#### \*\* PUBLIC DISCLOSURE COPY \*\*

Department of the Treasury Internal Revenue Service

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

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

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

OMB No. 1545-0047

Open to Public Inspection

Form 990 (2012)

| A                              | FOR T              | ie 2012 calendar year, or tax year beginning and  | ending            |   |                                |
|--------------------------------|--------------------|---|-------------------|---|--------------------------------|
| В                              | Check i<br>applica | C Name of organization  |                   | D Employer ident                        | ification number               |
| Г                              | Addi               | ess<br>9 INDIAN LAW RESOURCE CENTER   |                   |   |                                |
| Ē                              | Nam<br>chan        | 8   |                   | 52_                                     | 1121079                        |
| Г                              | Initia<br>retur    |   | Room/suite        | E Telephone numi                        |                                |
| F                              | Term               | in- 1 602 MODERN BUTNO  | INDONN'S GILLE    |   | <u>-449-2006</u>               |
| Ē                              | Ame                | nded  |                   |   |                                |
|                                | Appl               |   |                   | G Gross receipts \$                     | 801,184.                       |
| _                              | pend               | F Name and address of principal officer:ROBERT T. COULTER   |                   | H(a) Is this a group<br>for affiliates? |                                |
|                                |                    | 602 NORTH EWING, HELENA, MT 59601   |                   |   | Yes X No                       |
| _                              | Tax-ex             | tempt status: X 501(c)(3) 501(c) ( )  | - C07             | H(b) Are all affiliates i               |                                |
|                                |                    | ite: NWW.INDIANLAW.ORG  | or 527            | 1                                       | a list. (see instructions)     |
|                                |                    | of organization: X Corporation Trust Association Other  | 1 V               | H(c) Group exempt                       |                                |
|                                | art I              | Summary   | <u>  L Year (</u> | or tormation: 1978                      | M State of legal domicile: DC  |
| ø                              | 1                  | Briefly describe the organization's mission or most significant activities: PROV                  | IDES L            | EGAL ASSIS                              | TANCE AND                      |
| Governance                     |                    | ADVOCACY WITHOUT CHARGE TO INDIAN AND ALA   | ASKA N            | ATIVE NATI                              | ONS                            |
| Ĕ                              | 2                  | Check this box  if the organization discontinued its operations or dispos                         |                   |   |                                |
| Š                              | 3                  | Number of voting members of the governing body (Part VI, line 1a)                                 |                   |   |                                |
| ڻ<br>مح                        | 4                  | Number of independent voting members of the governing body (Part VI, line 1b)                     | **                | 4                                       |                                |
| es                             | 5                  | Total number of individuals employed in calendar year 2012 (Part V, line 2a)                      |                   | 5                                       |                                |
| Ϋ́                             | 6                  | Total number of volunteers (estimate if necessary)  |                   | 6                                       |                                |
| Activities &                   | 7 a                | Total unrelated business revenue from Part VIII, column (C), line 12                              |                   | 7:                                      |                                |
| _                              | b                  | Net unrelated business taxable income from Form 990-T, line 34                                    |                   | 7                                       |                                |
|                                | 1 .                |   |                   | Prior Year                              | Current Year                   |
| <u>Φ</u>                       | 8                  | Contributions and grants (Part VIII, line 1h)   |                   | 2,195,485                               |                                |
| Revenue                        | 9                  | Program service revenue (Part VIII, line 2g)  | }                 | 0                                       |                                |
| ě                              | 10                 | Investment income (Part VIII, column (A), lines 3, 4, and 7d)                                     |                   | 3,628                                   |                                |
| ш                              | 11                 | Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)                          |                   | 9,199                                   | <del></del>                    |
|                                | 12                 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)                |                   | 2,208,312                               |                                |
|                                | 13                 | Grants and similar amounts paid (Part IX, column (A), lines 1-3)                                  |                   | 0                                       |                                |
|                                | 14                 | Benefits paid to or for members (Part IX, column (A), line 4)                                     |                   | 0                                       | <del></del>                    |
| S                              | 15                 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)                 |                   | 998,518                                 |                                |
| Expenses                       | 16a                | Professional fundraising fees (Part IX, column (A), line 11e)                                     |                   | 0                                       |                                |
| ğ                              | b                  | Total fundraising expenses (Part IX, column (D), line 25) 181,00                                  | 5.                |   |                                |
| Ш                              | 17                 | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)                                      |                   | 544,166                                 | 505,679.                       |
|                                | 18                 | Total expenses. Add lines 13-17 (must equal Part iX, column (A), line 25)                         |                   | 1,542,684                               |                                |
|                                | 19                 | Revenue less expenses. Subtract line 18 from line 12  |                   | 665,628                                 |                                |
| Sor                            |                    |   | Beg               | inning of Current Year                  |                                |
| SSet                           | 20                 | Total assets (Part X, line 16)  |                   | 2,379,461                               |                                |
| Net Assets or<br>Fund Balances | 21                 | Total liabilities (Part X, line 26)   |                   | 65,670                                  |                                |
|                                |                    | Net assets or fund balances. Subtract line 21 from line 20  |                   | 2,313,791                               | 1,459,780.                     |
|                                | art II             | Signature Block   |                   |   |                                |
| Und                            | er pen             | alties of perjury, I declare that I have examined this return, including accompanying schedules   | and stateme       | nts, and to the best of r               | my knowledge and belief, it is |
| true                           | , corre            | ct, and complete. Declaration of preparer (other than officer) is based on all information of whi | ch preparer l     | nas any knowledge.                      |                                |
|                                |                    | Cionatura of officer  | -                 |   | -                              |
| Sig                            | n                  | Signature of officer  |                   | Date                                    |                                |
| Her                            | e                  | ROBERT T. COULTER, PRESIDENT/EXECUTIVE  | DIREC             | CTOR                                    |                                |
|                                |                    | Type or print name and title  |                   |   |                                |
| n.:                            |                    | Print/Type preparer's name Preparer's signature   | ŀ                 | ate Check                               | PTIN                           |
| Paid                           |                    | NATHAN D. MCCARTHY, CPA   | 0 4               | 4/07/13 self-emplo                      |                                |
| _                              | only               | Firm's name GALUSHA, HIGGINS & GALUSHA, P.C.  | 1700              | Firm's EIN                              | 81-0272932                     |
| USĘ                            | Only               | Firm's address P.O. BOX 1699  |                   | •                                       |                                |
|                                | . AL - ''          | HELENA, MT 59624-1699   |                   | Phone no.                               | ( <u>406</u> ) <u>442-5520</u> |
|                                |                    | RS discuss this return with the preparer shown above? (see instructions)                          |                   | *************************************** | X Yes No                       |
| 2320                           | v7 12-1            | 0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction                         | 26                |   | Form <b>QQ</b> () (2012)       |

Form 990 (2012) INDIAN LAW RESOURCE CENTER
Part IV Checklist of Required Schedules

|          |   |      | Yes   | No        |
|----------|---|------|-------|-----------|
| 1        | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?   |      |       |           |
|          | If "Yes," complete Schedule A   | 1    | Х     |           |
| 2        | Is the organization required to complete Schedule B, Schedule of Contributors?  | _2   | X     |           |
| 3        | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for                 |      |       |           |
|          | public office? If "Yes," complete Schedule C, Part I  | 3    |       | X         |
| 4        | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect                |      |       |           |
|          | during the tax year? If "Yes," complete Schedule C, Part II   | 4    |       | X         |
| 5        | is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or                    |      |       |           |
|          | similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III  | _5_  |       | X         |
| 6        | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to                       |      |       |           |
|          | provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I                    | 6    |       | X         |
| 7        | Did the organization receive or hold a conservation easement, including easements to preserve open space,                                       |      |       |           |
| _        | the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  |      |       | X         |
| 8        | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete                    |      |       |           |
| _        | Schedule D, Part III  | _8_  |       | X         |
| 9        | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for                   |      |       |           |
|          | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?                       |      |       |           |
| 40       | If "Yes," complete Schedule D, Part IV  | 9    |       | X         |
| 10       | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent                   |      |       |           |
|          | endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V  | 10   | X     | nas Casta |
| 11       | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. |      |       |           |
| -        | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,                     | F805 | Terus | EXTABLE   |
| u        |   |      | ~     |           |
| b        | Part VI  Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total            | 11a  | X     |           |
| _        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII   | 11b  |       | x         |
| С        | Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total                      | 110  |       |           |
| _        | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII  | 11c  |       | x         |
| d        | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in                    | 116  |       | -23       |
| -        | Part X, line 16? If "Yes," complete Schedule D, Part IX   | 11d  | x     |           |
| е        | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X                           | 11e  | - 11  | 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                          | 11f  |       | х         |
| 12a      | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete                             | 7    |       |           |
|          | Schedule D, Parts XI and XII  | 12a  | X     |           |
| b        | Was the organization included in consolidated, independent audited financial statements for the tax year?                                       |      |       |           |
|          | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional                           | 12b  |       | х         |
| 13       | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E   | 13   |       | X         |
| 14a      | Did the organization maintain an office, employees, or agents outside of the United States?   | 14a  |       | Х         |
| þ        | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,                         |      |       |           |
|          | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000                      |      |       |           |
|          | or more? If "Yes," complete Schedule F, Parts I and IV  | 14b  |       | X         |
| 15       | Did the organization report on Part iX, column (A), line 3, more than \$5,000 of grants or assistance to any organization                       |      |       |           |
|          | or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV   | 15   |       | X         |
| 16       | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals                  |      | į     |           |
|          | located outside the United States? If "Yes," complete Schedule F, Parts III and IV  | 16   |       | X         |
| 17       | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,                         |      |       |           |
| 40       | column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  | 17   |       | <u> </u>  |
| 18       | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines                    |      |       |           |
| 10       | 1c and 8a? If "Yes," complete Schedule G, Part II   | 18   |       | X         |
| 19       | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"                          |      |       |           |
| 20-      | complete Schedule G, Part III   | 19   |       | X         |
| Lva<br>h | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?                                    | 20a  |       | <u> </u>  |
|          | a copy of the duditor interior state file it is feturity  | 20b  |       |           |

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|     | Did the country to the first transfer of the |      | Yes | No |
|-----|--|------|-----|----|
| 21  | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the  |      |     |    |
|     | United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II  | 21   |     | X  |
| 22  | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,   |      |     |    |
|     | column (A), line 2? If "Yes," complete Schedule I, Parts I and III   | 22   |     | X  |
| 23  | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current   |      |     |    |
|     | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete   |      |     |    |
| 04- | Schedule J   | 23   |     | X  |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the  |      |     |    |
|     | last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete   |      |     |    |
|     | Schedule K. If "No", go to line 25   | _24a |     | X  |
| ь   | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  | 24b  |     |    |
| C   | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease   |      |     |    |
|     | any tax-exempt bonds?  | 24c  |     |    |
|     | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  | 24d  |     |    |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a   |      |     |    |
|     | disqualified person during the year? If "Yes," complete Schedule L, Part I   | 25a  |     | _X |
| b   | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and   |      |     |    |
|     | that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete  |      |     |    |
|     | Schedule L, Part I   | 25b  |     | X  |
| 26  | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified  |      |     |    |
|     | person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II  | 26   |     | X  |
| 27  | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial   |      |     |    |
|     | contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member  |      |     |    |
|     | of any of these persons? If "Yes," complete Schedule L, Part III   | 27   |     | X  |
| 28  | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV  |      |     |    |
|     | instructions for applicable filing thresholds, conditions, and exceptions):  |      |     |    |
| а   | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  | 28a  | X   |    |
| b   | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV   | 28b  |     | X  |
| C   | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,  |      |     |    |
|     | director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV   | 28c  |     | X  |
| 29  | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M   | 29   |     | X  |
| 30  | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation  |      |     |    |
|     | contributions? If "Yes," complete Schedule M   | 30   |     | X  |
| 31  | Did the organization liquidate, terminate, or dissolve and cease operations?   |      |     |    |
|     | If "Yes," complete Schedule N, Part I  | 31   |     | X  |
| 32  | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete   |      |     |    |
|     | Schedule N, Part II  | 32   |     | X  |
| 33  | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations   |      |     |    |
|     | sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  | 33   |     | X  |
| 34  | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and  |      |     |    |
|     | Part V, line 1   | 34   |     | X  |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)?  | 35a  |     | X  |
| b   | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity  |      |     |    |
|     | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  | 35b  |     |    |
| 36  | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?   |      |     |    |
|     | If "Yes," complete Schedule R, Part V, line 2  | 36   |     | X  |
| 37  | Did the organization conduct more than 5% of its activities through an entity that is not a related organization   |      |     |    |
|     | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI   | 37   | _   | х  |
| 38  | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?   |      |     |    |
|     | Note, All Form 990 filers are required to complete Schedule O  | 38   | x   |    |

# Form 990 (2012) INDIAN LAW RESOURCE CENTER Part V Statements Regarding Other IRS Filings and Tax Compliance

|           | Check if Schedule O contains a response to any question in this Part V   |          |   |                        |  |  |
|-----------|--|----------|---|------------------------|--|--|
|           |  |          |   |                        | Yes  | No   |
| 1a        | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   | 1a       | ] 9                                     | 1                      | 103  |  |
| b         | Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable  |          | <u> </u>                                |                        |  |  |
| C         | Did the organization comply with backup withholding rules for reportable payments to vendors and   |          | able gaming                             |                        |  |  |
|           | (gambling) winnings to prize winners?  | -        |   | 1c                     |  | -1   |
| 2a        | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,  |          |   |                        | interior   | 4.042  |
|           | filed for the calendar year ending with or within the year covered by this return  | 2a       | 15                                      |                        |  |  |
| b         | If at least one is reported on line 2a, did the organization file all required federal employment tax retu   |          | *************************************** | 2b                     | X  | its N. O.  |
| _         | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction  |          |   | 20                     |  | <br>. (1999)                                     |
| За        | Did the appropriation have appropriate the first   | -        | •                                       | За                     | 5.54.54  | X  |
| b         | is IVan II had it filed a Farm 000 T for this years of IA/a II mustiful an application to 0.1.4.1.0  |          |   | 3b                     |  | - 22   |
|           | At any time during the calendar year, did the organization have an interest in, or a signature or other  |          | with over a                             | 30                     |  |  |
| -         | financial account in a foreign country (such as a bank account, securities account, or other financial   |          | •                                       |                        |  | x  |
| h         | If "Yes," enter the name of the foreign country:   | acco     | unity:                                  | 4a                     | an di  |  |
| ~         | See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial   | A000     | unto.                                   |                        |  |  |
| 5a        | And the second s |          |   | 26.7 94                | Mar. N   | v  |
| b         | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans  |          | n                                       | 5a                     |  | X  |
|           | If IV/as Fide line For an Fig. did the assessment of the Fig. 6000 TO  |          |   | 5b                     |  | X  |
| 6a        |  |          |   | _5c                    |  | <del>                                     </del> |
| Ua        |  |          | -                                       | _                      |  | 3.5  |
|           | If "Yes," did the organization include with every solicitation an express statement that such contribu   |          |   | 6a                     | <del>                                     </del> | X  |
| D         |  |          | _                                       |                        | Ì  |  |
| <b>.,</b> | ***************************************  | •••••    |   | 6b                     |  |  |
| 7         | Organizations that may receive deductible contributions under section 170(c).  |          |   | Nation of              | FW S   | riyadi.  |
| a         | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and so   |          |   | _7a_                   |  | X  |
|           |  |          |   | _7b_                   |  |  |
| C         | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v<br>to file Form 8282?   |          | •                                       | _                      |  | v  |
| d         | Tensor III II I  |          |   | 7c                     | 1000   | X  |
| e         |  |          |   |                        | 1000   | Ethery.  |
| f         | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont  |          |   | 7e                     |  |  |
| ·<br>a    |  |          |   | <u>7f</u>              |  |  |
| ~         | If the organization received a contribution of qualified intellectual property, did the organization file F<br>If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization  |          |   | _7g_                   |  |  |
| 8         |  |          |   | <u>7h</u>              | sena ye  |  |
| •         | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. E organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at   |          |   | Atvarii                |  |  |
| 9         |  | t any ti | me during the year?                     | 8                      | talaa da   |  |
|           | Sponsoring organizations maintaining donor advised funds.  |          |   | Fahrdi                 |  | ABD (N.  |
| a         | Did the organization make any taxable distributions under section 4966?  |          |   | 9a                     |  |  |
| 10        | Did the organization make a distribution to a donor, donor advisor, or related person?  Section 501(c)(7) organizations. Enter:  |          |   | 9b                     |  |  |
|           | Initiation fees and capital contributions included on Part VIII, line 12   | ۔مد ا    |   |                        |  |  |
| b         | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities  | 10a      | *************************************** |                        |  |  |
| 11        | Section 501(c)(12) organizations. Enter:   | 10b      |   |                        |  |  |
|           | Gross income from members or shareholders  |          |   |                        |  |  |
| b         | Gross income from other sources (Do not net amounts due or paid to other sources against   | 11a      |   |                        |  |  |
|           | amounte due a control formation à  | 446      |   |                        |  |  |
| l2a       | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form   | 11b      | 2                                       | Alexandria<br>American | A  | jir salitea,                                     |
|           | If BV-c II and a little and a state of the s | 1        |   | 12a                    | 100 000  | rede in the                                      |
| 13        | Section 501(c)(29) qualified nonprofit health insurance issuers.   | 12b      | 1                                       |                        |  |  |
|           | Is the organization licensed to issue qualified health plans in more than one state?   |          |   | 40                     | 2000   | wagani.  |
|           | Note. See the instructions for additional information the organization must report on Schedule O.  |          |   | 13a                    |  | eguziesi il                                      |
| h         | Enter the amount of reserves the organization is required to maintain by the states in which the   |          |   |                        |  |  |
|           | organization is licensed to issue qualified health plans   | 404      |   |                        |  |  |
|           | Enter the amount of reserves on hand   | 13b      |   |                        | andra 1<br>English                               |  |
|           | Did the organization receive any nayments for indeer tenning consists during the toy years   | 13c      |   | 10-                    |  | X  |
|           | if "Yes," has it filed a Form 720 to report these payments? if "No," provide an explanation in Schedul   |          | ••••••                                  | 14a<br>14b             |  | <u>~</u>   |
|           |  |          |   |                        |  |  |

Form 990 (2012) Page 6 Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

|     | Check if Schedule O contains a response to any question in this Part Vi  |            |  | X            |
|-----|--|------------|--|--------------|
| Sec | ction A. Governing Body and Management   |            |  |              |
|     |  |            | Yes  | No           |
| 1a  | Enter the number of voting members of the governing body at the end of the tax year 12   | 2          |  |              |
|     | If there are material differences in voting rights among members of the governing body, or if the governing  |            |  |              |
|     | body delegated broad authority to an executive committee or similar committee, explain in Schedule O.  |            |  |              |
| b   | Enter the number of voting members included in line 1a, above, who are independent 15  |            |  |              |
| 2   | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other   |            |  |              |
|     | officer, director, trustee, or key employee?   | 2          |  | Х            |
| 3   | Did the organization delegate control over management duties customarily performed by or under the direct supervision  |            |  |              |
|     | of officers, directors, or trustees, or key employees to a management company or other person?   | 3          |  | х            |
| 4   | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?   | 4          |  | X            |
| 5   | Did the organization become aware during the year of a significant diversion of the organization's assets?   | 5          |  | X            |
| 6   |  | 6          | <del>                                     </del> | X            |
| 7a  |  | 0          |  |              |
| 'a  |  |            |  |              |
| h   | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or   | 7a         | ·  | X            |
| U   |  | l          |  |              |
| _   | persons other than the governing body?   | 7b         |  | X            |
| 8   | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:  |            |  |              |
| a   | •  | 8a         | X  |              |
| b   | ,  | 8b         | X  |              |
| 9   | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the   |            |  |              |
|     | organization's mailing address? If "Yes," provide the names and addresses in Schedule O  | 9          | ļ  | _ <u>X</u>   |
| Sec | tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)   |            | ļ  |              |
| ·   |  |            | Yes  | No           |
|     | Did the organization have local chapters, branches, or affiliates?   | 10a        |  | X            |
| b   | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,   |            |  |              |
|     | and branches to ensure their operations are consistent with the organization's exempt purposes?  | 10b        |  |              |
|     | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  | 11a        | X  |              |
| b   | Describe in Schedule O the process, if any, used by the organization to review this Form 990.  |            | 33.9   | 3/43         |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13  | 12a        | X  |              |
| b   | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  | 12b        | х  |              |
|     | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe   |            |  |              |
|     | in Schedule O how this was done  | 12c        | x  |              |
| 13  | Did the organization have a written whistleblower policy?  | 13         | X  |              |
| 14  | Did the organization have a written document retention and destruction policy?   | 14         | Х  |              |
| 15  | Did the process for determining compensation of the following persons include a review and approval by independent   |            | 20.00  | 1.8200       |
|     | persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  | 2          |  |              |
| а   | The organization's CEO, Executive Director, or top management official   | 15a        | x  | +7.50        |
| b   | Other officers or key employees of the organization  | 15b        | X  |              |
|     | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  | 130        | 43   | and the con- |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a  |            |  |              |
| _   | *  | 40-        | District (1)                                     | ~~           |
| h   | taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation  | <u>16a</u> | A  | X            |
|     | in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's   |            |  |              |
|     |  |            | Washing  | ATEAST.      |
| Sec | exempt status with respect to such arrangements? tion C. Disclosure  | 16b        | - ;  |              |
| 17  |  |            | ***************************************          |              |
| 18  | List the states with which a copy of this Form 990 is required to be filed MT  Section 6104 requires an examination to make its Forms 1000 (and 1004 its wall build by the file of the fil |            |  |              |
| .0  | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) of public inspection. Indicate how you made these available. Check all that apply.  | availab    | le   |              |
|     |  |            |  |              |
| 4Ω  |  |            |  |              |
| 19  | Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an  | d finan    | icial  |              |
| ~   | statements available to the public during the tax year.  |            |  |              |
| 20  | State the name, physical address, and telephone number of the person who possesses the books and records of the organiza   | tion: 🕨    | -  |              |
|     | INDIAN LAW RESOURCE CENTER - 406-449-2006  |            | ***  |              |
|     | 602 N. EWING, HELENA, MT 59601   |            |  |              |

| _   |     |        |  |
|-----|-----|--------|--|
| F∩m | 990 | (2012) |  |

#### INDIAN LAW RESOURCE CENTER

52-1121079

Page **7** 

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

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

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

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

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

| (A)                         | (B)                            |                                      |                       | (6      | C)           |                              |        | (D)                         | (E)  | (F)                               |
|-----------------------------|--------------------------------|--------------------------------------|-----------------------|---------|--------------|------------------------------|--------|-----------------------------|--|-----------------------------------|
| Name and Title              | Average                        | Position (do not check more than one |                       |         |              |                              |        | Reportable                  | Reportable                                       | Estimated                         |
|                             | hours per                      | box                                  | , unle                | ss pe   | rson         | is bot                       | h an   | compensation                | compensation                                     | amount of                         |
|                             | week<br>(list any<br>hours for |                                      |                       | dad     |              | or/trus                      | Ĺ      | from<br>the<br>organization | from related<br>organizations<br>(W-2/1099-MISC) | other<br>compensation<br>from the |
|                             | related<br>organizations       | Individual trustee or director       | Institutional trustee |         | loyee        | Highest compensated employee |        | (W-2/1099-MISC)             | ,  | organization<br>and related       |
| *                           | below<br>line)                 | ndiwdu                               | Institutio            | Officer | Key employee | Highest a                    | Former | - "                         |  | organizations                     |
| (1) ROBERT T. COULTER       | 40.00                          |                                      |                       |         |              |                              |        | ******                      |  |                                   |
| PRESIDENT EXECUTIVE DIR.    |                                | x                                    |                       | х       |              |                              |        | 108,745.                    | 0.   | 15,308                            |
| (2) SUSAN M.MASTEN          | 0.00                           |                                      |                       |         |              |                              |        |                             |  |                                   |
| CHAIRPERSON                 |                                | X                                    |                       | X       |              |                              |        | 0.                          | 0.   | 0                                 |
| (3) TERRI HENRY             | 0.00                           |                                      |                       |         |              |                              |        |                             |  |                                   |
| SECRETARY                   |                                | X                                    |                       | X       |              |                              |        | 0.                          | 0.   | . 0                               |
| (4) GAIASHKIBOS<br>DIRECTOR | 0.00                           | x                                    |                       |         |              |                              |        | 0.                          |  |                                   |
| (5) NORMA BIXBY             | 0.00                           | ^                                    |                       |         |              |                              |        | 0.                          | 0.   | 0                                 |
| PREASURER                   | 0.00                           | X                                    |                       | x       |              |                              |        | 0.                          | 0.   | 0                                 |
| (6) MARTIN AVERY            | 0.00                           | <u> </u>                             |                       | Λ       | <del></del>  |                              |        | V.                          | U •  | 0                                 |
| DIRECTOR                    | 0.00                           | x                                    |                       |         |              |                              |        | 0.                          | 0.   | 0 .                               |
| 7) MELANIE BENJAMIN         | 0.00                           |                                      |                       |         |              |                              |        | -                           |  | <u>U</u> .                        |
| DIRECTOR                    |                                | X                                    |                       |         |              |                              |        | 0.                          | 0.   | 0 .                               |
| 8) MICHELLE ALLEN           | 0.00                           |                                      |                       |         | -            |                              |        | 100                         |  |                                   |
| DIRECTOR                    |                                | X                                    |                       |         |              |                              |        | 0.                          | 0.   | 0                                 |
| 9) DACHO ALEXANDER          | 0.00                           |                                      |                       |         |              |                              |        |                             |  |                                   |
| PIRECTOR                    |                                | X                                    |                       |         |              |                              |        | 0.                          | 0.   | 0 .                               |
| 10) DARWIN HILL             | 0.00                           |                                      |                       |         |              |                              |        |                             |  |                                   |
| PIRECTOR                    |                                | X                                    |                       |         |              |                              |        | 0.                          | 0.   | 0 .                               |
| 11) CARMELA CURUP CHAJON    | 0.00                           |                                      |                       |         |              |                              |        |                             | ***************************************          |                                   |
| IRECTOR                     |                                | X                                    |                       |         |              |                              |        | 0.                          | 0.   | 0.                                |
| 12) ARMSTRONG A. WIGGINS    | 40.00                          |                                      |                       |         |              |                              |        |                             |  |                                   |
| IRECTOR DC OFFICE           |                                |                                      |                       |         |              | Х                            |        | 106,505.                    | 0.   | 9,895.                            |
|                             |                                |                                      |                       |         |              |                              |        |                             |  |                                   |
|                             |                                |                                      |                       |         |              |                              |        |                             |  |                                   |
|                             |                                |                                      |                       |         |              |                              |        |                             |  |                                   |
|                             |                                |                                      |                       |         |              |                              |        |                             |  |                                   |
| -                           |                                |                                      |                       |         |              |                              |        |                             |  |                                   |
|                             |                                |                                      |                       | _       |              |                              |        |                             |  | 2000                              |
|                             |                                |                                      |                       |         |              |                              |        |                             |  |                                   |

| Part VII   Section A. O                          | <b>(</b> )  | tees, Key Em (B) Average hours per week (list any hours for related organizations below line) | itee or director (90 xo p) | not c       | Pos<br>heck   | ition<br>more<br>rson<br>lirecto |             | one<br>h an<br>tee) | compensated Employe (D) Reportable compensation from the organization (W-2/1099-MISC) | es (continued) (E) Reportable compensat from relate organizatio (W-2/1099-M | ion<br>ed<br>ins | (F) Estimated amount of other compensation from the organization and related organizations |
|--|---|---|----------------------------|-------------|---------------|----------------------------------|-------------|---------------------|---|---|------------------|--|
| ·  |   |   |                            |             |               |                                  |             |                     |   |   |                  |  |
|  |   |   |                            |             |               |                                  |             |                     |   |   |                  |  |
|  |   |   |                            |             |               |                                  |             |                     |   |   |                  |  |
|  | **************************************                  |   |                            |             |               |                                  |             |                     | Annua .   |   |                  |  |
|  |   |   | .,                         |             |               |                                  |             |                     |   | vano.   |                  |  |
|  | - VII.  |   |                            |             |               |                                  |             |                     |   | **11**1014  |                  | ,  |
| ****   |   |   |                            |             |               |                                  |             |                     |   | <del></del>   |                  |  |
|  |   |   |                            |             |               |                                  |             |                     | 1000  | ******  |                  |  |
|  |   |   |                            |             |               |                                  |             |                     |   | ·   |                  | •  |
| 1b Sub-total                                     |   |   |                            |             |               |                                  |             |                     | 215,250.  |   | 0.               | 25,203.  |
|  | ation sheets to Part VI and 1c)                         |   |                            |             |               |                                  |             |                     | 0.<br>215,250.  |   | 0.               | <u>0.</u><br>25,203.   |
| 2 Total number of ind                            | ividuals (including but n                               |   |                            |             |               |                                  |             | o re                |   | ,000 of reportal  |                  | 43,403.  |
| compensation from                                | the organization  |   |                            |             | ***           |                                  |             | ····                |   |   |                  | Yes No   |
| 3 Did the organization                           | n list any former officer,                              | director, or tru  | stee                       | , ke        | y en          | olqr                             | yee,        | or h                | nighest compensated er  | nployee on  | ſ                |  |
| line 1a? If "Yes," co.                           | mplete Schedule J for s                                 | uch individual  |                            |             | •••••         |                                  |             |                     |   | ·····   |                  | 3 X  |
| 4 For any individual lis<br>and related organiza | sted on line 1a, is the su<br>ations greater than \$150 | m of reportabl<br>).000? <i>If</i> "Yes."   | 9 CO<br>" CO!              | mpe<br>mole | ensa<br>ete S | tion<br>Che                      | and<br>dule | oth                 | er compensation from t<br>or such individual  | he organization   |                  |  |
| 5 Did any person liste                           | d on line 1a receive or a                               | ccrue compen  | sati                       | on fi       | rom           | any                              | unre        |                     |   | dual for services   | 5<br>5           | 4 X  |
| rendered to the organization B. Independent      | anization? <i>If "Yes," com</i>                         | olete Schedule  | J fo                       | or st       | ich p         | oers                             | on .        |                     |   |   | <u></u>          | 5 X  |
| · · · · · · · · · · · · · · · · · · ·            | for your five highest cor                               | mpensated ind   | epe                        | nde         | nt co         | ontra                            | acto        | rs th               | nat received more than !  | \$100 000 of cor  | mnane:           | ation from   |
| the organization. Re                             | port compensation for t                                 | he calendar ye  | ar e                       | ndir        | ng w          | ith c                            | or wi       | thin                | the organization's tax y  | ear.  | 11001100         | ·  |
|  | (A) Name and business                                   | address   |                            |             |               |                                  |             |                     | (B)<br>Description of s   | enices  |                  | (C)<br>ompensation   |
| DORIS UNDERWO                                    |   |   |                            |             |               |                                  |             | P                   | ROVIDES   |   |                  | 211perisación  |
| 309 KINGS CAN                                    | YON DRIVE, Y  | UKON, C   | K                          | 73          | 09            | 9                                |             |                     | COMMUNICATION   | N SERVIC  |                  | 105,151.   |
|  |   |   |                            | ****        |               |                                  |             |                     |   |   |                  |  |
|  |   |   |                            |             |               |                                  |             |                     |   |   |                  |  |
|  |   | 181   |                            |             |               |                                  |             | -                   |   |   |                  | *****  |
|  |   | <del></del>   |                            |             |               |                                  |             | +                   | · · · · · · · · · · · · · · · · · · ·   |   |                  |  |
| 2 Total number of inde                           | ependent contractors (in                                | eluding but no  | ot lin                     | nitec       | i to 1        | thos                             | e list      | ted :               | above) who received me  | ore than  | and right        | ng ayan san san san san san san san san san s  |
|  | nsation from the organiz                                |   |                            |             |               | 1                                |             |                     |   | widii   |                  |  |

|  |          | Check if Schedule O cont  | tains a response | to any question                         | in this Part VIII                          |   | **********   |  |
|--|----------|---|------------------|---|--|---|--|--|
|  |          |   |                  |   | (A)<br>Total revenue                       | (B) Related or exempt function revenue  | (C)<br>Unrelated<br>business<br>revenue  | (D) Revenue excluded from tax under sections 512, 513, or 514  |
| ats  | 1 a      | Federated campaigns   | 1a               | 18,632.                                 |  |   |  | sita juria Libita est.   |
| Contributions, Giffs, Grants and Other Similar Amounts | b        |   |                  |   |  |   |  |  |
| S, G   | C        | Fundraising events  |                  |   |  |   |  |  |
| ar   |          | Related organizations   |                  |   |  |   |  |  |
| ž,   | e        | Government grants (contribut                                    |                  |   |  |   |  |  |
| Ş  | f        | All other contributions, gifts, gran                            | its, and         |   |  |   |  |  |
| the  |          | similar amounts not included abo                                | : 1              | 770,156.                                |  |   |  |  |
| d O  | g        | Noncash contributions included in lines                         |                  |   |  |   |  |  |
| <u>පි ව</u>  |          | Total, Add lines 1a-1f  |                  |   | 788,788.                                   |   |  |  |
|  |          |   |                  | Business Code                           |  |   |  |  |
| e  | 2 a      |   |                  |   |  |   | Service Control of the Control of th | The second secon |
| Š.   | b        |   | _                |   | ***************************************    |   | 111111111111111111111111111111111111111  |  |
| Program Service<br>Revenue                             | c        |   |                  | -                                       |  |   |  | NATURE -   |
| e a  | d        |   |                  |   |  | -   |  |  |
| Pog  | е        |   |                  |   |  |   |  |  |
| ፈ  | f        | All other program service reve                                  | enue             |   |  | ***************************************   |  |  |
|  |          | Total, Add lines 2a-2f  |                  |   |  | 4.00000 b.E.C. 240, 24.00   |  | - pagajinan garunga.   |
|  | 3        | Investment income (including                                    |                  |   |  |   |  |  |
|  |          | other similar amounts)  |                  | •                                       | 2,462.                                     |   |  | 2,462.   |
|  | 4        | Income from investment of ta                                    |                  |   | 5,1023                                     | -   |  | 2,402.   |
|  | 5        | Royalties   |                  |   |  |   |  |  |
|  | -        | ,   | (i) Real         | (ii) Personal                           |  |   | s Alika Hitaliaa alika d   |  |
|  | 6 a      | Gross rents   | (1) 1 1001       | (1) 1 01001121                          |  |   |  |  |
|  |          | Less: rental expenses   |                  |   |  |   |  |  |
|  | c        | <b>5</b> 11: 6 1  |                  |   |  |   |  |  |
|  |          | Net rental income or (loss)                                     |                  |   | Description of the second                  | e e a 1000 de 900 de 600 d<br>En 1500 de 600 de |  |  |
|  |          | Gross amount from sales of                                      | (i) Securities   | (ii) Other                              |  | Augustinate Per Jüney hiteliyik   | See Granise Jine J   | estite forese equiletat  |
|  |          | assets other than inventory                                     | (i) Cocurines    | (ii) Ou lei                             |  |   |  |  |
|  | ь        |   | ****             |   |  |   |  |  |
|  | ~        | and sales expenses  |                  |   |  |   |  |  |
|  | _        | Gain or (loss)  |                  |   |  |   |  |  |
|  |          | Net gain or (loss)  |                  | 1                                       | Avantin navidant bar                       |   | PÜLKA ÜRNIĞÜ TERKİNCE  |  |
|  |          | Gross income from fundraising                                   |                  |   | งส์ (Studentinen) และการณ์ที่ได้รับการ     | a, kvilia sopazija koje o B   | Mar Mistaroldeday 25   | utogringo - 2 Turk dagradas  |
| Jue  | Ģа       | including \$  | •                | •                                       |  |   |  |  |
| 9  |          | -   | of               |   |  |   |  |  |
| Other Reven  |          | contributions reported on line                                  | ,                |   |  |   |  |  |
| je   | _        |   | a                |   |  |   |  |  |
| ರ ∣  |          | Less: direct expenses  Net income or (loss) from fund           |                  |   |  |   |  | Constraint and the second  |
|  |          |   | -                |   |  |   | enstantial en al Medicina de la companya de la comp  | a Contraction of Marine Contraction  |
|  | 9 a      | Gross income from gaming ac                                     |                  |   |  |   |  |  |
|  |          | Part IV, line 19  |                  | *************************************** |  |   |  |  |
| 1  |          | Less: direct expenses   |                  |   |  |   |  |  |
|  |          | Net income or (loss) from gam<br>Gross sales of inventory, less | _                | <u> </u>                                | . Jefsé szerententekenek es a se           | eng energiages, telasan, angulgan, angulatanse  | and a fill and the state and the state of  | Salay or the salar extremely provide the second  |
|  | IV a     |   |                  |   |  |   |  |  |
|  | <b>.</b> | and allowances  |                  |   |  |   |  |  |
| .  |          | Less: cost of goods sold  Net income or (loss) from sales       |                  |   |  |   |  |  |
| ŀ  |          |   |                  |   | garigingisked rowner (1995-1996)           | Marije Nasibili sabiji in Nijerijesi  | regulações a la seculações (f. 1881).  | Later Assessment Services  |
| -  | 11 ~     | Miscellaneous Revenu  | <del>g</del>     | Business Code<br>900099                 | and the state of the state of the state of |   |  |  |
|  |          | OTHER   |                  | 900099                                  | 6,667.<br>3,267.                           | 6,667.  |  |  |
|  |          | ~ IIIIII  |                  | 20003                                   | 3,40/.                                     | 3,267.  |  |  |
|  | ب        | All other revenue   |                  |   |  |   | 1744   |  |
|  | ū.       | All other revenue   |                  | 1                                       | 9,934.                                     | Sign Symbol and School  | y salak uwalawa na ini ua wila.  | and a superior of the same of the  |
|  | 12       | Total Add lines 11a-11d   |                  |   |  | 0.004   |  |  |
| 200000   | 34       | Total revenue. See instructions.                                | ***********      |   | 801,184.                                   | 9,934.  | 0.   | 2,462.   |

### Part IX | Statement of Functional Expenses

| Sect       | ion 501(c)(3) and 501(c)(4) organizations must com   |                                       |                              | omplete column (A).  |                                       |
|------------|--|---------------------------------------|------------------------------|--|---------------------------------------|
|            | Check if Schedule O contains a respon  |                                       |                              |  | (5)                                   |
|            | not include amounts reported on lines 6b,<br>8b, 9b, and 10b of Part VIII.   | (A)<br>Total expenses                 | (B) Program service expenses | (C) Management and general expenses  | (D)<br>Fundraising<br>expenses        |
| 1          | Grants and other assistance to governments and   |                                       |                              |  |                                       |
|            | organizations in the United States. See Part IV, line 21   |                                       |                              |  |                                       |
| 2          | Grants and other assistance to individuals in  |                                       |                              |  |                                       |
|            | the United States. See Part IV, line 22  | · · · · · · · · · · · · · · · · · · · |                              |  |                                       |
| 3          | Grants and other assistance to governments,  |                                       |                              |  |                                       |
|            | organizations, and individuals outside the   |                                       |                              |  |                                       |
|            | United States. See Part IV, lines 15 and 16  |                                       | WARNE ALL                    |  |                                       |
| 4          | Benefits paid to or for members  | - www.                                |                              |  |                                       |
| 5          | Compensation of current officers, directors,   |                                       |                              | and the second s |                                       |
|            | trustees, and key employees  | 110,142.                              | 75,639.                      | 21,756.  | 12,747.                               |
| 6          | Compensation not included above, to disqualified   |                                       |                              |  |                                       |
|            | persons (as defined under section 4958(f)(1)) and  |                                       |                              |  |                                       |
|            | persons described in section 4958(c)(3)(B)   |                                       |                              |  | ,                                     |
| 7          | Other salaries and wages   | 799,742.                              | 549,211.                     | 157,972.   | 92,559.                               |
| 8          | Pension plan accruals and contributions (include   |                                       |                              |  |                                       |
|            | section 401(k) and 403(b) employer contributions)  | 47,099.                               |                              | 14,785.  | 4,968.                                |
| 9          | Other employee benefits  | 122,641.                              |                              | 38,498.  | 12,936.                               |
| 10         | Payroli taxes  | 72,535.                               | 42,115.                      | 22,769.  | 7,651.                                |
| 11         | Fees for services (non-employees):   |                                       |                              |  |                                       |
|            | Management   |                                       |                              |  |                                       |
|            | Legal  | 2,836.                                | 2,836.                       |  |                                       |
|            | Accounting   | 13,758.                               |                              | 13,758.  | ····                                  |
| d          | Lobbying   | ~                                     |                              | 77.00  |                                       |
| е          | Professional fundraising services. See Part IV, line 17  |                                       |                              |  |                                       |
| , <b>f</b> | Investment management fees   |                                       |                              |  |                                       |
| g          | Other. (If line 11g amount exceeds 10% of line 25,   |                                       |                              |  |                                       |
|            | column (A) amount, list line 11g expenses on Sch O.)   | <u> 190,306.</u>                      |                              | 30,669.  | 25,188.                               |
| 12         | Advertising and promotion  | <u>251.</u>                           |                              |  | <u>35.</u>                            |
| 13         | Office expenses  | <u>64,291.</u>                        |                              | 41,347.  | 7,921.                                |
| 14         | Information technology   | <u>21,766.</u>                        | 10,861.                      | 9,143.   | 1,762.                                |
| 15         | Royalties  |                                       |                              |  | ~~~                                   |
| 16         | Occupancy  | <u>56,125.</u>                        |                              | 56,125.  |                                       |
| 17         | Travel   | <u> 105,248.</u>                      | 49,568.                      | 46,152.  | 9,528.                                |
| 18         | Payments of travel or entertainment expenses   |                                       |                              |  |                                       |
|            | for any federal, state, or local public officials  |                                       |                              |  | ······· · · · · · · · · · · · · · · · |
| 19         | Conferences, conventions, and meetings   | · · · · · · · · · · · · · · · · · · · |                              |  | ****                                  |
| 20         | Interest   | ***                                   |                              |  |                                       |
| 21         | Payments to affiliates   |                                       |                              |  |                                       |
| 22         | Depreciation, depletion, and amortization  | 9,277.                                | 5,897.                       | 1,426.   | 1,954.                                |
| 23         | Insurance  | 4,928.                                |                              | 4,928.   |                                       |
| 24         | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) |                                       |                              |  |                                       |
| а          | HOSTING AND MEALS  | 24,173.                               | 12,807.                      | 9,930.   | 1 426                                 |
| h          | DUES AND REGISTRATION  | 8,331.                                | 780.                         | 5,842.   | 1,436.                                |
| 6          | ALL OTHER EXPENSES   | 2,744.                                | 166.                         | 1,967.   | 1,709.                                |
| d          | STAFF DEVELOPMENT  | 1,645.                                | T00.                         | 1,645.   | 611.                                  |
|            | All other expenses   | T,040+                                |                              | 1,045.   |                                       |
| 25         | Total functional expenses. Add lines 1 through 24e   | 1,657,838.                            | 998,121.                     | 478,712.   | 101 005                               |
| 26         | Joint costs. Complete this line only if the organization   | <u> </u>                              | 230,141.                     | 7/0,114·   | 181,005.                              |
|            | reported in column (B) joint costs from a combined   |                                       |                              |  | •                                     |
|            | educational campaign and fundraising solicitation.   |                                       |                              |  |                                       |
|            | Check here if following SOP 98-2 (ASC 958-720)   |                                       |                              |  |                                       |
| 222041     | 12-10-12   |                                       |                              |  | Form <b>900</b> (0010)                |

Form 990 (2012)
Part X Balance Sheet

| ı a                         | ILA | Check if Schedule O contains a response to an  | v question in this D                    | art X                                   |   |          |   |
|-----------------------------|-----|--|---|---|---|----------|---|
|                             |     | CHOSK II OBITEGUIE O COITGETS & TESPOTISE TO SET   | y queenvii III IIIIS P                  | G1 £ ^                                  | (A)<br>Beginning of year  | 1        | (B)<br>End of year  |
|                             | 1   | Cash - non-interest-bearing  |   |   | 535,104.  | 1        | 319,291.  |
|                             | 2   | Savings and temporary cash investments   |   |   | 325,612.  |          | 272,139.  |
|                             | 3   | Pledges and grants receivable, net   | 1,023,182.                              | _                                       | 423,957.  |          |   |
|                             | 4   | Accounts receivable, net   |   | 2,485                                   |   | 4,405    |   |
|                             | 5   | Loans and other receivables from current and for   |   |   |   |          |   |
|                             |     | trustees, key employees, and highest compensions.  Part II of Schedule L   |   |   |   | 5        |   |
|                             | 6   | Loans and other receivables from other disqual   |   |   |   |          | rajdisterik i, vezitik hetike tereste ezi   |
|                             | -   | section 4958(f)(1)), persons described in section  |   |   |   |          |   |
|                             |     | employers and sponsoring organizations of sec  |   |   |   |          |   |
|                             |     | employees' beneficiary organizations (see instr)   |   | -                                       |   | 6        |   |
| Assets                      | 7   | Notes and loans receivable, net  |   |   | 7   |          |   |
| 155                         | 8   | Inventories for sale or use  |   | *************************************** | 8   |          |   |
| *                           | 9   | Prepaid expenses and deferred charges  |   | 6,549.                                  |   | 18,122.  |   |
|                             | 1   | Land, buildings, and equipment: cost or other  |   | *************************************** |   |          |   |
|                             |     | basis. Complete Part VI of Schedule D  | 100 1                                   | 41,803.                                 |   |          |   |
|                             | h   | Less: accumulated depreciation   |   | $\frac{21,003.}{20,771.}$               |   | 40-      | 21,032.   |
|                             | 11  | Investments - publicly traded securities   | 30,309.                                 |   | 41,034.   |          |   |
|                             | 12  | Investments - other securities. See Part IV, line  |   | 34,626.                                 | 11  | 37,350.  |   |
|                             | 13  | Investments - program-related. See Part IV, line   |   | 34,020.                                 |   | 3/,330.  |   |
|                             | 14  | Intangible assets  | ''                                      | ••••••                                  |   | 13       |   |
|                             | 15  | Other assets. See Part IV, line 11   | 421,594.                                | 14                                      | 401 504   |          |   |
|                             | 16  | Total assets, Add lines 1 through 15 (must equ   | al line 3/1\                            |   | 2,379,461.  | 15       | 421,594.  |
|                             | 17  | Accounts payable and accrued expenses  | 65,670.                                 | 16                                      | 1,517,890.  |          |   |
|                             | 18  | Grants payable   |   | 03,070.                                 |   | 58,110.  |   |
|                             | 19  |  |   |   |   | 18       |   |
|                             | 20  | Deferred revenue   | *************************************** |   |   | 19       | ····  |
| to.                         | 21  | Tax-exempt bond liabilities  Escrow or custodial account liability. Complete I   | Dark IV at Oak and de                   | Б.                                      |   | 20       |   |
| Ë                           | 22  | Loans and other payables to current and former   |   |   | i<br>Harasakki menaparan Talabaran Balahan Kab                                      | 21       | Approximation of the section of the |
| Liabilities                 |     | key employees, highest compensated employee  |   |   |   |          |   |
| Ë                           |     |  |   |   |   |          |   |
|                             | 23  | Complete Part II of Schedule L   |   |   |   | 22       |   |
|                             | 24  | Unsecured notes and loans payable to unrelated   |   |   | · · · · · · · · · · · · · · · · · · ·   | 23       |   |
|                             | 25  | Other liabilities (including federal income tax, pa  |   |   |   | 24       |   |
|                             |     | parties, and other liabilities not included on lines   |   |   |   |          | •   |
|                             |     | Calcadata B  |   |   | •   |          |   |
|                             | 26  | Total liabilities, Add lines 17 through 25   | *************************************** |   | 65,670.   | 25       | FO 110  |
|                             |     | Organizations that follow SFAS 117 (ASC 958  | ) shock have                            | <b>V</b>                                | Asia wakali Marika awa wa wa  | 26       | 58,110.   |
| တ္                          |     | complete lines 27 through 29, and lines 33 an  |   | LAL and                                 |   |          |   |
| ဦ                           | 27  | Unrestricted net assets  |   |   | 610 FOE   |          |   |
| <u>a</u>                    | 28  | Temporarily restricted net assets  |   | 610,595.<br>1,652,235.                  | 27  | 229,186. |   |
| g P                         | 29  | Permanently restricted net assets  | 50,961.                                 | 28                                      | <u>1,174,827.</u>   |          |   |
| 5                           |     | Organizations that do not follow SFAS 117 (A   |   | 29                                      | <u>55,767.</u>  |          |   |
| 卢                           |     | and complete lines 30 through 34.  | ooo, oneck ne                           |   | esember 19 och esperalativit i 1960 i 1967 i<br>South fra Sengal Sengal socialistik |          |   |
| Net Assets or Fund Balances | 30  | Capital stock or trust principal, or current funds   |   |   |   |          |   |
| SSE                         | 31  | Paid-in or capital surplus, or land, building, or eq   |   |   |   | 30       |   |
| Ϋ́                          | 32  | Retained earnings, endowment, accumulated inc  |   |   |   | 31       |   |
| ž                           | 33  | Total net assets or fund balances  |   |   | 2,313,791.  | 32       | 1 450 700   |
|                             | 34  | Takal Katalika and the same and |   |   | 2,313,791.  | 33       | 1,459,780.  |
|                             |     | The second residual cost   | *******************************         |   | <u>4,313,401.</u>   | 34       | 1,517,890.  |

| FOIII | 1990 (2012) INDIAN LAW RESOURCE CENTER   | 27-77      | <u>. 410/9</u> | Pag  | ge 12   |
|-------|--|------------|----------------|------|---------|
| Pa    | rt XI Reconciliation of Net Assets   |            |                |      |         |
|       | Check if Schedule O contains a response to any question in this Part XI  |            |                |      |         |
|       | •  |            |                |      |         |
| 1     | Total revenue (must equal Part VIII, column (A), line 12)  | 1          | 801            | .1   | 84.     |
| 2     | Total expenses (must equal Part IX, column (A), line 25)   | 2          | 1,657          |      |         |
| 3     | Revenue less expenses. Subtract line 2 from line 1   |            |                |      | 54.     |
| 4     | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))                          | 4          | 2,313          |      |         |
| 5     | Net unrealized gains (losses) on investments   | 5          |                |      | 43.     |
| 6     | Donated services and use of facilities   | 6          |                |      |         |
| 7     | Investment expenses  | 7          | 1110           |      |         |
| 8     | Prior period adjustments   | 8          |                |      |         |
| 9     | Other changes in net assets or fund balances (explain in Schedule O)   | 9          |                |      | 0.      |
| 10    | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,                 |            |                |      |         |
| _     | column (B))  | 10         | 1,459          | 7,7  | 80.     |
| Pa    | rt XII Financial Statements and Reporting  |            |                |      |         |
|       | Check if Schedule O contains a response to any question in this Part XII   |            | *******        |      |         |
|       |  |            |                | Yes  | No      |
| 1     | Accounting method used to prepare the Form 990: Cash X Accrual Other   |            |                | 1475 |         |
|       | If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule     |            |                |      |         |
| 2a    | Were the organization's financial statements compiled or reviewed by an independent accountant?                    |            | 2a             |      | X       |
|       | if "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed    | on a       |                |      |         |
|       | separate basis, consolidated basis, or both:   |            |                |      |         |
|       | Separate basis Consolidated basis Both consolidated and separate basis   |            |                |      |         |
| b     | Were the organization's financial statements audited by an independent accountant?                                 |            | 2b             | X    |         |
|       | If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat    | e basis,   | 3439           |      | realin) |
|       | consolidated basis, or both:   |            |                |      |         |
|       | X Separate basis Consolidated basis Both consolidated and separate basis   |            |                |      |         |
| C     | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the | e audit,   |                |      |         |
|       | review, or compilation of its financial statements and selection of an independent accountant?                     |            | 2c             | X    |         |
|       | If the organization changed either its oversight process or selection process during the tax year, explain in Sch  | edule O.   |                |      |         |
| За    | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si |            | 3, 6, 6, 9     | 0.11 |         |
|       | Act and OMB Circular A-133?  |            | 3a             |      | _X      |
| b     | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ  | ired audit |                |      |         |
|       | or audits, explain why in Schedule O and describe any steps taken to undergo such audits                           |            | 3b             |      |         |

#### **SCHEDULE A**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

|   | or the organiza  |   |   |                |                              |                                       |   |                      |             | er identifica |              |              |
|---|------------------|---|---|----------------|------------------------------|---------------------------------------|---|----------------------|-------------|---------------|--------------|--------------|
| Part  | I Bonooi         | INDIAN                                      | LAW RESOURCE  | E CEN'         | TER                          |                                       |   |                      | ī           | <u>52-112</u> | <u> 1079</u> | <del>)</del> |
|   |                  |   | arity Status (Ali organ                             |                |                              |                                       |   | structions           | •.          | 11/2          |              |              |
|   |                  |   | n because it is: (For lines                         |                |                              |                                       |   |                      |             |               |              |              |
| 1   | TO(D)( T)(A)(1). |   |   |                |                              |                                       |   |                      |             |               |              |              |
| 2   |                  |   |   |                |                              |                                       |   | •                    |             |               |              |              |
| 3   |                  |   | pital service organization                          |                |                              |                                       |   |                      |             |               |              |              |
| 4   |                  |   | n operated in conjunctior                           | n with a ho    | spital desc                  | cribed in s                           | ection 17                               | D(b)(1)(A)(          | (iii). Ente | r the hospita | al's nar     | ne,          |
|   | city, and st     |   |   |                |                              |                                       |   | 11000                | ****        | ·····         |              |              |
| 5   |                  |   | e benefit of a college or t                         | iniversity o   | owned or o                   | perated b                             | y a goverr                              | nmental ur           | nit descri  | bed in        |              |              |
| section 170(b)(1)(A)(iv). (Complete Part II.)  6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). |                  |   |   |                |                              |                                       |   |                      |             |               |              |              |
| 6 L<br>7 X  |                  |   |   |                |                              |                                       |   |                      |             |               |              |              |
| ما ١  | •                |   | eceives a substantial part                          | of its sup     | port from a                  | a governm                             | ental unit                              | or from th           | e genera    | I public des  | cribed       | in           |
| ۰.  | _                | 0(b)(1)(A)(vi). (Comp                       | •   |                |                              |                                       |   |                      |             |               |              |              |
| .8  | 」 A communi      | ity trust described in                      | section 170(b)(1)(A)(vi).                           | . (Complete    | e Part II.)                  |                                       |   |                      |             |               |              |              |
| 9   | An organiza      | ation that normally re                      | eceives: (1) more than 33                           | 1/3% of it     | s support                    | from conti                            | ributions, ı                            | membersh             | nip fees, a | and gross re  | eceipts      | from         |
|   | activities re    | lated to its exempt t                       | unctions - subject to cert                          | ain except     | tions, and                   | (2) no mor                            | e than 33                               | 1/3% of it           | ts suppoi   | rt from gros  | s inves      | tment        |
|   | nicome and       | unrelated business                          | taxable income (less sec                            | ction 511 to   | ax) from bu                  | usinesses                             | acquired l                              | by the org           | anization   | after June    | 30, 19       | 75.          |
| 10  | _                | n 509(a)(2), (Comple                        | •   |                |                              |                                       |   |                      |             |               |              |              |
| ii =  | An organiza      | ation organized and                         | operated exclusively to te                          | est for pub    | olic safety.                 | See secti                             | on 509(a)(                              | 4).                  |             |               |              |              |
|   |                  | auon organized and                          | operated exclusively for t                          | he benefit     | of, to perf                  | orm the fu                            | nctions of                              | , or to car          | Ty out the  | e purposes    | of one       | or           |
|   | describes t      | ny supported organi<br>he type of cupportin | zations described in sect                           | ion 509(a)     | (1) or secti                 | on 509(a)(                            | 2). See <b>se</b>                       | ction 509            | (a)(3). Ci  | neck the bo   | x that       |              |
|   | a Type           |   | g organization and comp                             |                |                              |                                       | _                                       |                      |             |               |              |              |
| _   | <del>-</del>     |   |   |                | unctionally                  |                                       |   | d Li Ty <sub>i</sub> | pe III - No | n-functiona   | lly inte     | grated       |
|   | foundation:      | g uns box, reduity u                        | nat the organization is no                          | t controlled   | d directly d                 | r indirecti                           | y by one c                              | r more dis           | squalified  | persons ot    | her tha      | en           |
| f   | If the organ     | inariagers and other                        | than one or more public                             | y supporte     | ed organiza                  | ations des                            | cribed in s                             | section 50           | 9(a)(1) oı  | r section 50  | 9(a)(2).     |              |
| •   | Supporting       | organization chack                          | ritten determination from                           | the IRS th     | at it is a Ty                | /pe I, Type                           | II, or Typ                              | e III                |             |               |              |              |
| g   | Since Augus      | et 17 2006 has the                          | this box  |                |                              | · · · · · · · · · · · · · · · · · · · |   |                      | •••••       | •••••         |              | . Ц          |
| •   | (i) A pers       | on who directly or in                       | organization accepted a                             | lane enter     | ontribution                  | 1 from any                            | of the foll                             | owing per            | sons?       |               |              |              |
|   | the go           | verning hady of the                         | directly controls, either a                         | ione or rog    | genner with                  | persons (                             | зеѕспреа                                | ın (II) and          | (iii) below | <b>'</b> ,    | Yes          | No           |
|   | (ii) A famil     | v member of a nere                          | supported organization?                             |                | •••••••                      | ·····                                 |   |                      | ••••••      | 11g(i)        | -            |              |
|   | (iii) A 35%      | controlled entity of                        | on described in (i) above?                          |                |                              |                                       |   | ••••••               |             | 11g(ii)       | 4            | <u> </u>     |
| h   | Provide the      | following information                       | a person described in (i) on about the supported or | or (II) abov   | Θ?<br>                       |                                       | • | •                    |             | 11g(iii)      | <u> </u>     |              |
|   |                  | TOROWING INTOMINATION                       | in about the supported or                           | ganization     | (S).                         |                                       |   |                      | •           |               |              |              |
| (i) Nam   | ne of supported  | CEN FINE                                    | 7   | (iv) lo the c  | oroopization                 | 60 Did                                |   | 6.43.1               |             |               |              |              |
|   | ganization       | (ii) EIN                                    | (iii) Type of organization (described on lines 1-9  | in col. (i) ii | organization<br>sted in your | oroanizat                             | inn in col                              | Lorganizati          | on in col.  | (vii) Amoun   | t of mor     | netary       |
|   | •                |   | above or IRC section                                | governing      | document?                    | (i) of you                            | support?                                | (i) organiz<br>U.S   |             | sup           | port         |              |
|   |                  |   | (see instructions))                                 | Yes            | No                           | Yes                                   | No                                      | Yes                  | No          |               |              |              |
|   | 1776             |   |   |                |                              | ,                                     | - 110                                   | 103                  | 140         | 2             |              |              |
|   | ·                |   |   |                |                              |                                       |   | <u> </u>             |             |               |              |              |
|   |                  |   |   |                |                              | ***                                   |   | <del> </del>         |             |               |              |              |
|   | **               |   |   |                | [·                           |                                       |   |                      |             |               |              |              |
|   |                  |   |   |                |                              |                                       |   |                      |             | <del></del>   |              |              |
|   |                  |   |   |                |                              |                                       |   |                      |             |               |              |              |
|   |                  |   | ***   |                |                              | ****                                  |   |                      |             |               | "11          |              |
|   |                  |   |   |                |                              |                                       |   |                      |             |               |              |              |
|   |                  |   | ,   |                |                              |                                       |   |                      |             |               |              |              |
|   |                  |   | <u>, , , , , , , , , , , , , , , , , , , </u>       |                |                              |                                       |   |                      |             |               |              |              |
|   |                  |   | Hearden en fillster en skynne                       | sytubia ese    |                              | 5 1.00                                |   |                      |             |               |              |              |

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

Schedule A (Form 990 or 990-EZ) 2012

### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| Se   | ction A. Public Support                      |                              |                      |                        |                      |                      |                |
|------|--|------------------------------|----------------------|------------------------|----------------------|----------------------|----------------|
| Cale | endar year (or fiscal year beginning in) 🕨   | (a) 2008                     | <b>(b)</b> 2009      | (c) 2010               | (d) 2011             | (e) 2012             | (f) Total      |
| 1    | Gifts, grants, contributions, and            |                              |                      |                        |                      | 1                    | 7-00           |
|      | membership fees received. (Do not            |                              |                      |                        |                      |                      |                |
|      | include any "unusual grants.")               | 1905859.                     | 658,918.             | 1403756.               | 2201758.             | 794,335.             | 6964626.       |
| 2    | Tax revenues levied for the organ-           |                              |                      | i                      |                      |                      |                |
|      | ization's benefit and either paid to         |                              |                      |                        |                      |                      |                |
|      | or expended on its behalf                    |                              |                      |                        |                      |                      |                |
| 3    | The value of services or facilities          |                              |                      | •                      |                      |                      |                |
|      | furnished by a governmental unit to          |                              |                      |                        |                      |                      | and the second |
|      | the organization without charge              |                              |                      |                        |                      |                      | ·              |
| 4    | Total. Add lines 1 through 3                 | 1905859.                     | 658,918.             | 1403756.               | 2201758.             | 794,335.             | 6964626.       |
| 5    | The portion of total contributions           |                              |                      |                        |                      |                      |                |
|      | by each person (other than a                 |                              |                      |                        |                      |                      |                |
|      | governmental unit or publicly                |                              |                      |                        |                      |                      |                |
|      | supported organization) included             |                              |                      |                        |                      |                      |                |
|      | on line 1 that exceeds 2% of the             |                              |                      |                        |                      |                      |                |
|      | amount shown on line 11,                     |                              |                      |                        |                      |                      |                |
|      | column (f)                                   |                              |                      |                        |                      |                      | 4380171.       |
| 6    | Public support. Subtract line 5 from line 4. |                              |                      |                        |                      |                      | 2584455.       |
| Se   | ction B. Total Support                       |                              |                      |                        |                      |                      |                |
| Cale | ndar year (or fiscal year beginning in) 🕨    | (a) 2008                     | (b) 2009             | (c) 2010               | (d) 2011             | (e) 2012             | (f) Total      |
| 7    | Amounts from line 4                          | 1905859.                     | 658,918.             | 1403756.               | 2201758.             | 794,335.             | 6964626.       |
| 8    | Gross income from interest,                  | *                            |                      |                        | ÷                    |                      |                |
|      | dividends, payments received on              |                              |                      |                        |                      |                      | -              |
|      | securities loans, rents, royalties           |                              |                      |                        |                      |                      |                |
|      | and income from similar sources              | 1,554.                       | 5,568.               | 7,257.                 | 4,321.               | 5,105.               | 23,805.        |
| 9    | Net income from unrelated business           |                              |                      |                        |                      |                      |                |
|      | activities, whether or not the               |                              |                      |                        |                      |                      |                |
|      | business is regularly carried on             |                              |                      |                        |                      |                      |                |
| 10   | Other income. Do not include gain            |                              |                      |                        |                      |                      |                |
|      | or loss from the sale of capital             |                              |                      |                        |                      |                      |                |
|      | assets (Explain in Part IV.)                 | 2,020.                       | 2,857.               | 30,405.                | 2,767.               | 10,320.              | 48,369.        |
|      | Total support. Add lines 7 through 10        |                              |                      |                        |                      |                      | 7036800.       |
|      | Gross receipts from related activities,      |                              |                      |                        |                      | 12                   | 33,295.        |
| 13   | First five years. If the Form 990 is for     | the organization's           | first, second, third | i, fourth, or fifth ta | x year as a section  | 501(c)(3)            |                |
| 200  | organization, check this box and stop        |                              |                      |                        |                      |                      |                |
|      | tion C. Computation of Publi                 | <del> </del>                 |                      |                        |                      |                      |                |
| 14   | Public support percentage for 2012 (li       | ine 6, column (f) di         | vided by line 11, co | olumn (f))             |                      | 14                   | 36.73 %        |
| 15   | Public support percentage from 2011          | Schedule A, Part I           | II, line 14          | •••••                  | <u> </u>             | 15                   | 39.43 %        |
| 16a  | 33 1/3% support test - 2012. If the o        | rganization did not          | t check the box on   | line 13, and line 1    | 4 is 33 1/3% or m    | ore, check this bo   | c and          |
|      | stop here. The organization qualifies a      | as a publicly suppo          | orted organization   |                        |                      |                      | <b>&gt;</b> X  |
| Ь    | 33 1/3% support test - 2011. If the o        | rganization did not          | t check a box on lii | ne 13 or 16a, and      | line 15 is 33 1/3%   | or more, check thi   | s box          |
|      | and stop here. The organization quali        | fies as a publicly s         | upported organiza    | tion                   | •••••                | •                    | ▶□             |
| 17a  | 10% -facts-and-circumstances test            | : <b>- 2012.</b> If the orga | anization did not cl | neck a box on line     | 13, 16a, or 16b, ar  | nd line 14 is 10% o  | or more.       |
|      | and if the organization meets the "fact      | ts-and-circumstanc           | es" test, check th   | is box and stop he     | ere. Explain in Part | IV how the organi    | zation         |
|      | meets the "facts-and-circumstances" t        | test. The organizat          | ion qualifies as a p | ublicly supported      | organization         |                      |                |
| Ь    | 10% -facts-and-circumstances test            | - 2011. If the orga          | anization did not ch | neck a box on line     | 13, 16a, 16b, or 1   | 7a, and line 15 is 1 | 0% or          |
|      | more, and if the organization meets th       | e "facts-and-circun          | nstances" test, ch   | eck this box and s     | top here. Explain    | in Part IV how the   |                |
|      | organization meets the "facts-and-circ       | umstances" test. 1           | The organization qu  | ualifies as a public   | ly supported orgar   | nization             | ▶□             |
| 18   | Private foundation. If the organization      | n did not check a b          | oox on line 13, 16a  | , 16b, 17a, or 17b,    | check this box an    | d see instructions   | <b>→</b>       |

# Schedule A (Form 990 or 990-EZ) 2012 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

| <u>Se</u>  | ction A. Public Support   |   |  | P11  |  |   |  |
|--|---|---|--|--|--|---|--|
| Cale   | ndar year (or fiscal year beginning in) 📂   | (a) 2008  | (b) 2009   | (c) 2010   | (d) 2011   | (e) 2012  | (f) Total                              |
| 1  | Gifts, grants, contributions, and   |   |  |  |  |   |  |
|  | membership fees received. (Do not   |   |  |  |  |   |  |
|  | include any "unusual grants.")  |   |  |  |  |   |  |
| 2  | Gross receipts from admissions,   |   |  |  |  |   | ****                                   |
|  | merchandise sold or services per-   |   |  |  |  |   |  |
|  | formed, or facilities furnished in<br>any activity that is related to the   |   |  |  |  |   |  |
|  | organization's tax-exempt purpose   |   |  |  |  |   |  |
| 3  | Gross receipts from activities that   |   |  |  |  |   |  |
|  | are not an unrelated trade or bus-  |   |  | ٠  |  |   |  |
|  | iness under section 513   |   |  |  |  |   |  |
| 4  | Tax revenues levied for the organ-  | •   |  |  |  |   |  |
|  | ization's benefit and either paid to  | ,   |  |  |  |   |  |
|  | or expended on its behalf   |   |  |  |  |   |  |
| 5  | The value of services or facilities   |   |  |  |  |   |  |
|  | furnished by a governmental unit to   |   |  |  |  |   |  |
|  | the organization without charge   |   |  |  |  |   |  |
| 6  | Total. Add lines 1 through 5  |   |  |  |  |   |  |
| 7a   | Amounts included on lines 1, 2, and   |   | *****  | 11/11  |  |   | ************************************** |
|  | 3 received from disqualified persons  |   |  |  |  |   |  |
| b  | Amounts included on lines 2 and 3 received  |   |  |  |  |   | ************************************** |
|  | from other than disqualified persons that<br>exceed the greater of \$5,000 or 1% of the   |   |  |  |  |   |  |
|  | amount on line 13 for the year  |   |  |  |  |   |  |
| c  | Add lines 7a and 7b   |   |  |  |  |   |  |
|  | Public support (Subtract line 7c from line 6.)  |   | gariak gari  | A CONTRACTOR   |  |   | ****                                   |
| Sec  | ction B. Total Support  |   |  |  |  |   |  |
| Cale   | ndar year (or fiscal year beginning in) ➤   | (a) 2008  | (b) 2009   | (c) 2010   | (d) 2011   | (e) 2012  | (f) Total                              |
| 9  | Amounts from line 6   |   |  |  |  | 12,   | (1), 5-01                              |
| 10a  | Gross income from interest,   | · ·   |  | ***  | - 40/42  |   | ******                                 |
|  |   |   |  |  |  |   |  |
|  | dividends, payments received on   |   |  |  |  |   |  |
|  |   |   |  |  |  | ,   |  |
| b  | dividends, payments received on securities loans, rents, royalties  |   | A111-1   |  | VIRA   |   |  |
| b  | dividends, payments received on securities loans, rents, royalties and income from similar sources  |   | Any a.   | · .  |  |   | ·                                      |
| b  | dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income  |   |  |  |  |   |  |
| c  | dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  |   |  |  |  |   |  |
| c  | dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business   |   |  |  |  |   |  |
| c  | dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b,  |   |  |  |  |   |  |
| C<br>11  | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  |   |  |  |  |   |  |
| C<br>11  | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain  |   |  |  |  |   |  |
| C<br>11  | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  |   |  |  |  |   |  |
| c<br>11<br>12  | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital  |   |  |  |  |   |  |
| 11<br>12<br>13   | dividends, payments received on securities loans, rents, royalties and income from similar sources  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  | the organization's  | first, second, thire   | i, fourth, or fifth ta   | x year as a sectio   | n 501(c)(3) organiza  |  |
| 11<br>12<br>13<br>14   | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  | ***************************************   |  |  |  |   |  |
| 11<br>12<br>13<br>14<br>Sec  | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  | c Support Pei   | rcentage   | ************   |  |   |  |
| 11<br>12<br>13<br>14<br>Sec  | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  tion C. Computation of Public Public support percentage for 2012 (li  | c Support Per   | rcentage<br>vided by line 13, c  | ************   |  |   | ation,                                 |
| 11<br>12<br>13<br>14<br>Sec<br>15                                      | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here etion C. Computation of Public Public support percentage for 2012 (li Public support percentage from 2011)   | <b>c Support Per</b><br>ne 8, column (f) di<br>Schedule A, Part   | rcentage<br>vided by line 13, c  | ************   |  |   | ation,                                 |
| 11<br>12<br>13<br>14<br>Sec<br>15                                      | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  tion C. Computation of Public Public support percentage for 2012 (li  | <b>c Support Per</b><br>ne 8, column (f) di<br>Schedule A, Part   | rcentage<br>vided by line 13, c  | olumn (f))   |  | 15  | ation,                                 |
| 11<br>12<br>13<br>14<br>Sec<br>15<br>16<br>Sec                         | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here.  Ition C. Computation of Public support percentage for 2012 (lipublic support percentage from 2011.   | c Support Per<br>ne 8, column (f) di<br>Schedule A, Part<br>tment Income  | rcentage<br>vided by line 13, c<br>III, line 15<br>Percentage  | olumn (f))   |  | 15  | ###################################### |
| 11<br>12<br>13<br>14<br>Sec<br>15<br>16<br>Sec                         | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here ation C. Computation of Public support percentage for 2012 (line Public support percentage from 2011 ation D. Computation of Investion D. Computation of Investion D. Computation of Investion D. Computation of Investine Investment income percentage for 20            | c Support Per<br>ne 8, column (f) di<br>Schedule A, Part I<br>tment Income<br>12 (line 10c, colum   | rcentage<br>vided by line 13, c<br>III, line 15<br>Percentage<br>In (f) divided by lin   | olumn (f))   |  | 15<br>16  | ### ################################## |
| 11<br>12<br>13<br>14<br>5ec<br>15<br>16<br>5ec                         | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here tion C. Computation of Public support percentage for 2012 (li Public support percentage from 2011 tion D. Computation of Investment income percentage from 2011 Investment income percentage from 2011 Investment income percentage from 2011                            | c Support Per<br>ne 8, column (f) di<br>Schedule A, Part<br>tment Income<br>12 (line 10c, colum<br>011 Schedule A, F  | rcentage vided by line 13, c III, line 15 Percentage on (f) divided by line Part III, line 17  | olumn (f))<br>= 13, column (f))  |  | 15<br>16<br>17<br>18  | ### ################################## |
| 11<br>12<br>13<br>14<br>Sec<br>15<br>16<br>Sec<br>17                   | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.  Add lines 10a and 10b.  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.).  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here.  Ition C. Computation of Publication D. Computation of Investinest income percentage for 20 linvestment income percentage from 2 linvestment income percentage from 2 33 1/3% support tests - 2012. If the  | c Support Per<br>ne 8, column (f) di<br>Schedule A, Part I<br>tment Income<br>12 (line 10c, colum<br>011 Schedule A, F<br>organization did ne   | rcentage vided by line 13, c III, line 15 Percentage In (f) divided by line Part III, line 17 Int check the box c  | e 13, column (f))  | 15 is more than 3  | 15<br>16<br>17<br>18<br>3 1/3%, and line 17                                 | ## ## ## ## ## ## ## ## ## ## ## ## ## |
| 111 12 13 14 Sec 15 16 Sec 17 18 19a                                   | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  etion C. Computation of Public support percentage from 2011 (in Public support percentage from 2011 in D. Computation of Investment income percentage from 2 33 1/3% support tests - 2012. If the more than 33 1/3%, check this box ar 33 1/3% support tests - 2011. If the | c Support Per<br>ne 8, column (f) di<br>Schedule A, Part I<br>tment Income<br>12 (line 10c, colum<br>011 Schedule A, Forganization did no<br>did stop here. The<br>organization did no                          | rcentage vided by line 13, c III, line 15 Percentage In (f) divided by line Part III, line 17 In check the box coorganization quality                                      | olumn (f)) a 13, column (f)) n line 14, and line lies as a publicly s line 14 or line 19a                        | 15 is more than 3 upported organiza, and line 16 is mo                                 | 15<br>16<br>17<br>18<br>3 1/3%, and line 17<br>ation<br>are than 33 1/3%, a | ###################################### |
| 11<br>12<br>13<br>14<br>Sec<br>15<br>16<br>Sec<br>17<br>18<br>19a<br>b | dividends, payments received on securities loans, rents, royalties and income from similar sources.  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on  Other income, Do not include gain or loss from the sale of capital assets (Explain in Part IV.)  Total support. (Add lines 9, 10c, 11, and 12.)  First five years. If the Form 990 is for check this box and stop here  tion C. Computation of Public support percentage from 2011 tion D. Computation of Investment income percentage from 2 33 1/3% support tests - 2012. If the more than 33 1/3%, check this box ar   | c Support Per<br>ne 8, column (f) di<br>Schedule A, Part I<br>tment Income<br>12 (line 10c, colum<br>011 Schedule A, F<br>organization did no<br>od stop here. The<br>organization did no<br>ok this box and st | rcentage vided by line 13, c III, line 15 Percentage In (f) divided by line Part III, line 17 Int check the box coorganization quality of check a box on op here. The orga | olumn (f))  e 13, column (f))  n line 14, and line fles as a publicly s line 14 or line 19a nization qualifies a | 15 is more than 3 upported organiza, and line 16 is more a publicly supported organiza | 15<br>16<br>17<br>18<br>3 1/3%, and line 17<br>ation<br>are than 33 1/3%, a | ###################################### |

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2012

| Name of the organization                                   | <del>/</del> 11   | Employer identification number   |
|--|---|--|
|  | INDIAN LAW RESOURCE CENTER  | 52-1121079   |
| Organization type (chec                                    | k one):   |  |
| Filers of:   | Section:  |  |
| Form 990 or 990-EZ   | X 501(c)( 3 ) (enter number) organization   |  |
|  | 4947(a)(1) nonexempt charitable trust not treated as a private foundation   |  |
|  | 527 political organization  |  |
| Form 990-PF  | 501(c)(3) exempt private foundation   |  |
|  | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |  |
|  | 501(c)(3) taxable private foundation  |  |
| Note. Only a section 501  General Rule  For an organizat   | n is covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special I  cion filling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in   |  |
| Special Rules  |   |  |
| 509(a)(1) and 17   | 1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re<br>0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the<br>n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.   | egulations under sections<br>e greater of (1) \$5,000 or (2) 2%                          |
| total contribution   | 1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one conns of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or efformely to children or animals. Complete Parts I, II, and III.  |  |
| contributions for<br>If this box is che<br>purpose. Do not | 1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions did not to exclusively for religious, charitable, etc., purposes, but these contributions did not to cked, enter here the total contributions that were received during the year for an exclusive complete any of the parts unless the <b>General Rule</b> applies to this organization because ble, etc., contributions of \$5,000 or more during the year | otal to more than \$1,000.  vely religious, charitable, etc., it received nonexclusively |
| but it <b>must</b> answer "No" o                           | that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).  | B (Form 990, 990-EZ, or 990-PF),<br>t I, line 2 of its Form 990-PF, to                   |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

#### INDIAN LAW RESOURCE CENTER

52-1121079

| Part I     | Contributors (see instructions). Use duplicate copies of Part I if addition | onal space is needed.      | •   |
|------------|---|----------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
| 1          |   | -<br>- \$ <u>450,926.</u>  | Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
| 2          |   | -<br>-<br>\$\$0,000.       | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)   |
| (a)<br>No. | (b)   | (c)                        | (d)   |
| 3          | Name, address, and ZIP + 4  | * 35,000.                  | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)   |
| (a)<br>No. | (b)   | (c)                        | (d)   |
| 4 -        | Name, address, and ZIP + 4  | * 150,000.                 | Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d) Type of contribution  |
|            |   | \$                         | Person Payroli Noncash (Complete Part II if there is a noncash contribution.)     |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution   |
|            |   | \$                         | Person Payroll Noncash (Complete Part II if there is a noncash contribution.)     |

Name of organization

Employer identification number

#### INDIAN LAW RESOURCE CENTER

52-1121079

| (a)<br>No.<br>from<br>Part I             | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received   |
|--|--|--|--|
|  |  | <b>\$</b>                                      |  |
| (a)<br>No.<br>from<br>Part I             | (b)  Description of noncash property given   | (c)<br>FMV (or estimate)<br>(see instructions) | (d) Date received  |
| T 17 17 17 17 17 17 17 17 17 17 17 17 17 |  | \$   |  |
| (a)<br>No.<br>from<br>Part I             | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received   |
|  |  | <b>\$</b>                                      |  |
| (a)<br>No.<br>from<br>Part I             | (b) Description of noncash property given    | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received   |
|  |  | <br>  \$                                       |  |
| (a)<br>No.<br>from<br>Part I             | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received   |
|  |  | s  |  |
| (a)<br>No.<br>from<br>Part I             | (b)  Description of noncash property given   | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received   |
|  |  |  | To the state of th |

| amo or organ   |  |   | Comployer identification number  |  |  |  |  |  |
|----------------|--|---|--|--|--|--|--|--|
| NDIAN          | LAW RESOURCE CENTER  |   | 52-1121079   |  |  |  |  |  |
| Part III       | Exclusively religious, charitable, etc., indivi  | dual contributions to section 501(c)(7  | (8) or (10) organizations that total more than \$1,000 for   |  |  |  |  |  |
|                | year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.  | e following line entry. For organizations<br>contributions of <b>\$1 000</b> or less for th | s completing Part III, enter   |  |  |  |  |  |
| ····           | Use duplicate copies of Part III if additiona  | space is needed.  | to your - (Enter this information once.)   |  |  |  |  |  |
| a) No.         |  | 100   |  |  |  |  |  |  |
| from<br>Part I | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |  |  |  |  |  |
|                |  | , name -  | 11119481   |  |  |  |  |  |
| -              | -2417  |   |  |  |  |  |  |  |
| -              |  |   |  |  |  |  |  |  |
| -              |  |   |  |  |  |  |  |  |
|                |  |   |  |  |  |  |  |  |
|                |  | (e) Transfer of gift  | •  |  |  |  |  |  |
|                | Tunnefamoula   | 170   |  |  |  |  |  |  |
|                | Transferee's name, address, an   | 0 ZIP + 4   | Relationship of transferor to transferee   |  |  |  |  |  |
| -              |  |   |  |  |  |  |  |  |
| -              |  |   | The state of the s |  |  |  |  |  |
| -              |  |   |  |  |  |  |  |  |
| 2) No.         |  |   |  |  |  |  |  |  |
| from           | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |  |  |  |  |  |
| Part I         | THE RESERVE THE PARTY OF THE PA |   | (1) Doodsplast of now girl is need   |  |  |  |  |  |
| -              |  |   |  |  |  |  |  |  |
| [ -            |  |   |  |  |  |  |  |  |
| -              |  |   | Annual Indiana   |  |  |  |  |  |
|                |  | W   |  |  |  |  |  |  |
|                | (e) Transfer of gift   |   |  |  |  |  |  |  |
|                |  |   |  |  |  |  |  |  |
|                | Transferee's name, address, and  | ZIP + 4   | Relationship of transferor to transferee   |  |  |  |  |  |
| _              | - The state of the |   |  |  |  |  |  |  |
| · ] _          | - ANGLE - NOVE - |   |  |  |  |  |  |  |
|                | - Annual  | 1000  |  |  |  |  |  |  |
| -> >-          |  |   |  |  |  |  |  |  |
| n) No.<br>From | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |  |  |  |  |  |
| Part i         |  | (c) Ose of gift   | (d) Description of now gift is need  |  |  |  |  |  |
| -              |  |   |  |  |  |  |  |  |
|                |  | - 2 (0) 1   |  |  |  |  |  |  |
| _              |  |   |  |  |  |  |  |  |
|                |  | ***************************************   |  |  |  |  |  |  |
|                |  | (e) Transfer of gift  |  |  |  |  |  |  |
| **             | (c) manager of grit  |   |  |  |  |  |  |  |
|                | Transferee's name, address, and  | ZIP+4   | Relationship of transferor to transferee   |  |  |  |  |  |
| _              |  |   |  |  |  |  |  |  |
| _              |  |   |  |  |  |  |  |  |
| _              |  |   |  |  |  |  |  |  |
|                |  |   |  |  |  |  |  |  |
| i) No.<br>rom  | (6) 19   |   |  |  |  |  |  |  |
| art            | (b) Purpose of gift  | (c) Use of gift   | (d) Description of how gift is held  |  |  |  |  |  |
| <u> </u>       |  | - HVL   |  |  |  |  |  |  |
|                |  |   |  |  |  |  |  |  |
| ĺ              |  | 1000  |  |  |  |  |  |  |
|                |  |   |  |  |  |  |  |  |
|                |  | (e) Transfer of gift  |  |  |  |  |  |  |
|                |  | (c) Hansier Of Gift   |  |  |  |  |  |  |
|                | Transferee's name, address, and  | 7ID + 4   | Dolotionakia attumusta et e  |  |  |  |  |  |
|                | The state of the s |   | Relationship of transferor to transferee   |  |  |  |  |  |
| -              |  |   | ***************************************  |  |  |  |  |  |
|                |  |   |  |  |  |  |  |  |
| -              | 1  |   |  |  |  |  |  |  |
| ,              |  |   |  |  |  |  |  |  |

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

# **Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

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

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

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

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

| •  | Section 501(c)(4), (5), or (6) organiz | ations: Complete Part III.             |                           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Tury, mon  |
|----|--|--|---------------------------|---|--|
|    | ne of organization                     |  | -                         | Emp                                     | loyer identification number                      |
| _  |  | LAW RESOURCE CENT                      |                           |   | 52-1121079                                       |
| Pá | art I-A Complete if the or             | ganization is exempt unde              | er section 501(c)         | or is a section 527 o                   | organization.                                    |
|    |  |  | •                         |   | ٠.   |
|    |  | ization's direct and indirect politica |                           |   | ı  |
|    |  |  |                           |   |  |
| 3  | Volunteer hours                        |  |                           |   |  |
| Ps | rt I-B Complete if the or              | ganization is exempt unde              | r section 501/eV          | 3)                                      | · · · · · · · · · · · · · · · · · · ·            |
|    |  | x incurred by the organization under   |                           |   |  |
|    |  | x incurred by organization manager     |                           |   |  |
| 3  | If the organization incurred a secti   | ion 4955 tax, did it file Form 4720 fo | or this vear?             |   | Yes No   |
| 4a | Was a correction made?                 |  |                           | *************************************** | Yes No   |
| b  | If "Yes," describe in Part IV.         | •                                      |                           | •                                       |  |
| Pa | irt I-C Complete if the or             | ganization is exempt unde              | r section 501(c),         | except section 501                      | (c)(3).  |
| .1 | Enter the amount directly expende      | ed by the filing organization for sect | ion 527 exempt functi     | ion activities                          | }  |
|    | Enter the amount of the filing orga    | nization's funds contributed to other  | er organizations for se   | ction 527                               |  |
|    | exempt function activities             |  |                           | ▶ 9                                     | 3  |
| 3  | Total exempt function expenditure      | s. Add lines 1 and 2. Enter here an    | d on Form 1120-POL,       | ,                                       |  |
|    | line 17b                               |  |                           | ▶9                                      |  |
|    | Did the filing organization file Form  | 1 1120-POL for this year?              |                           |   | Yes No   |
| 5  | Enter the names, addresses and e       | mployer identification number (EIN)    | of all section 527 pol    | itical organizations to whic            | ch the filing organization                       |
|    | made payments. For each organization   | ation listed, enter the amount paid    | from the filing organiza  | ation's funds. Also enter t             | ne amount of political                           |
|    | contributions received that were p     | romptly and directly delivered to a    | separate political orga   | nization, such as a separa              | ate segregated fund or a                         |
|    |  | additional space is needed, provid     | le information in Part l' | V.                                      |  |
|    | (a) Name                               | (b) Address                            | (c) EIN                   | (d) Amount paid from                    | (e) Amount of political                          |
|    |  | •                                      | ·                         | filing organization's                   | contributions received and promptly and directly |
|    | •                                      |  |                           | funds. If none, enter -0                | delivered to a separate                          |
|    |  |  |                           |   | political organization.                          |
|    |  |  |                           |   | If none, enter -0                                |
|    | •                                      | ·                                      |                           |   |  |
|    |  |  |                           |   |  |
|    |  | ŀ                                      | * '                       |   |  |
|    |  |  |                           |   |  |
|    |  |  | ·                         |   |  |
|    |  |  |                           | · · ·                                   |  |
|    |  |  |                           |   |  |
|    |  |  | <u> </u>                  |   |  |
|    |  |  |                           |   |  |
|    |  |  |                           |   |  |
|    |  | 1                                      |                           |   |  |

| Schedule C (Form 990 or 990-EZ) 2012   | 2 INDIAN                        | LAW R                                 | ESOURCE CE                       | NTER   | 52-1                                   | 121079 Page 2  |
|--|---------------------------------|---------------------------------------|----------------------------------|--|--|--|
| Part II-A Complete if the o  | rganization                     | is exem                               | pt under section                 | n 501(c)(3) and fil                          | ed Form 5768                           |  |
| (election under se   | ection 501(h                    | 1)).                                  | •                                |  |  |  |
| A Check L if the filing organia  | zation belongs                  | to an affilia                         | ted group (and list in           | Part IV each affiliated                      | group member's nam                     | e, address, EIN,   |
| expenses, and sh   | nare of excess                  | lobbying ex                           | (penditures).                    |  |  |  |
| B Check F if the filing organi.  | zation checked                  | l box A and                           | l "limited control" pro          | visions apply.                               | •                                      |  |
|  | mits on Lobby<br>enditures" mea |                                       | ditures<br>ts paid or incurred.) |  | (a) Filing<br>organization's<br>totals | (b) Affiliated group<br>totals   |
| 1a Total lobbying expenditures to in   | ifluence public                 | opinion (ar                           | rass roots lobbying)             |  | 16,932.                                |  |
| b Total lobbying expenditures to in  |                                 |                                       |                                  |  | 1,585.                                 |  |
| c Total lobbying expenditures (add   |                                 |                                       |                                  |  | 18,517.                                |  |
| d Other exempt purpose expenditu   |                                 |                                       | -                                |  | 1,639,323.                             | . ,  |
| e Total exempt purpose expenditu   |                                 |                                       |                                  |  | 1,657,840.                             |  |
| f Lobbying nontaxable amount. Er   |                                 |                                       |                                  |  | 232,892.                               | ,  |
| If the amount on line 1e, column (a  |                                 |                                       | ying nontaxable amo              | 1  |  |  |
| Not over \$500,000   | , (2)                           |                                       | ne amount on line 1e.            | , and is                                     |  |  |
| Over \$500,000 but not over \$1,0  | 100,000                         |                                       | plus 15% of the exce             | ess over \$500 000                           |  |  |
| Over \$1,000,000 but not over \$1  |                                 | · · · · · · · · · · · · · · · · · · · | plus 10% of the exce             |  |  |  |
| Over \$1,500,000 but not over \$1  |                                 |                                       | plus 5% of the exces             |  |  |  |
| Over \$17,000,000  | 7,000,000                       | \$1,000,00                            |                                  | 33 ονει ψ1,000,000.                          |  |  |
| 010. 411,000,000   | · ·                             | Ψ1,000,00                             | ,,,,                             |  |  | handi kang disapatan da 1991, sababat<br>Birita disapatan da 1992, sababat da 1992 |
| g Grassroots nontaxable amount (   | enter 25% of li                 | ne 1f)                                |                                  |  | 58,223.                                |  |
| h Subtract line 1g from line 1a. If z  | ' ·                             |                                       |                                  |  | 0.                                     |  |
| i Subtract line 1f from line 1c. If ze   | =                               |                                       |                                  |  | 0.                                     |  |
| j If there is an amount other than :   |                                 |                                       |                                  |  |  |  |
| reporting section 4911 tax for thi   |                                 |                                       |                                  |  |  | Yes No   |
|  |                                 |                                       | aging Period Under S             |  |  |  |
| -  |                                 |                                       | • •                              | do not have to comp<br>s 2a through 2f on pa |  | ,  |
|  | Lobbyi                          | ng Expend                             | litures During 4-Yea             | r Averaging Period                           |  |  |
| Calendar year<br>(or fiscal year beginning in)                                 | (a) 200                         | 09                                    | <b>(b)</b> 2010                  | (c) 2011                                     | ( <b>d)</b> 2012                       | (e) Total  |
| 2a Lobbying nontaxable amount  | 201                             | 389.                                  | 217,551.                         | 227,280.                                     | 232,892.                               | 879,112.   |
| <ul> <li>b Lobbying ceiling amount<br/>(150% of line 2a, column(e))</li> </ul> |                                 |                                       |                                  |  |  | 1,318,668.   |
| c Total lobbying expenditures  |                                 |                                       |                                  | 2,907.                                       | 18,517.                                | 21,424.  |
| d Grassroots nontaxable amount   | 50                              | 347.                                  | 54,388.                          | 56,820.                                      | 58,223.                                | 219,778.   |
| e Grassroots ceiling amount  |                                 |                                       |                                  |  |  | 200 668  |

16,932. 16,932. Schedule C (Form 990 or 990-EZ) 2012

# Schedule C (Form 990 or 990-EZ) 2012 INDIAN LAW RESOURCE CENTER 52-1121079 Page 3 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| Fore    | r each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description   |   | (a)                    |  | (b)                           |  |
|---------|--|---|------------------------|--|-------------------------------|--|
| of th   | e lobbying activity.   | Yes                                     | No                     | Am   | ount                          |  |
| 1       | During the year, did the filing organization attempt to influence foreign, national, state or  |   | SWE WITH EA            | 7 a - 2 y a - 5 y a - 5 y a                      | yro, e Rossia i gazay         |  |
|         | local legislation, including any attempt to influence public opinion on a legislative matter   |   |                        |  |                               |  |
|         | or referendum, through the use of:   |   |                        |  |                               |  |
| а       | Volunteers?  |   |                        |  | versellige                    |  |
| b       | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?   |   |                        |  |                               |  |
| ن<br>ام | Media advertisements?  |   |                        |  |                               |  |
| u       | Mailings to members, legislators, or the public?   |   |                        |  |                               |  |
| f       | Publications, or published or broadcast statements?  Grants to other organizations for lobbying purposes?  |   |                        | <del> </del>                                     | ····                          |  |
| ,       | Direct contact with legislators, their staffs, government officials, or a legislative body?  |   |                        |  |                               |  |
|         | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  |   |                        |  |                               |  |
| ;       |  |   | <del> </del>           | -  |                               |  |
| ;       | ***************************************  | es es la companya                       | ecostyc Mitganiese nei | <u> </u>   |                               |  |
| 2a      | Total. Add lines 1c through 1i  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  | 50,50 tg-00-00 mg/sy                    | ecaphoron da           | i<br>Nikiarenceir                                |                               |  |
| h.      | If "Yes," enter the amount of any tax incurred under section 4912  |   | Dan stellerich         |  |                               |  |
|         | If "Yes," enter the amount of any tax incurred by organization managers under section 4912   |   |                        | <b> </b>   |                               |  |
| ٠<br>ر  | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?   |   |                        | Silver Verskerten                                | Side o kontra o terra o terra |  |
| Par     | t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4) | on 501(a)                               | (5) or o               | anales and                                       | governos escolo               |  |
|         | 501(c)(6).   | on sone                                 | noj, ur si             | SCHOIL   | **                            |  |
|         |  |   |                        | Yes  | No                            |  |
| 1       | Were substantially all (90% or more) dues received nondeductible by members?   |   | -                      | 163  | 140                           |  |
| 2       | Did the organization make only in-house lobbying expenditures of \$2,000 or less?  | • | 1                      | <del>                                     </del> |                               |  |
| 3       | Did the organization agree to carry over lobbying and political expenditures from the prior year?  |   | 2                      | <u> </u>   |                               |  |
|         | t III-B Complete if the organization is exempt under section 501(c)(4), secti  | on 501/o                                | 3                      | otion  | <u> </u>                      |  |
|         | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."   | l "No," O                               | R (b) Pai              | t III-A, lii                                     | ne 3, is                      |  |
| 1       | Dues, assessments and similar amounts from members   |   | 1                      |  |                               |  |
| 2       | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)  | cal                                     |                        |  |                               |  |
|         | expenses for which the section 527(f) tax was paid).   |   |                        |  | •                             |  |
| a       | Current year   |   | 2a                     |  |                               |  |
| b       | Carryover from last year   |   | 2b                     |  |                               |  |
| C       | iotai  |   | 2c                     |  |                               |  |
| 3       | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  |   | 3                      |  |                               |  |
| 4       | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc   | cess                                    | elenare ter            |  |                               |  |
|         | does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and  |   |                        |  | ,                             |  |
|         | expenditure next year?   |   | 4                      | :  |                               |  |
| 5       | Taxable amount of lobbying and political expenditures (see instructions)   |   | 5                      |  |                               |  |
| Par     | IV Supplemental Information  |   | I T                    |  |                               |  |
| Comp    | olete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Pa  | art II.A (affilia                       | ated group             | lict\s Dort II                                   | A line Or                     |  |
| nd F    | art II-B, line 1. Also, complete this part for any additional information.   |   | ated group             | iisty, rait ii:                                  | A, III e 2,                   |  |
|         |  |   |                        |  |                               |  |
|         |  |   |                        |  |                               |  |
|         |  |   |                        |  |                               |  |
|         |  | <del> </del>                            |                        |  |                               |  |
|         |  |   |                        |  |                               |  |
|         |  |   | ····                   |  | <del></del> .                 |  |
|         |  |   |                        |  |                               |  |
|         |  |   |                        |  |                               |  |
|         |  |   | •                      | •  |                               |  |
|         |  |   |                        |  |                               |  |
|         |  |   |                        |  |                               |  |

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012 Open to Public

Open to Public Inspection

Name of the organization

TNDTAN LAW PECOLOGY CENTER

Employer identification number

| Pa                                      | rt I: Organizations Maintaining Donor Advised  |   | Or Accounts, Complete if the   |
|---|--|---|--|
|   | organization answered "Yes" to Form 990, Part IV, line   |   | or repodulter complete it tile   |
| *************************************** |  | (a) Donor advised funds                     | (b) Funds and other accounts   |
| 1                                       | Total number at end of year  |   |  |
| 2                                       | Aggregate appările stiana te (dessie   |   |  |
| 3                                       | Aggregate grants from (d. win  |   | ****   |
| 4                                       | Aggregate value at end of year   |   | The second secon |
| 5                                       | Did the organization inform all donors and donor advisors in w   | riting that the assets held in donor advise | d funds  |
| _                                       | are the organization's property, subject to the organization's ex  |   |  |
| 6                                       | Did the organization inform all grantees, donors, and donor ad   | vicare in writing that grant funds can be w | Yes No   |
|   | for charitable purposes and not for the benefit of the donor or  |   |  |
|   | impermissible private benefit?   |   |  |
| Pa                                      | rt II Conservation Easements. Complete if the orga   | nization answered "Ves" to Form 000. Do     | Yes No   |
| 1                                       | Purpose(s) of conservation easements held by the organization  |   | ar 14, 1818 7.   |
| •.                                      | Preservation of land for public use (e.g., recreation or ed  |   |  |
|   | Protection of natural habitat  |   | orically important land area   |
|   | Preservation of open space   | Preservation of a certifi                   | ed historic structure  |
| 2                                       | · ·  |   | _  |
| ~                                       | Complete lines 2a through 2d if the organization held a qualifie day of the tax year.                              | d conservation contribution in the form of  | f a conservation easement on the last  |
|   | day of the tax year.   |   |  |
| а                                       | Total number of consequation economists  |   | Held at the End of the Tax Year  |
| _                                       | Total process restricted by assessments  |   |  |
| b                                       | Total acreage restricted by conservation easements   |   | 2b   |
| c<br>d                                  | Number of conservation easements on a certified historic structure of conservation easements in all the latter (a) |   |  |
| u                                       | Number of conservation easements included in (c) acquired aff  |   |  |
| 2                                       | listed in the National Register  |   | 2d   |
| 3                                       | Number of conservation easements modified, transferred, release  | ased, extinguished, or terminated by the o  | organization during the tax  |
| ,                                       | Number of states when a superior that the  |   |  |
| 4<br>5                                  | Number of states where property subject to conservation ease   |   | •  |
| 9                                       | Does the organization have a written policy regarding the perio  | dic monitoring, inspection, handling of     |  |
| 6                                       | violations, and enforcement of the conservation easements it h   | loids?                                      | Yes No   |
| 7                                       | Staff and volunteer hours devoted to monitoring, inspecting, are   | nd enforcing conservation easements dur     | ing the year 🕨   |
| 8                                       | Amount of expenses incurred in monitoring, inspecting, and en  | forcing conservation easements during the   | ne year 🕨 \$   |
| 0                                       | Does each conservation easement reported on line 2(d) above  |   |  |
|   | and section 170(h)(4)(B)(ii)?  |   | Yes No   |
| 9                                       | In Part XIII, describe how the organization reports conservation   | easements in its revenue and expense s      | tatement, and balance sheet, and   |
|   | include, if applicable, the text of the footnote to the organization   | n's financial statements that describes th  | e organization's accounting for  |
| Par                                     | conservation easements.  t III   Organizations Maintaining Collections of A  | Ant Uinterin I Torre Torre 201              |  |
| , WI                                    |  | Art, Historical Treasures, or Oth           | ier Similar Assets.  |
| 4-                                      | Complete if the organization answered "Yes" to Form 99   |   |  |
| ıa                                      | If the organization elected, as permitted under SFAS 116 (ASC  | 958), not to report in its revenue stateme  | nt and balance sheet works of art,   |
|   | historical treasures, or other similar assets held for public exhib  | ition, education, or research in furtheranc | e of public service, provide, in Part XIII,  |
|   | the text of the footnote to its financial statements that describe   |   |  |
| D                                       | If the organization elected, as permitted under SFAS 116 (ASC  | 958), to report in its revenue statement a  | nd balance sheet works of art, historical  |
|   | treasures, or other similar assets held for public exhibition, educ  | cation, or research in furtherance of publi | c service, provide the following amounts   |
|   | relating to these items:   |   | •  |
|   | (i) Revenues included in Form 990, Part VIII, line 1   |   |  |
| _                                       | (ii) Assets included in Form 990, Part X   |   | ▶ \$   |
| 2                                       | If the organization received or held works of art, historical treasu   |   | ain, provide   |
|   | the following amounts required to be reported under SFAS 116   | (ASC 958) relating to these items:          |  |
| a                                       | Revenues included in Form 990, Part VIII, line 1   |   | <b>&gt;</b> \$   |
| b                                       | Assets included in Form 990, Part X  |   | <b>&gt;</b> \$   |

| Sch            |   | LAW RESOURC                               |   |               |   |                          |            | 2107        |          |            |
|----------------|---|---|---|---------------|---|--------------------------|------------|-------------|----------|------------|
| Pa             | rt III Organizations Maintaining C  | ollections of Art                         | t, Historical Tr                        | easures,      | or Oth                                  | er Simila                | ar Asse    | ts(contin   | rued)    |            |
| 3              | Using the organization's acquisition, access  | on, and other records                     | s, check any of the                     | following th  | at are a                                | significant ι            | use of its | collection  | n item   | าธ         |
|                | (check all that apply):   |   |   |               |   |                          |            |             |          |            |
| а              | Public exhibition   | d   |   | hange prog    |   |                          |            |             |          |            |
| b              | Scholarly research  | е   | Other                                   |               |   |                          |            |             |          |            |
| C              | Preservation for future generations   |   |   |               |   |                          |            |             |          |            |
| 4              | Provide a description of the organization's co  |   |   |               |   |                          | se in Par  | t XIII.     |          |            |
| 5              | During the year, did the organization solicit of  |   |   |               |   |                          |            | _           |          |            |
| _              | to be sold to raise funds rather than to be m   |   |   |               |   |                          |            | Yes         |          | No         |
| Pa             | rt IV Escrow and Custodial Arran  |   | e if the organization                   | n answered    | "Yes" to                                | Form 990,                | Part IV,   | line 9, or  |          |            |
|                | reported an amount on Form 990, Pa  |   | *************************************** |               |   |                          | ·          |             |          |            |
| 1a             | Is the organization an agent, trustee, custod   | ian or other intermedi                    | ary for contribution                    | ns or other a | ssets no                                | t included               |            |             |          | _          |
|                | on Form 990, Part X?  |   |   |               |   | •••••                    | <u>_</u>   | Yes         |          | No         |
| b              | If "Yes," explain the arrangement in Part XIII  | and complete the folio                    | owing table:                            |               |   |                          |            |             |          |            |
|                |   |   |   |               |   |                          | wer        | Amount      |          |            |
| C              |   |   |   | ·····         | • | 1c                       | ···        |             | ***      |            |
| d              |   |   |   |               |   | <u>1d</u>                |            |             |          |            |
| е              | Distributions during the year   |   |   |               |   | 1e                       |            | *****       |          |            |
| f              | Ending balance  |   |   |               |   | 1 <u>f</u>               |            |             |          |            |
| 2a             | *** *** **** **** **** **** **** **** ****  | orm 990, Part X, line 2                   | 21?                                     |               | • |                          | L          | Yes         | <u> </u> | No         |
| D <sub>2</sub> |   | Check here if the exp                     | lanation has been                       | provided in   | Part XIII                               |                          |            |             |          |            |
| га             | rt V Endowment Funds. Complete i  |   |   |               |   |                          |            | · · · · · · |          |            |
|                | Destanta a f  | (a) Current year                          | (b) Prior year                          | (c) Two yea   | rs back                                 | (d) Three ye             | ears back  | (e) Four    | years    | back       |
| 1a             |   | 50,961.                                   | 50,721.                                 | 4             | 8,239.                                  |                          | 15,762,    |             | 37       | 093.       |
| b              | Contributions   | 4,806                                     | 240_                                    |               | 2,482.                                  |                          | 2 477      | <u> </u>    | 8        | 669.       |
| C              | Net investment earnings, gains, and losses  |   |   |               |   |                          |            | <u></u>     |          |            |
| d              | Grants or scholarships  |   |   | <u> </u>      |   | 17114                    |            | - non-      |          |            |
| е              | •   |   |   |               |   |                          |            |             |          |            |
|                | and programs  |   |   | <u> </u>      |   |                          | -11111.2   |             |          |            |
| f              | Administrative expenses   |   | -400                                    |               |   |                          |            |             |          |            |
| 9              | End of year balance   | 55,767.                                   | 50,961.                                 |               | 0,721.                                  | 4                        | 8 239.     |             | 45,      | 762.       |
| 2              | Provide the estimated percentage of the curr  |   |   | i)) held as:  |   |                          |            |             |          |            |
| a<br>b         | Board designated or quasi-endowment  Permanent endowment  |   | <b>%</b>                                |               |   |                          |            |             |          |            |
| C              | Temporarily restricted endowment  | %   |   |               |   |                          |            |             |          |            |
| ·              | The percentages in lines 2a, 2b, and 2c shou  | <u> </u>                                  |   |               |   |                          |            |             |          |            |
| За             | Are there endowment funds not in the posses   | od equal 100%.                            |   |               |   |                          |            |             |          |            |
|                | by:   | ssion of the organizati                   | ion that are neig ai                    | nd administe  | ered for t                              | he organiza              | tion       | ŗ           | —т       |            |
|                | · · ·   |   |   |               |   |                          |            | F           | Yes      | No         |
|                |   | d a la l |   |               |   |                          | ••••••     | 3a(i)       | X        |            |
| h              | (ii) related organizations  |   | 0-1-1-1 PC                              |               | •••••                                   | ••••••                   |            | 3a(ii)      |          | <u> </u>   |
| 4              | If "Yes" to 3a(ii), are the related organizations<br>Describe in Part XIII the intended uses of the | organizationia and a                      | Schedule R?                             |               |   |                          |            | 3b          |          |            |
| Par            | t VI Land, Buildings, and Equipm  | ent. See Form 900 t                       | ment tungs.                             |               | ·                                       | ***                      |            |             |          |            |
| <u></u>        | Description of property   | (a) Cost or oth                           | <u> </u>                                |               |   |                          |            |             |          |            |
|                |   | basis (investme                           | , t,                                    |               | • •                                     | ccumulated<br>preciation | '          | (d) Book    | value    | •          |
| 1a             | Land  |   | nty Daois (                             | outor)        | <u> </u>                                | Pieciation               | .1         |             |          |            |
|                | Buildings   |   | <u> </u>                                |               | gersom efficient                        |                          | 11. 11     | -           |          |            |
| C              | Leasehold improvements  | ••  |   | 5,331.        |   | 2,54                     | 2          |             | 7        | 20         |
|                | Equipment   |   |   | 7,685.        | 1102                                    | 89,44                    |            |             |          | 39.<br>43. |
|                | Other   | 1   |   | 8,787.        |   | 28,78                    |            |             | , 4      | 0.         |
| Total          | . Add lines 1a through 1e. (Column (d) must ed  |   | column (R) line 1                       | 2(c) )        | ****                                    | 20,10                    |            | . 21        | 0.3      | 32.        |

Schedule D (Form 990) 2012

INDIAN LAW RESOURCE CENTER

52-1121079 Page 3

Schedule D (Form 990) 2012

|                | dule D (Form 990) 2012 INDIAN LAW RESOURCE CENTER   |                   | ****                                    |  | 121079          | Page 4            |
|----------------|---|-------------------|---|--|-----------------|-------------------|
| Par            | t XI Reconciliation of Revenue per Audited Financial Statemer   | nts With          | Revenue per R                           | eturn  |                 |                   |
| 1              | Total revenue, gains, and other support per audited financial statements  |                   |   | 1  | 803             | 827.              |
| 2              | Amounts included on line 1 but not on Form 990, Part VIII, line 12:   |                   |   | in Care  |                 |                   |
| а              | Net unrealized gains on investments   | 2a                | 2,643.                                  |  |                 |                   |
| b              | Donated services and use of facilities  |                   |   |  |                 |                   |
| C              | Recoveries of prior year grants   |                   |   |  |                 |                   |
| d              | Other (Describe in Part XIII.)  | 1 1               |   |  |                 |                   |
| e              | Add lines 2a through 2d   |                   |   | 2e   | 2               | 643.              |
| 3              | Subtract line 2e from line 1  |                   |   | 3  |                 | 184.              |
| 4              | Amounts included on Form 990, Part VIII, line 12, but not on line 1:  | ***************** |   | 4-5-V.   | 001             | , 104.            |
| a              | Investment expenses not included on Form 990, Part VIII, line 7b  | 40                |   |  |                 |                   |
| b              | Other (Describe in Part XIII.)  |                   | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | Appendig<br>Appendig   |                 |                   |
| -              |   |                   |   | earson files   |                 | ^                 |
| 5              | Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  | •                 |   | 4c   | 901             | <u>0.</u><br>184. |
|                | t XII Reconciliation of Expenses per Audited Financial Stateme  | nte With          | Evpenses per                            | 5 Detu   |                 | 104.              |
| 1              |   |                   | <del></del>                             |  |                 | 030               |
|                | Total expenses and losses per audited financial statements  |                   |   | 1  | <u>1,657,</u>   | 838.              |
| 2              | Amounts included on line 1 but not on Form 990, Part IX, line 25:   | 1 _ 1             |   |  |                 |                   |
| a              | Donated services and use of facilities  | 2a                |   |  |                 |                   |
| b              | Prior year adjustments Other leases   |                   | ,                                       |  |                 |                   |
| C              | Other losses  |                   |   |  |                 |                   |
| d              | Other (Describe in Part XIII.)  |                   |   | tati di  |                 |                   |
|                | Add lines 2a through 2d   |                   |   | 2e   |                 | <u> </u>          |
| 3              | Subtract line 2e from line 1  |                   |   | 3  | <u>1,657</u> ,  | <u>838.</u>       |
| 4              | Amounts included on Form 990, Part IX, line 25, but not on line 1:  | 1 1               |   |  |                 |                   |
| а              | Investment expenses not included on Form 990, Part VIII, line 7b  |                   |   |  |                 |                   |
| b <sub>.</sub> | Other (Describe in Part XIII.)  | 4b                |   | CONTACTOR OF THE CONTROL OF THE CONT |                 |                   |
| C              | Add lines 4a and 4b   |                   |   | 4c   | •               | 0.                |
| 5              | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)  |                   |   | 5  | 1,657,          | 838.              |
|                | t XIII Supplemental Information   |                   |   |  |                 |                   |
| (, line        | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to part to part V, LINE 4: ENDOWMENT EARNINGS ARE DESIGN | rovide any        | additional information                  | on.  | b; Part V, line | 4; Part           |
| ואקב           | FDAT. CIIDDODM AND DINDTMA OF THEMPSEASTED  | <b>.</b>          |   |  | ·<br>           |                   |
| 7171           | ERAL SUPPORT AND FUNDING OF INTERNSHIPS FO  | R LAW             | SCHOOL ST                               | JDEN   | TS.             |                   |
|                |   |                   |   |  |                 |                   |
|                |   |                   | ····                                    |  |                 |                   |
|                |   |                   |   |  |                 |                   |
|                |   |                   |   |  |                 |                   |
|                |   |                   |   |  |                 |                   |
|                |   | ****              |   |  | ****            |                   |
|                |   |                   |   |  |                 |                   |
|                |   |                   |   |  | -               |                   |
|                |   |                   | ,                                       |  |                 |                   |
|                |   |                   |   |  |                 |                   |
|                |   |                   |   |  |                 |                   |
|                | ·   |                   |   |  |                 |                   |

#### SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** 

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

INDIAN LAW RESOURCE CENTER

**Questions Regarding Compensation** 

Employer identification number 52-1121079

|    |  | *****         | Yes           | No   |
|----|--|---------------|---------------|--|
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,   |               | 163           | 140  |
|    | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.   |               |               |  |
|    | First-class or charter travel  Housing allowance or residence for personal use   |               |               |  |
|    | Travel for companions Payments for business use of personal residence  |               |               |  |
|    | Tax indemnification and gross-up payments  Health or social club dues or initiation fees   |               |               |  |
|    | Discretionary spending account  Personal services (e.g., maid, chauffeur, chef)  |               |               |  |
|    |  |               |               |  |
| b  | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or  |               |               |  |
|    | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain   | 1b            | . Maria di sa | - 04.11.1                                    |
| 2  | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,   | 100           |               |  |
|    | trustees, and the CEO/Executive Director, regarding the items checked in line 1a?  | 2             |               |  |
|    |  | 100           |               |  |
| 3  | Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's  |               |               | 12.41  |
|    | CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to   |               |               |  |
|    | establish compensation of the CEO/Executive Director, but explain in Part III.   |               |               |  |
|    |  |               |               |  |
|    | The state of the s | 3.5           |               |  |
|    |  |               |               |  |
|    | Form 990 of other organizations  X Approval by the board or compensation committee   |               |               |  |
| 4  | Buring the year did any nercon listed in Form 000 Part VIII Castian & Buring the year  |               |               |  |
| 7  | During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:   |               |               |  |
| 9  | Paralle  | Total Society |               |  |
|    |  | 4a            |               | <u> X</u>                                    |
| b  | Participate in, or receive payment from, a supplemental nonqualified retirement plan?  | <u>4b</u>     | -             | X  |
| C  | Participate in, or receive payment from, an equity-based compensation arrangement?   | 4c            | ļ             | X  |
|    | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.  |               |               |  |
|    |  |               |               |  |
| _  | Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.  |               |               |  |
| 5  | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation  |               |               | 75.3.<br>Sugar                               |
|    | contingent on the revenues of:   |               |               | Africa da Da.<br>Partir susanya<br>Matalanda |
| а  | The organization?  | 5a            | <u> </u>      | X  |
| b  | Any related organization?  | 5b            |               | _X_  |
|    | If "Yes" to line 5a or 5b, describe in Part III.   |               |               |  |
| 6  | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation  |               |               |  |
|    | contingent on the net earnings of:   |               |               |  |
| а  | The organization?  | 6a            |               | X  |
| b  | Any related organization?  | 6b            |               | X  |
|    | If "Yes" to line 6a or 6b, describe in Part III.   |               |               | 10044  |
| 7  | For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments  |               |               | . 15 1.11                                    |
|    | not described in lines 5 and 6? If "Yes," describe in Part III   | 7             |               | X  |
| 8  | Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the  | -             |               |  |
|    | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III  | 8             |               | _x   |
| 9  | If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in   | -             |               |  |
|    | Regulations section 53 4958-6(c)?  |               |               |  |

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

Schedule J (Form 990) 2012

Schedule J (Form 990) 2012

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

For each individual whose compensation must be reported in 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.

|                    | (B) Breakdov             | (B) Breakdown of W-2 and/or 1099-MISC compensation | 1099-MISC | compensation:  | (C) Retirement and   | (D) Nontaxable   | sumn   | (F) Compensation   |
|--------------------|--------------------------|--|-----------|--|--|--|--|--|
| (A) Name and Title | (i) Base<br>compensation | (ii) Bonus & incentive compensation                |           | (III) Other<br>reportable<br>compensation  | other deferred<br>compensation   | benefits   | (D)(H)(B)  | reported as deferred<br>in prior Form 990  |
|                    | (1)                      |  |           |  |  | THE PERSON NAMED IN COLUMN TO THE PE |  | The state of the s |
| 7                  | (II)                     |  |           |  |  | - Target Attack  |  |  |
|                    | 8                        |  |           | 11774  |  | THE PERSON NAMED IN COLUMN TO THE PE |  |  |
|                    | (E)                      |  |           |  |  |  |  |  |
| <u> </u>           | <b>S</b>                 |  |           |  |  |  |  |  |
|                    | (1)                      |  |           | ***************************************  |  |  |  | •  |
| <u> </u>           | €                        |  |           |  |  |  |  |  |
| 1)                 | (II)                     |  |           |  |  | To the second of the second of   |  | -  |
| <u> </u>           | 0                        |  |           |  |  |  |  | THE PROPERTY OF THE PROPERTY O |
| 1)                 | (11)                     |  |           |  | THE  | · · · · · · · · · · · · · · · · · · ·  |  |  |
|                    |                          |  |           |  |  |  |  | -  |
| 1)                 | (1)                      |  |           |  |  | The second secon |  |  |
| -                  | (1)                      |  |           | THE PROPERTY OF THE PROPERTY O |  | The state of the s |  |  |
|                    | (II)                     |  |           |  |  | · · · · · · · · · · · · · · · · · · ·  |  |  |
| 3                  | (€                       | 111111111111111111111111111111111111111            |           | THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY A |  |  |  |  |
|                    | (ii)                     |  |           |  |  |  |  |  |
|                    |                          |  |           |  |  | A.A. Carrier and C | 111111111111   |  |
| (ii)               | 0                        |  |           |  | -  | The state of the s |  |  |
| 8                  |                          |  |           |  |  | The state of the s | TO SECURE OF THE | ***************************************  |
| ([])               | (1                       |  |           |  |  |  |  |  |
|                    |                          |  |           |  |  |  |  |  |
| (1)                |                          |  |           |  |  |  |  |  |
| 8                  |                          |  |           |  |  | -  |  |  |
| 1)                 | 0                        |  |           |  |  |  |  |  |
| <u> </u>           |                          |  |           |  |  |  |  |  |
| (ii)               | 0                        |  |           |  |  |  |  |  |
| <u> </u>           |                          |  |           |  |  |  |  |  |
| (11)               | 0                        |  |           | 1  | TI TITLE TO THE TI |  |  |  |
| (1)                |                          | -  |           |  |  |  |  | · · · · · · · · · · · · · · · · · · ·  |
|                    | (                        |  |           | · · · · · · · · · · · · · · · · · · ·  |  |  |  |  |
| 8                  |                          |  |           |  |  | and the second s |  |  |
|                    |                          |  |           |  |  |  |  |  |

Schedule J (Form 990) 2012

#### **SCHEDULE L**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,

or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No. 1545-0047

Open To Public

Name of the organization **Employer identification number** INDIAN LAW RESOURCE CENTER 52-1121079 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 \_\_\_\_\_\_ > \$ 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Part II Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (b) Relationship (a) Name of (d) Loan to or (h) Approved (c) Purpose (e) Original (i) Written (g) in (f) Balance due with by board or interested person of loan principal amount default? agreement? organization organization? committee? To From Yes Yes No Total **Grants or Assistance Benefiting Interested Persons.** Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27, (a) Name of interested person (b) Relationship between (c) Amount of (d) Type of (e) Purpose of interested person and ássistance assistance assistance the organization

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

Schedule L (Form 990 or 990-EZ) 2012

| Schedule L (Form 990 or 990-EZ) 2012 IND] | AN LAW RESOURCE CENTE  | ER   | 52-1121                                 | <u> 1079</u> | Page 2                        |
|---|--|--|---|--------------|-------------------------------|
| <u> </u>                                  | olving Interested Persons.   |  |   |              |                               |
| Complete if the organization answer       | ered "Yes" on Form 990, Part IV, line 28a, 2   | 28b, or 28c.                                       |   |              |                               |
| (a) Name of interested person             | (b) Relationship between interested person and the organization  | (c) Amount of transaction                          | (d) Description of transaction          | organiz      | aring of<br>zation's<br>nues? |
|   |  |  |   | Yes          | No                            |
| ROBERT T. COULTER                         | EXECUTIVE DIRECTOR   | 14,086   | RENT                                    |              | X                             |
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| Part V Supplemental Information           |  |  | <u> </u>                                | 1            | <u> </u>                      |
|   | ional information for responses to question  | ns on Schedule I (see                              | instructions)                           |              |                               |
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#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

232211 01-04-13 INDIAN LAW RESOURCE CENTER

Employer identification number 52-1121079

| FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:   |
|--|
| THROUGHOUT NORTH, CENTRAL, AND SOUTH AMERICA WHO ARE WORKING TO PROTECT  |
| THEIR LAND, RESOURCES, HUMAN RIGHTS, ENVIRONMENT, AND CULTURAL   |
| HERITAGE.  |
|  |
| FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:   |
| SAFE WOMEN, STRONG NATIONS - OUR SAFE WOMEN/STRONG NATIONS PROJECT   |
| TRAINS AND PROVIDES LEGAL ADVICE TO NATIVE WOMEN'S GROUPS AND INDIAN   |
| NATIONS IN THE USE OF HUMAN RIGHTS LAW AND OTHER MECHANISMS TO   |
| STRENTHEN THEIR ABILITY TO DEFEND AND PROTECT NATIVE WOMEN. WE ARE   |
| CURRENTLY WORKING WITH TRIBES TO PROVIDE THEM WITH LEGAL ADVICE,   |
| TRAINING, AND EDUCATIONAL MATERIALS.   |
| EXPENSES \$ 663,541. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.   |
|  |
| MULTI-LATERAL DEVELOPMENT BANKS - PROMOTE TRANSPARENCY AND INDIGENOUS  |
| PARTICIPATION IN THE DRAFTING OF POLICIES ON INDIGENOUS PEOPLES AT THE   |
| WORLD BANK AND THE INTER-AMERICAN DEVELOPMENT BANK (IDB). PROMOTE A  |
| STRONGER INSTITUTIONAL RELATIONSHIP BETWEEN THE UNITED NATIONS   |
| PERMANENT FORUM ON INDIGENOUS PEOPLES AND THE WORLD BANK, AND ENSURE   |
| THAT MULTILATERAL DEVELOPMENT BANK POLICIES CONFORM TO EXISTING AND  |
| EMERGING INTERNATIONAL LEGAL STANDARDS FOR PROTECTING THE RIGHTS OF  |
| INDIGENOUS PEOPLES.  |
|  |
| NATIVE LAND LAW PROJECT-RESEARCH AND DRAFT A NEW FRAMEWORK FOR FEDERAL   |
| INDIAN LAW. THIS EFFORT INVOLVES TOP LEGAL AND ACADEMIC MINDS FROM   |
| ACROSS THE COUNTRY IN AN AMBITIOUS RESTATEMENT OF FEDERAL LAW AS IT  LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012) |

FORM 990, PART VI, SECTION C, LINE 19: INDIAN LAW RESOURCE CENTER PUTS ITS 990 AND FINANCIAL STATEMENTS ON ITS WEBSITE.

PUBLIC INSPECTION UPON REQUEST.