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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning , 2009, and ending , 20

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization: MILLION DOLLAR ROUND TABLE

Doing Business As:

Number and street (or P.O. box if mail is not delivered to street address): 325 W. TOUHY AVENUE — Room/suite:

City or town, state or country, and ZIP + 4: PARK RIDGE IL 60068-4265

D Employer identification number: 36-2138427

E Telephone number: (847) 692-6378

G Gross receipts $ 20,521,050

F Name and address of principal officer: SEE ATTACHMENT #1

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(6) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.MDRT.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1969

M State of legal domicile: IL

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SEE ATTACHMENT #2

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)	3	5
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	5
5	Total number of employees (Part V, line 2a)	5	81
6	Total number of volunteers (estimate if necessary)	6	400
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

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		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)		
9	Program service revenue (Part VIII, line 2g)	28,879,969	18,762,630
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-499,516	-954,586
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	962,828	501,374
12	Total revenue -- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	29,343,281	18,309,418
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	6,918,598	6,966,634
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	20,312,265	14,861,394
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	27,230,863	21,828,028
19	Revenue less expenses. Subtract line 18 from line 12	2,112,418	-3,518,610

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	23,779,114	25,030,922
21	Total liabilities (Part X, line 26)	4,173,899	5,281,425
22	Net assets or fund balances. Subtract line 21 from line 20	19,605,215	19,749,497

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 — Date

JOHN PRAST — EXECUTIVE VICE PRESIDENT

Type or print name and title

Paid Preparer's Use Only

Preparer's signature — Date: 5/3/10 — Check if self-employed ▶ ☐ — Preparer's identifying number (see instr.)

Firm's name (or yours if self-employed), address, and ZIP + 4:
CALDWELL, COREN & COMPANY, LTD.
8170 SOUTH CASS
DARIEN, IL 60561

EIN ▶ 36-3122209

Phone no. ▶ (630) 960-2135

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate Instructions. Form **990** (2009)

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14

Part III **Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission:
SEE ATTACHMENT #3

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 611430) (Expenses $ 4,204,261 including grants of $) (Revenue $ 3,299,439)
SEE ATTACHMENT #4

4b (Code 611430) (Expenses $ 1,137,114 including grants of $) (Revenue $ 1,250,863)

4c (Code: 511120) (Expenses $ 515,902 including grants of $) (Revenue $)

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

4e **Total program service expenses ▶ $** 5,857,277

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 ... N/A	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	11	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
	• Did the organization report an amount for investments -- other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	• 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.			
	• 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			
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part 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? (Yes: , No: X) If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional. 12A	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?	14a		X
b	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	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

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? N/A	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? N/A	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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	

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	42		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		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	81		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O N/A	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	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.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? N/A	5c			
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?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? N/A	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g			X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h			X
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			X
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			X
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

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	1a	5		
b	Enter the number of voting members that are independent	1b	5		
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	
b	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:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a			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? N/A	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	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	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	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
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:			
a	The organization's CEO, Executive Director, or top management official?	15a	X	
b	Other officers or key employees of the organization?	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
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?	16a		X
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? N/A	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

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.

☐ Own website ☐ Another's website ☒ 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: ▶ SEE ATTACHMENT #5

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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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.

(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	HIGHEST COMPENSATED EMPLOYEE	FORMER				
JAMES E ROGERS IMMEDIATE PAST PRESIDENT	5.00	X							29,407	0	0
WALTON W ROGERS IMMEDIATE PAST PRESIDENT	5.00	X							89,565	0	0
GUY E BAKER PRESIDENT	10.00	X							71,381	0	0
JENNIFER A BORISLOW SECOND VICE PRESIDENT	5.00	X							46,997	0	0
JULIAN H GOOD JR FIRST VICE PRESIDENT	10.00	X							51,867	0	0
D SCOTT BRENNAN SECRETARY	5.00	X							21,987	0	0
JOHN J PRAST EXECUTIVE VICE PRESIDENT	50.00				X				362,312	0	14,917
PATRICK A KOZIOL DIRECTOR FINANCE & ADMINISTRATION	50.00					X			195,538	0	11,659
RAYMOND J KOPCINSKI DIRECTOR MEETING SERVICES	50.00					X			248,791	0	20,639
STEPHEN P STAHR MANAGING DIRECTOR	50.00					X			185,923	0	24,652
JACQUELINE CAMPA HUMAN RESOURCE DIRECTOR	50.00					X			120,696	0	10,107
WILLIAM JESSE DIRECTOR INFORMATION SERVICES	50.00					X			115,134	0	14,057

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	Highest compensated employee	Former				
1b **Total** ▶									1539598	0	96031

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 ▶ 9

			Yes	No
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
SEE ATTACHMENT #6		

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 ▶ 21

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 AMTS	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, & 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**				
	2a MEMBERSHIP INCOME	541900	15,456,815	15,456,815		
	b MEETINGS INCOME	611430	3,299,439	3,299,439		
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a-2f ▶		18,756,254			
OTHER REVENUE	3 Investment income (including dividends, interest, and other similar amounts) ▶		763,106	763,106		
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6a Gross Rents					
	b Less: rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory					
	b Less: cost or other basis and sales expenses	1,717,693				
	c Gain or (loss)					
	d Net gain or (loss) ▶		-1,717,693	-1,717,693		
	8a 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 ▶					
	9a Gross income from gaming activities. See Part IV, line 19 a					
	b Less: direct expenses b					
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances a	813,311				
	b Less: cost of goods sold b	493,939				
	c Net income or (loss) from sales of inventory ▶		319,372	319,372		
	Miscellaneous Revenue	**Business Code**				
	11a MANAGEMENT FEES	561000	100,000	100,000		
	b OTHER INCOME	611430	88,379	88,379		
	c					
	d All other revenue					
	e **Total.** Add lines 11a-11d ▶		188,379			
	12 **Total revenue.** See instructions ▶		18,309,418	18,309,418		

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	1,064,431			
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	3,880,969			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	771,234			
9	Other employee benefits	894,163			
10	Payroll taxes	355,837			
11	Fees for services (non-employees):				
a	Management				
b	Legal	88,848			
c	Accounting	48,400			
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	117,541			
g	Other	821,500			
12	Advertising and promotion	483,729			
13	Office expenses	160,044			
14	Information technology	59,358			
15	Royalties	9,850			
16	Occupancy	322,526			
17	Travel	116,510			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	10,110,795			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization #7	398,065			
23	Insurance	104,519			
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	PUBLICATIONS	1,115,985			
b	MISCELLANEOUS	368,848			
c	CREDIT CARD FEES	225,784			
d	POSTAGE AND SHIPPING	148,833			
e	EXHIBITS	122,441			
f	All other expenses #8	37,818			
25	**Total functional expenses.** Add lines 1 through 24f	21,828,028			
26	**Joint costs.** Check here ▶ ☐ 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	757,123	1	4,284,407
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	37,554	4	24,448
	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	1,086,418	9	1,049,601
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 9,822,710			
	b	Less: accumulated depreciation — 10b: 8,112,048	2,034,601	10c	1,710,662
	11	Investments -- publicly traded securities	17,717,511	11	15,662,198
	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	2,145,907	15	2,299,606
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	23,779,114	16	25,030,922
LIABILITIES	17	Accounts payable and accrued expenses	2,302,723	17	2,872,983
	18	Grants payable		18	
	19	Deferred revenue		19	
	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	1,871,176	25	2,408,442
	26	**Total liabilities.** Add lines 17 through 25	4,173,899	26	5,281,425
NET ASSETS OR FUND BALANCES		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	19,605,215	27	19,749,497
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] 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	19,605,215	33	19,749,497
	34	Total liabilities and net assets/fund balances	23,779,114	34	25,030,922

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ 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 lines 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.	2c	X	
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: ☒ Separate basis ☐ Consolidated basis ☐ 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 N/A	3b		

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
MILLION DOLLAR ROUND TABLE

Employer identification number
36-2138427

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)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

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 the 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:

		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? ☐ 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:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	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		265,000		265,000
b Buildings		3,729,978	2,491,628	1,238,350
c Leasehold improvements				
d Equipment		5,798,415	5,591,103	207,312
e Other		29,317	29,317	
Total. Add lines 1a through 1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				1,710,662

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. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

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

(a) Description	(b) Book value
CASH SURRENDER VALUE OF LIFE INSURANCE	2,162,251
DEFERRED COMPENSATION ASSETS	137,355
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	2,299,606

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

1. (a) Description of liability	(b) Amount
Federal income taxes	
ACCRUED SALARIES	69,884
DEFERRED MEMBER DUES	1,184,337
DEFERRED COMPENSATION	1,154,221
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	2,408,442

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.

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	18,309,418
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	21,828,028
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,518,610
4	Net unrealized gains (losses) on investments	4	3,662,892
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	3,662,892
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	144,282

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	22,348,708
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains on investments	2a	3,662,892		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV.)	2d	493,939		
e	Add lines 2a through 2d			2e	4,156,831
3	Subtract line 2e from line 1			3	18,191,877
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	117,541		
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	117,541
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	18,309,418

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	22,204,426
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	493,939		
e	Add lines 2a through 2d			2e	493,939
3	Subtract line 2e from line 1			3	21,710,487
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	117,541		
b	Other (Describe in Part XIV.)	4b			
c	Add lines 4a and 4b			4c	117,541
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	21,828,028

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.

PART XII 2D COST OF GOODS SOLD 493,939

PART XIII 2D COST OF GOODS SOLD 493,939

PART X LINE 2: NOTE J - INCOME TAXES
ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME TAXES CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE ASSOCIATION'S FINANCIAL STATEMENTS. ASC 740 PRESCRIBES A MORE LIKELY THAN NOT RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN. THE ASSOCIATION DOES NOT HAVE ANY TAX POSITIONS AT DECEMBER 31, 2009.

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
MILLION DOLLAR ROUND TABLE

Employer identification number
36-2138427

Part I **Questions Regarding Compensation**

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	[X] First-class or charter travel	[ ] Housing allowance or residence for personal use		
	[X] Travel for companions	[ ] Payments for business use of personal residence		
	[X] Tax indemnification and gross-up payments	[ ] Health or social club dues or initiation fees		
	[X] Discretionary spending account	[ ] Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
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?	2	X	
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.			
	[ ] Compensation committee	[X] Written employment contract		
	[ ] Independent compensation consultant	[X] Compensation survey or study		
	[ ] Form 990 of other organizations	[X] 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?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	X	
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	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	7		X
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		X

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(I) Base compensation	(II) Bonus & incentive compensation	(III) Other reportable compensation				
JAMES E ROGERS	(I)			29,407			29,407	38,060
	(II)							
WALTON W ROGERS	(I)			89,565			89,565	101,291
	(II)							
GUY E BAKER	(I)			71,381			71,381	56,181
	(II)							
JENNIFER A BORISLOW	(I)			46,997			46,997	11,540
	(II)							
JULIAN H GOOD JR	(I)			51,867			51,867	37,435
	(II)							
D SCOTT BRENNAN	(I)			21,987			21,987	
	(II)							
JOHN J PRAST	(I)	338,100	1,000	23,212	8,250	6,667	377,229	458,264
	(II)							
PATRICK A KOZIOL	(I)	183,680	1,000	10,858	4,992	6,667	207,197	229,912
	(II)							
RAYMOND J KOPCINSKI	(I)	231,916	1,000	15,875	7,020	13,619	269,430	273,818
	(II)							
STEPHEN P STAHR	(I)	181,498	1,000	3,425	5,550	19,102	210,575	189,054
	(II)							
	(I)							
	(II)							
	(I)							
	(II)							
	(I)							
	(II)							
	(I)							
	(II)							
	(I)							
	(II)							
	(I)							
	(II)							

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.

SCHEDULE J PART I LINE 4B
JOHN PRAST PARTICIPATES IN A SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN. THE ASSOCIATION MADE NO CONTRIBUTION TO THIS PLAN FOR THE YEAR ENDED DECEMBER 31, 2009.

SCHEDULE O (Form 990)	Supplemental Information to Form 990	OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ▶ Attach to Form 990.	2009 Open to Public Inspection

Name of the organization	Employer identification number
MILLION DOLLAR ROUND TABLE	36-2138427

PART VI SECTION B LINE 11:
FORM 990 IS PREPARED BY THE ORGANIZATION'S ACCOUNTING DEPARTMENT, DISCUSSED WITH THE ORGANIZATION'S INDEPENDENT ACCOUNTANTS AND DISTRIBUTED TO THE ORGANIZATION'S GOVERNING BODY PRIOR TO FILING.

PART VI SECTION B LINE 15:
15A:
THE EXECUTIVE VICE PRESIDENT'S COMPENSATION AND BENEFITS ARE REVIEWED BY THE EXECUTIVE COMMITTEE ANNUALLY. ASAE'S BLUE CHIP AND ASSOCIATION FORM SURVEYS ARE PARTICIPATED IN AND EVALUATED EACH YEAR. PROCESS AND DECISION IS DOCUMENTED BY LETTER FROM PRESIDENT.
15B:
ASAE'S BLUE CHIP AND ASSOCIATION FORM SURVEYS ARE PARTICIPATED IN AND EVALUATED EACH YEAR. OCCUPATION SPECIFIC SURVEYS SUCH AS SHRM, NFRE AND NMA ARE REVIEWED.

MOST RECENT COMPENSATION DOCUMENTATION:
COMPENSATION FOR ALL EXECUTIVE POSITIONS WAS REVIEWED AND DOCUMENTED FOR 2010. ADJUSTMENTS WERE MADE TO 2 POSITIONS FOR WHICH DUTIES HAVE BEEN EXPANDED

PART VI SECTION B LINE 12C
ANY PURCHASE OF SERVICES OR GOODS OVER $5000 REQUIRES BIDS FROM THREE VENDORS. EVERY TUESDAY, THE CEO, MANAGING DIRECTOR AND ACCOUNTING MANAGER MEET TO REVIEW AND APPROVE ALL PURCHASE ORDERS. EVERY WEDNESDAY, THE CEO, MANAGING DIRECTOR, ACCOUNTING MANAGER AND TWO DIRECTORS AUTHORIZED TO SIGN CHECKS MEET TO REVIEW AND DISCUSS INVOICES.

PRINCIPAL OFFICER NAME AND ADDRESS

ATTACHMENT 1: FORM 990 PAGE 1, LINE F

OPEN TO PUBLIC INSPECTION	For calendar year 2009, or tax period beginning , and ending

Name of Organization	Employer Identification Number
MILLION DOLLAR ROUND TABLE	36-2138427

990, Page 1, Line F

Principal officer name ..... JOHN J PRAST

or

Business Name:

Street Address ..... 325 WEST TOUHY AVENUE

U.S. Address:

Zip code 60068-4265 City PARK RIDGE State IL

or

Foreign Address

City .....

Province or State .....

Country .....

Postal code .....

PRIMARY EXEMPT PURPOSE

ATTACHMENT 2: FORM 990 PAGE 1, PART I

OPEN TO PUBLIC INSPECTION	For calendar year 2009 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
MILLION DOLLAR ROUND TABLE	36-2138427

Primary Purpose

THE MISSION OF THE MILLION DOLLAR ROUND TABLE IS TO BE A VALUED MEMBER DRIVEN INTERNATIONAL NETWORK OF LEADING INSURANCE AND INVESTMENT FINANCIAL SERVICE PROFESSIONALS WHO SERVE THEIR CLIENTS BY EXEMPLARY PERFORMANCE AND THE HIGHEST STANDARD OF ETHICS, KNOWLEDGE, SERVICE AND PRODUCTIVITY.

PRIMARY EXEMPT PURPOSE

ATTACHMENT 3: FORM 990 PAGE 2, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2009 or tax period beginning , and ending .

Name of Organization	Employer Identification Number
MILLION DOLLAR ROUND TABLE	36-2138427

Primary Purpose

THE MISSION OF THE MILLION DOLLAR ROUND TABLE IS TO BE A VALUED MEMBER DRIVEN INTERNATIONAL NETWORK OF LEADING INSURANCE AND INVESTMENT FINANCIAL SERVICE PROFESSIONALS WHO SERVE THEIR CLIENTS BY EXEMPLARY PERFORMANCE AND THE HIGHEST STANDARD OF ETHICS, KNOWLEDGE, SERVICE AND PRODUCTIVITY.

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 4: FORM 990 PAGE 2, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2009, or tax period beginning , and ending	
Name of Organization		**Employer Identification Number**
MILLION DOLLAR ROUND TABLE		36-2138427

Part III - Statement of Program Service Accomplishments

Code: 611,430 Expenses: 4,204,261 including Grants of. Revenue 3,299,439

Exempt Purpose Achievements

MILLION DOLLAR ROUND TABLE ANNUAL MEETING. 3619 MEMBERS ATTENDED A 4 DAY MEETING OF EDUCATIONAL AND MOTIVATIONAL PROGRAMMING TO BENEFIT THE CAREERS OF INSURANCE AND FINANCIAL SERVICE PROFESSIONALS.

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 4: FORM 990 PAGE 2, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2009, or tax period beginning , and ending	
Name of Organization		**Employer Identification Number**
MILLION DOLLAR ROUND TABLE		36-2138427

Part III - Statement of Program Service Accomplishments

Code: 611,430 Expenses: 1,137,114 including Grants of: Revenue: 1,250,863

Exempt Purpose Achievements

MILLION DOLLAR ROUND TABLE TOP OF THE TABLE MEETING. 201 MEMBERS ATTENDED A 4 DAY MEETING OF EDUCATIONAL PROGRAMMING TO LEARN THE LATEST IN INDUSTRY SALES TECHNIQUES.

PART III - STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 4: FORM 990 PAGE 2, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2009, or tax period beginning , and ending .

Name of Organization	Employer Identification Number
MILLION DOLLAR ROUND TABLE	36-2138427

Part III - Statement of Program Service Accomplishments

Code: 511,120 Expenses: 515,902 including Grants of: Revenue.

Exempt Purpose Achievements

PUBLISHES "ROUND THE TABLE" MAGAZINE BIMONTHLY AS AN EDUCATIONAL AND INFORMATIONAL SERVICE FOR USE OF ITS MEMBERS. CIRCULATION IS APPROXIMATELY 34,000 PER ISSUE, ALMOST EXCLUSIVELY TO MEMBERS. THE MAGAZINE CONTAINS NO PAID ADVERTISING AND IS NOT SOLD TO OUTSIDE SUBSCRIBERS. COST OF SUBSCRIPTION IS INCLUDED IN MEMBERSHIP.

BOOKS ARE IN CARE OF

ATTACHMENT 5: FORM 990 PAGE 6, PART VI, SECTION C, LINE 20

OPEN TO PUBLIC INSPECTION | For calendar year 2009 or tax period beginning , and ending

Name of Organization	Employer Identification Number
MILLION DOLLAR ROUND TABLE	36-2138427

Part VI - Line 91a

Individual Name or Business Name: GERIE SMRCINA

Street Address: 325 W. TOUHY AVE.

U.S. Address:

Zip code 60068-4265 City PARK RIDGE State IL

or

Foreign Address

City

Province or State

Country

Postal code

Phone Number (847)993-4924

Fax Number

FIVE HIGHEST COMPENSATED INDEPENDENT CONTRACTORS

ATTACHMENT 6: FORM 990 PAGE 8, PART VII

For calendar year 2009 or tax period beginning , and ending

Name of Organization	Employer Identification Number
MILLION DOLLAR ROUND TABLE	36-2138427

Part VI Five Highest Compensated Independent Contractors

(a) Name and address of each independent contractor paid more than $100,000	(b) Type of service	(c) Compensation
WILLIAMS GERARD PRODUCTION CHICAGO, IL	MEETINGS PRODUCTION	1,163,876
PRINCIPAL FINANCIAL DES MOINES, IA	RETIREMENT PLAN	1,139,865
GIBBS & SOELL INC NEW YORK, NY	PUBLIC RELATIONS	697,852
BLUE CROSS BLUE SHIELD CHICAGO, IL	HEALTH INSURANCE	620,749
HYATT HOTELS CHICAGO, IL	LODGING & MEETINGS	603,940

SCHEDULE OF DEPRECIATION AND DEPLETION

ATTACHMENT 7: FORM 990 PAGE 10, PART IX, LINE 22

OPEN TO PUBLIC INSPECTION

For Calendar year 2009, or tax year period beginning and ending

Name of Organization
MILLION DOLLAR ROUND TABLE

Employer Identification Number
36-2138427

Description of Property	Date Acquired	Cost or Other Basis	Prior Year Depreciation	Method of Computation	Rate (%) or Life (Years)	Depreciation This Year
LAND		265,000				
BUILDINGS		3,729,978	2,367,302			124,326
EQUIPMENT		5,798,415	5,317,364			273,739
OTHER		29,317	29,317			
	Total	9,822,710	7,713,983			398,065

SCHEDULE OF OTHER EXPENSES

ATTACHMENT 8: FORM 990 PAGE 10, LINE 24 - OTHER EXPENSES

OPEN TO PUBLIC INSPECTION | For calendar year 2009 or tax period beginning , and ending .

Name of Organization
MILLION DOLLAR ROUND TABLE

Employer Identification Number
36-2138427

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
REPAIR AND MAINTENANCE	37,818			
Total	37,818			

2009 NOTES

MILLION DOLLAR ROUND TABLE
36-2138427

NOTE #1

WHILE THE TAXPAYER HAS ASSETS IN EXCESS OF $10 MILLION, THEY FILE FEWER THAN 250 TAX FORMS, THUS, PRECLUDING THE TAXPAYER FROM THE REQUIREMENT OF FILING THE FORM 990 ELECTRONICALLY