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## Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

2009

Open to Public  
Inspection

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

## A For the 2009 calendar year, or tax year beginning

and ending

<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization  <b>SCRUM ALLIANCE, INC.</b>			D Employer identification number  <b>20-5825034</b>	
	Doing Business As			E Telephone number  <b>317-727-0094</b>	
	Number and street (or P.O. box if mail is not delivered to street address) <b>P.O. BOX 40097</b>			Fame and street (or P.O. box if mail is not delivered to street address) <b>P.O. BOX 40097</b>	
	Room/suite			G Gross receipts \$  <b>3,229,351.</b>	
	City or town, state or country, and ZIP + 4 <b>INDIANAPOLIS, IN 46240-0097</b>			H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)			H(c) Group exemption number ►	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			J Website: ► <a href="http://WWW.SCRUMALLIANCE.ORG">WWW.SCRUMALLIANCE.ORG</a>		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►			L Year of formation: <b>2006</b> M State of legal domicile: <b>CO</b>		

## Part I Summary

<b>Activities &amp; Governance</b> 1 Briefly describe the organization's mission or most significant activities <b>SCRUM ALLIANCE'S MISSION IS TO PROMOTE INCREASED AWARENESS AND UNDERSTANDING OF SCRUM, PROVIDE</b> 2 Check this box ► <input type="checkbox"/> 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) <b>3</b> <b>8</b> 4 Number of independent voting members of the governing body (Part VI, line 1b) <b>4</b> <b>7</b> 5 Total number of employees (Part V, line 2a) <b>5</b> <b>0</b> 6 Total number of volunteers (estimate if necessary) <b>6</b> <b>0</b> 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 <b>7a</b> <b>3,297.</b> b Net unrelated business taxable income from Form 990-T, line 34 <b>7b</b> <b>2,297.</b>	Prior Year		Current Year			
	<b>Revenue</b>					
	8 Contributions and grants (Part VIII, line 1h) <b>2,606,484.</b>		3,210,308.			
	9 Program service revenue (Part VIII, line 2g) <b>20,615.</b>		13,328.			
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) <b>-3,120.</b>		3,297.			
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <b>2,623,979.</b>		3,226,933.			
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <b>RECEIVED</b>					
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) <b>DEO 07/2010</b>					
	14 Benefits paid to or for members (Part IX, column (A), line 4) <b>IPOSC</b>					
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <b>OPEN UT</b>					
	16a Professional fundraising fees (Part IX, column (A), line 11) <b>IPOSC</b>					
	b Total fundraising expenses (Part IX, column (D), line 25) <b>IPOSC</b>					
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) <b>2,521,666.</b>		2,806,678.			
	18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) <b>2,521,666.</b>		2,806,678.			
	19 Revenue less expenses Subtract line 18 from line 12 <b>102,313.</b>		420,255.			
	<b>Expenses</b>		<b>Beginning of Current Year</b>		<b>End of Year</b>	
	20 Total assets (Part X, line 16) <b>1,037,425.</b>		1,428,560.			
	21 Total liabilities (Part X, line 26) <b>35,290.</b>		6,170.			
	22 Net assets or fund balances Subtract line 21 from line 20 <b>1,002,135.</b>		1,422,390.			
<b>Net Assets or Fund Balances</b>						

## Part II Signature Block

<b>Sign Here</b> ► Signature of officer ► Type or print name and title	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				
	12/2/10				
	Date				
<b>Paid Preparer's Use Only</b> ► Preparer's signature ► Firm's name (or yours if self-employed), address, and ZIP + 4	Date	Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions)			
	12/01/10				
	SHERCK HUSSEY JOHNSON & MCNAUGHTON LLC 1402 N CAPITOL AVE, SUITE 150 INDIANAPOLIS, IN 46202-2316		EIN ►		
Phone no. ► 317-236-0888					

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes  No

## Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

**SCRUM ALLIANCE'S MISSION IS TO PROMOTE INCREASED AWARENESS AND UNDERSTANDING OF "SCRUM", PROVIDE RESOURCES TO INDIVIDUALS AND ORGANIZATIONS USING "SCRUM", AND SUPPORT THE ITERATIVE IMPROVEMENT OF THE SOFTWARE DEVELOPMENT PROFESSION.**

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 exempt purpose achievements for each of the organization's three largest program services by expenses  
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 \$ )  
**SCRUM ALLIANCE IS ORGANIZED AND OPERATED EXCLUSIVELY FOR PURPOSES OF FURTHERING THE ADVANCEMENT OF THE "SCRUM" SOFTWARE DEVELOPMENT PROCESS. ACTIVITIES OF THE ORGANIZATION INCLUDE CLASSES, A CERTIFICATION PROGRAM AND GATHERINGS.**

4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

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

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	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? If "Yes," complete Schedule C, Part II	4	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts where 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	7	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; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable <ul style="list-style-type: none"> <li>Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.</li> <li>Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.</li> <li>Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII</li> <li>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 Part X, line 16? If "Yes," complete Schedule D, Part IX</li> <li>Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.</li> <li>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? If "Yes," complete Schedule D, Part X.</li> </ul>	11	X
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	X
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? <ul style="list-style-type: none"> <li>Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I</li> </ul>	14a	X
14b		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, Part II	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 located outside the United States? If "Yes," complete Schedule F, Part III	16	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	X

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## Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 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 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
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
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	
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	
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? 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):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) 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, Parts II, III, IV, and V, line 1	34	X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	X
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	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	X

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## Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable	1a 27	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 0	
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)</i>		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country ►		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	X	
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	X	
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	X	
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	X	
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	X	
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	X	
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	X	
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	X	
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
9a	Did the organization make any taxable distributions under section 4966?	X	
9b	Did the organization make a distribution to a donor, donor advisor, or related person?	X	
10	<b>Section 501(c)(7) organizations.</b> Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

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

### Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body	8	
1b	Enter the number of voting members that are independent	7	
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	X
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	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	X
6	Does the organization have members or stockholders?	6	X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	8a	X
a	The governing body?	8b	X
b	Each committee with authority to act on behalf of the governing body?		
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	X

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990	12a	X
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12b	X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12c	X
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	13	X
13	Does the organization have a written whistleblower policy?	14	X
14	Does the organization have a written document retention and destruction policy?	15	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15a	X
a	The organization's CEO, Executive Director, or top management official	15b	X
b	Other officers or key employees of the organization		
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	16a	X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16b	
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

### Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed ► <u>IN</u>
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
	<input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► <u>MILESTONE ADVISORS, LLC</u>
	<u>6053 N COLLEGE AVENUE, INDIANAPOLIS, IN 46220</u>

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

**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. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any current officer, director, or trustee.

Check this box if the organization did not compensate any current officer, director, or trustee.

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)				(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee			
1b Total						0.	0.	0.
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization						0.		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						3		X
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						4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person						5		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation
ADVANCED DEVELOPMENT METHODS 49 SOLOMON ROAD, LEXINGTON, MA 02420	MANAGEMENT SERVICES	336,037.
CUNDIFF CONSULTING SERVICES, INC 1801 WILLOW BEND CT., AVON, IN 46123	MANAGEMENT SERVICES	307,913.
BLANK ROME, LLP P.O. BOX 8500, PHILADELPHIA, PA 19178	ATTORNEY	176,698.
PAVE COMMUNICATIONS, LLC 13009 FAIRFAX COURT, MCCORDSVILLE, IN 46055	MARKETING AND EVENT MNGT	136,036.
LARA SCHMUTTE, CPA, LLC PO BOX 90050, INDIANAPOLIS, IN 46290-0050	ACCOUNTING	119,310.
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►	5	

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Digitized by srujanika@gmail.com

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Form 990 (2009)

**Part VIII Statement of Revenue**

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts					
1 a 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				
g Noncash contributions included in lines 1a-1f \$ .....					
h Total. Add lines 1a-1f ►					
Program Service Revenue		Business Code			
2 a CLASS REVENUE	900099	1,514,105.	1,514,105.		
b CERTIFICATIONS	900099	911,700.	911,700.		
c GATHERINGS	900099	686,503.	686,503.		
d CSD PROGRAM	900099	98,000.	98,000.		
e					
f All other program service revenue .....					
g Total. Add lines 2a-2f ►		3,210,308.			
Other Revenue					
3 Investment income (including dividends, interest, and other similar amounts) ►			13,328.		13,328.
4 Income from investment of tax-exempt bond proceeds ►					
5 Royalties ►					
6 a Gross Rents	(i) Real	(ii) Personal			
b Less rental expenses .....					
c Rental income or (loss) .....					
d Net rental income or (loss) .....					
7 a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses .....					
c Gain or (loss) .....					
d Net gain or (loss) .....					
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a				
b Less: direct expenses .....	b				
c Net income or (loss) from fundraising events .....					
9 a Gross income from gaming activities See Part IV, line 19	a				
b Less direct expenses .....	b				
c Net income or (loss) from gaming activities .....					
10 a Gross sales of inventory, less returns and allowances	a	5,715.			
b Less cost of goods sold .....	b	2,418.			
c Net income or (loss) from sales of inventory .....			3,297.		3,297.
Miscellaneous Revenue	Business Code				
11 a					
b					
c					
d All other revenue .....					
e Total. Add lines 11a-11d ►					
12 Total revenue. See instructions. ►		3,226,933.	3,210,308.	3,297.	13,328.

**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) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management	486,430.			
b Legal	176,698.			
c Accounting	7,500.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	1,006,373.			
12 Advertising and promotion	54,133.			
13 Office expenses	41,549.			
14 Information technology				
15 Royalties				
16 Occupancy	77,253.			
17 Travel	193,157.			
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	33,622.			
23 Insurance	9,000.			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <b>MEETING EXPENSES FOR GA</b>	346,196.			
b <b>REGONLINE, BANK &amp; CREDI</b>	113,422.			
c <b>CONFERENCE SUPPLIES</b>	59,626.			
d <b>BOARD MEETING EXPENSE</b>	44,728.			
e <b>COMPUTER MAINTENANCE AN</b>	31,363.			
f All other expenses	125,628.			
25 Total functional expenses Add lines 1 through 24f	2,806,678.			
26 Joint costs. Check here ► <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

## Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	556,974.
	2 Savings and temporary cash investments	462,947.	2	829,923.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	16,937.	9	23,203.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 5,675.		
	b Less accumulated depreciation	10b 2,522.	10c 20,898.	3,153.
	11 Investments - publicly traded securities	495,000.	11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	41,643.	14	15,307.
	15 Other assets. See Part IV, line 11		15	
	16 Total assets. Add lines 1 through 15 (must equal line 34)	1,037,425.	16	1,428,560.
Liabilities	17 Accounts payable and accrued expenses	690.	17	170.
	18 Grants payable		18	
	19 Deferred revenue	34,600.	19	6,000.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	35,290.	26	6,170.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,002,135.	27	1,422,390.
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,002,135.	33	1,422,390.
	34 Total liabilities and net assets/fund balances	1,037,425.	34	1,428,560.

Form 990 (2009)

## Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input type="checkbox"/> Accrual <input checked="" type="checkbox"/> Other <u>MODIFIED CASH</u>		
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X
b Were the organization's financial statements audited by an independent accountant?	2b	X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.		
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:		
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2009)

**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, 11, or 12.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**SCRUM ALLIANCE, INC.**

Employer identification number  
**20-5825034**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?  Yes  No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ► \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

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

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1

► \$ \_\_\_\_\_

b Assets included in Form 990, Part X

► \$ \_\_\_\_\_

**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 XIV.

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 organization answered "Yes" to 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 XIV and complete the following table:

c Beginning balance  
d Additions during the year  
e Distributions during the year  
f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to 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 year end balance held as:

a Board designated or quasi-endowment ► \_\_\_\_\_ %  
b Permanent endowment ► \_\_\_\_\_ %  
c Term endowment ► \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization

by

(i) unrelated organizations  
(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

Yes	No
3a(i)	
3a(ii)	
3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Investments - Land, Buildings, and Equipment.** See Form 990, Part X, line 10

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		5,675.	2,522.	3,153.
e Other				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ► 3,153.

**Part VII Investments - Other Securities.** 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
Financial derivatives		
Closely-held equity interests		
Other		

Total. (Col (b) must equal Form 990, Part X, col (B) line 12.) ►

**Part VIII Investments - Program Related** See Form 990, Part X, line 13

**Total (Col (b) must equal Form 990, Part X, col (B) line 13.) ►**

**Part IX** **Other Assets.** See Form 990, Part X, line 15

**Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)**

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Amount	
	Federal income taxes		

**Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)**

2. FIN 48 Footnote In Part XIV, 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

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**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3
4	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
6	Investment expenses	6
7	Prior period adjustments	7
8	Other (Describe in Part XIV)	8
9	Total adjustments (net) Add lines 4 through 8	9
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

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 on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	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 XIV.)	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 XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

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 XIV)	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 XIV)	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 XIV Supplemental Information

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**Schedule F**  
(Form 990)**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2009**Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

Name of the organization

SCRUM ALLIANCE, INC.Employer identification number  
20-5825034**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b1 For grantmakers. 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 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States

## 3 Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
GERMANY	0	0	PROGRAM SERVICES	GATHERING FOR MBRS	156,217.
BRAZIL	0	0	PROGRAM SERVICES	GATHERING FOR MBRS	100,385.
<b>Totals</b>	► 0	0			256,602.

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

Schedule F (Form 990) 2009

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Dant II Grants and Contracts

**Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.

See Schedule E-1 (Form 990) if additional space is needed

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Schedule F (Form 990) 2009

**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16  
Use Schedule F-1 (Form 990) if additional space is needed

Use Schedule F-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance

(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement
--------------------------	--------------------------	---------------------------------

f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
----------------------------------	--	---

**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

**2009**

Open to Public Inspection

Name of the organization

**SCRUM ALLIANCE, INC.**

Employer identification number  
**20-5825034**

**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 in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

<input checked="" 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 indemnification and gross-up payments	<input 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)

**1b** 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 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

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

**4** 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:

**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 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 contingent on the revenues of

**a** The organization?

**b** Any related organization?

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

**a** The organization?

**b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III

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

**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 Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III

**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 Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2009

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02-02-10



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

PART I, LINE 1A: KEN SCHWABER AND DAN HINTZ, DIRECTORS OF SCRUM ALLIANCE, BOTH HAD FIRST CLASS AND / OR COMPANION TRAVEL ON BEHALF OF THE ORGANIZATION FOR 2009 IN THE AMOUNT OF \$2,614 AND \$1,974, RESPECTIVELY.

SCRUM ALLIANCE DID NOT TREAT THIS EXPENSE AS TAXABLE COMPENSATION TO THE THEM BECAUSE THE EXPENSE WAS A NECESSARY AND REASONABLE EXPENSE AND DIRECTLY RELATED TO SCRUM ALLIANCE'S BUSINESS PURPOSE. BECAUSE SCRUM PROVIDES SERVICES WORLDWIDE AND DIRECTORS ARE OFTEN CALLED UPON TO MEET PERSONALLY WITH THOSE CONSUMERS OF SERVICES, TRAVEL IS A PRIMARY EXPENSE OF THE ORGANIZATION. MANY TIMES, DIRECTORS MUST TRAVEL WITH SHORT NOTICE. WHILE IT IS NOT THE POLICY OF SCRUM ALLIANCE TO REIMBURSE FOR FIRST CLASS TRAVEL, IT DOES SO WHEN IT FEELS THE EXPENSE IS NECESSARY AND REASONABLE.

SCRUM ALLIANCE DOES NOT CURRENTLY HAVE A WRITTEN BUSINESS EXPENSE REIMBURSEMENT POLICY, BUT IT IS CURRENTLY WORKING WITH LEGAL COUNSEL TO DEVELOP THAT POLICY, WHICH WILL BE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS LATE THIS YEAR OR EARLY NEXT YEAR. WHILE SCRUM DID NOT HAVE A WRITTEN POLICY IN 2009, IT HAS ALWAYS REQUIRED DIRECTORS AND OFFICERS TO ACCOUNT TO THE BOARD OR MANAGEMENT COMPANY IN A TIMELY FASHION IN ORDER TO RECEIVE REIMBURSEMENT FOR EXPENSES INCURRED WHILE SERVING THE ORGANIZATION.

**Part III** Supplemental Information

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

JIM CUNDIFF, A KEY EMPLOYEE OF SCRUM ALLIANCE'S MANAGEMENT COMPANY, CUNDIFF CONSULTING SERVICES HAD TRAVEL EXPENSES FOR COMPANIONS IN HIS ROLE AS A KEY EMPLOYEE OF CUNDIFF CONSULTING SERVICES. AS NOTED IN PART VII, SECTION A. AND SECTION B. MR. CUNDIFF WAS NOT PAID DIRECTLY BY SCRUM ALLIANCE. SCRUM ALLIANCE HIRED HIS COMPANY TO PROVIDE MANAGEMENT SERVICES TO IT. MR. CUNDIFF DID NOT RECEIVE REIMBURSEMENT FROM SCRUM ALLIANCE FOR ANY OF HIS TRAVEL EXPENSES, BUT THEY WERE INCLUDED AS PART OF THE COMPENSATION TO HIS COMPANY ON FORM 1099.



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### FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

RESOURCES TO INDIVIDUALS AND ORGANIZATIONS USING SCRUM, AND SUPPORT THE  
ITERATIVE IMPROVEMENT OF THE SOFTWARE DEVELOPMENT PROFESSION.

### FORM 990, PART V, LINE 1C:

THE ORGANIZATION HAD NO REPORTABLE PAYMENTS SUBJECT TO THE BACKUP  
WITHHOLDING RULES.

### FORM 990, PART V, LINE 7H:

THE ORGANIZATION DID NOT RECEIVE ANY CONTRIBUTIONS OF CARS, BOATS,  
AIRPLANES, OR OTHER VEHICLES THAT WOULD REQUIRE THE FILING OF FORM  
1098-C.

FORM 990, PART VI, SECTION A, LINE 3: MANAGEMENT AND CONTROLLER DUTIES  
WERE CONTRACTED TO CONSULTING FIRMS DURING THE ORGANIZATIONS GROWTH AND  
DEVELOPMENT PHASE. AS OF THE FILING OF THIS 990 THE ORGANIZATION HAS HIRED  
AN INDIVIDUAL TO SERVE AS FULL TIME MANAGING DIRECTOR.

FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES OTHER THAN  
THE BOARD OF DIRECTORS, WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING  
BODY.

FORM 990, PART VI, SECTION B, LINE 11: A COPY OF THE DRAFT WAS SENT TO THE  
ORGANIZATIONS GOVERNING BODY FOR REVIEW. IT WAS REVIEWED AND APPROVED BY

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02-03-10

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THE GOVERNING BODY AFTER ALL ISSUES WERE RESOLVED.

FORM 990, PART VI, SECTION B, LINE 15A: THE ORGANIZATION USED A  
COMPENSATION CONSULTING FIRM TO PREPARE A SURVEY OF COMPARABLE COMPENSATION  
PACKAGES IN THE INDUSTRY IN ORDER TO DETERMINE THE APPROPRIATENESS OF THE  
FEES TO BE PAID TO A MANAGEMENT CONSULTING FIRM. THE REPORT WAS REVIEWED BY  
THE BOARD OF DIRECTORS, AND BASED UPON THE FINDINGS IN THAT REPORT THE  
BOARD APPROVED THE COMPENSATION. THE BOARD OF DIRECTORS HAS RETAINED LEGAL  
COUNSEL TO DEVELOP A WRITTEN POLICY TO ENSURE THAT ALL COMPENSATION  
ARRANGEMENTS WITH RELATED PARTIES ARE EVALUATED AND ENTERED AT ARMS' LENGTH  
AND THAT ANY COMPENSATION THAT IS PAID TO A RELATED PARTY IS REASONABLE AND  
REFLECTS FAIR MARKET VALUE. THE POLICY WILL ENCOURAGE THE APPLICATION OF  
THE REBUTTABLE PRESUMPTION STANDARD OF CODE SECTION 4958 AND THE RELATED  
TREASURY REGULATIONS BY (A) EXCLUDING ANY INTERESTED PARTY FROM THE  
DECISIONMAKING PROCESS; (B) REQUIRING DISINTERESTED BOARD OR COMMITTEE  
MEMBERS TO OBTAIN AND RELY UPON COMPARABILITY DATA WHEN SETTING THE  
PROPOSED COMPENSATION TERMS; (C) REQUIRING APPROVAL OF THE TRANSACTION IN  
ADVANCE BY DISINTERESTED DIRECTORS OR COMMITTEE MEMBERS; AND (D) REQUIRING  
CONTEMPORANEOUS DOCUMENTATION (I.E., MINUTES) REFLECTING THE DECISION AND  
THE PROCESS BY WHICH IT WAS MADE. THE BOARD WILL REVIEW AND APPROVE THIS  
NEW POLICY LATE THIS YEAR OR EARLY NEXT YEAR.

FORM 990, PART VI, SECTION C, LINE 19:

THE FORMS ARE AVAILABLE FOR DOWNLOAD ON SCRUM ALLIANCE'S WEBSITE.

WWW.SCRUMALLIANCE.ORG

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### FORM 990, PART VII CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC:

KEN SCHWABER - 49 SOLOMON ROAD, LEXINGTON, MA 02420

### FORM 990, PART XI, LINE 1:

### ACCOUNTING METHOD USED TO PREPARE THE FORM 990:

MODIFIED CASH BASIS

### SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: MICHELLE SLIGER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

BOARD MEMBER

(C) AMOUNT OF TRANSACTION \$ 3300.

(D) DESCRIPTION OF TRANSACTION: SCRUM REVENUE - CLASSROOM REVENUE

RECEIVED FROM BOARD MEMBER OR BAORD MEMBER'S COMPANY

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: KEN SCHWABER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

PRESIDENT AND DIRECTOR

(C) AMOUNT OF TRANSACTION \$ 336036.

(D) DESCRIPTION OF TRANSACTION: PURSUANT TO A CONSULTING SERVICES

CONTRACT, ADVANCED DEVELOPMENT METHODS, INC. SERVED AS PRESIDENT AND

DIRECTOR OF THE SCRUMHUB, ONE OF THE KEY PROGRAMS OF SCRUM ALLIANCE, INC.

FROM JANUARY 1, 2009 UNTIL OCTOBER 2, 2009, WHEN THAT CONTRACT WAS

TERMINATED BY LETTER. KEN SCHWABER SERVED AS A DIRECTOR OF SCRUM

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ALLIANCE FROM JANUARY 1, 2009 UNTIL SEPTEMBER 15, 2009, WHEN HE SUBMITTED HIS LETTER OF RESIGNATION. HE IS THE FOUNDER OF SCRUM ALLIANCE AND WAS ALSO THE FORMER CHAIRMAN OF THE BOARD. UNDER THE TERMS OF THE CONTRACT, ADVANCED DEVELOPMENT METHODS, INC. AND KEN SCHWABER, AS ITS KEY EMPLOYEE, MADE MANAGEMENT DECISIONS FOR THE ORGANIZATION. FEES FOR THESE SERVICES TOTaled \$210,000 DURING 2009. ADDITIONAL COMPENSATION INURED TO ADVANCED DEVELOPMENT METHODS, INC. AS FOLLOWS: \$35,012 OF FURNITURE AND EQUIPMENT (COST, PURCHASED IN 2009), \$2,644 OF OFFICE SUPPLIES, \$76,472 OF RENT AND FACILITIES EXPENSES AND \$11,908 OF EQUIPMENT (NET BOOK VALUE, PURCHASED BEFORE 2009).

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: KEN SCHWABER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

PRESIDENT AND DIRECTOR

(C) AMOUNT OF TRANSACTION \$ 0.

(D) DESCRIPTION OF TRANSACTION: CONTINUED: ALL OF THE FORGOING AMOUNTS

WERE REPORTED ON A 2009 FORM 1099 TO ADVANCED DEVELOPMENT METHODS, INC.

TOTALING \$336,036. AS STATED IN PART VI, SECTION B. LINE 15A, THE BOARD

REVIEWED A COMPENSATION SURVEY PREPARED BY AN INDEPENDENT FIRM WHEN

DETERMINING COMPENSATION OF THE COMPANY'S TOP MANAGEMENT OFFICIALS.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: KEN SCHWABER

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

PRESIDENT AND DIRECTOR

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(C) AMOUNT OF TRANSACTION \$ 19350.

(D) DESCRIPTION OF TRANSACTION: SCRUM REVENUE - CLASSROOM REVENUE

RECEIVED FROM BOARD MEMBER OR BAORD MEMBER'S COMPANY

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: JIM CUNDIFF

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

MANAGING DIRECTOR

(C) AMOUNT OF TRANSACTION \$ 307913.

(D) DESCRIPTION OF TRANSACTION: PURSUANT TO A CONSULTING SERVICES

CONTRACT, CUNDIFF CONSULTING SERVICES, INC. SERVED AS MANAGING DIRECTOR

OF SCRUM ALLIANCE, INC. FROM JANUARY 1, 2009 UNTIL SEPTEMBER 15, 2009,

WHEN IT RESIGNED AS MANAGING DIRECTOR. THE BOARD AGREED TO HONOR THE

TERMS OF THE CONTRACT THROUGH THE END OF ITS TERM (JANUARY 2010) BECAUSE

JIM CUNDIFF, A KEY EMPLOYEE OF CUNDIFF CONSULTING SERVICES, AGREED TO

CONTINUE TO ASSIST WITH THE TRANSITION TO A NEW MANAGING DIRECTOR. UNDER

THE TERMS OF THE CONTRACT CUNDIFF CONSULTING SERVICES, AND JIM CUNDIFF,

AS ITS KEY EMPLOYEE, MADE MANAGEMENT DECISIONS FOR THE ORGANIZATION.

FEES FOR THESE SERVICES TOTALED \$307,913 DURING 2009 AND WERE REPORTED ON

A FORM 1099 TO CUNDIFF CONSULTING SERVICES, INC. AS STATED IN PART VI,

SECTION B, LINE 15A, THE BOARD REVIEWED A COMPENSATION SURVEY PREPARED BY

AN INDEPENDENT FIRM WHEN DETERMINING COMPENSATION OF THE COMPANY'S TOP

MANAGEMENT OFFICIALS.

(E) SHARING OF ORGANIZATION REVENUES? = NO

(A) NAME OF PERSON: MIKE COHN

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**(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:**

BOARD MEMBER

(C) AMOUNT OF TRANSACTION \$ 51900.

(D) DESCRIPTION OF TRANSACTION: SCRUM REVENUE - CLASSROOM REVENUE

RECEIVED FROM BOARD MEMBER OR BAORD MEMBER'S COMPANY

(E) SHARING OF ORGANIZATION REVENUES? = NO

FORM 990, PART VI, SECTION B, LINE 12A:

SCRUM ALLIANCE HAS RETAINED LEGAL COUNSEL TO REVISE AND EXPAND ITS

CONFLICT OF INTEREST POLICY. THE PROPOSED POLICY WILL REQUIRE

DIRECTORS, OFFICERS AND KEY EMPLOYEES TO SUBMIT AN ANNUAL CONFLICT OF

INTEREST DISCLOSURE. THE ANNUAL DISCLOSURE REQUIRES DIRECTORS,

OFFICERS AND KEY EMPLOYEES TO DISCLOSE, IN WRITING, ANY KNOWN FINANCIAL

INTEREST THAT THE INDIVIDUAL (TOGETHER WITH FAMILY MEMBERS) HAS IN ANY

BUSINESS ENTITY THAT TRANSACTS BUSINESS WITH SCRUM ALLIANCE. IN

ADDITION, DIRECTORS, OFFICERS AND KEY EMPLOYEES ARE REQUIRED TO

IMMEDIATELY DISCLOSE ANY POSSIBLE CONFLICT OF INTEREST THAT ARISES

MID-YEAR IN RELATION TO A PROPOSED TRANSACTION. THE CONFLICT OF

INTEREST POLICY REQUIRES THAT ANY INDIVIDUAL WITH A CONFLICT BE RECUSED

FROM THE DECISIONMAKING PROCESS, THAT INDEPENDENT DIRECTORS OR

COMMITTEE MEMBERS DETERMINE THAT THE PROPOSED TRANSACTION IS IN THE

BEST INTERESTS OF SCRUM ALLIANCE, AND THE TRANSACTION MUST BE APPROVED

BY A VOTE OF THE INDEPENDENT DIRECTORS OR COMMITTEE MEMBERS WITHOUT THE

PARTICIPATION OF ANY INTERESTED INDIVIDUAL. THE BOARD WILL REVIEW AND

APPROVE THIS NEW POLICY LATE THIS YEAR OR EARLY NEXT YEAR.

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FORM 990, PART VI, SECTION B, LINE 13:

THE ORGANIZATION IS CURRENTLY IN THE PROCESS OF APPROVING A  
WHISTLEBLOWER POLICY.

FORM 990, PART VI, SECTION B, LINE 14:

THE ORGANIZATION IS CURRENTLY IN THE PROCESS OF APPROVING A DOCUMENT  
RETENTION POLICY.