



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Short Form
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form
► The organization may have to use a copy of this return to satisfy state reporting requirements

2009

Open to Public
Inspection

A For the 2009 calendar year, or tax year beginning		January 1	, 2009, and ending	December 31	, 2009
B Check if applicable		C Name of organization			D Employer identification number
<input type="checkbox"/> Address change		AUVSI Pathfinder Chapter Inc			26-1985340
<input type="checkbox"/> Name change		Number and street (or P O box, if mail is not delivered to street address)			E Telephone number
<input type="checkbox"/> Initial return		1812 Mountain Brook Dr			256-509-9647
<input type="checkbox"/> Terminated		City or town, state or country, and ZIP + 4			F Group Exemption Number ►
<input type="checkbox"/> Amended return		Huntsville, AL 35801			
<input type="checkbox"/> Application pending					

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method. Cash Accrual
Other (specify) ►

I Website: ► www.auvsipathfinder.com

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

K Check ► if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3
	4 Investment income	4
	5a Gross amount from sale of assets other than inventory	5a
	b Less: cost or other basis and sales expenses	5b
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ► <input type="checkbox"/>	
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a 159,373
b Less: direct expenses other than fundraising expenses	6b 76,078	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c 83,295	
7a Gross sales of inventory, less returns and allowances	7a	
b Less: cost of goods sold	7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)		
8 Other revenue (describe ►)		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8		
Expenses	10 Grants and similar amounts paid (attach schedule)	10 74,650
	11 Benefits paid to or for members	11
	12 Salaries, other compensation, and employee benefits	12
	13 Professional fees and other payments to independent contractors	13
	14 Occupancy, rent, utilities, and maintenance	14
	15 Printing, publications, postage, and shipping	15
	16 Other expenses (describe ► Schedule)	16 10,232
	17 Total expenses. Add lines 10 through 16	17 84,882
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18 (1,587)
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19 54,521
	20 Other changes in net assets or fund balances (attach explanation)	20
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21 52,934
	RECEIVED MAY 17 2010 IRS-OSC OGDEN, UT	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

22 Cash, savings, and investments	(A) Beginning of year	(B) End of year
	0 22	52,934
	23 Land and buildings	23
	24 Other assets (describe ►)	24
	25 Total assets	25
	26 Total liabilities (describe ►)	26
	27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	0 27 52,934

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)

What is the organization's primary exempt purpose? **Promote unmanned systems technology**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner; describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expense:

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)

28	Grants to 35 schools and three other educational organizations to foster interest in robotics.		
	(Grants \$ 59,150) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a	59,150
29	Scholarship endowments at University of Alabama in Huntsville and Calhoun Community College to promote robotics study		
	(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	29a	12,000
30	AUVSI (national) awards for Best Papers		
	(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	30a	3,500
31	Other program services (attach schedule)		
	(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	31a	
32	Total program service expenses (add lines 28a through 31a)	► <input type="checkbox"/>	32 74,650

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Andy Ramsey Huntsville, AL	President	0	0	0
Terry Griffin Madison, AL	1st Vice President	0	0	0
Peter Blocker Huntsville, AL	2nd Vice President	0	0	0
Dana Osborne Huntsville, AL	Secretary	0	0	0
Don Jones Huntsville, AL	Treasurer	0	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.	35a	✓
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35b	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	36	✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	37a	0
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39 Section 501(c)(7) organizations. Enter:	39a	N/A
a Initiation fees and capital contributions included on line 9	39b	N/A
b Gross receipts, included on line 9, for public use of club facilities		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____	40b	N/A
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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		
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ► _____		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ► _____		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ► _____		
42a The organization's books are in care of ► <u>Don W. Jones</u> Telephone no. ► <u>256-539-2714</u> Located at ► <u>Huntsville, AL</u> ZIP + 4 ► <u>35801-1356</u>		
b 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)?	42b	✓
If "Yes," enter the name of the foreign country: ► _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.? If "Yes," enter the name of the foreign country: ► _____	42c	✓
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ► <u>43</u>		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

Part VI

Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51. N/A

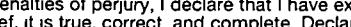
N/A

46	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	Yes	No
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	46	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	47	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	48	
b	If "Yes," was the related organization a section 527 organization?	49a	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."	49b	

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

d Total number of other independent contractors each receiving over \$100,000 . ►

Sign Here	<p>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</p> <p>▶  5-1310</p> <p>Signature of officer</p> <p>▶ <u>DON W. JONES TREASURER</u> Date</p> <p>Type or print name and title</p>
--------------	---

Paid Preparer's Use Only	Preparer's signature 	Date 5/12/10	Check if self- employed <input type="checkbox"/>	Preparer's identifying number (See instructions) 416-46-3186
Firm's name (or yours if self-employed), address, and ZIP + 4	Bibb & Associates, P.C. P.O. Box 2706, Huntsville, AL 35804-2706		EIN <input type="checkbox"/>	63-0756548
			Phone no <input type="checkbox"/>	256-533-7376

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

Form 990-EZ (2009)

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2009

**Open To Public
Inspection**

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization

Employer identification number

AUVSI Pathfinder Chapter Inc

26 | 1985340

20

1985340

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. **N/A**

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations e Solicitation of non-government grants
b Internet and email solicitations f Solicitation of government grants
c Phone solicitations g Special fundraising events
d In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

2b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through col (c))
		<u>Roundtable</u> (event type)	<u>Symposium</u> (event type)	(total number)	
Revenue	1 Gross receipts . . .	55,702	103,671		159,373
	2 Less: Charitable contributions . . .				
	3 Gross income (line 1 minus line 2) . . .	55,702	103,671		159,373
Direct Expenses	4 Cash prizes . . .				
	5 Noncash prizes . . .				
	6 Rent/facility costs . . .	22,765	43,630		66,395
	7 Food and beverages . . .				
	8 Entertainment . . .				
	9 Other direct expenses . . .	4,108	5,575		9,683
	10 Direct expense summary. Add lines 4 through 9 in column (d)				(76,078)
	11 Net income summary. Combine line 3, column (d), and line 10				83,295

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

N/A

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue . . .				
Direct Expenses	2 Cash prizes . . .				
	3 Noncash prizes . . .				
	4 Rent/facility costs . . .				
	5 Other direct expenses . . .				
	6 Volunteer labor . . .	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				()
	8 Net gaming income summary. Combine line 1, column d, and line 7				

		Yes	No
9	Enter the state(s) in which the organization operates gaming activities:		
a	Is the organization licensed to operate gaming activities in each of these states?		
b	If "No," explain:		
10a	Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?		
b	If "Yes," explain:		
11	Does the organization operate gaming activities with nonmembers?		
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		

13 Indicate the percentage of gaming activity operated in:

- a** The organization's facility
- b** An outside facility

13a	%	Yes	No
13b	%		

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ►

Address ►

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?

- b** If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$

- c** If "Yes," enter name and address of the third party:

Name ►

Address ►

16 Gaming manager information:

Name ►

Gaming manager compensation ► \$

Description of services provided ►

Director/officer

Employee

Independent contractor

17 Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$

15a

17a

FORM 990-EZ
AUVSI PATHFINDER CHAPTER, INC.
26-1985340
HUNTSVILLE, AL

Part I, Line 10

Recipient	Award	Planned Use
Grants to Schools		
Hampton Cove Elementary	1,000	Robotics Team
Bob Jones High School	1,000	Robotics Team
Holy Family School Cyber Dragons	1,500	6-8th Grade Robotics Teams
Madison Academy Brain Stangs	750	9-12 Robotics Team
Randolph School RaideRobotics	2,000	Grade 5-6 Robotics Team
Grissom High School	2,000	Robotics Team
Athens Middle School Team B.E.A.S.T.	2,000	LEGO Mindstorms
Madison Elementary	500	LEGO and BoeBot
East Limestone High	1,000	Moonbuggy Expenses
Priceville High School	700	Robotics Team
Lincoln County High School F.E.A.R. 547	3,000	Falcon Engineering and Robotics Team 547
Whitesburg Middle School	1,500	Robotics Program
Horizon Elementary	1,500	Horizon Robotics Program
Arab High School Team #538	2,000	First Robotics
Chaffee Elementary School	1,000	WEDO Robotics Registration
New Century	1,500	NCTHS Robotics Program
Jones Valley Elementary	1,000	FIRST Lego League

FORM 990-EZ
AUVSI PATHFINDER CHAPTER, INC.
26-1985340
HUNTSVILLE, AL

Part I, Line 10

Recipient	Award	Planned Use
Team #1		
Jones Valley Elementary	1,000	FIRST Lego League
Team #2		NXT Starter Kit
 Lee High School	 2,000	 Robotics Program
 Grace Lutheran School	 1,000	 Robotics Club Support
 Huntsville Middle School	 1,000	 Robotics Team
 Riverside Christian Academy	 1,000	 Robotics Programs BEST and LEGO Teams
 Weatherly Elementary	 1,000	 Robotics Team LEGO
 Brookhaven Middle School	 1,000	 New NXT Robotics
 Discovery Middle School	 2,000	 FLL Robotics Program
 Columbia Elementary Boys & Girls Club Triana	 1,750	 Triana Robotics Teams
 Faith Christian Academy	 1,000	 BEST Robotics
 Columbia High School	 2,000	 Robotics Program
 Limestone County Career Tech First Team 34	 2,000	 FIRST Robotics Team 34
 Holly Pond High School	 1,000	 BEST Robotics
 Riverton Middle School	 1,000	 FLL Robotics
 West Madison Elementary	 650	 FLL Robotics
 Bob Jones High School	 1,000	 FIRST and BEST Robotics
 Leon Sheffield Elem. Magnet	 600	 NXT Kits
 Athens Bible School	 1,000	 BEST Kits
		45,950

FORM 990-EZ
AUFSI PATHFINDER CHAPTER, INC.
26-1985340
HUNTSVILLE, AL

Part I, Line 10

Recipient	Award	Planned Use
<u>Grants to Other Educational Organizations</u>		
ACTE Tech Fair	3,200	Competition Expenses
SciQuest	5,000	FLL Robotics
Alabama FIRST Lego League Championship Tournament	5,000	Tournament Expenses
<u>Scholarship Endowments</u>		
University of Alabama Huntsville	8,000	Scholarship Fund
Calhoun Community College	4,000	Scholarship Fund
<u>Other</u>		
AUFSI National Best Papers	<u>3,500</u>	Prizes
Total	<u><u>74,650</u></u>	

FORM 990-EZ
AUVSI PATHFINDER CHAPTER, INC.
26-1985340
HUNTSVILLE, AL

Part I, Line 16

Other Operating Expenses

Credit card & bank fees	2,341
Meeting expense	2,163
Travel	2,453
Accounting	2,140
Application fee, Form 1024	750
Web operations	324
Post office box	61
	<hr/>
	10,232