
											$\dashv$		$\dashv$		
41-6	Sub-Total												$\perp$		
	Total from continuation sheets to P	art VII, Sectio	n A .	٠. '			<b>▶</b>								
<u>d 1</u>	Total (add lines 1b and 1c)						▶			78,216					413,640
2	Total number of individuals (including of reportable compensation from the			e list	ed al	bove	e) who	rece	eived moi	re than	\$10	0,000			
_													_	Yes	No
3	Did the organization list any <b>former</b> line 1a? <i>If "Yes," complete Schedule</i> .			ee, k	ey eı •	mple •	oyee,	or hi	ghest con	npensat	ed (	employee on • •	3		No
4	For any individual listed on line 1a, is organization and related organization individual											the			
5	Did any person listed on line 1a recei			·	rom	-	unrol	• •	organizat		• ndu	udual for	4	Yes	
5	services rendered to the organization										•	· · ·	5		No
Se	ection B. Independent Contract													<b>.</b>	
1	Complete this table for your five high from the organization Report compe												nper	nsation	
	· · · · · · · · · · · · · · · · · · ·	(A) and business addre										(B) ption of services		(C Comper	
USPS		and business dudie	.33							Shipping	esci	ption or services			,180,000
	Campus Drive lateo, CA 944979224														
	Graphics Inc									Printing S	Serv	ices		2	,017,455
	PO Box 644840														
Pittsburgh, PA 15264 Escendent LLC Consulting/Talent Services							1	,896,373							
	47 W Polk St Ste 100-232 Chicago, IL 60605														
Code and Theory LLC Website Design								1	,451,636						
	roadway 5th Floor York, NY 10012														
	sion Management Corporation									Telemark	etın	g		1	,222,332

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

Part	VΠ	Statement of	Revenue								rage <b>3</b>
		<del></del>		a respo	onse or note to any	line in this	Part VIII				П
				<u> </u>		(A) Total reve		(I Relat exe fund	B) ed or mpt ction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaig	ns	1a				reve	enue		512-514
nts nts		<b>b</b> Membership dues		1b	<u> </u> 						
Contributions, Gifts, Grants and Other Similar Amounts		c Fundraising events			<u> </u> 						
S. G Am		_		1c	38,000						
iii Ia		d Related organization		1d	38,000 I						
S, E		e Government grants (c	•	1e	1						
ion S		f All other contributions and similar amounts n		1f	8,507,096						
but the		above									
		g Noncash contribute in lines 1a-1f \$	ons included								
Contributions, Gifts, Grants and Other Similar Amounts		<b>Total.</b> Add lines 1a-1	1f		•	8,545	5 006				
					Business		3,030				
Ę	<b>2</b> a	Membership Dues				813920	68,6	71,300	68,671,	300	
ž Ž	Ь	Meeting Fees				813920	26,5	31,910	26,581,	910	
3	c	Publication Revenue				813920	8,1	73,984	8,173,	984	
Ę.	d	Accreditation Fees				813920		57,870	4,557,		
Ε	е	Advertising				511120		36,493	1 276	2,386,4	193
Program Service Revenue	f	All other program se	ervice revenue	!			1,2	76,702	1,276,	702	
ď	g	Total.Add lines 2a-2	f		<b>▶</b> 111,6	48,259					
	3	Investment income (i									
		•			<b>•</b>	<u> </u>	1,238,809	'			1,238,809
		Income from investm Royalties		-	ond proceeds	<u> </u>	8,731,437				8,731,437
	3	Royaldes	(ı) Rea		(II) Personal		0,, 02,, 10,				3,732,137
	6a	Gross rents	(1) 1102	•	(,	1					
						1					
	t	Less rental expenses									
		Rental income or				1					
		(loss)				<u> </u>					
	•	Net rental income o		•	(1) Other						
	7:	Gross amount	(ı) Securi	ties	(II) Other	+					
	, .	from sales of assets other	137,8	867,355							
		than inventory									
	Ŀ	Less cost or other basis and	131 /	174 002	24.623	1					
		sales expenses		174,883							
		Gain or (loss)	<u> </u>	392,472	-24,632	Ţ	6,367,840				16,367,840
		I Net gain or (loss) Gross income from f			<b>•</b>	1	0,307,640				10,307,640
<u>a</u>	0.0	(not including \$		of							
Other Revenue		contributions reporte See Part IV, line 18		. a	}						
اور ا	ŀ	Less direct expense		ь		-					
7		: Net income or (loss)			rents	J					
ŧ	9a	Gross income from g		ies							
O		See Part IV, line 19		а	}						
	ŀ	Less direct expense	· c	b		1					
		: Net income or (loss)			L	J					
		aGross sales of invent	tory, less								
		returns and allowand	ces	_							
		Nos sont of goods	a a l d	a b		-					
		Less cost of goods				]					
		Net income or (loss) Miscellaneous		invent	tory ► Business Code						
	11	LaMarketing Fees			900004	-	908,617			908,617	
		-									
	Ŀ	Sponsorship			900004		8,370			8,370	
		эропоотопір					•			•	
	,	d All other revenue			<del>                                     </del>	-					
		Total. Add lines 11a			▶						
		2 Total revenue. See					916,987	1			
		Ottal levellue. See	. 1130 0000115		•	14	7,448,428		109,261,766	3,303,480	26,338,086 Form <b>990</b> (2016)
											rorm <b>990</b> (2016)

. 🗆
(D) Ingexpenses

		<b>(A)</b> Beginning of year		( <b>B</b> ) End of year
1	Cash-non-interest-bearing	17,911,064	1	15,227,014
2	Savings and temporary cash investments	37,587	2	51,131
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	4,878,531	4	4,551,670
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part		_	

73,675,310

62.057.878

12,801,360

275,280

318,580,024

6,903,756

53,832,189

118.300.584

179,036,529

139.543.495

139,543,495

318.580.024

277.398.094

10c

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34

11,617,432

280.932.261

453,713

319.040.810

16,977,822

53,047,643

94.274.660

164,300,125

154,740,685

154,740,685

319.040.810

Form **990** (2016)

II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L Assets Notes and loans receivable, net . . . . Inventories for sale or use . 3.332.016 8 2.579.258 1.946.092 9 3.628.331 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other

10a

10b

basis Complete Part VI of Schedule D

Intangible assets . . . . .

Accounts payable and accrued expenses

Investments—publicly traded securities .

Investments—other securities See Part IV, line 11 .

Investments—program-related See Part IV, line 11

Other assets See Part IV, line 11 . . . .

Tax-exempt bond liabilities . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Total assets. Add lines 1 through 15 (must equal line 34) . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

b Less accumulated depreciation

Grants payable . . .

Deferred revenue . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

11

12

13

14

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16

17

18

19

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32

33

34

Liabilities 22

Fund Balances

Assets or

Net

8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	10,798,210		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	154,740,685		
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

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

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

2b

2c

3а

3b

Yes

Yes

No

Form 990 (2016)

Separate basis

consolidated basis, or both

Audit Act and OMB Circular A-133?

Separate basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

Consolidated basis

### Additional Data

**Software ID:** 16000333

**Software Version:** 17.2.1.0 **EIN:** 36-0723150

Name: American Bar Association

Form 990 (2016)

Form 990, Part III, Line 4a: ABA Sections, Divisions, and Forums The American Bar Association is one of the largest voluntary professional associations in the world. Throughout its history, the ABA has demonstrated an ability to anticipate the needs of the legal profession and respond to the needs of a changing society. The ABA brings the resources of a large national organization to the analysis and development of policy on issues that are of concern to both the profession and the public. Much of this work is carried out through entities of the Association, primarily Sections, Divisions and Forums, Continued on Schedule O.

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Officer Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related director. below dotted organizations employee line) Trustee

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Linda A Klein

President

Hilarie Bass

President-Elect

Mary T Torres

Mary L Smith

Secretary-Elect

G Nicholas Casev

Michelle A Behnke

Treasurer-Flect

Paulette Brown

Wendell G Large

Member-At-Large

Member-At-Large

E Fitzgerald Parnell III

Immediate Past President

Secretary

Treasurer

Deborah Enix-Ross

Chair, House of Delegates

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Officer Highest compensat Former Individual trustee or director Institutional organizations MISC) MISC) related director. below dotted organizations employee line) Trustee 1 00 Joe B Whisler ...... Χ Member-At-Large 1 00 2 00 Maryann Elizabeth Foley ............... Х 0 Member-At-Large 1 00

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Alan Van Etten

Orlando Lucero

John Louros

Member-At-Large

Member-At-Large

Member-At-Large

Ilene Knable Gotts

Member-At-Large

Kevin L Shepherd

Member-At-Large

Barry C Hawkins

Member-At-Large

David F Bienvenu

Member-At-Large

David S Houghton

Member-At-Large

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Highest compensat Former Individual trustee or director Institutional MISC) related organizations MISC) director below dotted organizations employee line) 1 00 John L McDonnell

Member-At-Large	1 00				-		
Pamela A Bresnahan	34 00	×			0	0	
Member-At-Large	1 00	,,			Ç	Ĭ	
William R Bay	1 00	×			0	0	
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Member-At-Large

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Member-At-Large

J Timothy Eaton

Member-At-Large

Member-At-Large

A Vincent Buzard

Member-At-Large

Leslie Miller

Penina Kessler Lieber

Paula E Boggs

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Member-At-Large 1 00		
William R Bay	0	0
Member-At-Large 1 00		Ĭ
Bernard T King 2 00 X	0	0
Member-At-Large 1 00		Ŭ

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William R Bay	1 00	v			_	0	n
Member-At-Large	1 00	^			0	0	0
Bernard T King	2 00	×			0	0	0
Member-At-Large	1 00	^				0	0
Darcee S Siegel	4 00	_			0	0	0

Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation compensation amount of other hours per person is both an officer week (list from the from related compensation any hours organizations and a director/trustee) organization from the for related (W-2/1099-(W-2/1099-Highest com employee organization and individual to or director Office Former Key employ Institutiona organizations MISC) MISC) related below dotted organizations line)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

		แรโลล	Trustee	99	npensated			
Scott C LaBarre	7 00					0	0	0
Member-At-Large	1 00	^					0	
Lorelie S Masters	4 00	_				_	0	0
Member-At-Large	1 00	^					0	
Donald R Dunner	4 00					0	0	0
Member-At-Large	1 00	^					0	0

Donald R Dunner	4 00	×				_	_	
Member-At-Large	1 00					0	0	
Linda L Randell	6 00	X				0	0	
Member-At-Large	1 00					,		
Mın K Cho	9 00							Γ
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Member-At-Large

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Ruthe Catolico

William C Carpenter

Harry Truman Moore

Lında L Randell	6 00	×			0	0	
Member-At-Large	1 00						
Min K Cho	9 00	×			0	0	
Member-At-Large	1 00						
Herbert B Dixon Jr	9 00						

Member-At-Large	1 00								
Mın K Cho	9 00	V					0	•	
Member-At-Large	1 00	X					O	U	
Herbert B Dixon Jr	9 00	¥					0	0	
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Member-At-Large	1 00	X			0	0	
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Member-At-Large	1 00	^			0	3	
Andrew Joshua Markus	9 00						

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Compensated Employees, and Independent Contractors (D) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099organization and Officer Highest compensatemplovee Former Inst organizations MISC) MISC) related below dotted organizations employee

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22,361

41,539

21,840

22,003

17,057

18,140

1,150,249

375,264

347,059

366,461

348,848

312,013

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	line)	adual trustee irector	titutional Trustee
Ramona G See	9 00		
Member-At-Large	1 00	X	
Milliam N Shenherd	4 00		

William N Shepherd

Member-At-Large

Benjamin E Griffith

Member-At-Large

Erica Rose Grinde

Member-At-Large

William K Phelan

James Dimos

Jarisse Sanborn

Thomas M Susman

Christopher Gloede

Jack L Rives

......

Assoc Executive Director-Governmental Affairs

Executive Director Chief Operating Officer

Assoc Executive Director-General Counsel

Assoc Executive Director-Membership

Sr Assoc Executive Director CFO

Deputy Executive Director

Compensated Employees, and Independent Contractors (C) (D) (E) Name and Title Average Position (do not check more Reportable Reportable than one box, unless hours per compensation compensation week (list person is both an officer from the from related and a director/trustee) any hours organization organizations

(F)

Estimated

amount of other

compensation

from the

17,492

5,921

18,319

33,676

30,636

7,141

0

0

0

0

229,298

218,996

204,315

326,611

247,191

212,002

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

		l					′ I	/14/ 2/4000	/VV 3/4000	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	0	organization and related organizations
Alpha Brady Sr Assoc Exec Director Chief Governance Officer	40 00 5 00				×			305,563	0	14,010
Holly Cook Sr Associate Executive Director	40 00				×			247,318	0	19,457
Valeria J Stokes Sr Assoc Executive Director-Chief HR	40 00				x			242,996	0	32,154
Carol Stevens Associate Executive Director-CMR	40 00				x			232,681	0	31,635
H Maria Enright	40 00									

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Carol Stevens	40 00	
Associate Executive Director-CMR		
H Maria Enright	40 00	
-		
Assoc Executive Director-Professional Services		

Robert Horowitz

Martin Balogh

Barry Currier

William Adams

Laura Metzger

**Director-Professional Services** 

Assoc Executive Director-Meetings Travel

Deputy Managing Director-Accrediation

Division Director Brand Product Management

Managing Director-Accreditation Legal Education

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33 00

5 00 50 00

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (C) (E) (F) (D) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation from the week (list person is both an officer from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W- 2/1099organization and MISC) MISC) organizations related ions

	below dotted line)	dividual trustee director	stitutional Trustee	y employee	iphest compensated	rmer	1130)		organizations
Cheryl Niro	40 00				V		241.546		20.000
Senior Strategy Advisor					×		211,516	0	29,890
Jerome Kıska	30 00								

...............

12 00

Deputy Chief Financial Officer

208,140

0

30,369

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

OMB No 1545-0047

DLN: 93493193000218

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

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SCHEDULE C (Form 990 or 990-

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

www.irs.gov/form990.

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 Name of the organization **Employer identification number** American Bar Association 36-0723150 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 1 2

Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes

Was a correction made? ☐ Yes □ No h If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

3 4

Did the filing organization fileForm 1120-POL for this year?

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

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

(a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds If none, enter and promptly and -0directly delivered to a separate political organization If none, enter -0-3 5

Schedule C (Form 990 or 990-EZ) 2016

Total lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots nontaxable amount

Grassroots lobbying expenditures

Total Add lines 1c through 1i

(6).

answered "Yes."

Dues, assessments and similar amounts from members

Supplemental Information

expenses for which the section 527(f) tax was paid).

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

activity

1

2a

1

2

3

1

2

c Total

Part IV

3

Part III-A

Part III-B

Current year

Carryover from last year

expenditure next year?

Return Reference

(b)

Amount

(a)

Yes

No

## Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)

and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see

Explanation

Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

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 by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Did the organization agree to carry over lobbying and political expenditures from the prior year?

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues

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?

If "Yes," enter the amount of any tax incurred under section 4912

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

including any attempt to influence public opinion on a legislative matter or referendum, through the use of

1

2

1

2a

2b

2c

3

4 5

Schedule C (Form 990 or 990EZ) 2016

Yes

No

Nο

No

No

68,671,300

1,028,755

1,028,755

1,716,783

-688.028

efile GRAPHIC print - DO NOT PROCESS As Filed Data -SCHEDULE D

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

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990,

DLN: 93493193000218 OMB No 1545-0047

(Form 990)

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. Open to Public Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization **Employer identification number** American Bar Association 36-0723150 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b)Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during 3 Aggregate value of grants from (during year) Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c C Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? □ No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D

Schedule D (Form 990) 2016

Par	31111	Organizations Ma	aintaining Col	lections of	Art, Hist	orical T	reas	sures, or	Other	Similar As	<b>sets</b> (cont	inued)	
3		g the organization's acq s (check all that apply)	juisition, accessior	n, and other r	ecords, che	ck any o	f the f	following tl	hat are a	sıgnıfıcant u	se of its col	lection	
а		Public exhibition			ı	d 🗆	Loa	n or excha	inge prog	rams			
b		Scholarly research			ı	e 🗌	Oth	er					
c		Preservation for future	e generations										
4	Provide Part >	de a description of the XIII	organization's col	lections and e	explain how	they fur	her tl	he organiz	atıon's ex	empt purpos	se in		
5		ng the year, did the org s to be sold to raise fur								ular	☐ Yes	□ N	0
Pai	rt IV	Escrow and Cust Complete if the ord X, line 21.			on Form 9	90, Par	t IV,	line 9, or	reporte	ed an amou	nt on Forr	n 990,	Part
1a		e organization an agent ded on Form 990, Part I		an or other in	itermediary	for contr	ibutio	ns or othe	r assets i	not	☐ Yes	□ <b>N</b>	0
ь	If "Ye	es," explain the arrange	ement in Part XIII	and complet	e the follow	ing table		Γ		Ar	nount		_
С	Begin	nning balance						[	1c				_
d	Addıt	ons during the year							1d				_
е	Dıstrı	butions during the year	r						1e				
f	Endın	ng balance							1f				
<b>2</b> a	Did th	he organization include	an amount on Fo	rm 990, Part	X, line 21,	or escro	word	ustodial a	ccount lia	bility?	☐ Yes	<b></b> ✓ N	0
b	If "Ye	es," explain the arrange	ement in Part XIII	Check here	ıf the explai	nation ha	s bee	n provided	l in Part )	KIII			
Pa	rt V	Endowment Fund	<b>ds.</b> Complete ıf	the organiz	ation answ	vered "\	es" o	on Form 9	990, Par	t IV, line 10	<b>)</b> .		
				(a)Current	year (	<b>b)</b> Prior ye	ar	(c)Two ye	ars back	(d)Three year	rs back (e)	Four year	rs back
1a	Beginn	ning of year balance .			67,104		3,971		1,926,658		99,851	9,	728,735
b	Contrib	butions			25,865		8,456		1,898,356		9,500		2,000
С	Net inv	vestment earnings, gair	ns, and losses	1,2	:54,049	67	8,913		-196,329	1,4	43,145		923,250
d	Grants	or scholarships	•										
		expenditures for facilitie ograms	es										
f	Admını	istrative expenses .			148,469	-	4,236		234,714		25,838		54,134
g	End of	year balance		14,7	98,549	13,56	7,104	1	3,393,971	11,9	26,658	10,	599,851
2 a		de the estimated perce d designated or quasi-e	-	ent year end l 30 120 %	balance (line	≘ 1g, colu	ımn (	a)) held as	5				
b	Perm	anent endowment 🕨	49 940 %										
С	Temp	porarily restricted endov	wment ► 19 9	940 %									
	The p	percentages on lines 2a	, 2b, and 2c shou	ld equal 1009	%								
3а		here endowment funds	not in the posses	sion of the or	ganization i	hat are l	neld a	ınd admını	stered fo	r the			
	-	nization by nrelated organizations									3a(i)	Yes	No No
		related organizations .					•				3a(ii)		110
b		es" on 3a(II), are the rel			quired on S	chedule I	٠ ۲۶.	• •			3b	Yes	
4		ribe in Part XIII the inte											
Pai	rt VI	Land, Buildings,	and Equipmer	nt.								,	
		Complete if the or											
	Descri	iption of property	(a) Cost or oth (investme		( <b>b)</b> Cost or ot	her basis (	other)	(c)Accu	imulated d	epreciation	( <b>d)</b> B	ook value	9
1a	Land												
b	Buildin	ngs											
c	Leaseh	nold improvements				23,9	29,42	2		18,008,354		- 5	,921,068
d	Equipn	ment				49,3	371,78	0		44,049,524		- 5	,322,256
							374,10						374,108
Tota	I. Add	lines 1a through 1e (Co	olumn (d) must ed	qual Form 99	0, Part X, co	olumn (B	), line	10(c)) .		<b>•</b>		11	,617,432

Part VII Investments—Other Securities. Complete if the	organization ansv	vered 'Yes' on Form	990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value		ethod of valuation
(Including name of security)  (1)Financial derivatives		Cost or er	d-of-year market value
(2)Closely-held equity interests (3)Other (A) Financial derivatives and other financial products			
(B) Closely-held equity interests (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)  Part VIII Investments—Program Related. Complete if the		wared Weel on Form	2000 Port IV line 11e
See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value		ethod of valuation id-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )  Part IX  Other Assets. Complete if the organization answered "	Yes' on Form 990. Pa	rt IV. line 11d See Fo	rm 990. Part X. line 15
(a) Description	,	,	(b) Book value
(2)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15 )			. •
<b>Other Liabilities.</b> Complete if the organization and See Form 990, Part X, line 25.	swered 'Yes' on Fo	orm 990, Part IV, lın	e 11e or 11f.
1. (a) Description of liability	<b>(b)</b> B	ook value	
(1) Federal income taxes			
Federal income taxes			
Deferred Rent		18,145,958	
Pension Liability		48,774,313	
Other Liabilities		1,018,521	
Due to Related Parties		335,868	
Long-term Debt		26,000,000	
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	b fortunts to the or	94,274,660	ababama anka khisak sasa sada 10
<ol> <li>Liability for uncertain tax positions In Part XIII, provide the text of torganization's liability for uncertain tax positions under FIN 48 (ASC 74)</li> </ol>			

Add lines 4a and 4b .

Other losses .

Other (Describe in Part XIII ) .

Donated services and use of facilities .

Prior year adjustments . . . . .

Other (Describe in Part XIII ) .

Add lines 2a through 2d .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Subtract line 2e from line 1 .

Part XI

2

b

c

d

е

b

Part XII

5

1

2

b

d

е 3

а

b

c

Part XIII

5

4

3

4

Schedule D (Form 990) 2016

Page 4

21,193,449

147,448,428

147,448,428

142,653,711

1,450,671

141.203.040

12,416,091

153,619,131

Schedule D (Form 990) 2015

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

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

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

**Supplemental Information** 

Net unrealized gains (losses) on investments . . .

Donated services and use of facilities
Recoveries of prior year grants
Other (Describe in Part XIII )
Add lines 2a through 2d
Subtract line <b>2e</b> from line <b>1</b>
Amounts included on Form 990, Part VIII, line 12, but not on line 1
Investment expenses not included on Form 990, Part VIII, line 7b $$ .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

2c 2d 4a

4b

2a

2b

2c

2d

4b

Explanation

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

2a

2b

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

10,623,766

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . . Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

1,450,671

12.416.091

10,569,683

2e

3

4c

2e

3

4c

Page <b>5</b>	Schedule D (Form 990) 2015
tinued)	Part XIII Supplemental Information (co
Explanation	Return Reference

Schedule D (Form 990) 2016

## **Additional Data**

Software ID: 16000333 Software Version: 17.2.1.0

EIN: 36-0723150

Name: American Bar Association

# Supplemental Information

Return Reference	Explanation			
V 4	The endowment funds are held by a tax-exempt related organization, ABA Fund for Justice an d Education FJE ABA uses the proceeds from the endownment to provide a predictable stream of funding for ABA programs			

Supplemental Information	
Return Reference	Explanation
X 2	The ABA and FJE are qualified under the US Internal Revenue Code as tax exempt organizatio ns or, in the case of FJE, as a tax-exempt fund, and are exempt from tax on income related to their tax-exempt purposes under 501 a of the Code. The ABA is exempt from income tax a s an association described in Section 501 c6 of the Code. FJE is exempt under Section 501 c3. FJE and other organizations do not have any material unrelated business income. Accordingly, no provision for income taxes has been made in the consolidated financial statements for the fiscal years ended August 31, 2017 and 2016. There are no amounts of interest and penalties associated with the tax matters that are recognized in the ABAs consolidated financial statements for the fiscal years ended August 31, 2017 and 2016.

Supplemental Information Return Reference Explanation Pension changes other than net periodic pension cost 12,248,881, Investment Fees 1,565,538 XI 2d , Federal and States taxes 59.577 Total Other 10,623,766

upplemental Information	
Return Reference	Explanation
III 2d	Pension allocation to FJE 1,450,671

Sı

Supplemental Information Return Reference Explanation Investment Fees 1,565,538, Federal and States taxes 59,577, Grants from FJE 10,790,976 Total Other XII 4b 12.416.091

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493193000218 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer Identification number** American Bar Association 36-0723150 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eliqibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part III Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance See Additional Data Table (1)(2)(3)(4)

(6)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . . .

(a) Type of grant or as	sistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) Scholarships/Awards		52	67,200			
1)						
2)						
3)						
4)						
5)						
6)						
7)						
Part IV Supplement	al Information	on. Provide the info	ormation required in F	Part I, line 2, Part III	, column (b), and any other ad	Iditional information.
Return Reference	Explanation	on				

Schedule I (Form 990) 2016

## **Additional Data**

Education 321 N Clark St Chicago, IL 60654

AIPLEF

241 18th St South Arlington, VA 22202

		Software ID:	: 16000333				
		Software Version:	: 17.2.1.0				
		EIN:	: 36-0723150				
		Name:	: American Bar Assoc	ciation			
Farms 200 Calcadada I. Barri	II Constant	Oth 4	D	tions and Bonnet			
Form 990, Schedule I, Part	11, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	c Governments.		
(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	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	(h) Purpose of grant or assistance
ABA Fund for Justice &	36-6110299	501C3	10,790,975				General Support

17,500

Awards/Fellowships

i orini 330/3circulate 1/ i ure	zz, Grancs and	Other Assistance to	<i>-</i>
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d)

54-2019670

501C3

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 26-0556625 501C3 20.000 General Support Ace Mentor Program of America Inc 400 Main St 600 Stamford, CT 06901

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

86-6004791

Arizona Attorney General's

1275 W Washington St Phoenix, AZ 85007

Office

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Attorney General of Texas 74-6000057 6.000 Awards/Fellowships 115 state agency 300 W 15th St Austin, TX 78701

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

Austin, TX 78701

Commonwealth of Massachusetts
One Asburton Place FI 18

Boston, MA 02108

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 54-6001703 6.000 Awards/Fellowships Commonwealth of Virginia -115 state agency OAG 900 E Main St 6056 Richmond, VA 23219 Commonwealth of Kentucky -61-0600439 6.000 Awards/Fellowships 115 state agency

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

OAG

700 Capitol Ave 34 Frankfort, KY 40601

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 23-1671562 501C3 17.047 Awards/Fellowships

Community Legal Services Inc 1424 Chestnut St Philadelphia, PA 19102

Community Tax Aid Inc 52-1557807 501C3 16,520

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

218 D St SF FI 1 Washington, DC 20003

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Connecticut Dept of Consumer 61-1615965 6.000 Awards/Fellowships 115 state agency Protection

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

165 Capitol Ave Hartford, CT 06106 Department of Justice (PR)

PO Box 9020192 San Juan, PR 00902

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance 58-6002010 6.000 Awards/Fellowships Georgia Department of Law 115 state agency 40 Capitol Sq SW Atlanta, GA 30334

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

Iowa Attorney General's Office

1305 E Walnut St Des Moines, IA 50319

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government other) assistance Legal Aid Society of San Diego 95-1869806 70.373 Awards/Fellowships 115 state agency 110 S Fuclid Ave San Diego, CA 92114

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

Mississippi Attorney General's

Office

550 High St 1200 Jackson, MS 39225

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance Montana Attorney General's 81-0302402 6.000 Awards/Fellowships 115 state agency Office 215 N Sanders Helena, MT 59620 NCCUSL-Nat'l Conf of Commr 36-2307682 26.250 115 state agency General support on Uniform State Law

111 N Wabash Ave 1010 Chicago, IL 60602

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government other) assistance National Association of Black 52-1266959 501C3 13.000 General support Journalists 1100 Knight Hall 3100 College park, MD 20742 Nebraska Department of 47-0491233 6.000 Awards/Fellowships 115 state agency

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Justice

2115 State Capitol Lincoln, NE 68509

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance New York State Department of 14-6013200 6.000 Awards/Fellowships 115 state agency 1 ----

37.710

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

Lavv	
120 Broadway	
New York, NY 10271	
Northwestern University	

375 E Chicago Ave Chicago, IL 60611

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Office of the Attorney General 62-6001445 6.000 Awards/Fellowships 115 state agency Tennessee 425 Fifth Ave North Nashville, TN 37243

OAG-Dept of Legal Affairs 59-3749349 6.000 Awards/Fellowships 115 state agency

PL-01 The Capitol Tallahassee, FL 32399

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Office of the Attorney General 87-6000545 6.000 Awards/Fellowships 115 state agency Utah

160 E 300 South FI 5
Salt Lake City, UT 84114

Oklahoma Indian Legal 73-1142462 115 state agency 30,732

Services Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

4200 Perimeter Ctr Dr 222 Oklahoma City, OK 73112

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance Oregon Department Of Justice 93-6001740 6.000 Awards/Fellowships 115 state agency 1515 SW 5th Ave 410

General Support

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

Portland, OR 97201
Pace University

78 N Broadway White Plains, NY 10603

(a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance Pennsylvania Office of Attorney 23-2160277 6.000 Awards/Fellowships 115 state agency General Strawberry Sa Fl 15 Harrisburg, PA 17120

EMLF support

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501C3

Rocky Mountain Mineral Law

9191 Sheridan Blvd 203 Westminster, CO 80031

Foundation

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 57-6000286 6.000 Awards/Fellowships South Carolina Attorney 115 state agency General

6.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

1000 Assembly St 519 Columbia, SC 29201 State of Alabama OAG

501 Washington Ave Montgomery, AL 36130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance State of Arkansas OAG 71-6007391 6.000 Awards/Fellowships 115 state agency 323 Ctr St 1100 Little Rock, AR 72201

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

51-6000279

State of Delaware

820 N French St Wilmington, DE 19801

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 99-0319357 6.000 Awards/Fellowships State of Hawaii Dept 115 state agency Commerce & Consumer Aff 235 S Bertania St Rm 801 Honolulu, HI 96813 State of IndianaOAG 35-6000158 6.000 Awards/Fellowships 115 state agency

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

302 W Washington St Fl 5 Indianapolis, IN 46204

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 48-1124839 6.000 Awards/Fellowships State of Kansas Attorney 115 state agency

State of Marvland OAG	52-6002033	115 state agency	6,000		Awards/Fellowships
General 120 SW 10th Ave Fl 2 Topeka, KS 66612			·		

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

200 St Paul Pl Baltimore, MD 21202

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance State of Nevada OAG 88-6000022 6.000 Awards/Fellowships 115 state agency 555 E Washington 3900

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

555 E Washington 3900 Las Vegas, NV 89101

02-6000618

State of New Hampshire

33 Capitol St Concord, NH 03301

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 21-6000928 6.000 Awards/Fellowships State of New Jersey OAG 115 state agency P O Box 45029

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

Newark, NJ 07101 State of Ohio

30 F Broad St Fl 15 Columbus, OH 43215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applıcable grant cash non-cash assistance or assistance other) or government assistance State of South Dakota 46-6000364 6.000 Awards/Fellowships 115 state agency 1302 E Hwy 14 2

6,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

115 state agency

83-0208667

Pierre, SD 57501
State of Wyoming OAG

123 Capitol Ave Cheyenne, WY 82002

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance University of Minnesota 41-6042488 501C3 58.158 Awards/Fellowships

Scholarship

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

701 S Main St

Columbia, SC 29208

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of **(b)** EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 91-6001060 6.000 Awards/Fellowships Washington State Attorney 115 state agency General 800 5th Ave 2000 Seattle, WA 98104 55-6000749 6.000 Awards/Fellowships West Virginia Attorney 115 state agency

General's Office 1900 Kanawha Blvd E Charleston, WV 25305

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant **(b)** EIN (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 6.000 Wisconsin Department of 39-6006427 115 state agency Awards/Fellowships Justice 17 W Main St

Madison, WI 53702

DLN: 93493193000218

OMB No 1545-0047

#### 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. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.qov/form990.

Open to Public Inspection

2015

Department of the Treasury Internal Revenue Service

Name of the organization American Bar Association

**Employer identification number** 

			36-0723150			
Pa	rt I Questions Regarding Compensation					
					Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provide					
	990, Part VII, Section A, line 1a Complete Part III to	•				
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement or provision of all of the expenses desc		. , , , ,	1b	Yes	
2						
	directors, trustees, officers, including the CEO/Execut	ive D	Director, regarding the items checked in line 1a?	2	Yes	
3	Indicate which, if any, of the following the filing organize	ation	used to establish the compensation of the			
,	organization's CEO/Executive Director Check all that used by a related organization to establish compensati	appl	y Do not check any boxes for methods			
	Compensation committee	г	Written employment contract			
	☐ Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	Ŀ	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Pa or a related organization	ırt V I	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control par	ymer	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplementa	ıl non	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-base	ed co	impensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provi	ide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization	ns m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, li compensation contingent on the revenues of					
а	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, li compensation contingent on the net earnings of	ne 1	a, did the organization pay or accrue any			
а	The organization?			<b>6</b> a		
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, li payments not described in lines 5 and 6? If "Yes," des			7		
8	Were any amounts reported on Form 990, Part VII, par					
	subject to the initial contract exception described in Rein Part III	egula	ations section 53 4958-4(a)(3)? If "Yes," describe	_		
				8		
9	If "Yes" on line 8, did the organization also follow the resection 53 4958-6(c)?	ebutt	table presumption procedure described in Regulations	9		

Schedule J (Form 990) 2015							Page Z
Part III Officers, Directors	, Trustees, Key Er	nployees, and Hig	hest Compensate	<b>ed Employees.</b> 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 are not 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							
(A) Name and Title (B) Breakdown of W-2 and/or 1099-MIS		SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	<b>(F)</b> Compensation in	
	Base (1) compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990

Cahadula 1 (Farm 000) 201 F

See Additional Data Table

Schedule 3 (Form 330) 2013	r aye <b>3</b>					
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						
Return Reference	Explanation					
	Senior executives were offered spousal travel for general business trips during the year Spousal travel was treated as taxable and reported on a 1099 at year end					
Part I Line 4a	During FY2017, Christopher Gloede, Associate Executive Director, received a serverance payment in the amount of 123,868 Laura Metzger, Division					

Schedule J (Form 990) 2015

Director Brand and Product Mgmt, received a serverance payment in the amount of 89,985

Schedule 1 (Form 990) 2015

 Software ID:
 16000333

 Software Version:
 17.2.1.0

 EIN:
 36-0723150

Name: American Bar Association

Compensation ind	(ii) onus & centive pensation 238,857 20,840	(iii) Other reportable compensation 3,564	other deferred compensation	benefits 1,073	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1 Jack L Rives Executive Director Chief Operating Officer  (II)  1 William K Phelan Sr Assoc Executive Director CFO  (II)  2 James Dimos  (I)  907,828  (II)  353,559  (II)  330,598	238,857	3,564	21,708	1,073	į.	
Sr Assoc Executive Director CFO (II)  2James Dimos (j) 330,598	20,840	865		-	1,173,030 	
			21,350	21,214	417,828	
(11)	15,000	1,461	6,506	15,736	369,301	
Assoc Executive Director- General Counsel (II) 356,461	10,000		21,350	1,415	389,226	
AThomas M Susman Assoc Executive Director- Governmental Affairs  (II)  343,185	3,500	2,163	17,057	835	366,740	
Assoc Executive Director-Membership (II) 153,419	34,487	124,107	14,199	4,486	330,698	
Sr Assoc Exec Director Chief Governance Officer  (I) 289,313	15,000	1,250	7,230	7,023	319,816	
THolly Cook Sr Associate Executive Director  (I) 234,294	12,500	524	18,825	913	267,056	
SValena J Stokes Sr Assoc Executive Director- Chief HR  (i) 233,337  (ii) 233,337	8,340	1,318	18,505	13,582	275,082	
Associate Executive Director- CMR (II) 217,964	13,340	1,377	18,007	14,536	265,224	
Assoc Executive Director-Professional Services (II) 226,026	1,840	1,432	3,844	11,582	244,724	
11Robert Horowitz Director-Professional Services (i) 212,727 (ii)	5,000	1,269	5,288	810	225,094	
Assoc Executive Director- Meetings Travel  (i) 193,149	10,000	1,166	4,671	1,839	210,825	
13Barry Curner Managing Director- Accreditation Legal Education (I) 321,348	2,000	3,263	20,025	14,544	361,180	
14William Adams Deputy Managing Director- Accrediation (i) 243,910	1,700	1,581	16,988	14,397	278,576	
15 Laura Metzger Division Director Brand Product Management  (i) 111,062	10,517	90,424	3,576	3,720	219,299	
16Cheryl Niro Senior Strategy Advisor  (i) 209,247  (ii)	1,000	1,269	16,262	14,461	242,239	
17Jerome Kıska Deputy Chief Financial Officer  (II) 198,593	8,340	1,208	16,720	14,538	239,399	

Internal Revenue Service  Name of the organization American Bar Association	▶Info	"Yes" on Foormation about the sections (sections (sections (sections (sections (section answered	➤ Compl rm 990, Pa or Form ➤ Attac out Schedu	orm 990, Part 1 Relationship be	anization ans 5a, 25b, 26, 2 V, line 38a of 0 or Form 99 0 or 990-EZ; //form990.	swered 27, 28a, 28b, or 40b. 0-EZ. ) and its instr	or 28 ruction En 36	ns is	yer ide 3150		20 Den Inspection n	1 to Pu	6 ublic
American Bar Association  Part I Excess Benef Complete if the	<b>it Tran</b> organizat	<b>isactions</b> (s	► Attac out Schedu section 501( d "Yes" on F	th to Form 990 le L (Form 99 www.irs.gov, (c)(3), section 5 form 990, Part 1 Relationship be	o or Form 99 0 or 990-EZ /form990. 501(c)(4), and IV, line 25a or	<b>0-EZ. ) and its instr 1</b> 501(c)(29) or <b>2</b> 25b, or Form	En 36	nploy -072	yer ide 3150	C	pen i Insp	to Pu ecti	ublic on
Name of the organization American Bar Association  Part I Excess Benef Complete if the c	<b>it Tran</b> organizat	<b>isactions</b> (s	section 501( d "Yes" on F	c)(3), section 5 form 990, Part 1	501(c)(4), and IV, line 25a or otween disqual	501(c)(29) or 25b, or Form	En 36	nploy -072	yer ide 3150		Insp	ecti	on
Part I Excess Benef Complete if the c	organizat	tion answered	d "Yes" on F	orm 990, Part 1 Relationship be	IV, line 25a or tween disqual	25b, or Form	36 rganiza	-072 ations	3150	entifica	ition n	umb	er
Complete if the o	organizat	tion answered	d "Yes" on F	orm 990, Part 1 Relationship be	IV, line 25a or tween disqual	25b, or Form	rganıza	ations					
Complete if the o	organizat	tion answered	d "Yes" on F	orm 990, Part 1 Relationship be	IV, line 25a or tween disqual	25b, or Form			only)				
				Relationship be	tween disqual			Z. Pa		ne 40b			
				c	organization		nd	(c) D	escript	on of	(d	) Corı	ected?
								tr	ansactı	on	Y	es	No
reported an ar	nd/or F e organi mount or ionship	rom Interzation answern Form 990, F	ested Per red "Yes" or Part X, line ! (d) Loan orga	<b>sons.</b> n Form 990-EZ,			90, Par (g) defa	t IV, In ult?	line 26  (I Appro boai	s, or if the high section in the sec	(	anıza )Wrıt reem	ten
			То	From			Yes	No	Yes	No	Yes		No
				1									
 Total				•	<b>\$</b>								
Part IIII Grants or As							•						
Complete if the complete if the complete is the complete in the complete in the complete in the complete is the complete in the complete in the complete in the complete is the complete in th	on <b>(b</b> )		between n and the	es" on Form 9 (c) Amount o		(d) Type (	of assi	stanc	e	<b>(e)</b> Pui	pose c	f assı	stance
									_				
	+								-+				

Complete if the organization a	inswered tes on Form	n 990, Part IV, line 286	a, 280, Or 28C.		
(a) Name of Interested person	(b) Relationship between interested person and the organization	<b>(c)</b> Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) Julianna Theberge	Employee	48,731	Employee Compensation		No
(2) Ingrid Stokes	Employee	47,763	Employee Compensation		No

(2) Ingrid Stokes	Employee	47,763 Employee Compensation	No		
Part V. Supplemental Information					

Julianna Theberge is a family member of Valerie Stokes, a key employee of the ABA

Ingrid Stokes is a family member of Valerie Stokes, a key employee of the ABA

Explanation

Schedule L (Form 990 or 990-EZ) 2016

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference

Part IV Line 1

Part IV Line 2

DLN: 93493193000218 OMB No 1545-0047 Supplemental Information to Form 990 or 990-EZ SCHEDULE O (Form 990 or 990-Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. EZ) ▶ Attach to Form 990 or 990-EZ. Open to Public ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at Department of the Treasury Inspection www.irs.gov/form990. Internal Revenue Service
Name of the organization Employer identification number American Bar Association 36-0723150 990 Schedule O, Supplemental Information Return **Explanation** Reference Form 990. The ABA provides lawyers unparalleled opportunities for professional growth and service th Part III, Line rough numerous groups dedicated to specific areas of law. The Association currently has 22 Sections, which range in size from about 3,600 members to more than 51,000 7 divisions an 4a d 6 forums All of these groups draw their membership from lawyers, judges, academics, law students and associate members with common interests. Sections include the following legal I areas Administrative Law and Regulatory Practice Antitrust Law Business Law Criminal Jus tice Dispute Resolution Environment, Energy and Resources Family Law Health Law Civil Righ ts and Social Justice Intellectual Property Law International Law Labor and Employment Law Legal Education Litigation Public Contract Law Infrastructure and Regulated Industries Re al Property, Trust and Estate Law Science and Technology Law State and Local Government La w Taxation Tort, Trial and Insurance Practice Divisions include Government and Public Sec tor Lawyers Judicial Law Practice Law Student Senior Lawyers Solo, Small Firm and General Practice, and Young Lawyers Forums explore new areas of developing law such as Affordable Housing, Air and Space Law, Communications Law, Construction Law, Entertainment and Sport s Industries Law and Franchising Sections, Divisions and Forums within the ABA provide me mbers a myriad of opportunities for professional development, leadership development, netw orking, pro bono contributions, and education within their own particular field of interes t and expertise Sections and Divisions also contribute to policy-making on issues of impo rtance to both lawyers and the public Sections originate many of the recommendations that become the ABAs policy positions and act as checks and balances on recommendations of oth er entities. Through the work of these groups, the ABA benefits the public through improve ment of both the profession and the legal system

Return Reference	Explanation
Form 990, Part III, Line 4c	The ABA also publishes both print and electronic versions of the ABA Journal, which is pro vided free to approximately 400,000 members, as well as to numerous libraries interested in legal topics. The ABA also published more than 250 books and eBooks that were sold or distributed to more than 85,000 customers. These books offered guidance and counsel in every legal discipline and every aspect of a legal career. Many of these excellent books would not have been published by a commercial publisher because their revenue potential is not good reat enough for a commercial model. However, these publications are of great value to the profession, providing vital information to keep lawyers up to date on developments in the law. Thus, ABA publications serve clients, the public and courts by improving the education in and professionalism of the nations lawyers. Because the ABAs mission is to serve the profession, many disciplines and authors are able to publish vital and timely information that the vould not otherwise be available to the profession.

Return Reference	Explanation
Form 990,	In 2017, the ABA became aware of an unauthorized diversion of assets totaling approximatel
Part VI,	y 1 3 million over a period of multiple years, committed by a non-management staff member
Section A,	The employee was immediately placed on administrative leave when the unauthorized diversi

Line 5 on of assets was detected and was terminated the following day. The ABA commenced an investigation and notified both the Executive Committee of its board of directors and law enfor cement, with whom the ABA has cooperated fully in the ongoing investigation. Furthermore, forensic experts from the accounting firm of Grant Thornton were engaged to participate in the investigation along with the ABA Internal Audit, Financial Services staff and the Gen eral Counsels Office The ABA reviewed and revised procedures including more stringent con trols and monitoring and increased financial oversight. The ABA is in the process of seeki

ng recovery of the funds from its insurance carrier

Return Reference	Explanation
Form 990, Part VI, Section A, Line 6	The members of the Nominating Committee of the House of Delegates nominate the members of the Board of Governors, the elective offices of the Association which include the Presiden t Elect, Secretary, Treasurer, and Chair of the House of Delegates. The President-elect au tomatically becomes the President at the next Annual Meeting after his/her election as Pre sident-elect. Members who register for the annual meeting elect six members of the House of Delegates. The House elects the Board of Governors, and the officers of the Association, including the President-elect, the Chair of the House of Delegates, the Secretary and Tre asurer. Members may nominate officers and governors by presenting a nominating petition to the Secretary with the number of member signatures specified in the bylaws for each elect ed position. Members may initiate a referendum to change or initiate ABA policy by filing a petition with the requisite number of signatures. The House, by majority vote, can direct a referendum on a question relating to the substance of the law, the administration of justice or the policy of the Association. In either case, the majority of members casting a ballot determine the result. All members may attend the meetings of the House of Delegates and may submit a resolution with report for consideration by the House.

Return Reference	Explanation
Form 990, Part VI, Section A, Line 7a	The ABA House of Delegates elects the Board of Governors, and the officers which includes the President-elect, the Chair of the House of Delegates, the Secretary and Treasurer The House is designed to be representative of the legal profession in the United States Members of the Association who register for the annual meeting elect six delegates-at-large. A BA members of each state elect state delegates ABA members who belong to state and qualify ing local Bar Associations also elect delegates, the number being dependent upon the number of ABA members and lawyers in the respective state or local association. Association members of ABA sections, divisions and eligible judicial conferences elect section/division delegates Each section has a minimum of two delegates, with additional delegates dependent upon the number of members in each section. The U.S. Virgin Islands Bar Association, Guam, the Commonwealth of the Northern Mariana islands and American Somoa elect a delegate. State, local and territorial bar associations elect delegates according to their own rules. For purposes of election to the Board, the House is grouped into nineteen geographical districts. Governors serve staggered three year terms the House elects approximately one-thir dof the Board, and the President-Elect at each annual meeting. The Board of Governors consists of one member from each of the 19 geographical districts, nine section members-at-large, one law student member-at-large, one judicial member-at-large, two young lawyer members-at-large, and five Goal III members-at-large. The President, Chair of the House, President, Elect, Immediate Past President, Secretary and Treasurer of the ABA are ex-officio members of the Board of Governors. Every third year the Treasurer-Elect is included in the Board of Governors. The House elects the Chair of the House for a two-year term in even-numbered years.

Return Reference	<b>Explanation</b>
Form 990, Part VI, Section B, Line 11b	Prior to filing the return with the IRS, it is reviewed by the organizations management an d subject to review by the Audit Committee. The final Form 990 is shared on a secure website with all members of the Board prior to filing the return with the IRS, sufficiently in advance of the due date to allow Board members the opportunity to raise questions or concerns, if any

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Form 990,	Each Board member received the Conflict of Interest COI questionnaire this year All respo
Part VI,	nses were reviewed by the Accounting team at the ABA Prior to each Board meeting, staff a
Section B,	ssigned to the Board of Governors distribute COI forms to Board members and collect the co
Line 12c	mpleted COI forms If a Board member discloses a conflict regarding a matter before the Bo
	ard, the Board member must disclose the conflict and, if necessary, recuse himself/herself
	from any matter involving the disclosed conflict, and the recusal is noted in the minutes

Return

Reference

ĺ	Form 990,	The Executive Compensation Committee of the ABA Board of Governors reviewed compensation i
	Part VI,	nformation of comparable entities and the performance assessment of the top management pos
	Section B,	ition and made a recommendation to the full ABA Board of Governors. The ABA Board of Gover
	Line 15a	nors approves the final compensation of the Executive Director of the American Bar Associa

tion This process occurs every year and was last performed calendar year 2016

Explanation

Return
Reference

The Executive Compensation Committee of the ABA Board of Governors reviewed compensation to the Executive Compensation of the Executive Co

The Executive Compensation Committee of the ABA board of Governors reviewed compensation i
nformation of comparable entities and performance of other officers and key employees. Whe
n key employee positions become vacant, the compensation is reviewed by Associations Execu
tive Director and the Human Resources department. This process occurs every year and was I
ast performed in calendar year 2016. In the case of a vacancy occurring during the calenda
r year, the process occurs on an ad-hoc basis

Return Explanation

Form 990,
Part VI,
Section B,
Line 19

The ABAs Constitution and Bylaws, Business Conduct Standards, Conflict of Interest Policy,
and the Audited Financial Statements are available on ABAs website www abanet org and als
o to the public upon request

Return Explanation

Form 990,
Part XI, Line
Pension changes other than net periodic pension cost 12,248,881 Pension allocation to rel
ated organization 1,450,671 Total other changes in net assets or fund balances 10,798,210

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Department of the Treasury

Internal Revenue Service

#### **Related Organizations and Unrelated Partnerships**

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

DLN: 93493193000218 OMB No 1545-0047

> Open to Public Inspection

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

ame of the organization nerican Bar Association	Emp	Employer identification number									
							723150				
Part I Identification of Disregarded Entities Complete if	f the organization	answered "Yes	" on Form	990, Part	IV, line 3	3.					
(a) Name, address, and EIN (If applicable) of disregarded entity	Pri	<b>(b)</b> mary activity			(d) Ile (state Total Inco		( <b>e)</b> End-of-year a	ssets	s Direct contr entity		
Part II Identification of Related Tax-Exempt Organization related tax-exempt organizations during the tax year.	ons Complete if th	e organization	answered	"Yes" on F	orm 990,	Part I	V, line 34 be	ecause	it had one or	more	
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activit	ty Legal dor	(c) Legal domicile (state or foreign country)		) le section	(e) Public charity status (if section 501(c)(3))				(13) contro entity?	
1)ABA Fund for Justice & Education 21 N Clark Street	Public Service		IL	501c3		12a		ABA		Yes	No
hıcago, IL 60654 6-6110299											
<b>2)</b> American Bar Endowment 21 N Clark Street hicago, IL 60654	Grants		IL	501c3		7		N/A			No
6-2384321 <b>3)</b> American Bar Foundation 50 N Lake Shore Drive	Research		IL	501c3		7		N/A			No
hıcago, IL 60611 6-6110271								18/7			
<b>4)</b> National Judicial College idicial College Building MS 358	Education		NV	501c3		2		N/A			No
eno, NV 89557 4-2427596								.,,,,			
or Panerwork Reduction Act Notice, see the Instructions for Form	990	Ca	t No 5013	85Y				Sch	edule R (Form	990) 20	016

Part III Identification of Related Orgone or more related organization				te If the	e orga	anızatıon	ansv	vered "Y	es" on Form	າ 990,	Part I'	V, line 3	4 be	cause ı	t had	
<b>(a)</b> Name, address, and E related organizatio	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	( <b>d</b> ) Dire contro entil	ect Predomir olling income(rel		nant Share of total incolored, from der 512-		(g) Share of end-of-year assets	(h) Disproprtionat ar allocations?				partner?	r Perce	<b>k)</b> entage ership	
		+								Yes	No			Yes No	4	
Part IV Identification of Related Org because it had one or more related organization.	ganizations Taxable as a Cated organizations treated as	Corporation a corporation	or Trus	st Comp	olete na th	if the org	janiz ir.	ation ans	swered "Yes	s" on F	orm 9	90, Part	IV,	line 34		
(a) Name, address, and EIN of	(b) (c)			(d)			(e)	(f) Share of tota	(g) Share of end-of year assets		-of- Percent owners		) tage	(ı Section	I <b>)</b>	
related organization	Primary activity	Legal domicile (state or foreig country)			Direct controlling entity		g Type of entity (C corp, S corp, or trust)						income	ship	(13) controlle entity?	
(1)ABA Retirement Funds	Benefit Plans		IL		N/A		C Corp								Yes	<b>No</b> No
321 N Clark St Chicago, IL 60654 36-2550367																
(2)American Lawyers Insurance Plans Inc	Insurance		IL		ABE		C Corp	p								No
321 N Clark St Chicago, IL 60654 36-3650005																
	<u> </u>											Schedul	e R (	Form 9	90) 20	116

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Part V Transactions With Related Organic	anizations Complete if the organization answered "Yes" on Form 9	90, Part IV, line 34, 35	b, or 36.		
Note. Complete line 1 if any entity is listed	n Parts II, III, or IV of this schedule			Y	'es No
1 During the tax year, did the orgranization enga	ge in any of the following transactions with one or more related organizations	listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) ro	valties, or(iv) rent from a controlled entity			1a	No
<b>b</b> Gift, grant, or capital contribution to related	organization(s)			1b Y	es
${f c}$ Gift, grant, or capital contribution from relat	ed organization(s)			1c	No
<b>d</b> Loans or loan guarantees to or for related o	ganızatıon(s)			1d	No
e Loans or loan guarantees by related organiz	ation(s)			1e	No
${f f}$ Dividends from related organization(s) .				1f	No
${f g}$ Sale of assets to related organization(s) .				1g	No
h Purchase of assets from related organization	(s)			1h	No
i Exchange of assets with related organization	s)			1i	No
j Lease of facilities, equipment, or other asset	to related organization(s)			1j	No
<b>k</b> Lease of facilities, equipment, or other asse	s from related organization(s)			1k	No
I Performance of services or membership or fu	ndraising solicitations for related organization(s)			11	No
<b>m</b> Performance of services or membership or fi	ndraising solicitations by related organization(s)			1m	No
n Sharing of facilities, equipment, mailing lists	or other assets with related organization(s)			1n	No
o Sharing of paid employees with related orga	nization(s)			10	No
<b>p</b> Reimbursement paid to related organization	s) for expenses			<b>1</b> p	No
<b>q</b> Reimbursement paid by related organization	(s) for expenses			1q	No
r Other transfer of cash or property to related	organization(s)			1r	No
s Other transfer of cash or property from rela	ed organization(s)			1s	No
2 If the answer to any of the above is "Yes," s	e the instructions for information on who must complete this line, including co	overed relationships and tr	ansaction thresholds		
Name of r	(a) (b) Interest (b) Transaction type (a-		( <b>d)</b> Method of determining a	mount invo	olved
(1)ABA Fund for Justice & Education	b	10,790,975	Cash		

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>(b)</b> Primary activity	domicile	(d) Predominant Income (related, unrelated, excluded from tax under sections 512- 514)	section		Are all partners section		(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	ite	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General c managin partner?	or g ?	<b>(k)</b> Percentage ownership
			514)	Yes	No	<b>!</b> ,		Yes	No		Yes	No			
										Schedul	e R (Form	1 990	0) 2016		

Schedule R (Form 990) 2016 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Schedule R (Form 990) 2016