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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

A F	or th	e 2009	caler		x year beginning			09, and				, 20		_
Вс	heck if ap	pilcable	Please	C Name of organiz	ation ASSOCIAT	ION OF THE	UNITE	STAT	ES ARMY	D Employ	er Identific	ation numb	er	
	Addre	58	use IRS label or	Doing Business A	\s					53-0	193361	l		
	7	change	print or	Number and stre	eet (or PO box if mail	is not delivered to str	eet address)		Room/suite	E Telepho	one number			_
\vdash	Initial	-	type, See	2425 WILSO	ON BLVD				1	(703)	841-4	300		
-	4		Specific		te or country, and ZIP	+ 4								_
-	Termi Amen		instruc- tions.	ARLINGTON	• •	•				G Gross r	meainte ¢	13 8	307,358	Ω
- }-	return	١ إ				CODDON D (TIT T T 777	NI		<u> </u>	a group return	بنسم -		_
L_	Applic pendi	ng			of principal officer:	JORDON R. S	OUTTIVE	IN		affiliate	s?		Yes X	
			SAME	AS LINE C							l affiliates incli	ـــا		No
		empt sta		X 501(c) (3	(insert no)	4947(a)(1) or	527			If "No	" attach a list	(see instruction	ons)	
J	Websi	te: 🕨 🖢	WWW.	AUSA.ORG						_ `	exemption nu			
K	Form o	of organi	zation	X Corporation	Trust Asso	ciation Other	<u> </u>	L	Year of format	ion 1950	M State	of legal dom	icile V	<u>A</u>
Pa	rt I	Sun	nmary	1										
		Briefly	descri	he the organization	on's mission or mos	et significant activiti								_
	'	AUSA	IS	A PRIVATE.	NON-PROFIT	EDUCATION	AL ORG	ANIZA	TION COM	MITTED	TO			
2					S ARMYAC									
Пã	i				LY MEMBERS.		.=====			·			·	
Governance	•								45 050/					
ိ	1				organization discor								28	
త					the governing body								27	
ţ	ı				members of the go	overning body (Par	t VI, line 1t	"		 .			101	
Activities				of employees (Pa							5			_
Ąċ	6	Total n	number	of volunteers (es	timate if necessary)					. <i></i>	. 6		1,071	
ľ	7a	Total g	ross u	nrelated business	revenue from Part \	VIII, column (C), lir	ie 12				7a		329,159	_
	b	Net un	related	d business taxable	e income from Form	990-T, line 34 .	<u></u>			· · · · ·	7b	4	170,734	<u>4</u> .
				·						Prior Y	ear	Curre	nt Year	
•	8	Contril	butions	and grants (Part	VIII_line 1h)					1,14/	,237.	1,6	571,07	1.
Revenue	9	Progra	m serv	nce revenue (Part	VIII, line[20]					31,615	,258.	32,6	573,945	5 .
Š	10	Invest	ment ir	come (Part VIII (olumn A tines 3	1772				-1,808	,567.	- 4	154,328	<u>8</u> .
ž					ng-(A), lines 5, 6d, 8		 a)				,193.		66,882	_
	12	Total	OVODU	add lines 9 the	o Bah 11MhAù steigus	Bert VIII called	^ν /		• • • •	32,890			357,570	
							(A), IIIC 12	., <u></u>	· · · · - 		,505.		258,018	
					id (Part IX, column (· · · · ⊢		0.			0 .
	14	Benefi	ts paid	to or for member	s (Partix solumn employee benefits	A), line 4)				0 200	,941.		788,323	
es	15	Salarıe	es, othe	er compensation\-	employee benefits (Hart for dolumn (A), lines 5-1	"		9,209		- ·		_
Expenses					Part IX, column (A),					*	0.			<u>o</u> .
Ğ.	b	Total f	undrai	sing expenses, Pa	rt IX, column (D), lir	ne 25) ▶ 1 <u>,</u> 3	22,187	<u>:</u>					<u> </u>	
ш	17	Other	expens	es (Part IX, colun	nn (A), lines 11a-11	d, 11f-24f)				22,329			56,435	_
	18	Total e	expense	es Add lines 13-	17 (must equal Part	IX, column (A), line	e 25)			32,607			002,776	
	19	Reven	ue less	s expenses Subtr	act line 18 from line	12		<u></u>		282	,540.	1,8	354,794	<u>4.</u>
58									E	Beginning	of Year	End	of Year	
ets or	20	Total a	issets (Part X, line 16)						49,003	,739.	59,2	232,670	Ō.
Ass Bal				s (Part X, line 26)						15,836	,665.	14,0	062,720	ō.
E E					Subtract line 21 from	line 20				33,167	,074.	45,	69,950	ō.
Đ	rt II		_	e Block					<u>· · · · · · · · · · · · · · · · · · · </u>					_
	ш											- best of -	ka audad	-
		and b	penaiti elief, it	es of perjury, I dec is true, correct, an	lare that I have exan d complete Declarat	nined this return, in- ion of preparer (oth	er than offi	ompanying cer) is bas	sed on all info	rmation of	which prep	arer has ar	y knowleds	ge
_		١.	1	men H P	hans -							15,20		
	ign	•	Sugnatu	re of officer						Date	, , ,	2,20		_
п	ere	" `	- 0	_		0 0 0 0 0 0 0	حر	0 40-		 1	•			
		 • .		mas G. RH	AME V	P FINAM	e 010	TUR	INSIER	1140				_
			Type or	print name and title										_
		Prepa	rer's	DA	> _		Date		Check if self-		∣ Preparer's I (see instru	identifying i ctions)	umber	
Paid		signa	ture	I Well			5-1	3-201	O employed		,			_
-	parer's			or yours ARGY,	WILTSE & F	ROBINSON, F	.c.			EIN	>			_
Use	Only		employe s, and 2		EENSBORO DRIVE,	7TH FLOOR MCLEAN	I, VA 2210	12		Phone no	▶ 7	03-893	-0600	_
May	the II				preparer shown abo							X Ye		No
_					ion Act Notice, see								990 (200	_

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.*

complete ls the or Did the candidat Section Schedule	ganization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," o Schedule A	1 2 3 4 5	X X X	х
complete ls the or Did the candidat Section Schedule	ganization required to complete Schedule B, Schedule of Contributors?	3 4 5	Х	х
2 Is the or 3 Did the candidat 4 Section Schedule	ganization required to complete Schedule B, Schedule of Contributors?	3 4 5	Х	х
3 Did the candidat 4 Section Schedule	organization engage in direct or indirect political campaign activities on behalf of or in opposition to see for public office? If "Yes," complete Schedule C, Part I	3 4 5		х
candidat 4 Section Schedule	es for public office? If "Yes," complete Schedule C, Part I	5	х	
4 Section Schedule	501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete of C, Part II	5	х	
Schedule	o C, Part II	5	х	
	s 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	Х	
5 Sections	nd reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
	nd reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III			
	to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," schedule D, Part I	6		
6 Did the	to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," schedule D, Part I	6		
	e Schedule D, Part I	6		
_	organization receive or hold a conservation easement, including easements to preserve open space,		1	Х
•		1		
		7		Х
	organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	Schedule D, Part III	8		X
•	organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	 	_	
	ovide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			1
	Schedule D, Part N	9		x
•	organization, directly or through a related organization, hold assets in term, permanent, or	-		
	dowments? If" Yes," complete Schedule D, Part V	10	x	1
•	ganization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	10		
	X, or X as applicable	11	x	1
	organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete</i>	*** Top : 12	23222	Reside
			\hat{x}_{i},\hat{y}_{i}	3.2
	D. Part VI organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more	10		1004
	-		4	
	al assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	200	e de la	
	organization report an amount for investments-program related in Part X, line 13 that is 5% or more	145%	15	3.
	al assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		i sa Ka	
	organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1		
•	In Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		2	
	rganization's separate or consolidated financial statements for the tax year include a footnote that addresses	11.00		
•	ization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.	A sili		
	organization obtain separate, independent audited financial statements for the tax year? If "Yes,"	30974	Mass	#3F.
•	Schedule D, Parts XI, XII, and XIII	12	X 2~2 7-30 5	774.50.5.50
	organization included in consolidated, independent audited financial statement for the tax year?			
•	ompleting Schedule D, Parts XI, XII, and XIII is optional			
	ganization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
	organization maintain an office, employees, or agents outside of the United States?	14a		X
	organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			1
	, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	X	
	organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
_	tion or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
	organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	luals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
	organization report a total of more than \$15,000 of expenses for professional fundraising services			l
on Part I	K, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18 Did the	organization report more than \$15,000 total of fundraising event gross income and contributions on			
	lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19 Did the	organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	complete Schedule G, Part III	19		Х
	organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х

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	i		
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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	Х	
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	Х	
24 a	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 question 25	24a		Х
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		
	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		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
U	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		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26	х	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
21	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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	39.75		14 F176
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)	1 1 1 1 1	, x	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
U	Schedule L. Part N	28b		Х
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 N	28c		Х
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			
30	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
J 1	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
J2	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
JJ	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
5 4	III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
33	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
50	organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
J 1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and	<u> </u>		
50	19? Note. All Form 990 filers are required to complete Schedule O	38	х	
	TO CHOLOT AND COME TO CONTROL OF CONTROL CONTR	———		

Par	t 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 82	.		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	•		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			<u>.</u>
	gaming (gambling) winnings to prize winners?	1 c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	38		. ;
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 101			1
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	1,337		1 6
	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	3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			l
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			l
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶		ĝ, · , j	
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
	and Financial Accounts.	*		<u>√84°.</u>
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	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 question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			l
	Prohibited Tax Shelter Transaction?	5c		ļ
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	1		ĺ
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	188
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<u> </u>	X
	and services provided to the payor?	7a		<u> </u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			х
	required to file Form 8282?	7 c		1
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7e		X
	benefit contract?	7f		X
١ ~	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	х	
9 h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	. 3		
"	required?	7 h	х	l
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	(79) (4	, ,	
·	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		
9	Sponsoring organizations maintaining donor advised funds.	187	.,	·
_	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	7.		3.
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			l
11	Section 501(c)(12) organizations. Enter:			1
	Gross income from members or shareholders	ί <u>.</u> .		* * 65**
	Gross income from other sources (Do not net amounts due or paid to other sources against			- 33-
_	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			دريًّة - د

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.

Sect	tion A. Governing Body and Management			
		<u> जिश्व</u>	Yes	No
а	Enter the number of voting members of the governing body	n **)		
1b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	355		Jegg
	any other officer, director, trustee, or key employee?	2		<u>x</u>
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		<u>X</u>
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	Х	
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	1000 A 1000 A 1000 A	100 m	
_	the year by the following:		O'LL DESC	
а	The governing body?	8a	Х	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
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		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Х	
	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	Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11	Х	
11A		- 1,885, - 1,885, - 1,885,	\$13 .559	11
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
-	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
•	describe in Schedule O how this is done	12c	Χ	
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		900	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	\$	4 . 4	
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
. va	with a taxable entity during the year?	16a		X
h	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	- 40'-05" (1814)		£17,32,30
D	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?	1	~~ `	
Sect	ion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed ▶_CA, IN, VA,			
17	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)	s only	. – – – .	
18		o orny,	'	
	available for public inspection. Indicate how you make these available. Check all that apply. Own website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	iest		
	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 HELEN HEGYI, 2425 WILSON BLVD, ARLINGTON, VA 22201	ne		
	organization 703-907-2649	- -		

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 con	npensate ar	y cur	rent	off	icer	, direc	tor,	or trustee		
(A)	(B)			(C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee P or director	c Institutional trustee	Officer	Mey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
GORDON R. SULLIVAN										
PRESIDENT	38.00	Х		Х				470,000.	0	48,137.
VALERIE L. BALDWIN										
TRUSTEE	1.00	X.	! 		<u> </u>			0.	0	0.
NICHOLAS D. CHABRAJA										
TRUSTEE	1.00	X						0.	0	0.
HON RUDY DELEON										
TRUSTEE	1.00	Х						0.	0	0.
MG PATRICIA HICKERSON, USA RET]					1				
TRUSTEE	1.00	Х						0.	0.	0.
LINDA HUDSON		İ								
TRUSTEE	1.00	Х				ļ		0.	0 :	0.
LTG LARRY JORDAN, USA RET										
TRUSTEE	1.00	Х						0.	0	0.
CHRISTOPHER E. KUBASIK						1				
TRUSTEE	1.00	Х	<u> </u>					0.	0	0.
CSM WILLIAM MIXON, USA RET		1	Ì							
TRUSTEE	1.00	Х						0.	0.	0.
DENNIS A. MUILENBURG										
TRUSTEE	1.00	Х						0.	0.	0.
GEN DENNIS REIMER, USA RET				l				_	_	_
TRUSTEE	1.00	Х			_			0.	0	0.
DANIEL L. SMITH	1									_
TRUSTEE	1.00	Х						0.	0.	0.
GEN CARL VUONO, USA RET	1								_	_
TRUSTEE	1.00	Х			<u> </u>			0.	0.	0.
THOMAS W. RABAUT									_	_
DEPUTY CHAIRMAN AND CEO	1.00	Х			<u> </u>	ļļ		0.	0	0.
LTG JULIUS BECTON, JR, USA RET	1				1					_
VICE CHAIRMAN	1.00	Х		<u> </u>	<u> </u>]		0.	0	<u> </u>
SMA ROBERT HALL, USA RET									_ [^
VICE CHAIRMAN	1.00	Х				<u></u>		0.	0:	0.

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	plo	oye	es,	and I	lig	hest Compensat	ed Employe	es (c	ontınued)
(A)	(B)	1		•	C)			(D)	(E)		(F)
Name and title	Average hours per week	Posi or direc			Key employee	that ap Highest employ	Former	Reportable compensation from the	Reportable compensation from relate organization	on d	Estimated amount of other compensation
		Individual trustee or director	Institutional trustee		ployee	Highest compensated employee		organization (W-2/1099-MISC)	(W-2/1099-M		from the organization and related organizations
MG ANSEL STROUD, JR, LAARNG RET		1	\vdash	-	1	-	 		 		
VICE CHAIRMAN	1.00	x	Ì		İ		İ	0.		0.	0
LTG DAVID OHLE, USA RET		\vdash	 	T		-					
VICE CHAIRMAN	1.00	х						0.		ο.	0
GEORGE T. SINGLEY, III											
VICE CHAIRMAN	1.00	Х				j		0.		ο.	0
NORMAN D. HARKINS			\vdash	 							
TRUSTEE	1.00	Х				1		0.		0.	0
RONALD W. JOHNSON			Т		i -						
TRUSTEE	1.00	Х			l			0.		0.	0
COL JOHN ROGERS, USA RET			1		l						
TRUSTEE	1.00	X			١			0.		0.	0
LTG DONALD JONES, USA RET											
TRUSTEE	1.00	x			ŀ			0.		0.	0
COL ROBERT ULIN, USA RET		ļ									
TRUSTEE	1.00	Х		İ				0.		0.	0
COL GEORGE LANNING, USA RET			Т								
TRUSTEE	1.00	Х						0.		0.	0
COL DAVID BOOZE, USA RET				T							
TRUSTEE	1.00	Х						0.	_	0.	0
LTC LAWRENCE BETHEL, II, USA RET			П	1							
TRUSTEE	1.00	Х				l		0.		0.	0
COL DAVID R. ELLIS, USA RET											
TRUSTEE	1.00	Х	<u> </u>			<u> </u>		0.		0.	0
THOMAS G. RHAME											
VP, FINANCE & ADMINISTRATION	38.00	<u> </u>	<u> </u>	X		<u> </u>		221,000.		0.	15,600
1b Total . CONTINUED AT SCHEDULE J-			<u></u>			<u> </u>	<u> </u>	2,071,338		0.	217,641.
2 Total number of individuals (including but not reportable compensation from the organization)				ed a	bov	e) wh	o re	eceived more than	\$100,000 in		
3 Did the organization list any former office	cer, direct	or or	tri	uste	e,	key e	emp	oloyee, or highes	t compensat	ed	Yes No
employee on line 1a? If "Yes," complete Sched	ule J for su	ch ınd	lıvıd	lual							3 X
4 For any individual listed on line 1a, is the the organization and related organizations	greater th	nan \$	150	0,00	002	If "Y	'es,"	' complete Sched	lule J for su	ch	A X
indıvidual											4 X
5 Did any person listed on line 1a receiv services rendered to the organization? If "Yes,"	e or accr <i>'complete</i>	ue c Sched	omp fule	pens J fo	r su	on fro och pe	om <u>rsor</u>	any unrelated c	organization f	or •	5 X
Section B. Independent Contractors									·		
Complete this table for your five highest compensation from the organization	compensa	ted ır	ndep	pen	den	t con	trac	tors that receive	d more than	\$10 ——	0,000 of
(A) Name and business add	ress							(B) Description of se	rviçes	C	(C) Compensation
ATTACHMENT 3							\top				
TIT TACIFIENT 5						_	+				
							\top				
		-					1				
					_		1	, , , , , , , , , , , , , , , , , , , 			
2 Total number of independent contractors (iii	ncluding b	ut no	t lır	nite	d to	thos	se I	isted above) who	received		-

4

more than \$100,000 in compensation from the organization ▶

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art	VIII	Statement of Reve	nue			53-0193361		
-		-			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 51
23	1a	Federated campaigns	1a			,		
Ĕ	b	Membership dues	1b			rivers	, ·	X .
Ĕ	c	Fundraising events	1c				, 4, ,	1
ě	d	Related organizations	<u>1d</u>	· · · · · · · · · · · · · · · · · · ·		''		<u>'</u>
Ē	e	Government grants (contribu	1 . 1		,	,	1	
5	f	All other contributions, gifts, gran	ts,					
동		and similar amounts not included	labove . 1f	1,671,071.	·	.5' k	-22.	1200
and other similar amounts	g	Noncash contributions included i	·			83		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	h	Total. Add lines 1a-1f	<u> </u>		1,671,071.	F 7	1,145	3 7 6
ğ				Business Code	<u>\$</u> .			11 ,
S	2a	ADVERTISING		541800	3,387,730.	58,571.	3,329,159.	ļ
9	b	SYMPOSIA 6 OTHER MEETINGS		900099	12,662,126.	12,662,126.		
울	C	ANNUAL MEETING		900099	10,511,249	10,511,249.		ļ
စ္က	d	MEMBERSHIP DUES		900099	5,982,840	5,982,840		
Program Service Revenue	е	ALLOWANCE TO REGIONS		900099	130,000	130,000.		
<u>6</u>	f	All other program service rev	enue	L		1 24 No. 1 West 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	477 (S) + 12 May 1 may 7	7 1 20 1 20 4
<u></u>	9	Total. Add lines 2a-2f	<u> </u>	<u> ▶</u>	32,673,945.			A STATE OF THE STA
	3	Investment income (includin	g dividends, inter	est, and				
		other similar amounts)			719,007.			719,00
	4	Income from investment of t	ax-exempt bond	proceeds 🕨	0.			
ļ	5	Royalties · · · · · · ·		<u> </u>	200,521.	97177 2 7722		200,52
			(i) Real	(ii) Personal				
	6a	Gross Rents	1,467,357	<u> </u>	· • • • • • • • • • • • • • • • • • • •		**	3
	b	Less: rental expenses	956,041	·		, ,	• ,	,
	C	Rental income or (loss)	511,316	<u> </u>				
i	a	Net rental income or (loss).		.	511,316.	1 V	M. tolk ments	511,316
	7 a	Gross amount from sales of	(ı) Securities	(ii) Other				
		assets other than inventory	4,835,767			ار ۱۹		T.
	b	Less, cost or other basis				'Y	1	
		and sales expenses	6,009,102		3 (3) ×	3 1 3 3		
	C	Gain or (loss)	-1,173,335	<u>.</u>				
	d	Net gain or (loss)	• • • • • • • •	. <u>, ▶</u>	-1,173,335.	(T) , ;-	¥-5-1	-1,173,33
9	8 a	Gross income from f	undraisıng		1	13.50	34 Cm 3	
e l		events (not including \$				1	-	
<u>§</u>		of contributions reported on	line 1c).		18		F CAS	
Other Revenue		See Part IV, line 18		1	Market 1			
<u> </u>	þ	Less: direct expenses				1.33		7
5	С	Net income or (loss) from fur	ndraising events .	· <u>· · · · · · · · · · · · · · · · · · </u>	772,021.	772,021.	, , , , , , , , , , , , , , , , , , , ,	
	9 a	Gross income from gaming a			, ,			1
		See Part IV, line 19		1		Line in	in history	
	b	Less direct expenses			0.		19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 , ,, 345 da., 5
	C	Net income or (loss) from ga		. <u> ▶</u>	l			
1	l0a	Gross sales of inventor returns and allowances		43,391	•			
	b	Less: cost of goods sold		I				<u></u>
L		Net income or (loss) from sal	les of inventory		9,147.	9,147.		<u> </u>
		Miscellaneous Reven	ue	Business Code		77		,
1	1a	OTHER		900099	473,877.	473,877.		
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d			473,877.	· f		
- 1		· · · -			35,857,570.	30,599,831.	3,329,159.	257,509

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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	lete column (A) but ar (A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
4	Grants and other assistance to governments and	 	expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21	1,026,368.	1,026,368.		
2	Grants and other assistance to individuals in		, , , , , , , , , , , , , , , , , , , ,	ika aimeret z	Book and the state of the state of the
-	the U.S. See Part IV, line 22	231,650.	231,650.		
3	Grants and other assistance to governments,		· · · · · · · · · · · · · · · · · · ·	में हार से देव रहा है।	
	organizations, and individuals outside the	}			Karamana ta anini
	U.S. See Part IV, lines 15 and 16	0.		The state of the s	
4	Benefits paid to or for members	0.	0.		
5	Compensation of current officers, directors,				
	trustees, and key employees	1,556,148.	484,672.	1,071,476.	0.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)		0.	0.	0.
7	Other salaries and wages	6,186,772.	5,438,583.	341,406.	406,783.
8	Pension plan contributions (include section 401(k)	1	_		_
	and section 403(b) employer contributions)		0.	414,333.	
9	Other employee benefits			0.	0.
10	Payroll taxes	503,629.	0.	503,629.	0.
11	Fees for services (non-employees)		^	_	1
	Management	0.	0.	0.	0.
	Legal	68,575.	0.	68,575.	
	Accounting	122,734.	0.	122,734.	0.
	Lobbying	0.			0.
	Professional fundraising services See Part IV, line 17	151,722.	75,861.	75,861.	0.
	Investment management fees	361,880.	251,266.	38,015.	72,599.
	Other	643,619.			
12	Advertising and promotion	1 217 040			
13	Office expenses	1 470 626	1,074,578.	299,383.	
14 15	Information technology		0.	0.	0.
16	Occupancy	637,086.	480,082.	108,370.	
17	Travel	810,552.	671,714.	123,611.	15,227.
18	Payments of travel or entertainment expenses	<u> </u>	 	 	
	for any federal, state, or local public officials	0.	0.	0.	0.
19	Conferences, conventions, and meetings	9,341,469.	8,765,783.	575,686.	0.
20	Interest	5,500.	0.	5,500.	0.
21	Payments to affiliates	2,691,907.	2,691,907.	0.	0.
22	Depreciation, depletion, and amortization	238,999.	192,480.	27,559.	18,960.
23	Insurance	200,539.	107,987.	92,552.	0.
24	Other expenses. Itemize expenses not		医生物性性 医二种		
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)	\$ P\\$!			3 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_	PUBLICATION COSTS	1,392,928.	1,265,218.	111,384.	16,326.
_	CREDIT CARD FEES	370,871.	326,308.	1,928.	42,635.
_	DUES & SUBSCRIPTIONS	1,266,791.	71,603.	1,194,258.	930.
	TAXES & LICENSES	346,570.	281,115.	65,455.	0.
•	MISCELLANEOUS	1,108,015.	457,285.	650,442.	288.
	All other expenses	34 000 776	26 462 400	0.	1 200 100
	Total functional expenses. Add lines 1 through 24f	34,002,776.	26,463,498.	6,217,091.	1,322,187.
	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				

2 Savings and temporary cash investments 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part II of Schedule D b Less: accumulated depreciation 10b less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - the recurrities. See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest complete Part IV of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part IV of Schedule D 26 Total Itabilities. Add lines 17 through 25 (marting) and disqualified persons Complete Part IV of Schedule D 26 Total Itabilities. Add lines 17 through 25 (marting) and disqualified persons Complete Part IV of Schedule D 27 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 27 Payables to current and former officers directors trustees, level employees, highest compensated employees and disqualified persons Complete Part IV of Schedule D 27 Organizations	Par	t X	Balance Sheet			
2 Savings and temporary cash investments 3 Piedges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(8). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part II of Schedule D b Less: accumulated depreciation 10b less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - the recurrities. See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets 15 Other assets See Part IV, line 11 15 Other assets See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest complete Part IV of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part IV of Schedule D 26 Total Itabilities. Add lines 17 through 25 (marting) and disqualified persons Complete Part IV of Schedule D 26 Total Itabilities. Add lines 17 through 25 (marting) and disqualified persons Complete Part IV of Schedule D 27 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 27 Payables to current and former officers directors trustees, level employees, highest compensated employees and disqualified persons Complete Part IV of Schedule D 27 Organizations	•					
2 Savings and temporary cash investments		1	Cash - non-interest-bearing	4,925,832.	1	7,971,479.
3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(n)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepald expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D b Less accumulated depreciation 11 Investments - publicy traded securities. 12 Investments - program-related See Part IV, line 11 13 investments - program-related See Part IV, line 11 14 Intample assets 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 10 Tax-exempt bond labilities 20 Tax-exempt bond labilities 21 Exercise or custodial account lability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part X of Schedule D 21 Tax-exempt bond labilities 22 Tax-exempt bond labilities 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Total liabilities. Add lines 17 through 25 28 Temporarily restricted net assets 29 Organizations that Gollow SFAS 117, check here band complete lines 27 through 29, and lines 33 and 34. 27 Total liabilities. Add lines 10 through 34. 28 Tedinal stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total retained	1	2	Savings and temporary cash investments	4,659,750.	2	3,747,744.
A Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule I. Receivables from other disqualified persons (as defined under section 4958(f)(11) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule I. Notes and loans receivable, net Notes and loans receivable, net Notes and loans receivable, net Notes and belief or sale or use or use or sale or use	- 1	3			3	
Seceivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		4		2,653,472.	4	2,989,098.
Schedule L	i	5		Strategy of the strategy of th	, ° . ,	
Schedule L. 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. 7 7 Notes and loans receivable, net			employees, and highest compensated employees. Complete Part II of	540,000.		600,000
6 Receivables from other disqualified persons (as defined under section 4958(c)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment. cost or the part of the basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 11 Investments - publicly traded secunties. 12 Investments - other securities. See Part IV, line 11. 13 Investments - other securities. See Part IV, line 11. 14 Intangble assets. 15 Other assets See Part IV, line 11. 16 Total assets See Part IV, line 11. 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Escrow or custodial account liability. Complete Part IV of Schedule D persons Complete Part II of Schedule D persons Complete Part II of Schedule D persons Complete Part II of Schedule D persons Complete Part IV of Schedule D persons Complete P	- 1		Schedule L		5	
Part It of Schedule L 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. 11 Investments - publicity traded securities. 12 Investments - other securities. See Part IV, line 11. 13 Investments - program-related See Part IV, line 11. 14 Intangible assets. 15 Other assets See Part IV, line 11. 16 Total assets. Add lines 1 through 15 (must equal line 34). 17 Accounts payable and accrued expenses. 18 Grants payable. 19 Deferred revenue. 20 Tax-exempt bond liabilities. 21 Excrow or custodial account liability. Complete Part IV of Schedule D 21 Excrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part X of Schedule D 21 Excrow or custodial account liability. Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part IV of Schedule D 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities. Add lines 17 through 25. 26 Total liabilities. Add lines 17 through 25. 27 Organizations that follow SFAS 117, check here 28 Temporarily restricted net assets 29 Permanently restricted net assets 30 Capital stock or trust principal, or current funds 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplu		6	Receivables from other disqualified persons (as defined under section			
Part I of Schedule L	-		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete		*******	
8 Inventories for sale or use 220,030, 8 204,77, 9 Prepaid expenses and deferred charges 2,313,503, 9 1,975,41 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D b Less: accumulated depreciation. D 10b 8,380,149, 9,884,096, 10c 9,903,01 11 Investments - publicly traded securities. 23,807,056, 11 31,841,01 12 Investments - program-related See Part IV, line 11 13 Investments - program-related See Part IV, line 11 14 Intangible assets.			Part II of Schedule L		6	
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	a		Unrestricted net assets			
	B			344,059.		343,393.
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104 Tatal habilities and not account (6 and belongs 1 40 003 730 lead 50 222 6"	8	33	Total net assets or fund balances		33	45,169,950.
		34	Total liabilities and net assets/fund balances	49,003,739.	34	59, 232, 670.

Form **990** (2009)

Page	1	2

Form 990 (2009)

Pa	Financial Statements and Reporting			
-			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	: 7.3	ing.	1.
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		1.2	
	Schedule O.		2.22	200
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
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?	2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in	•	1 1/2	*- 5°,3
	Schedule O.		, ~ ° , ~ '	
ď	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were	1,1	3 458F	16/5·3°2
	issued on a consolidated basis, separate basis, or both		, 35.35. 1.35.4	
	X Separate basis Consolidated basis Both consolidated and separate basis		icala Com	11.8343-1
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		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	1		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		Form	990	(2009

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number Name of the organization 53-0193361 ASSOCIATION OF THE UNITED STATES ARMY Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the 4 hospital's name, city, and state. An organization operated for the benefit of a college or university owned or operated by a governmental unit described in 5 section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c | Type III - Functionally integrated d l Type III - Other Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations, described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type II, Type III, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No 11g(i) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). h (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col. support (I) organized in the above or IRC section governing document? col. (i) of your US? (see instructions)) support? Yes No Yes No Yes No ۲, તીવદી_વા (ત્રીક્રક્ષ T,464 · • 9.%

Total

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (d) 2008 (a) 2005 (b) 2006 (c) 2007 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") . . . Tax revenues levied for the organization's benefit and either paid to or expended on The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3..... The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)..... Public support. Subtract line 5 from line 4 Section B. Total Support (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 7 Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar Net income from unrelated business activities, whether or not the business is 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 . . 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage <u>%</u> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) %_ 16a 331/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check b 331/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

<u>Sec</u>	tion A. Public Support						
C	ılendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include			j			
	any "unusual grants.")	684,923	694,855.	912,331.	1,147,237.	1,671,071.	5,110,417.
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities			-			
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	25,406,779.	34,357,068.	28,351,453.	30,085,565.	31,584,476.	149,785,341.
3	Gross receipts from activities that are not an			-			
•	unrelated trade or business under section 513						
4	Tax revenues levied for the organization's					-	
4							
	benefit and either paid to or expended on				i		
_	its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the				:		
	organization without charge						
6	Total. Add lines 1 through 5	26,091,702.	35,051,923.	29,263,784.	31,232,802	33,255,547.	154,895,758
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13						
	for the year	664,588.					664,588
c	Add lines 7a and 7b	664,588.					664,588.
8	Public support (Subtract line 7c from		and Lin				
	line 6.)				THE RESERVE OF THE PARTY OF THE		154,231,170.
Sec	tion B. Total Support						-
	alendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Totai
9	Amounts from line 6,	26,091,702.	35,051,923.	29,263,784.	31,232,802.	33,255,547.	154,895,758.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	1 270 057	6 167 050	2,791,352.	2,212,624.	2,386,885.	14,937,777.
	sources	1,378,957	6,167,959.	2,731,332.	2,212,024.	2,300,003.	1173317111
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975	· · · · · · · · · · · · · · · · · · ·		3,891,169.	3,791,258	3,329,159	11,011,586.
С	Add lines 10a and 10b	1,378,957.	6,167,959.	6,682,521.	6,003,882	5,716,044	25,949,363.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets	\					
	(Explain in Part IV.)			468,374.	0.	0.	468,374.
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	27,470,659	41,219,882.	36,414,679.	37,236,684.	38,971,591.	181,313,495
14	First five years. If the Form 990 is for	the organization	n's first, second.	third, fourth, or	fifth tax year a	s a section 501(c)(3)
, -	organization, check this box and stop here	•			•		
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2009 (line 8	 		nn (fl)		15	85.06%
16	Public support percentage from 2008 Sche					16	85.90%
						1 10 1	
	tion D. Computation of Investmer			3 column (ft)		17	14.31%
17	Investment income percentage for 2009 (lin						12.94%
18	Investment income percentage from 2008					18	
19a	33 1/3% support tests - 2009. If the or						
	17 is not more than 33 1/3 %, check the						
b	33 1/3% support tests - 2008. If the org						
	line 18 is not more than 331/3 %, check						
20 JSA	Private foundation. If the organization	did not check	a box on line 1	4, 19a, or 19b			
					S	ichedule A (Form 99	10 or 990-EZ1 2009

Page 4

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

EXPLANATION OF OTHER INCOME

FORM 990, SCHEDULE A, PART III, LINE 12

OTHER INCOME NOT REGULARLY CARRIED ON.

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

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

• Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C.

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Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ▶ See separate instructions Inspection If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

•	Section 527 organizations. Co	implete Fart 1-A only.				
lf th	e organization answered "Yes	s," to Form 990, Part IV, line 4, or For	m 990-EZ, Part VI, line	47 (Lobbying Activities), ther	1	
•	Section 501(c)(3) organization	ns that have filed Form 5768 (election i	under section 501(h)):	Complete Part II-A. Do not con	nplete Part II-B	
•	Section 501(c)(3) organization	ns that have NOT filed Form 5768 (elec	ction under section 501	(h)): Complete Part II-B Do no	ot complete Part II-	۹.
if th	e organization answered "Yes	s," to Form 990, Part IV, line 5 (Proxy T	ax), then			
•	Section 501(c)(4), (5), or (6) of	rganizations. Complete Part III.				
Na	me of organization			Employer identi	fication number	•
ASS	OCIATION OF THE U	NITED STATES ARMY		53-01	93361	
Pa	rt I-A Complete if the	organization is exempt under	section 501(c) o	r is a section 527 orgar	ization.	
1		ne organization's direct and indirect	political campaign	activities in Part IV.		
2	•					
3						
•				· · · · · · · · · · · · · · · · · · ·		
Pai	rt I-B Complete if the	organization is exempt under	section 501(c)(3)	•		
1		xcise tax incurred by the organizat	on under section 49	955 ▶ \$		
2		excise tax incurred by organization				
3		d a section 4955 tax, did it file Forn				No
4 a	Was a correction made?					No
b	If "Yes," describe in Part IV					
Pai	t I-C Complete if the	organization is exempt under	section 501(c),	except section 501(c)(3).	
1	Enter the amount directly	expended by the filing organization	n for section 527 e	xempt function		
	activities			> \$		
2		ing organization's funds contributed				
		ities	-	▶ .		
3	Total exempt function ext	penditures. Add lines 1 and 2 En	ter here and on Fo	orm 1120-POL,		
4		file Form 1120-POL for this year?			Yes	No
5		s and employer identification numb				yments
		anization listed, enter the amount				
	political contributions rece	eived that were promptly and direc	tly delivered to a s	eparate political organizat	tion, such as a s	eparate
	segregated fund or a politic	cal action committee (PAC). If addit	ional space is need	ed, provide information in	Part IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of	political
	(2) 112	(2)	(4)	filing organization's	contributions red	eived and
				funds If none, enter -0-	promptly and of delivered to a s	
					political organiz	
					none, enter	-0
			. ,			
			,			

Yes X No

Ρ	art II-A Complete if the organizati under section 501(h)).	on is exempt under section 501(c)(3) and	d filed Form 5768 (ele	ction
		belongs to an affiliated group. checked box A and "limited control" provis	sions apply.	
		oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a	Total lobbying expenditures to influence	public opinion (grass roots lobbying)	245.	
b	• •	a legislative body (direct lobbying)	18,318.	
c		a and 1b)	10 563	
d			1 21 106 720	
-		d lines 1c and 1d)	31,145,351.	
f	Lobbying nontaxable amount Enter the columns		1,000,000.	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	250,000.	
h	Subtract line 1g from line 1a. If zero or le			
i	Subtract line 1f from line 1c If zero or le			
		either line 1h or line 1; did the organization fil	e Form 4720 reporting	

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

	Lobbying Expe	nditures During 4-Y	ear Averaging Period	1	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2 a Lobbying non-taxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000
b Lobbying ceiling amount (150% of line 2a, column (e))				Carlotte Control of Co	6,000,000
c Total lobbying expenditures	2,238.	2,022.	4,461.	18,563.	27,284.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	0.	0.	2,304.	245.	2,549.

Pa	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	file	d For	m 576	3		
		(8	a)		(b)		
		Yes	No		Amou	nt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.						
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c d	Media advertisements? Mailings to members, legislators, or the public?						
e f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?						
g h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV						
j 2 a	Total Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	right, Lightan	.ű.	errich.		digric.	454
b c	If "Yes," enter the amount of any tax incurred under section 4912		5, 3,	ahned The con		ACCE	
d Pa	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	c)(5)	, or s	ection		eri, eer	". T. L.
	501(c)(6).					Yes	No
1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?		· · · ·		2		
Pa	Did the organization agree to carryover lobbying and political expenditures from the prior year? . t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, "Yes."	c)(5)	, or s	ection			
1 2	Dues, assessments and similar amounts from members	olitic	al	1			
a b c	Current year			2a			
3 4	Total	of th	ne	3 Likes			
5	excess does the organization agree to carryover to the reasonable estimate of nondeductible lot and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)			4 5			
	t IV Supplemental Information	• • •]	3			-
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, complete this part for any additional information.	line !	5; and	Part II	-B, line	e 1i 	
					· 		
							
-		-					

Schedule C (F	Form 990 or 990-EZ) 2009	53-0193361	Page 4
Part IV	Supplemental Information (continued)	· · · · · · · · · · · · · · · · · · ·	
raitiv	Supplemental information (continued)		
-			
	·		
	·		

SCHEDULE D (Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

COCTAMION OF MHE HATMED CHAMEC ADMV

Employer identification number

ASS	OCIATION OF THE UNITED STATES ARM	1Y				53-01933	61	
Par	Organizations Maintaining Donor Add the organization answered "Yes" to Fo			ilar Funds o	r Acco	ounts. Com	plete if	
		(a) Donor advis	sed fu	ınds	((b) Funds and	other acco	unts
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 th	ho 20	reate hald in a	lonor a	dused		
3	funds are the organization's property, subject to t	_					Yes	No
6	Did the organization inform all grantees, donors,						163	140
•	used only for charitable purposes and not for the							
	purpose conferring impermissible private benefit?						Yes	No No
Pai	Conservation Easements. Complete	if the organization ans	were	ed "Yes" to F	orm 9	90 Part IV		140
4	Purpose(s) of conservation easements held by th				011111 0	00, 1 01114,	1110 7.	
•	Preservation of land for public use (e.g., reci	,	\Box	Preservation	of an h	ietorically im	nortant la	nd area
	Protection of natural habitat	reation of pleasure)	I I	Preservation			•	
	Preservation of open space			Freservation	or a ce	itilied filstor	ic structur	5
2	Complete lines 2a through 2d if the organization is	hold a gualified conconic	ation	contribution i	n tha fa	orm of a con	convotion	
_	easement on the last day of the tax year.	ileid a qualified corisei va	alion	Continuation	ii tiie it	on a con	SCI VALIOIT	
	casement on the last day of the tax year.					Held at th	e End of	the Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easemen							
c	Number of conservation easements on a certified						•	
d	Number of conservation easements included in (• •	!!!			
3	Number of conservation easements modified, tra					v the organiz	ation durir	ia
•	the tax year ▶		.5			,		3
4	Number of states where property subject to cons	ervation easement is loca	ated	>				
5	Does the organization have a written policy regard				andling	of		
	violations, and enforcement of the conservation e		_		_		Yes	. No
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing	g cor	nservation ea	semen	ts during the	year	
	>	,	•				•	
7	Amount of expenses incurred in monitoring, inspe	ecting, and enforcing con	nserv	ation easeme	ents du	ring the year		
	> \$							
8	Does each conservation easement reported on lir	ne 2(d) above satisfy the	e requ	uirements of se	ection			
	170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?						Yes	L No
9	In Part XIV, describe how the organization reports	s conservation easemen	nts in	its revenue ar	nd expe	nse statemei	nt, and	
	balance sheet, and include, if applicable, the text	of the footnote to the or	rgani	zation's finani	cial stat	ements that	describes	
	the organization's accounting for conservation eas							
Pai					er Sim	ilar Assets.	•	
	Complete if the organization answered	d "Yes" to Form 990, F	art I	IV, line 8.				
1 a	If the organization elected, as permitted under	SFAS 116, not to repor	rt ıņ	its revenue s	stateme	ent and bala	nce shee	t works of
	If the organization elected, as permitted under art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its f	eld for public exhibition, financial statements that	, eau Laes	ication, or ret cribes these it	searcn	in furtherand	ce or pub	iic service,
b	If the organization elected, as permitted under							
-	historical treasures, or other similar assets held	for public exhibition, e	educ	ation, or rese	earch ii	n furtheranc	e of pub	lic service,
	provide the following amounts relating to these ite	ems					-	
	(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 a							
	following amounts required to be reported under							
а	Revenues included in Form 990, Part VIII, line 1 .					▶\$		
b	Assets included in Form 990, Part X					▶\$		

Par	t Organizations Maintaini	ng Collections of	of Art, Histo	rical	reasures	, or U	ther Similar A	ssets (CC	ntinued	<u></u>
3	Using the organization's acquisition	accession and o	other records	che	ck any of th	e follo	wing that are a s	significant	use of its	.
,	collection items (check all that appl		, , , , , , , , , , , , , , , , , , ,	, 0	on only or a			,		•
_	Public exhibition	37.	a [٦	Loan or ex	change	nrograms			
a	₹		<u>"</u> ⊢	4	Other	onange	programs			
b	Scholarly research		e	┙	Olliei					
C	Preservation for future ge			.		46			i-	
4	Provide a description of the organization	zation's collections	and explain	now	iney turtner	tne or	ganization's exe	mpt purpo	ose in	
	Part XIV.									
5	During the year, did the organization								_	
	assets to be sold to raise funds rati								Yes	No
Par	t IV Escrow and Custodial A IV, line 9, or reported an					answ	ered "Yes" to f	Form 990	, Part	
12	Is the organization an agent, truste	e custodian or oth	ner intermedi	iarv fo	or contribution	ons or	other assets not	ť		
	included on Form 990, Part X?							Г	Yes	No
h	If "Yes," explain the arrangement in							• • • ∟		
U	Tres, explain the arrangement in	T all Alv and con	ipiete the for		100.0.		Ar	mount		
_	Beginning balance					40		1100111	-	
ن	•									
a	Additions during the year									
e	Distributions during the year									
t	Ending balance								т 	1 1
	Did the organization include an am), Part X, line	217	• • • • • •			• • • ∟	Yes	No
	If "Yes," explain the arrangement in									
Par	t V Endowment Funds. Con									
		(a) Current Year	(b) Prior ye	ear	(c) Two ye				(e) Four ye	
1 a	Beginning of year balance	351,291	7,775	,212.	1 3 44 1 62-	Constitution (September 1			44,34
b	Contributions	84,877	91	, 178		·	et eregety y	<u>~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>	788 A.	il in the second
C	Net investment earnings, gains,				1 1 TEVE 1					
	and losses	3,944,371	-4,631	,425.		V				7278
d	Grants or scholarships				ب ئىلا -		Carlotte Carlo		,£77 *	
е	Other expenditures for facilities .						7 7 3 7	****	.६(
	and programs	2,854,984.	2,855	,508.	، بير	~ ~ ~	성취 그 설명	_ ^		
f	Administrative expenses	26,006.		,166.	₹1, 3 °	: Å,		Jan Company	100 miles	Sy 1 gen 104
g	End of year balance	1,499,549.		,291.	Brit.	· · · · · · · · · · · · · · · · · · ·	F 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4, -	87,57	14.5
2	Provide the estimated percentage				1 7.3 3 2	, ,	<u></u>			
_ a	Board designated or quasi-endown									
b	Permanent endowment ▶	%	<u> </u>							
	Term endowment ▶	%								
	Are there endowment funds not in		the organiz	ation i	that are held	d and :	administered for	the		
va		the possession of	the organiza	20011	mat are ner	a and t	administered for		Ī	es No
	organization by								3a(i)	X
	(i) unrelated organizations								3a(ii)	$\frac{x}{x}$
	(ii) related organizations							• • • •	3b	
_	If "Yes" to 3a(II), are the related org								30	
4	Describe in Part XIV the intended u					-4 V (:	40			
Par		dings, and Equi	pment. See				ne 10.			
	Description of investment		or other basis restment)	(t) Cost or other basis (other)		(C) Accumulated depreciation	(d)	Book value	
1a	Land				455,2	85	۶ ، د کړې			,285.
b	Buildings		·	1	2,144,9	95	4,092,168.		8,052	2,827.
C	Leasehold improvements			1	398,4	79	283,520.			,959.
ď	Equipment			<u> </u>	3,474,7		2,583,004.		891	735.
 	Other		·	<u> </u>	1,809,7		1,421,457.			3,287.
Tota	I. Add lines 1a through 1e (Column		rm 990. Part	X. co						3,093.
		, ,			,-,,	- 1 - /				

Part VII	Investments - Other Securities. See I	Form 990, Part X, lir	ne 12.	
•	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value Cost or end-of-year m	uation: arket value
Financial d	lerivatives			
	ld equity interests			
Other				
		 		,
		+		
		ļ		
		+		
Total (Calum	nn (b) must equal Form 990, Part X, col (B) line 12)		SIN COLUMN OF AN AND AND AND AND AND AND AND AND AND	ART CONTRACTOR
Part VIII				TASK ON ANY OF ANY STREET, CHILD
Fait VIII	(a) Description of investment type	(b) Book value	(c) Method of val	uation
	(a) Description of investment type	(b) Book value	Cost or end-of-year m	arket value
		· · · · · · · · · · · · · · · · · · ·		
		······		
	nn (b) must equal Form 990, Part X, col (B) line 13) 🔻 🕨			
Part IX	Other Assets. See Form 990, Part X,			<u>_</u>
	(a	i) Description		(b) Book value
			·	
				.
				-
				<u> </u>
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 15)			>
Part X	Other Liabilities. See Form 990, Part			
1.	(a) Description of liability	(b) Amount		
Federal inc	come taxes			
	DEPOSITS	113,801	7	
			· ,	-
			The state of the s	States of the second
				£
			_	
			」	
			· vy	
	· , ,			٤
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 25)	113,801	·	

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 >	Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
	Total revenue (Form 990, Part VIII, column (A), line 12)	1	35,857,570.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	34,002,776.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,854,794.
4	Net unrealized gains (losses) on investments	4	10,148,080.
	Donated services and use of facilities	5	
	Investment expenses	6	
	Prior period adjustments	7	
	Other (Describe in Part XIV.)	8	-420,417.
9		9	9,727,663.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	11,582,457.
Part 2	Reconciliation of Revenue per Audited Financial Statements With Revenue per Retu	ırn	
	Total revenue, gains, and other support per audited financial statements	. 1	42,088,846.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	- KÖr	
а	Net unrealized gains on investments	<u>. المناسم ((ر</u>	
b	Donated services and use of facilities		,
С	Recoveries of prior year grants		
	Other (Describe in Part XIV.)		: L
	Add lines 2a through 2d	. 2e	10,148,080
	Subtract line 2e from line 1		31,940,766
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	72. 22.	1
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		ę.
	Other (Describe in Part XIV.) 4b 3,916,80	1.	_
	Add lines 4a and 4b	. 4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	. 5	35,857,570.
Part >	Reconciliation of Expenses per Audited Financial Statements With Expenses per Re	turn	
1	Total expenses and losses per audited financial statements	1	30,506,389
	Amounts included on line 1 but not on Form 990, Part IX, line 25.		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b	3, a. f	-
С	Other losses 2c	_]:-:	
d	Other (Describe in Part XIV.) 2d 1,940,68	5.	.
е	Add lines 2a through 2d	2e	1,940,686.
3	Subtract line 2e from line 1	. 3	28,565,703
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	2.7	
а	Investment expenses not included on Form 990, Part VIII, line 7b		·
b	Other (Describe in Part XIV)	3 .	
С	Add lines 4a and 4b	4c	5,437,073
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	. 5	34,002,776.
Part 2	(IV Supplemental Information		
and 2b	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa ; 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 Als t to provide any additional information	t IV, lin o comp	nes 1b olete
SEE I	PAGE 5		

Page 5

RECONCILIATION OF REVENUE

FORM 990, SCHEDULE D, PART XII, LINE 4B

REVENUE FROM UNAUDITED DIVISIONS OF ENTITY 5,857,490

COST OF GOOODS SOLD -34,244

COST OF SPECIAL EVENTS -950,401

RENTAL EXPENSES -956,041

TOTAL PART XII LINE 4B 3,916,804

OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

FORM 990, SCHEDULE D, PART XIII, LINE 2D

RENTAL EXPENSE 956,401

COST OF GOODS SOLD 34,244

COST OF SPECIAL EVENTS 950,401

TOTAL PART XIII LINE 2B 1,940,686

OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

FORM 990, SCHEDULE D, PART XIII, LINE 4B

EXPENSES FROM UNAUDITED DIVISIONS OF ENTITY 5,437,073

OTHER RECONCILING ITEMS

FORM 990, SCHEDULE D, PART XI, LINE 8

REVENUE FROM UNAUDITED DIVISION -5,857,490

EXPENSES FROM UNAUDITED DIVISION 5,437,073

TOTAL PART XI LINE 8 AMOUNTS -420,417

FIN 48 AUDIT FOOTNOTE

FORM 990, SCHEDULE D, PART X, LINE 2

EFFECTIVE JANUARY 1, 2009, THE ASSOCIATION ADOPTED THE AUTHORITATIVE GUIDANCE ISSUED BY THE FASB ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ORGANIZATION'S FINANCIAL STATEMENTS. UNDER THIS GUIDANCE, WHEN TAX RETURNS ARE FILED, IT IS HIGHLY CERTAIN THAT SOME POSITIONS TAKEN WOULD BE SUSTAINED UPON EXAMINATION BY THE TAXING AUTHORITIES, WHILE OTHERS ARE SUBJECT TO UNCERTAINTY ABOUT THE MERITS OF THE POSITION TAKEN OR THE AMOUNT OF THE POSITION THAT WOULD BE ULTIMATELY SUSTAINED. THE BENEFIT OF A TAX POSITION IS RECOGNIZED IN THE FINANCIAL STATEMENTS IN THE PERIOD DURING WHICH, BASED ON ALL AVAILABLE EVIDENCE, MANAGEMENT BELIEVES IT IS MORE LIKELY THAN NOT THAT THE POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING THE RESOLUTION OF APPEALS OR LITIGATION PROCESSES, IF ANY. TAX POSITIONS TAKEN ARE NOT OFFSET OR AGGREGATED WITH OTHER POSITIONS. TAX POSITIONS THAT MEET THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD ARE MEASURED AS THE LARGEST AMOUNT OF TAX BENEFIT THAT IS MORE THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT WITH THE APPLICABLE TAXING AUTHORITY. THE PORTION OF THE BENEFITS ASSOCIATED WITH TAX POSITIONS TAKEN THAT EXCEEDS THE AMOUNT MEASURED AS DESCRIBED ABOVE WOULD BE REFLECTED AS A LIABILITY FOR

Page 5

UNRECOGNIZED TAX BENEFITS, ALONG WITH ANY ASSOCIATED INTEREST AND PENALTIES THAT WOULD BE PAYABLE TO THE TAXING AUTHORITIES UPON EXAMINATION. THE ADOPTION OF THIS AUTHORITATIVE GUIDANCE HAD NO EFFECT ON THE ASSOCIATION'S BEGINNING NET ASSETS.

USE OF ENDOWMENT FUNDS

FORM 990, SCHEDULE D, PART V, LINE 4

THE INSTITUTE OF LAND WARFARE WAS ESTABLISHED AS A DESIGNATED FUND FOR THE RESEARCH, PUBLICATION, AND DISTRIBUTION OF INFORMATION ON NATIONAL DEFENSE INSSUES IN ACCORDANCE WITH THE ASSOCIATION'S CHARTER AND BY-LAWS.

Schedule F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b line 15, or line 16. ► Attach to Form 990. ► See separate instructions.

Employer Identification number

53-0193361 ASSOCIATION OF THE UNITED STATES ARMY General Information on Activities Outside the United States. Complete if the organization answered Part I "Yes" to Form 990, Part IV, line 14b. 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 For grantmakers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the **United States** Activities per Region (Use Schedule F-1 (Form 990) if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total offices in the employees or region (by type) (i e , a program service, expenditures in fundraising, program services, describe specific type of region agents in region grants to recipients located in service(s) in region region the region) 55,387. ۵ 0 FUNDRAISING SEE PART IV EUROPE 1,377. 0 0 FUNDRAISING SEE PART IV CENTRAL AMERICA/CARIBBEAN 30,576. SEE PART IV 0 FUNDRAISING EAST ASIA AND THE PACIFIC n FUNDRAISING SEE PART IV 124,644. MIDDLE EAST AND NORTH AFRICA 0 0

0

211,984.

i.

53-0193361

Schedule F (Form 990) 2009

Page 2 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 Use Schedule F-1 (Form 990) if additional space is needed. Part II

			disbursement	assistance	assistance	(book, FMV, appraisal, other)
	9 × 60					
	•					
The state of the s	н,					
	6			41		
•						
	,					
, , , , , , , , , , , , , , , , , , ,	•					
(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)						

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 entitles

Schedule F (Form 990) 2009

53-0193361

Schedule F (Form 990) 2009

Page 3:
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.

(h) Method of valuation (book, FMV, appraisal, other) (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance

Schedule F (Form 990) 2009

Part IV	Supplemental Information Complete this part to provide the information required in Part I, line 2, and any additional information.
PROGRA	M SERVICE DESCRIPTION
FORM 9	90, SCHEDULE F, PART I, LINE 3E
SPECIF	IC TYPES OF PROGRAM SERVICES INCLUDED EDUCATION, NEW MEMBER
RECRUI	TING, MEMBER RETENTION AND ANNUAL MEETINGS.
ACCOUN	TING METHOD
FORM 9	90, SCHEDULE F, PART I, LINE 3F
THE AC	COUNTING METHOD USED TO ACCOUNT FOR EXPENDITURES IS THE ACCRUAL
METHOD	OF ACCOUNTING.
	

SCHEDULE G

(Form 990 or 990-EZ) Department of the Treasury

Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the

Supplemental Information Regarding

organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ See separate Instructions. OMB No. 1545-0047 Open To Public Inspection

Internal Revenue Service Employer identification number Name of the organization ASSOCIATION OF THE UNITED STATES ARMY 53-0193361 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Part I Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Solicitation of non-government grants е Internet and email solicitations f Solicitation of government grants b C Phone solicitations g Special fundraising events d In-person solicitations 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? 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 (i) Name of individual (ii) Activity (iii) Did fundraiser have (iv) Gross receipts (v) Amount paid to (vi) Amount paid to (or retained by) or entity (fundraiser) custody or control of from activity (or retained by) contributions? fundraiser listed in organization col (i) Yes No 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

Pa	art	Fundraising Events. Complete more than \$15,000 on Form	ete if to 1990	the organization I-EZ, Iine 6a. Lis	ans t ev	wered "Yes" to ents with gros	to Fo	rm 990, Part IV, Iir eipts greater than	าе 18, เ \$5,0	, or repo 00.	orte	d
-				(a) Event #1 ORAISING		(b) Event #2 NDRAISING	_	(c) Other Events	((d) Total elid col. (a)	thro	
ē			ļ	(event type)		(event type)		(total number)	+-			
Revenue	1	Gross receipts		167,756.		106,6	73.	1,447,993		1,7	22,	422
æ	2	Less. Charitable										
		contributions	ļ						 			
	3	Gross income (line 1 minus line 2)		167,756.		106,6	73.	1,447,993		1,7	22,	422
_				· · · · · · · · · · · · · · · · · · ·					†		<u>`</u>	
	4	Cash prizes	<u> </u>	 	_				ـــــ			
	5	Noncash prizes	İ		İ							
•	ľ			 	-				1			
nse:	6	Rent/facility costs	<u> </u>									
Direct Expenses	7	Food and beverages							ļ			
irec	R	Entertainment										
		Emericaniment							+			
	9	Other direct expenses	L	84,703.	<u> </u>	60,12	25.	805,573	<u> </u>	9	50,	401
	4.0	Disease sympasses and lines 4		O in (d)				_		95	n 4	101.)
	11	Direct expense summary. Add lines 4 Net income summary. Combine line 3	≀throu 3 colu	ign 9 in column (d) imn (d), and line 1(• • • • • • •						021
Pa												
		than \$15,000 on Form 990-	EZ, lir	ne 6a.				<u> </u>	,			
Ęę				(a) Bingo		b) Pull tabs/Instant go/progressive bing		(c) Other gaming		Total gam (a) throug		
Revenue						,	-		+		,	
æ	1	Gross revenue							<u> </u>			
ses	2	Cash prizes										
Expenses	3	Noncash prizes										
ect E												
Dire	4	Rent/facility costs				 						
	5	Other direct expenses										
				Yes %	L.	Yes	%	Yes %	SE SE	CIRS		\$*580 10 10 10 10 10 10 10 1
	6	Volunteer labor	Ш,	No	Ц	No		No	- 11 -1	<u> </u>	, ;;;;	
	7	Direct expense summary Add lines 2	throu	igh 5 in column (d)					()
	8	Net gaming income summary. Combi	ne lin	e 1, column d, and	line	7	<u></u>	<u>.</u> >				
_	_									Y	es	No
9	⊐ ale	Enter the state(s) in which the organizat s the organization licensed to operate g	ion op iamine	rerates gaming act	of the	3. 				9a	···	الم المحمد و م
ŀ		f "No," explain:	Z	g activities in each	01 (11)	.se states:				\(\frac{1}{2}\)	,, , ,	. 💥
	_										3, 14,	1
	-	,,,,,,		:		:::-:-			-			j";•~``\
		Vere any of the organization's gaming li f "Yes," explain	cense	es revoked, suspe	nded	or terminated of	during	the tax year?		10a	23.4.21	TER.
	√ 11	•										
	_						. 				erini (
11		oes the organization operate gaming a								11	7,1	X 1" 1
12		s the organization a grantor, beneficiary ormed to administer charitable gaming?								12		3.3
	- 10	zimou to auminister charitable gaming "									- 1	

Independent contractor

Schedule G (Form 990 or 990-EZ) 2009

Director/officer

Mandatory distributions:

Employee

or spent in the organization's own exempt activities during the tax year > \$

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations,

OMB No 1545-0047 2009

Open to Public Inspection

Employer identification number

(Form 990) Department of the Treasury Internal Revenue Service	Governments, and Individuals in the United States Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Attach to Form 990.
Vame of the organization	

% × √es 53-0193361 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? Part I General Information on Grants and Assistance ASSOCIATION OF THE UNITED STATES ARMY

and Organizations in the United States. Complete if the organization answered "Yes" to	it received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use	space is needed	The base of the ba
Part II Grants and Other Assistance to Governments and Organiza	Form 990, Part IV, line 21, for any recipient that received mc	Part IV and Schedule I-1 (Form 990) if additional space is need	
Part Grants and Other	Form 990, Part IV	Part IV and Sched	

raitiv and schedule I-1 (Follil 990) il additionial space is riecuca	and II addition	וומו שמפר ושווי	ובבתבת				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant (e) Amount of non-cash assistance	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ARMY HISTORICAL FOUNDATION							
	52-1367225	501(C)(3)	500,000.				ARMY MUSEUM DONATION
NATIONAL INFANTRY FOUNDATION							
	58-2422819	501(C)(3)	250,000.				ANNUAL DONATION
OUR MILITARY KIDS							
	56-2483648	501(C)(3)	10,000				ANNUAL DONATION
THE OLD GUARD MONUMENT FUND							
	26-2463281	501(C)(3)	10,000.				DONATION
FISHER HOUSE FOUNDATION							
	11-3158401	501(C)(3)	75,000.				ANNUAL DONATION
MARSHALL LEGACY INSTITUTE							_
	54-1853093	501(C)(3)	15,000.				DONATION
THE OSS SOCIETY							
	33-0810619	501(C)(3)	10,000.				FUNDRAISER
MADISON COUNTY VETERANS MEMORIAL FOUNDATION							
HUNTSVILLE, AL 35801	47-0865053	501(C)(3)	15,003.				DONATION
MILITARY CHILD EDUCATION COALITION							
HARKER HEIGHTS, TX 762889416	74-2889416	501(C)(3)	30,000.				DONATION
PENTAGON CREDIT UNION FOUNDATION							
ALEXANDRIA, VA 22314	54-2062271	501(C)(3)	25,000				DONATION
US ARMY MWR							
VA 22201		US ARMY	35,377.				EVENT SUPPORT
ARMY HERITAGE CTR FOUNDATION							
CARLISLE, PA 17013	25-1830984	501(C)(3)	10,000.				DONATION

Enter total number of section 501(c)(3) and government organizations Enter total number of other organizations

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

Schedule I (Form 990) 2009

53-0193361

Page 2.

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. Schedule I (Form 990) 2009

Part III Grants an

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
GRANT TO WRITE TRILOGY ON THE ARMY	r	5,000.			
SCHOLARSHIPS	209	226,650.			
Part IV Supplemental Information. Complete this par	te this part to	provide the info	rt to provide the information required in Part I,	line 2,	and any other additional information.
GRANTS AND OTHER ASSISTANCE		1	 		
FORM 990, SCHEDULE I, LINE 2			 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
MONITORS GRANTS GIVEN	FOR EDUCATI	TIONAL PURPOSES	S FROM ITS		
SCHOLARSHIP FUNDS. BASED ON VARIOUS CRITE	US_CRITERI	RIA AND THE AE	APPLICANT'S CV,	/, A	
COMMITTEE CONSISTING OF AUSA OFFICERS	CERS DECIDES	ES WHO DESERVES	AND	RECEIVES	
SCHOLARSHIP FUNDING.					
					Schedule I (Form 990) 2009

SCHEDULE 1-1 (Form 990)

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II or Part III.

OMB No 1545-0047 2009

Open to Public Inspection

> Department of the Treasury Name of the organization Internal Revenue Service

Employer identification number

53-0193361

Schedule I-1 (Form 990) 2009 (h) Purpose of grant or assistance CONATION ONATION ONATION CONATION SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT SUPPORT Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) (d) Amount of cash grant (e) Amount of non-cash assistance 30,000. 10,000. 10,950. 16,350. 30,000. 5,502. 50,000. 40,000. 18,600 15,000 51,507 For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990. (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501 (C) (3) 501(C)(3) 501(C)(3) JS ARMY 75-1744396 05-0655633 20-2925320 THE UNITED STATES ARMY 22-2034407 20-4254979 20-0366717 52-1886690 52-1193585 27-0766813 80-0191117 (p) EIN (a) Name and address of organization INTREPID FALLEN HEROES FOUNDATION OPERATION MAKE A SOLDIER SMILE SPECIAL OPS WARRIOR FOUNDATION FISHER HOUSE FT. SAM HOUSTON ARMY WAR COLLEGE FOUNDATION AMERICAN FREEDOM FOUNDATION FT. SAM HOUSTON, TX 78234 FT. LEAVENWORTH, KS 66027 or government REFLECTION MEMORIAL PARK FISHER HOUSE - LANDSTUHL ASSOCIATION OF ARLINGTON, VA 22201 ARLINGTON, VA 22201 ARLINGTON, VA 22201 ARLINGTON, VA 22201 S.G.S.C FOUNDATION CARLISLE, PA 17013 NEW YORK, NY 10036 USASOC - US ARMY TAMPA, FL 33608 TAMPA, FL 33681 LUME, VA 22639 MARRIOTT RANCH Part I

Schedule I-1 (Form 990) 2009 Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III.)	Assistance to Ind	53- lividuals in the Uni	0193361 ted States (Schedule	I (Form 990), Part III.)	Page 2.
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
	-				
					Schedule I-1 (Form 990) 2009

SCHEDULE J (Form 990)

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 Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

ASSOCIATION OF THE UNITED STATES ARMY

Employer Identification number 53-0193361

Par	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	100		200 G
	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			3.6
	Travel for companions Payments for business use of personal residence	148	THE	1、紫莱
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees] : 7
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)	\$1.7° \$1°		
ь	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment) (j., -, 3%)	
U	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to	(800±2114	£.II	SENET .
	explain	1b	X	ļ
2	explain			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	X	ļ
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.	\$34 Se)	"C Libet"	19 to 18 to
	X Compensation committee X Written employment contract	ii k		ALC:
	Independent compensation consultant X Compensation survey or study	Ph#	Sin	2,78
	Form 990 of other organizations X Approval by the board or compensation committee	2,3%		
4	During the year, did any person listed in Form 990, Part VII. Section A, line 1a, with respect to the filing	√3 ′	,	,
	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	CHARLES KHR	doubledeks	i dining
а		4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			'
		.,,,,	* *0 !	di G
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.	8. 300	1 25	
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	15.00		
	compensation contingent on the revenues of		Mil.	1000
a	The organization?	5a		X
b	Any related organization?	5 b	Ç ≱ 3.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
_	If "Yes" to line 5a or 5b, describe in Part III	1, 1, 1, 1, 1	1965 1965 1965	,31° 2(4) 80° 03%
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	12.53		
	compensation contingent on the net earnings of.	12.77	227.3	X
a	The organization?	6a		X
b	Any related organization?	6 b	1.275	
-	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	_		x
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			l
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe			x
e	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in	8		
7	Regulations section 53 4958-6(c)?			

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.

		(B) Breakdown of W-2 and	of W-2 and/or 1099-MISC	/or 1099-MISC compensation				i i
(A) Name		(I) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(t)+(D)	ry Compensation reported in prior Form 990-EZ
	€		50,000.	0	33,600.	14,537.	518,137.	0.
GORDON R. SULLIVAN	: €	 	0	0	0	0	0.	.0.
	6	195,000.	26,000.	0	15,600.	0	236, 600.	0
THOMAS G. RHAME	(II)		0	0	0	0		.0
	(1)	195,000.	26,000.	0	15,600.	0	236, 600.	0.
THEODORE G. STROUP	<u> </u>		0	0.	0	0	! !	.0
	8	110,5	8,487.	39, 967.	8,842.	11,472.	179, 299.	0
HELEN I. HEGYI	(ii)		0	-		0.	 	.0
	E	195,000.	26,000.	0	15,600.	11,472.	248,072.	0
ROGER G. THOMPSON,	JR. (III)		0	0	0	0	 	.0
	ε	124,92	9,495.	.0	9,994.	14,537.	158,951.	0
NORMAN H. CAMPBELL		0		0	0	0	1 1 1	.0
	(1)	108,212.	8,325.	23,867.	8,657.	4,626.	153, 687.	0
JOHN E. GRADY	(ii)	0.	0		0	0	i	.0
	0							
	<u>(ii)</u>							
	(c)							
	(II)							
	<u> </u>							
	(ii)							
	€	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1					
	(ii)							
	8	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1					
	E							
	9		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1				
	(8)							
	<u> </u>			1				
	(ii)							
	Ξ	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
	Œ							
	<u>e</u>		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1				
	(0)							
į							Sche	Schedule J (Form 990) 2009

Partill 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.
EXPLANATION OF TRAVEL AND DUES
FORM 990, SCHEDULE J, PART I, LINE 1A
FIRST-CLASS OR CHARTER TRAVEL: THE PRESIDENT AND THREE VICE PRESIDENTS
USE FIRST CLASS AIR TRAVEL. EMPLOYEES CAN ALSO TRAVEL FIRST CLASS IF THE
TRIP GOES BEYOND TWO CONTINENTS (P.EX. TO KUALA LUMPUR).
HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES: THE PRESIDENT BELONGS TO
R BUSIN

Schedule J (Form 990) 2009

SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

➤ See the Instructions for Form 990.

Name of the Organization

Employer identification number

ASSOCIATION OF THE UNITED STATES ARMY

53-0193361

Employees		1						 	r -	
(A) Name and title	(B) Average hours per week		_	chec	_	that ap		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MSC)	other compensation from the organization and related organizations
THEODORE G. STROUP										
VP, EDUCATION	38.00			Х	<u> </u>			221,000.	0.	15,600
ANNE E. BELYEA										
SECRETARY	38.00	ļ		X				122,702.	0.	14,738
HELEN I. HEGYI										•
CONTROLLER	38.00			Х				158,985.	0.	20,314
ROGER G. THOMPSON, JR.										
VP, MEETINGS	38.00			Х				221,000.	0.	27,072
GEORGE COAN										
DIRECTOR, NATIONAL SECURITY	38.00					Х		119,675.	0.	8,892
JOHN E. DAVIES										
DIRECTOR, REGIONAL ACTIVITIES	38.00					Х		139,550.	0.	8,892
NORMAN H. CAMPBELL										
DIRECTOR, INFORMATION SYSTEMS	38.00				Ì	Х	İ	134,420.	0.	24,531
JOHN E. GRADY										
DIRECTOR, PUBLIC AFFAIRS	38.00					Х		140,404.	0.	13,283
MARY BLAKE CROUCH	20.00					v		122 602		20 502
EDITOR, ARMY MAGAZINE	38.00					X	<u> </u>	122,602.	0.	20,582
							L			
										
							<u> </u>			
			_							

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No 1545-0047 Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer Identification number

ASSOCIATION OF THE UNITED ST	TATES	ARMY					53	-019	336	1		
Part I Excess Benefit Transacations Complete if the organization answ								, Part	V, line	e 40b		
1 (a) Name of disqualified persor				(h) Description	of transaction	าก				(c) Cor	rrected?
- (a) realise of disqualities person	· ·· ·· · · · · · · · · · · · · · · · ·										Yes	No
			 				_					<u> </u>
												
												
2 Enter the amount of tax imposed on under section 49583 Enter the amount of tax, if any, on li									► \$ _ ► \$ _			
Part II Loans to and/or From Intere Complete if the organization an				Part IV, lır	ne 26, or For	m 990-EZ,	Part \	/, line	38a			
(a) Name of interested person and purpose		to or from anization?	(c) Ori principal		(d) Bala	nce due	(e) In (default?	by bo	proved pard or nittee?		/ritten ment?
	То	From					Yes	No	Yes	No	Yes	No
GORDON R. SULLIVAN INSURANCE POLICY	ļ	×		60,000.		600,000.	ļ	х	х		х	
	 	ļ					<u> </u>	ļ				
	<u> </u>						 			-		
	1	 					 					
	1						ļ	ļ				
Total				▶\$		600,000.		·	,	,		,
Part III Grants or Assistance Benefication Complete if the organization and					e 27		·					
(a) Name of interested person	(b) Re	elationsh	ip between in organiza		son and the	(c) A	Amoun	t and t	ype of	assist	ance	
	_									<u>-</u>		
									-			
	 			,								
	<u> </u>											
				······································								
Part IV Business Transactions Invo Complete if the organization and					ne 28a, 28b,	or 28c.						•
(a) Name of interested person			nip between son and the ation		nount of saction	(d) Desc	cription	of tra	nsactı	on	(e) Sha organiz reven	zation's
	ļ		 								Yes	No
	 			 								
	 			 	 							
	 					 						
	1.											
	 					t						

For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury internal Revenue Service

Name of the organization

ASSOCIATION OF THE UNITED STATES ARMY

Employer identification number 53-0193361

ATTACHMENT 1

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11A

AUSA'S FORM 990 IS REVIEWED BY THE FINANCE COMMITTEE. THE CHAIRMAN OF THIS COMMITTEE GIVES AN ACCOUNT OF THE TAX RETURN AND ITS IMPLICATIONS TO THE COUNCIL OF TRUSTEES ALONG WITH THE ORGANIZATION'S FINANCIAL POSITION.

DETERMINING COMPENSATION

FORM 990, PART VI, LINE 15

FOR ALL OFFICERS (INCLUDING THE PRESIDENT): COMPENSATION COMMITTEE CHAIRED BY THE CHAIRMAN OF THE COUNCIL OF TRUSTEES DETERMINES THE OFFICER'S COMPENSATION.

AVAILABILITY OF OTHER DOCUMENTS

FORM 990, PART VI, LINE 19

BYLAWS, TAX RETURN, ORGANIZATION STRUCTURE AND BUDGET ARE AVAILABLE UPON REQUEST.

CONFLICTS OF INTEREST

FORM 990, PART VI, LINE 12C

IT IS THE RESPONSIBILITY OF ALL DIRECTORS, OFFICERS AND EMPLOYEES TO REPORT ETHICS VIOLATIONS-OR SUSPECTED VIOLATIONS- WITHOUT ADVERSE CONSEQUENCES TO THE COMPLIANCE OFFICER OR THEIR SUPERVISOR. THE COMPLIANCE OFFICER IS RESPONSIBLE TO INVESTIGATE ALL COMPLAINTS AND

Name of the organization

ASSOCIATION OF THE UNITED STATES ARMY

Employer Identification number 53-0193361

ATTACHMENT 1 (CONT'D)

ALLEGATIONS AND WILL ADVISE AT HIS/HER DISCRETION TO THE AUSA CEO OR THE FINANCE/AUDIT COMMITTEE. REPORTS ARE KEPT CONFIDENTIAL TO THE EXTENT POSSIBLE AND ALL REPORTS ARE INVESTIGATED AND CORRECTED IF NEEDED.

ELECTION OF GOVERNING BODY

FORM 990, PART VI, LINE 7

THE CHAIRMAN APPOINTS A 3 MEMBER NOMINATING COMMITTEE FROM AMONG THE COUNCIL OF TRUSTEES FOR THE PURPOSE OF PROVIDING A SLATE OF NOMINEES FOR VACANT POSITIONS ON THE COUNCIL. THE NOMINATING COMMITTEE SUBMITS A SLATE SELECTED FROM MEMBERSHIP OF AT LEAST ONE NOMINEE FOR EACH VACANT POSITION. AFTER PUBLICATION OF THE SLATE IN AUSA NEWS, ADDITIONAL CANDIDATES MAY BE NOMINATED, IF THEY COMPLIED WITH THE CONDITIONS.

BALLOTS WILL BE COUNTED UNDER THE DIRECTION OF THE COUNCIL OF TRUSTEES BY OFFICIAL TELLERS.

OTHER PROGRAM SERVICES

FORM 990, PART III, LINE 4D

OTHER PROGRAM SERVICES INCLUDE: ARMY MAGAZINE, CORPORATE MEMBERS, PUBLIC AFFAIRS, GOVERNMENT AFFAIRS, AUSA NEWS, MEMBERSHIP FULFILLMENT, DATA PROCESSING INSIGNIA AND INSURANCE.

ATTACHMENT 2

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE ASSOCIATION'S OBJECTIVE IS TO BE WHOLLY EDUCATIONAL, LITERARY,

AND SCIENTIFIC. IT FOSTERS ESPRIT DE CORPS AND REPRESENTS EVERY

AMERICAN SOLDIER BY BEING A VOICE FOR ALL OF THE ARMY COMPONENTS.

Name of the organization
ASSOCIATION OF THE UNITED STATES ARMY

Employer identification number 53-0193361

ATTACHMENT 2 (CONT'D)

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

FOSTERS PUBLIC SUPPORT OF THE ARMY'S ROLE IN NATIONAL SECURITY,
PROVIDES PROFESSIONAL AND INFORMATIONAL PROGRAMS, AND SUPPORTS AND
PROMOTES THE READINESS AND TRANSFORMATION OF THE ARMY COMPONENTS FOR
THE 21ST CENTURY.

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS	ATTACHMENT 3	
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
ALEX BROWN INVESTMENT MANAGEMENT 217 EAST REDWOOD STREET, SUITE 1400 BALTIMORE, MD 21202	INVESTMENT ADVISOR	151,721.
MGL MANAGEMENT, LLC 11654 PLAZA AMERICA DRIVE SUITE 184 RESTON, VA 20190	CONSULTING	250,192.
CAS SEVERN 6201 CHEVY CHASE DRIVE LAUREL, MD 20707	CONSULTING	292,949.
TMA RESOURCES, INC. 1919 GALLOWS ROAD SUITE 400 VIENNA, VA 22182	CONSULTING	408,754.
TOTAL COMPENSATION		1,103,616.