

990

Return of Organization Exempt From Income Tax

OMB No. 1545-

0047 2023

Open to Public Inspection

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

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

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning 01-01-2023, and ending 12-31-2023

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: TEXAS TRIAL LAWYERS ASSOCIATION. Doing business as: Number and street (or P.O. box if mail is not delivered to street address) Room/suite: 1220 COLORADO STREET. City or town, state or province, country, and ZIP or foreign postal code: AUSTIN, TX 78701

D Employer identification number: 74-1095408. E Telephone number: (512) 476-3852. G Gross receipts \$ 7,700,164

F Name and address of principal officer: TIFFANY MCGEE, 1220 COLORADO ST STE 500, AUSTIN, TX 78701

H(a) Is this a group return for subordinates? [] Yes [x] No. H(b) Are all subordinates included? [] Yes [] No. H(c) Group exemption number

I Tax-exempt status: [] 501(c)(3) [x] 501(c)(6) (insert no.) [] 4947(a)(1) or [] 527

J Website: WWW.TTLA.COM

K Form of organization: [x] Corporation [] Trust [] Association [] Other

L Year of formation: 1949. M State of legal domicile: TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO PROTECT THE CONSTITUTIONAL GUARANTEE OF ACCESS TO THE COURTS AND TRIAL BY JURY, AND PROVIDE AN ENVIRONMENT ENABLING OUR MEMBERS TO SUCCESSFULLY AND ETHICALLY ENGAGE IN THE PRACTICE OF LAW, AS THEY SEEK JUSTICE ON BEHALF OF THEIR CLIENTS.

Table with 2 columns: Description, Amount. Rows 2-7a: 2 Check this box [] if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) 184. 4 Number of independent voting members of the governing body (Part VI, line 1b) 184. 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 24. 6 Total number of volunteers (estimate if necessary) 233. 7a Total unrelated business revenue from Part VIII, column (C), line 12 61,209.

Table with 3 columns: Description, Prior Year, Current Year. Rows 8-12: 8 Contributions and grants (Part VIII, line 1h) 37,550 / 427,638. 9 Program service revenue (Part VIII, line 2g) 6,043,541 / 5,955,374. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 1,000,097 / 1,093,022. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 159,359 / 128,990. 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 7,240,547 / 7,605,024.

Table with 3 columns: Description, Prior Year, Current Year. Rows 13-19: 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 103,780 / 127,998. 14 Benefits paid to or for members (Part IX, column (A), line 4) 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,308,976 / 3,503,853. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 16b Total fundraising expenses (Part IX, column (D), line 25) 0. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 3,282,691 / 3,974,664. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 6,695,447 / 7,606,515. 19 Revenue less expenses. Subtract line 18 from line 12 545,100 / -1,491.

Table with 3 columns: Description, Beginning of Current Year, End of Year. Rows 20-22: 20 Total assets (Part X, line 16) 8,957,945 / 8,716,205. 21 Total liabilities (Part X, line 26) 5,998,444 / 5,495,956. 22 Net assets or fund balances. Subtract line 21 from line 20 2,959,501 / 3,220,249.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer: TIFFANY MCGEE CEO. Date: 2024-11-08. Type or print name and title

Paid Preparer Use Only: Print/Type preparer's name: Allman & Associates Inc. Preparer's signature. Date: 2024-11-08. Check [] if self-employed. PTIN: P00648533. Firm's name: Allman & Associates Inc. Firm's EIN: 46-2979080. Firm's address: 9600 Great Hills Trail Suite 150W, Austin, TX 78759. Phone no.: (512) 502-3077.

May the IRS discuss this return with the preparer shown above? See Instructions. [x] Yes [] No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO PROTECT THE CONSTITUTIONAL GUARANTEE OF ACCESS TO THE COURTS AND TRIAL BY JURY, AND PROVIDE AN ENVIRONMENT ENABLING OUR MEMBERS TO SUCCESSFULLY AND ETHICALLY ENGAGE IN THE PRACTICE OF LAW, AS THEY SEEK JUSTICE ON BEHALF OF THEIR CLIENTS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$)
PROVIDES THE HIGHEST LEVEL OF EDUCATION TO OUR MEMBERS, WITH RESOURCES AND VALUABLE NETWORKING OPPORTUNITIES TO HELP OUR MEMBERS THRIVE AS THE PRACTICE OF LAW CONTINUES TO EVOLVE

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
ADVOCATING FOR AN OPEN AND BALANCED CIVIL JUSTICE SYSTEM

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, and Yes/No response columns. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		No
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? <i>If "Yes," complete Schedule J</i>	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		
25b	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? <i>If "Yes," complete Schedule L, Part I</i>		
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons?		No
27	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	Yes	
28b	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	Yes	
28c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions?		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3?		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
35b	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance
 Check if Schedule O contains a response or note to any line in this Part V

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		

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

Main form area containing questions 2a through 17, including sub-questions and input fields for 'Yes', 'No', and numerical values.

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 1b Enter the number of voting members... 2 Did any officer, director, trustee... 3 Did the organization delegate control... 4 Did the organization make any significant changes... 5 Did the organization become aware... 6 Did the organization have members... 7a Did the organization have members... 7b Are any governance decisions... 8 Did the organization contemporaneously document... 8a The governing body... 8b Each committee... 9 Is there any officer, director, trustee...

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters... 10b If "Yes," did the organization have written policies... 11a Has the organization provided a complete copy... 11b Describe on Schedule O the process... 12a Did the organization have a written conflict of interest policy... 12b Were officers, directors, or trustees... 12c Did the organization regularly and consistently monitor... 13 Did the organization have a written whistleblower policy... 14 Did the organization have a written document retention... 15 Did the process for determining compensation... 15a The organization's CEO... 15b Other officers or key employees... 16a Did the organization invest in, contribute assets to... 16b If "Yes," did the organization follow a written policy...

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed
18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: TIFFANY MCGEE 1220 COLORADO ST STE 500 AUSTIN, TX 78701 (512) 476-3852

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

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

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

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former			
(1) LAURA TAMEZ PRESIDENT	40.00	X		X			0	0	0	
(2) KEVIN CAMP PRESIDENT-ELECT	1.00	X		X			0	0	0	
(3) SA HAYDEN BRIGGLE SECRETARY/TREASURER	1.00	X		X			0	0	0	
(4) QUENTIN BROGDON IMMEDIATE PAST PRESIDENT	1.00	X					0	0	0	
(5) SALLY METCALFE VP FOR COMMUNICATIONS	1.00	X		X			0	0	0	
(6) LARA BROCK VP FOR CLE	1.00	X		X			0	0	0	
(7) JOSHUA DAVIS VP FOR FINANCE	1.00	X		X			0	0	0	
(8) JACK WALKER VP FOR LEGISLATIVE AFFAIRS	1.00	X		X			0	0	0	
(9) DANA BENTON VP FOR MEMBERSHIP	1.00	X		X			0	0	0	
(10) CHARLIE GINN VP FOR POLITICAL AFFAIRS	1.00	X		X			0	0	0	
(11) JIM PERDUE JR PRESIDENTIAL APPOINTMENT	1.00	X		X			0	0	0	
(12) GILBERT T ADAMS III DIRECTOR	0.50	X					0	0	0	
(13) WILL ADAMS DIRECTOR	0.50	X					0	0	0	
(14) JIM S ADLER DIRECTOR	0.50	X					0	0	0	
(15) WILLIAM ADLER DIRECTOR	0.50	X					0	0	0	
(16) BENNY AGOSTO DIRECTOR	0.50	X					0	0	0	
(17) WILLIAM K ALTMAN DIRECTOR	0.50	X					0	0	0	

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Highest compensated employee			
(18) JOHN S AMENT DIRECTOR	0.50	X				0	0	
(19) ROBERT E AMMONS DIRECTOR	0.50	X				0	0	
(20) JOHN B BALDWIN DIRECTOR	0.50	X				0	0	
(21) RICK BARRERA DIRECTOR	0.50	X				0	0	
(22) WADE BARROW DIRECTOR	0.50	X				0	0	
(23) WILLIAM K BERENSON DIRECTOR	0.50	X				0	0	
(24) ROBERT JAY BINSTOCK DIRECTOR	0.50	X				0	0	
(25) JOSH BIRMINGHAM DIRECTOR	0.50	X				0	0	
(26) ADAM J BLAKE DIRECTOR	0.50	X				0	0	
(27) BRYAN O BLEVINS JR DIRECTOR	0.50	X				0	0	
(28) LISA BLUE DIRECTOR	0.50	X				0	0	
(29) DEAN BOYD DIRECTOR	0.50	X				0	0	
(30) STEFANIE BRADSHAW DIRECTOR	0.50	X				0	0	
(31) GRETA MARIE BRAKER DIRECTOR	0.50	X				0	0	
(32) DEBBIE D BRANSON DIRECTOR	0.50	X				0	0	
(33) FRANK L BRANSON DIRECTOR	0.50	X				0	0	
(34) CHIP BROOKER DIRECTOR	0.50	X				0	0	
(35) OLGA BROWN DIRECTOR	0.50	X				0	0	
(36) LARRY ALAN BRUNER DIRECTOR	0.50	X				0	0	
(37) BLAKE BRUGENHOEFER DIRECTOR	0.50	X				0	0	
(38) RUSSELL W BUDD DIRECTOR	0.50	X				0	0	
(39) ANDREW S BULLARD DIRECTOR	0.50	X				0	0	
(40) NOBEL BULLOCK DIRECTOR	0.50	X				0	0	
(41) MICHAEL CALLAHAN DIRECTOR	0.50	X				0	0	
(42) COLLEEN CARBOY RN JD DIRECTOR	0.50	X				0	0	
(43) CRAIG W CARLSON DIRECTOR	0.50	X				0	0	
(44) GEORGE CHANDLER DIRECTOR	0.50	X				0	0	
(45) DAISY CHAPARRO DIRECTOR	0.50	X				0	0	
(46) GUY D CHOATE DIRECTOR	0.50	X				0	0	
(47) COLE A CLARK DIRECTOR	0.50	X				0	0	
(48) JONATHAN C CLARK DIRECTOR	0.50	X				0	0	
(49) TODD CLEMENT DIRECTOR	0.50	X				0	0	
(50) JOHN EDWARD COLLINS DIRECTOR	0.50	X				0	0	
(51) KIRK K COPLAND DIRECTOR	0.50	X				0	0	
(52) MICHAEL R COWEN DIRECTOR	0.50	X				0	0	
(53) HUNTER CRAFT DIRECTOR	0.50	X				0	0	
(54) ROBERT DENIGER CRAIN DIRECTOR	0.50	X				0	0	
(55) GLENN W CUNNINGHAM DIRECTOR	0.50	X				0	0	
(56) MARIO E DE LA GARZA DIRECTOR	0.50	X				0	0	
(57) CAMERON DEAN DIRECTOR	0.50	X				0	0	
(58) JUSTIN B DEMERATH DIRECTOR	0.50	X				0	0	
(59) DAVID E DOBBS DIRECTOR	0.50	X				0	0	
(60) EDWIN ARMISTEAD EASTERBY DIRECTOR	0.50	X				0	0	
(61) CRAIG EILAND DIRECTOR	0.50	X				120,000	0	
(62) BLAKE C ERSKINE DIRECTOR	0.50	X				0	0	
(63) JAVIER ESPINOZA DIRECTOR	0.50	X				0	0	
(64) MILAD KAISSAR FARAH DIRECTOR	0.50	X				0	0	
(65) KAREN ELIZABETH FERRIS DIRECTOR	0.50	X				0	0	
(66) KENNETH TOMMY FIBICH DIRECTOR	0.50	X				0	0	
(67) JAN WOODWARD FOX DIRECTOR	0.50	X				0	0	
(68) JASON FITZGERALD FRANKLIN DIRECTOR	0.50	X				0	0	
(69) RICK FREEMAN DIRECTOR	0.50	X				0	0	
(70) MARK D FRENKEL DIRECTOR	0.50	X				0	0	
(71) MICHAEL GALLAGHER DIRECTOR	0.50	X				0	0	
(72) OSCAR ALEJANDRO GARZA DIRECTOR	0.50	X				0	0	
(73) PAUL N GOLD DIRECTOR	0.50	X				0	0	
(74) JULIAN C GOMEZ DIRECTOR	0.50	X				0	0	
(75) MICHAEL GOMEZ DIRECTOR	0.50	X				0	0	
(76) JAIME A GONZALEZ JR DIRECTOR	0.50	X				0	0	
(77) DAVID C GREENSTONE DIRECTOR	0.50	X				0	0	
(78) DICKY GRIGG DIRECTOR	0.50	X				0	0	
(79) JOHN GSANGER DIRECTOR	0.50	X				0	0	
(80) MICHAEL G GUAJARDO DIRECTOR	0.50	X				0	0	
(81) MANUEL GUERRA III DIRECTOR	0.50	X				0	0	
(82) FRANCISCO GUERRA IV DIRECTOR	0.50	X				0	0	
(83) HARLEY HAMPTON DIRECTOR	0.50	X				0	0	
(84) BRYAN HARRISON DIRECTOR	0.50	X				0	0	
(85) STEVE HARRISON DIRECTOR	0.50	X				0	0	
(86) JAY HARVEY DIRECTOR	0.50	X				0	0	
(87) HESTY ANNETTE HATAWAY-CONE DIRECTOR	0.50	X				0	0	
(88) M RAYMOND HATCHER DIRECTOR	0.50	X				0	0	
(89) AARON M HECKAMAN DIRECTOR	0.50	X				0	0	
(90) RYSTON EDWARD HENRICHSON DIRECTOR	0.50	X				0	0	
(91) CASSANDRA HERNANDEZ DIRECTOR	0.50	X				0	0	
(92) FRANK HERRERA JR DIRECTOR	0.50	X				0	0	
(93) JAVIER L HERRERA DIRECTOR	0.50	X				0	0	
(94) JORGE A HERRERA DIRECTOR	0.50	X				0	0	
(95) RANDY HOWRY DIRECTOR	0.50	X				0	0	
(96) TOMMY JACKS DIRECTOR	0.50	X				0	0	
(97) BENEDICT VLADISLAV JAMES DIRECTOR	0.50	X				0	0	
(98) LAUREN VICTORIA JOBIN DIRECTOR	0.50	X				0	0	
(99) JOHN S JOSE DIRECTOR	0.50	X				0	0	
(100) KRIST KASTL DIRECTOR	0.50	X				0	0	
(101) TODD KELLY DIRECTOR	0.50	X				0	0	
(102) CHRISTOPHER GARRETT KING DIRECTOR	0.50	X				0	0	
(103) JUDY KOSTURA DIRECTOR	0.50	X				0	0	
(104) PETER ANDREW KRAUS DIRECTOR	0.50	X				0	0	
(105) CHRISTOPHER KWON DIRECTOR	0.50	X				0	0	
(106) ELIZABETH LARRICK DIRECTOR	0.50	X				0	0	
(107) CARLOS ALBERTO LEON DIRECTOR	0.50	X				0	0	
(108) LESLEY ANN HOWE LORENZ DIRECTOR	0.50	X				0	0	
(109) MIKE LOVE DIRECTOR	0.50	X				0	0	
(110) SCOTT ANTHONY LOVE DIRECTOR	0.50	X				0	0	
(111) TED B LYON JR DIRECTOR	0.50	X				0	0	
(112) MICHAEL PATRICK LYONS DIRECTOR	0.50	X				0	0	
(113) SEAN M LYONS DIRECTOR	0.50	X				0	0	
(114) GEORGE MALLIOS DIRECTOR	0.50	X				0	0	
(115) ERICA OLIVIA MALONEY DIRECTOR	0.50	X				0	0	
(116) MICHELLE MARIANNA MALONEY DIRECTOR	0.50	X				0	0	
(117) KIERNAN ANGUS MCALPINE DIRECTOR	0.50	X				0	0	
(118) SEAN ANTHONY MCCONNELL DIRECTOR	0.50	X				0	0	
(119) JOHN LINDSEY MCCRAW DIRECTOR	0.50	X				0	0	
(120) JACK E MCGEEHEE DIRECTOR	0.50	X				0	0	
(121) GAVIN HUGH MCINNIS DIRECTOR	0.50	X				0	0	
(122) PAMELA RENEE MCLEMORE DIRECTOR	0.50	X				0	0	
(123) WILLIAM CULLEN MCMAHON DIRECTOR	0.50	X				0	0	
(124) LUKE METZLER DIRECTOR	0.50	X				0	0	
(125) CALEB MILLER DIRECTOR	0.50	X				0	0	
(126) CLAY MILLER DIRECTOR	0.50	X				0	0	
(127) JAMES MITCHELL DIRECTOR	0.50	X				0	0	
(128) RICHARD WARREN MITHOFF DIRECTOR	0.50	X				0	0	
(129) RACHEL E MONTES DIRECTOR	0.50	X				0	0	
(130) ADAM THOMAS MUERY DIRECTOR	0.50	X				0	0	
(131) HOWARD L NATIONS DIRECTOR	0.50	X				0	0	
(132) BRAD PARKER DIRECTOR	0.50	X				0	0	
(133) SHREEDHAR R PATEL DIRECTOR	0.50	X				0	0	
(134) JAMES PAYNE DIRECTOR	0.50	X				0	0	
(135) S DYLAN PEARCY DIRECTOR	0.50	X				0	0	
(136) PAULA DARNIECE PEREZ DIRECTOR	0.50	X				0	0	
(137) DANIEL J PERKINS DIRECTOR	0.50	X				0	0	
(138) KIRK L PITTARD DIRECTOR	0.50	X				0	0	
(139) PARKER P POLAN DIRECTOR	0.50	X				0	0	
(140) BRYAN D POPE DIRECTOR	0.50	X				0	0	
(141) STAN M PUTMAN JR DIRECTOR	0.50	X				0	0	
(142) GEORGE QUESADA DIRECTOR	0.50	X				0	0	
(143) DONATO DAVID RAMOS JR DIRECTOR	0.50	X				0	0	
(144) MICHAEL R RAMSEY DIRECTOR	0.50	X				0	0	
(145) JEFFREY RASANSKY DIRECTOR	0.50	X				0	0	
(146) TIMOTHY D RAUB DIRECTOR	0.50	X				0	0	
(147) DENNIS CRAIG REICH DIRECTOR	0.50	X				0	0	
(148) NELSON JAMES ROACH DIRECTOR	0.50	X				0	0	
(149) FIDEL RODRIGUEZ JR DIRECTOR	0.50	X				0	0	
(150) CARL R ROTH DIRECTOR	0.50	X				0	0	
(151) ESTEBAN SANDOVAL DIRECTOR	0.50	X				0	0	
(152) MICAH SATTERWHITE DIRECTOR	0.50	X				0	0	
(153) MICHAEL GEORGE SAWICKI DIRECTOR	0.50	X				0	0	
(154) GEORGE FREDERICK SCHORR DIRECTOR	0.50	X				0	0	
(155) DANIEL JT SCIANO DIRECTOR	0.50	X				0	0	
(156) CONNOR GORDON SHEEHAN DIRECTOR	0.50	X				0	0	
(157) CHRISTOPHER SIMMONS DIRECTOR	0.50	X				0	0	
(158) MICHAEL L SLACK DIRECTOR	0.50	X				0	0	
(159) L BOYD SMITH JR DIRECTOR	0.50	X				0	0	
(160) MEREDITH MARIE SMITH DIRECTOR	0.50	X				0	0	
(161) CHARLES E SOECHTING JR DIRECTOR	0.50	X				0	0	
(162) NEIL SOLOMON DIRECTOR	0.50	X				0	0	
(163) RANDALL O SORRELS DIRECTOR	0.50	X				0	0	
(164) STEPHEN W STEWART DIRECTOR	0.50	X				0	0	
(165) PAULA FISSETTE SWEENEY DIRECTOR	0.50	X				0	0	
(166) LARRY F TAYLOR JR DIRECTOR	0.50	X				0	0	
(167) RYAN THOMPSON DIRECTOR	0.50	X				0	0	
(168) MITCHELL A TOUPS DIRECTOR	0.50	X				0	0	
(169) MICHAEL DAVID UVALLE DIRECTOR	0.50	X				0	0	
(170) BRENT RYAN WALKER DIRECTOR	0.50	X				0	0	
(171) JACK WALKER DIRECTOR	0.50	X				0	0	
(172) SHAHIMAR S WALLIS DIRECTOR	0.50	X				0	0	
(173) ROBERT BAILEY WALTMAN DIRECTOR	0.50	X				0	0	
(174) MARIBEL CORDOVA WASMILLER DIRECTOR	0.50	X				0	0	
(175) MICAL WAITS DIRECTOR	0.50	X				0	0	
(176) LES WEISBROD DIRECTOR	0.50	X				0	0	
(177) ROBERT E WHITE DIRECTOR	0.50	X				0	0	
(178) STUART RYAN WHITE DIRECTOR	0.50	X				0	0	
(179) RABC STANLEY WHITEHEAD DIRECTOR	0.50	X				0	0	
(180) JOHN EDDIE WILLIAMS JR DIRECTOR	0.50	X				0	0	
(181) JUSTIN L WILLIAMS DIRECTOR	0.50	X				0	0	
(182) S BURGESS WILLIAMS DIRECTOR	0.50	X				0	0	
(183) SEAN WILLIAMS DIRECTOR	0.50	X				0	0	
(184) PAULA A WYATT DIRECTOR	0.50	X				0	0	
(185) JOHN CLAYTON ZINDA DIRECTOR	0.50	X				0	0	
(186) TIFFANY MCGEE CEO	40.00			X		359,786	0	
(187) JAMES FIELDS DIRECTOR OF PUBLIC AFFAIRS	40.00			X		399,375	0	
(188) ALEX WINSLOW DIRECTOR OF COMMUNICATIONS	40.00			X		170,167	0	
(189) DENNIS SPEIGHT DIRECTOR OF POLITICAL AFFAIRS	40.00			X		168,396	0	
(190) KANICE SPEARS DIRECTOR OF MEMBERSHIP	40.00			X		144,229	0	
(191) LISA MELLORS DIRECTOR OF EDUCATION & EVENTS	40.00			X		134,375	0	
(192) TIFFANY CRAIG CONTROLLER	40.00			X		135,854	0	
(193) ZOE JANARD DIRECTOR OF LEGISLATIVE AFFAIRS	40.00			X		140,792	0	
(194) RAQUEL RIOS DIRECTOR	40.00			X		120,042	0	
1b Sub-Total								
c Total from continuation sheets to Part VII, Section A								
d Total (add lines 1b and 1c)					1,893,016	0	280,356	
2. Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1 0								
3. Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual						Yes	No	
4. For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual						Yes	No	
5. Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person						Yes	No	

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
KRALJ CONSULTING INC 1220 COLORADO ST STE 110 AUSTIN, TX 78701	LOBBYING	240,000
LEE WOODS 1122 COLORADO ST STE 400 AUSTIN, TX 78701	LOBBYING	195,600
AUDION LLC 2202 LARAMIE TRAIL AUSTIN, TX 78745	AV & GRAPHIC DESIGN	159,478
LAW OFFICES OF A CRAIG EILAND 1220 COLORADO ST STE 300 AUSTIN, TX 78701	LOBBYING	120,000
DANIELLE DELGADILLO, 4020 PROFFER MESA CIRCLE		

Part VIII Statement of Revenue

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

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants, and Other Amt Similar Amounts				
1a Federated campaigns		1a		
b Membership dues		1b		
c Fundraising events		1c		
d Related organizations		1d		
e Government grants (contributions)		1e		
f All other contributions, gifts, grants, and similar amounts not included above		1f	427,638	
g Noncash contributions included in lines 1a - 1f:\$		1g		
h Total. Add lines 1a-1f				427,638

Program Service Revenue		Business Code				
			(A)	(B)	(C)	(D)
2a MEMBERSHIP DUES		900099	4,702,134		0	0
b MEETINGS & SEMINARS		900099	1,013,653		0	0
c MARKETING		900004	177,237		36,972	124,678
d ADVOCATES INCOME		900099	24,100		0	0
e ADVERTISING INCOME		900003	15,750		15,750	0
f All other program service revenue.			22,500		0	0
g Total. Add lines 2a-2f.			5,955,374			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,093,022		0	1,093,022	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		8,487	0	8,487	0	
	6a Gross rents	6a	(i) Real	83,987			
		b Less: rental expenses	6b	95,140			
		c Rental income or (loss)	6c	-11,153			
		d Net rental income or (loss)			-11,153		-11,153
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities		(ii) Other		
		b Less: cost or other basis and sales expenses	7b				
		c Gain or (loss)	7c				
		d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a					
		b Less: direct expenses	8b				
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses		9b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						

OtherRevenueMiscAmt	11a REIMBURSEMENTS	Business Code				
		900099	126,500	126,500	0	0
	b OTHER REVENUE	900099	5,156	5,156	0	0
	c					
	d All other revenue					
e Total. Add lines 11a-11d			131,656			
12 Total revenue. See instructions			7,605,024	5,909,630	61,209	1,206,547

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Payroll taxes, and Total functional expenses.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash-non-interest-bearing	3,034,568	1	448,901
	2 Savings and temporary cash investments	50,625	2	1,215,695
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	148,021	4	482,993
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	105,209	9	140,715
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,235,761		
	b Less: accumulated depreciation	10b 1,112,254	119,005	10c 123,507
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	5,500,517	15	6,304,394
16 Total assets: Add lines 1 through 15 (must equal line 33)	8,957,945	16	8,716,205	
Liabilities	17 Accounts payable and accrued expenses	520,202	17	424,254
	18 Grants payable		18	
	19 Deferred revenue	1,171,372	19	1,196,515
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties	144,223	23	137,639
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	4,162,647	25	3,737,548
	26 Total liabilities: Add lines 17 through 25	5,998,444	26	5,495,956
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	2,833,003	27	3,187,351
	28 Net assets with donor restrictions	126,498	28	32,898
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	2,959,501	32	3,220,249
33 Total liabilities and net assets/fund balances	8,957,945	33	8,716,205	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,605,024
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,606,515
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,491
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,959,501
5	Net unrealized gains (losses) on investments	5	262,239
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (A))	10	3,220,249

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

Additional Data

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Software ID: 23017509

Software Version:

Form 990, Special Condition Description:

Special Condition Description

Schedule B

Schedule of Contributors

OMB No. 1545-0047

(Form 990)
Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990, 990-EZ, or 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

2023

Name of the organization TEXAS TRIAL LAWYERS ASSOCIATION	Employer identification number 74-1095408
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Organization type (check one):

Filers of:

Section:

- Form 990 or 990-EZ
 - 501(c)() (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

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
 TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number
 74-1095408

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED		\$ RESTRICTED	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
-		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization
 TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number
 74-1095408

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____
-	_____ _____ _____	_____ \$	_____

Name of organization TEXAS TRIAL LAWYERS ASSOCIATION	Employer identification number 74-1095408
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	
	_____	_____	

Additional Data

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Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

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

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

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

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

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

Name of the organization TEXAS TRIAL LAWYERS ASSOCIATION	Employer identification number 74-1095408
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities."		
2	Political campaign activity expenditures. See instructions	▶	\$ _____
3	Volunteer hours for political campaign activities. See instructions		_____

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

1	Enter the amount of any excise tax incurred by the organization under section 4955		\$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955		\$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?		<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV.		

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities		\$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶	\$ _____
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.....		\$ _____
4	Did the filing organization file Form 1120-POL for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
1				
2				
3				
4				
5				
6				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b Total lobbying expenditures to influence a legislative body (direct lobbying)														
c Total lobbying expenditures (add lines 1a and 1b)														
d Other exempt purpose expenditures														
e Total exempt purpose expenditures (add lines 1c and 1d)														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width:65%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)														
h Subtract line 1g from line 1a. If zero or less, enter -0-														
i Subtract line 1f from line 1c. If zero or less, enter -0-														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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)).

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	No
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	No
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	3	No

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	4,702,134
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	2,078,433
b Carryover from last year	2b	
c Total	2c	2,078,433
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3	2,351,067
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures. See Instructions	5	0

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference	Explanation

Additional Data

Return to Form

Software ID:
Software Version:

Supplemental Financial Statements

2022

Open to Public Inspection

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service

Name of the organization TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number

74-1095408

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor information.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II Conservation Easements. Includes checkboxes for various purposes, a table for 'Held at the End of the Year' with rows 2a-2d, and several text-based questions about monitoring and reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting and amounts for art and historical treasures.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Term endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0			0
b Buildings				
c Leasehold improvements				
d Equipment		1,229,855	1,111,302	118,553
e Other		5,906	952	4,954
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				123,507

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) TTLA HOLDING CO. ASSET	2,763,997
(2) ROU ASSET	3,540,397
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	6,304,394

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
LEASE LIABILITY	3,737,548
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	3,737,548

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

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

Return Reference	Explanation
Pt X, Line 2	THE ORGANIZATION HAS ADOPTED THE RECOGNITION REQUIREMENTS FOR UNCERTAIN INCOME TAX POSITIONS AS REQUIRED BY GAAP, WITH NO CUMULATIVE EFFECT ADJUSTMENT REQUIRED. INCOME TAX BENEFITS ARE RECOGNIZED FOR INCOME TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, ONLY WHEN IT IS DETERMINED THAT THE INCOME TAX POSITION WILL MORE LIKELY THAN NOT BE SUSTAINED UPON EXAMINATION BY TAXING AUTHORITIES. TTLA HAS ANALYZED THE TAX POSITIONS TAKEN IN ITS FILINGS WITH THE INTERNAL REVENUE SERVICE AND STATE JURISDICTIONS WHERE IT OPERATES. THE ENTITY BELIEVES THAT ITS INCOME TAX FILING POSITIONS WILL BE SUSTAINED UPON EXAMINATION AND DOES NOT ANTICIPATE ANY ADJUSTMENTS THAT WOULD RESULT IN MATERIAL ADVERSE EFFECTS ON THE FINANCIAL POSITION, CHANGES IN NET ASSETS OR CASH FLOWS. ACCORDINGLY, TTLA HAS NOT RECORDED ANY RESERVES, OR RELATED ACCRUALS FOR INTEREST AND PENALTIES FOR UNCERTAIN INCOME TAX POSITIONS AT DECEMBER 31, 2023 AND 2022. THE ENTITY IS SUBJECT TO INCOME TAX AUDITS FOR THE PREVIOUS THREE YEARS WHICH ARE OPEN. THERE ARE CURRENTLY NO AUDITS FOR ANY TAX PERIODS IN PROGRESS.

Additional Data

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Software Version:

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

Department of the
Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization
TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number
74-1095408

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) TEXAS WATCH 706B W BEN WHITE 230 AUSTIN, TX 78704	84-2881401	501(C)(4)	75,000				CONTRIBUTION

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 0
- 3** Enter total number of other organizations listed in the line 1 table 1

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference

Explanation

Additional Data

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Software ID: 23017509

Software Version:

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

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

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

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number

74-1095408

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|---|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax idemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
 - b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
 - c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
 - b** Any related organization?
- If "Yes," on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
 - b** Any related organization?
- If "Yes," on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b	Yes	
2	Yes	
4a		No
4b		No
4c		No
5a		
5b		
6a		
6b		
7		
8		
9		

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

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

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

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 TIFFANY MCGEE	(i)	335,000	13,958	10,828	36,142	14,525	410,453	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
2 JAMES FIELDS	(i)	368,334	18,125	12,916	38,065	10,411	447,851	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
3 ALEX WINSLOW	(i)	160,000	10,167	0	18,392	9,381	197,940	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
4 DENNIS SPEIGHT	(i)	153,500	14,896	0	21,059	9,568	199,023	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
5 KANICE SPEARS	(i)	137,500	6,729	0	15,625	9,431	169,285	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
6 LISA MELLORS	(i)	129,000	5,375	0	14,575	11,196	160,146	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
7 TIFFANY CRAIG	(i)	128,500	7,354	0	14,698	9,341	159,893	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0
8 ZOE TAYLOR	(i)	127,000	13,792	0	17,067	9,276	167,135	0
	(ii)	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0	----- 0

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
------------------	-------------

Additional Data

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Software ID:

Software Version:

Schedule L
(Form 990)

Transactions with Interested Persons

OMB No. 1545-0047

Complete if the organization answered "Yes" on Form 990, Part IV, lines 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.

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

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number

74-1095408

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) 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.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

- 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. . . . \$. \$ _____

Part II Loans to and/or From Interested Persons.

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

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total												

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SAGE SETTLEMENTS - RRM	CONTROLLED ENT OF BOARD MBRS SPOUS	83,500	EXHIBITOR AND ADVERTISER		No
(2) CARLTON HUMAN CAPITAL	CONTROLLED ENT OF BOARD MBRS SPOUS	16,760	CONSULTANT FOR LEAD ACADEMY		No
(3) CRAIG EILAND	BOARD MEMBER	120,000	CONTRACT LOBBYIST		No

Part V Supplemental Information

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

Return Reference	Explanation

Additional Data

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SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ****Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.****Attach to Form 990 or 990-EZ.****Go to www.irs.gov/Form990 for the latest information.**

OMB No. 1545-0047

2023**Open to Public
Inspection**Name of the organization
TEXAS TRIAL LAWYERS ASSOCIATION**Employer identification number**

74-1095408

Return Reference	Explanation
Pt VI, Line 2	THERE ARE MEMBERS OF THE ASSOCIATION THAT ARE RELATED THROUGH BUSINESS AND FAMILIAL RELATIONSHIPS. THESE RELATIONSHIPS ARE SEPARATE FROM THE ASSOCIATIONS ACTIVITIES.
Pt VI, Line 6	THE ASSOCIATION HAS MEMBERS.
Pt VI, Line 7a	THE MEMBERS OF THE ASSOCIATION MAY ELECT MEMBERS OF THE GOVERNING BODY.
Pt VI, Line 7b	THE MEMBERSHIP ELECTS THE PRESIDENT AND THE BOARD.
Pt VI, Line 11b	THE FORM 990 WAS REVIEWED TOGETHER BY THE CEO, CONTROLLER, TREASURER, CURRENT YEAR PRESIDENT, PRESIDENT-ELECT, DIRECTOR OF COMMUNICATIONS, CHIEF OFFICER OF PUBLIC AFFAIRS, AND IN-HOUSE GENERAL COUNSEL WITH THE PREPARING CPA. AFTER THE REVIEW, THE 990 IS SENT TO ALL BOARD MEMBERS PRIOR TO FILING WITH THE IRS.
Pt VI, Line 12c	THE ASSOCIATION REVIEWS AN ANNUAL DISCLOSURE FORM PROVIDED BY APPLICABLE OFFICERS AND DIRECTORS.
Pt VI, Line 15a	A COMPENSATION COMMITTEE REVIEWS AND MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS WITH RESPECT TO THE COMPENSATION AND/OR BONUSES OF THE CHIEF EXECUTIVE OFFICER AND CHIEF OFFICER OF PUBLIC AFFAIRS, PROVIDED SUCH COMPENSATION OF BONUS COMES FROM FUNDS ALLOCATED FOR THESE PURPOSES IN THE BUDGET. THE COMMITTEE USES COMPARABLE COMPENSATION DATA OF SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS IN THEIR REVIEW AND RECOMMENDATIONS. THE COMMITTEE ALSO KEEPS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING OF ITS DELIBERATIONS AND DISCUSSIONS.
Pt VI, Line 15b	A COMPENSATION COMMITTEE REVIEWS AND MAKES RECOMMENDATIONS TO THE BOARD OF DIRECTORS WITH RESPECT TO THE COMPENSATION AND/OR BONUSES OF THE CHIEF EXECUTIVE OFFICER AND CHIEF OFFICER OF PUBLIC AFFAIRS, PROVIDED SUCH COMPENSATION OF BONUS COMES FROM FUNDS ALLOCATED FOR THESE PURPOSES IN THE BUDGET. THE COMMITTEE USES COMPARABLE COMPENSATION DATA OF SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZATIONS IN THEIR REVIEW AND RECOMMENDATIONS. THE COMMITTEE ALSO KEEPS CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING OF ITS DELIBERATIONS AND DISCUSSIONS.
Pt VI, Line 19	THE ASSOCIATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

Additional Data

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**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047
2023
Open to Public Inspection

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
TEXAS TRIAL LAWYERS ASSOCIATION

Employer identification number
74-1095408

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) TEXAS TRIAL LAWYERS ASSOCIATION PAC 1220 COLORADO STREET AUSTIN, TX 78701 74-6140276	CONTRIBUTIONS TO POLITICAL CAMPAIGNS	TX	527		TEXAS TRIAL LAWYERS ASSOCIATION	Yes	
(2) TEXAS FAMILY SAFETY FOUNDATION 1220 COLORADO STREET AUSTIN, TX 78701 74-2891073	PROMOTION OF CIVIL SERVICE	TX	501(C)(3)	7	TEXAS TRIAL LAWYERS ASSOCIATION	Yes	
(3) TTLA HOLDINGS INC 1220 COLORADO STREET AUSTIN, TX 78701 26-0411501	MANAGE REAL PROPERTY OF TX TRIAL LAWYERS ASSOC.		501(C)(2)		TEXAS TRIAL LAWYERS ASSOCIATION	Yes	

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1)TRIALSMITH INC 5113 SOUTHWEST PKWY STE 285 AUSTIN, TX 78735 74-2956828	LEGAL INFORMATION MANAGEMENT	TX	TX TRIAL LAWYERS ASSOC	C	8,044,740	1,453,042	87.500 %	Yes	

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

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

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

- a** Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)
- f** Dividends from related organization(s)
- g** Sale of assets to related organization(s)
- h** Purchase of assets from related organization(s)
- i** Exchange of assets with related organization(s)
- j** Lease of facilities, equipment, or other assets to related organization(s)
- k** Lease of facilities, equipment, or other assets from related organization(s)
- l** Performance of services or membership or fundraising solicitations for related organization(s)
- m** Performance of services or membership or fundraising solicitations by related organization(s)
- n** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- o** Sharing of paid employees with related organization(s)
- p** Reimbursement paid to related organization(s) for expenses
- q** Reimbursement paid by related organization(s) for expenses
- r** Other transfer of cash or property to related organization(s)
- s** Other transfer of cash or property from related organization(s)

	Yes	No
1a	Yes	
1b		No
1c		No
1d		No
1e		No
1f	Yes	
1g		No
1h		No
1i	Yes	
1j		No
1k	Yes	
1l	Yes	
1m	Yes	
1n	Yes	
1o	Yes	
1p		No
1q		No
1r	Yes	
1s		No

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) TTLA HOLDINGS INC	K	696,142	ACTUAL CASH
(2) TRIALSMITH INC	A	8,487	ACTUAL CASH
(3) TRIALSMITH INC	F	1,050,000	ACTUAL CASH
(4) TTLA PAC	N	24,000	ACTUAL CASH
(5) TTLA PAC	L	17,393	ACTUAL CASH
(6) TTLA HOLDINGS INC	O	99,639	ACTUAL CASH
(7) TRIALSMITH INC	M	56,237	ACTUAL CASH
(8) TTLA PAC	O	107,556	ACTUAL CASH

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference

Explanation

Schedule R (Form 990) 2023

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