

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



# Form **990**

## **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

SCANNED DEC 0 2 2010

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

_	F 44		-1				orang rode		mapecilo	
	FOR TH	e 2009 C			, 2009, a	nd ending			, 20	
ַ כ	Check if a	pplicable	Please use IRS	Name of organization U. S. Travel Association					yer identification n	
╛	Address	change	label or	Doing Business As				53	0231139	<del>)</del>
۱ لـ	Name ch	nange	print or type	Number and street (or P O. box if mail is not delivered to street ad	dress)	Room/suite	1	E Teleph	none number	
] (	nitial ret	um	See	1100 New York Ave NW		45	0W	(202)	408-8422	2
٦	Terminat	ed	Specific Instruc-	City or town, state or country, and ZIP + 4						
],	Amende	d return	tions.	Washington, DC 20005				G Gross re	eceipts \$ 24,41	5.381
] <i>p</i>	Applicatio	n pending	F Nan	and address of principal officer			H(a) is this	a group retur	n for affiliates? Yes	No
	• •	, ,	Roger	Dow same as C above			1		included? Tes	□No
1	Tax-exe	empt status		11(c) ( <b>6</b> ) <b>◄</b> (insert no.)	****		1		a list (see instruction	
J	Websi	te: ▶ w		avel.org/			H(c) Group es			•
_		organization			I Year	r of formation			of legal domicile DE	
	art i	Summ			1	or torridation	1331	W Oldie e	or regar donners. DE	
	_					The Acc	a clation i		ined minelinell	
	1 1	Briefly d	escribe	he organization's mission or most significant a	activities	; THE AS	sociation i	is organ	iized principali	ў. <u>.</u>
ø				e whole of the United States travel industry						
Governance				d States. Activities include trade events, res	earch p	rojects, p	ublication	s and e	ducational mee	tings
Ē	1 .			avel industry						
Š	2	Check this	s box ►	If the organization discontinued its operations or disposi	ed of more	e than 25% o	fits net asset	ts.		
প্র	3	Number	of votir	members of the governing body (Part VI, line	1a).			3_		143
es	4	Number	of inde	endent voting members of the governing body	/ (Part V	/I, line 1b)		4		141
풀	1			employees (Part V, line 2a)		<i>.</i>		5		70
Activities &	1			volunteers (estimate if necessary)	, ,	. , ,	•	6		-0-
•	4			ated business revenue from Part VIII, column (	C) line	12	•	7a	46	1,193
				siness taxable income from Form 990-T, line 3		, _		. 7b	1	),189)
	1				·	·	Prior Yes		Current Yea	
		Cantribi	ıtıana a		95,587	10,699,176				
ë	8	Control	nions a	d grants (Part WIII-line h) EU	•	. –		19,849	9,780,461	
Revenue	9	Program	1 servici	revenue (Part VIII, line 2g)		•				
Ŗ	10	Investme	ent inco	ne (Part XIII, column (A), Hings 33 () 4, and 7d) Part VIII, Column (A), lines 5, 6d, 8c, 90, 10c, a		• -		93,828		0,678
	11	Other re	venue (	art VIII, column (A), lines 5, 6d, 8c, 19g, 10c, al	nd 11e)	- 40\ -	159,242		604,38	
				dd lines 8 through 11 (must equal Part VIII) colum		e 12)	22,7	68,506	21,53	
				ar amounts paid (Par IX) column (A), lines 1-3	6)	.		<u>-0-</u>	ļ	<u>-0-</u>
	14	<b>Benefits</b>	paid to	or for members (Part IX, column (A), line 4)			-0-		-(	
Expenses	15	Salaries,	other c	mpensation, employee benefits (Part IX, column (/	A), lines !	5–10)	7,9	54,508	8,93	4,988
ben	16a	Professi	onal fur	draising fees (Part IX, column (A), line 11e)		.  _	<u>.</u> ,	0-	-(	
ă	Ь	Total fur	ndraising	expenses (Part IX, column (D), line 25) ▶					;	
	17	Other ex	xpenses	(Part IX, column (A), lines 11a-11d, 11f-24f)		L	13,4	101,493	12,09	8,409
			•	Add lines 13-17 (must equal Part IX, column (	A), line 2	25)	21,3	356,001	21,03	3,397
				penses. Subtract line 18 from line 12		. '	1,4	112,505	50	1,306
ò	3					Ве	ginning of Cu		<del></del>	
ets	20	Total oc	cote (D	rt X, line 16)			15.9	942,161	17,93	
Assets C	20		-		•			45,705	12,00	
Net	21 22	Not see	ote or fi	Part X, line 26)	•	<u> </u>		196,456		4,994
	art II		nature		··	·		30,400	0,02	4,004
•	a1 t 11			penury, I declare that I have examined this return, including	accompar	ovina scheduli	e and statem	ents and	to the best of my kn	owledge
		and bel	ef, it is tr	correct, and complete. Declaration of preparer (other than	officer) is	s based on all	information	of which p	reparer has any kno	wledge
٥:		1.	/				1	1.1.0	d lu	
	gn			4504			Date	-	1100	
He	ere	y Sig	nature of	r J DOW President			Date	,		
		-								
		Typ	pe or print	name and title		- 10:				
		Prepare			Date	Chec setf-	K If	Preparer's (see instruc	identifying number	
Pai	id	signatui	re 🔽				oyed ▶ 🔲	າລ <del>ວດ</del> ແລແ <b>ນ</b> ເ	Olio(B)	
	eparer's									
		L Linux	name (or	ours			EIN	<b>•</b>	:	
US	e Only		mployed), s, and ZIP	+ 4 7			Phone no	<b>&gt;</b> (	)	
M	av the			return with the preparer shown above? (see ii	nstructio	ns)			Yes	No

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission: The Association is organized principally to represent the whole of the United States travel industry and to promote and facilitate increased travel to and within the United States. Activities include trade events, research projects, publications and educational meeting to service the travel industry
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	business that would otherwise be generated only through an exhaustive number of around-the-world trips.
4b	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ ) Other Trade Shows and Events Marketing Outlook Forum (MOF) provides benefit to the Association members by providing the most up-to-date economic forecast; the latest online and offline marketing trends; and Outlooks for
	all sectors of travel. The Educational Seminar for Tourism Organizations (ESTO) provides to more than 400 destination professionals from across the country the opportunity to build their knowledge and skills by providing
	new ideas in destination marketing, by exchanging information on what is working and not working at other
	destinations and by building a network of contacts who face the same challenges and opportunities.
	TravelCom an event where ideas and techniques in the areas of technology, eCommerce and distribution
	are exchanged. An opportunity to share best practices and what is effective. InternationalOpportunity to explore
	trade opportunities in new emerging markets such as India and China, as well as the traditional larger markets of
	Japan and South America
	······
40	(Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
	Research studies, reports and publications Domestic Research, Travel Indicators, Domestic Travel Reports,
	U.S. Travel Overviews, U.S. Market Research. International Research - Travel Statistics, Market Research & Analysis.
	on the top 25 countries generating U.S Travel. Economic Research – Economic Impact Reports, Travel Indicators,
	Custom Research. Travel Forecasts - Domestic & International Travel Trends, Seasonal Travel Trends. Current
	Travel Indicators - U.S. travel prices for lodging, gasoline, airfares.
	Web Site Development DiscoverAmerica.com under a cooperative agreement with the U.S. Department of Commerce. The Web site serves as the official travel and tourism website of the U.S. and currently serves the five
	leading inbound markets to the U.S. – Canada, Mexico, the UK, Germany and Japan.
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ n/a

Par	t IV Checklist of Required Schedules	<del>-</del>		age e
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	n	/a
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	8		✓
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9_		✓
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	1	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		A STATE OF THE PARTY OF THE PAR	
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X. line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X		·	
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	<u>)</u> 12	· 🗸	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI. XII, and XIII is optional.  12A   Yes No			~ , ,
13 14a	Is the organization a school described in section $170(b)(1)(A)(ii)$ ? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	✓	✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	✓	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II.	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		<b>✓</b>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓_
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		✓_

Fal	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		1
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		1
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	1	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		✓
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		✓
С	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		1
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		/a
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b	n,	/a
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .	28a	✓	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	✓	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	1	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	✓	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35		✓
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	n,	/a 
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	1	•

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	3	ļ	1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	1	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
La	Statements, filed for the calendar year ending with or within the year covered by this return 2a 70			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	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	3a	1	
	this return?	3b	1	<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	-00	Ť	
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		/
b	If "Yes," enter the name of the foreign country: ▶ n/a			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	, -,		<u></u>
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?.	5a		<b>✓</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding		n	/a
	Prohibited Tax Shelter Transaction?	5c	ļ.,	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a	n	/ <b>a</b>
	organization solicit any contributions that were not tax deductible?		11	ľ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).	,		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		~ ~ n	/a -
	and services provided to the payor?	7a	n/	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		/a
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		/a
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		a
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	n/	ļ
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as		n	/a
_	required?	7h		<del></del>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	-n	/a
•	, , , , , , , , , , , , , , , , , , ,	-	-	77
9	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	9a	n	/-a
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	n/	a
10	Section 501(c)(7) organizations. Enter.		$\neg \neg$	
a	Initiation fees and capital contributions included on Part VIII, line 12			أيدرن
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b n/a		İ	1, 6
11	Section 501(c)(12) organizations. Enter:	-	_ ,	15.
а	Gross income from members or shareholders	ł	٠,	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)  n/a			-
12a		12a	n	/a
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b   n/a	<del></del>	<del>-  </del>	

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.

Sec	tion A. Governing Body and Management			
		(America)	Yes	No
1a	Enter the number of voting members of the governing body	1		
b	Enter the number of voting members that are independent	-		1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	S		51.6% a
	any other officer, director, trustee, or key employee?	2	<u> </u>	<b>✓</b>
3	Did the organization delegate control over management duties customarily performed by or under the direct	ŀ		١.
	supervision of officers, directors or trustees, or key employees to a management company or other person? .	3_	ļ	<b>✓</b>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<b>√</b>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	ļ	<b>V</b>
6	Does the organization have members or stockholders?	6	ļ	<b>✓</b>
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			١,
	of the governing body?	7a		<b>✓</b>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	2202	<b>D</b> A40365
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
	The governing body?	8a	<b>V</b>	
_	Each committee with authority to act on behalf of the governing body?	8b	<b>V</b>	
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.			,
Sac	tion B. Policies (This Section B requests information about policies not required by the Int	9a	<u> </u>	
	enue Code.)	erriai		
			Yes	No
100	Does the experimental base level shorters branches or efficience?	10a	163	1
	Does the organization have local chapters, branches, or affiliates?	IVa	n	/a
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	10b		
44	affiliates, and branches to ensure their operations are consistent with those of the organization?  Has the organization provided a copy of this Form 990 to all members of its governing body before filing the	100		
11	form?	11	1	
11Δ	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		1400	(80) £
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	CONTRACTOR OF THE PERSON NAMED IN CONTRA	1
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		n	/a
_	rise to conflicts?	12b		
_	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		n	/a
C	describe in Schedule O how this is done	12c		
13	Does the organization have a written whistleblower policy?	13	1	
14	Does the organization have a written document retention and destruction policy?	14	<b>✓</b>	
15	Did the process for determining compensation of the following persons include a review and approval by	4		<b>1</b>
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1	
а	The organization's CEO, Executive Director, or top management official	15a	1	
b	Other officers or key employees of the organization	15b	1	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		✓
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		433	***************************************
-	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			Ž.
	the organization's exempt status with respect to such arrangements?	16b		, a 
Sec	ction C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ District of Columbia			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(or	c)(3)s (	only)	
	available for public inspection. Indicate how you make these available. Check all that apply.			
	☐ Own website ☐ Another's website ☑ Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of inte	erest	
	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 recoorganization: > US Travel Association, 1100 New York Ave NW, Suite 450W, Washington DC 20005 (202			

# 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.

(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per	Positi	on (c		k all	that ap	ply)	Reportable	Reportable	Estimated
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
List Attached Directors		1								
Roger J Dow		<b>  •</b>			-	<del> </del> -				
President and Chief Executive Officer	55			1				1,027,022.52		117,026.2
Bruce Bommarito Exec. V. President/ Chief Operating Officer	55		<u></u>	1				286,572.78		24,971.7
Dennis Petroskey Senior Vice President	55		<u></u>		1			251,460.07		27,082.6
Adam Vance Senior Vice President	55				1			243,468.35		28,138.0
Gary Oster Senior Vice President	55				1			302,896.00		25,096.9
Suzanne Cook Senior Vice President	55				1			238,490.38		79,028.3
Geoffrey Freeman Senior Vice President	55				1			309,762.95		15,888.5
Dennis Castleman Vice President	55					1		165,338.80		11,820.1
Patty Hubbard Vice President	55					1		147,183.72		55,137.8
Alma P Rojas Vice President	55					1		187,554.61		14,465.8
Bryan Lewis Chief of Staff	55			L		1		149,305.78		8,891.6
Eric Weber Vice President	55					1		168,594.33	1	25,222.0
Aire i regident										
							-			
										<del></del>

Part VII Section A. Officers, Directors, Tru (A)	(B)	·			C)			(D)	(E)	
Name and title	Average	Poerti	on le	•	•	that ap	-h4	Reportable		(F)
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	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
none										
										-
									130	
1b Total	······································	•					▶	3,477,650.29	-0	- 432,769.99
<ul> <li>Total number of individuals (including but reportable compensation from the organization)</li> <li>Did the organization list any former office employee on line 1a? If "Yes," complete S</li> </ul>	ation ► 20 er, director	or tr	uste	ee, I	кеу	emplo			· · · · · · · · · · · · · · · · · · ·	Yes No
For any individual listed on line 1a, is the sthe organization and related organizations individual.	sum of rep	ortab	le c	omp	ens	sation				4 🗸
5 Did any person listed on line 1a receive services rendered to the organization? If "	or accrue Yes," com	com	pen Sch	sati ledu	on 1	from a	any <i>uch</i>	unrelated org	anization for	5
Section B. Independent Contractors										<u> </u>
Complete this table for your five highest compensation from the organization.	ompensate	ed ind	ере	ende	nt o	contra	ctor	s that received	d more than \$	100,000 of
(A) Name and business add								(B) Description of s	ervices	(C) Compensation
APCO Worldwide, PO Box 9197, Uniondale N								nsulting Serv		594,142.73
E-site Marketing, 7285 Collection Center Dr. (			3					b Design Cor		591,466.87
Prime Policy Group, P.O. Box 933169 Atlanta Centerplate, 201 East Broad St, Spartanburg								nsulting Serv		552,647.74
Innovative Event Production, 9590 Lynn Bluf		<del></del>	207	723				ent Contracto ent Contracto		498,007.48 435,622.00
Total number of independent contractors (i more than \$100,000 in compensation from	ncluding b	ut not	t lim	iited		those				(STATES # 1

Pari	VIII	Statement of Re	venue		1			Page 8
				1	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ints	1a	Federated campaigns	1a		ļ		•	2.
<u> </u>	b	Membership dues	<u>1b</u>	8,508,868	]			
fts, r ar		Fundraising events .	<u>1c</u>					
nie.	1	Related organizations	1d	0.400.200	}			
Sir	e	Government grants (contr	·	2,190,308				`
ber He	'	All other contributions, gifts, and similar amounts not inclu-			[		•	,
Contributions, gifts, grants and other similar amounts		Noncash contributions include		1,661,396	ŧ		,	
ခဲ့ ငိ	h	Total. Add lines 1a-1f		. •	10,699,176		*	· **
		·		Business Code			<del>-</del>	
Ven	2a	Trade Show-Intl Pow	Wow	541800	7,062,809		112,257	6,950,552
æ	ь	Research publication		541900	172,076	156,854	15,222	0
<u>8</u>	С	Trade Shows-list atta	ched	541800	1,869,824		22,000	1,847,824
Ser	d	Research Studies		541900	668,768		127,400	541,368
Program Service Revenue	e	***************************************						
<u>go</u>	ן ן	All other program servi  Total. Add lines 2a-2f			0.770.477		·····	
	y				9,773,477	· · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
	3	Investment income (inc		ls, interest, and	130,448			130,448
	4	other similar amounts) Income from investment of			130,440			130,446
	5	<b>5</b> 111	or tax-exempt bor					
			(i) Real	(ii) Personal				
	6a	Gross Rents						
	1	Less: rental expenses			<i>\$</i>	,		
		Rental income or (loss)			^ _	, , , , , , , , , , , , , , , , , , ,		. *
	d	Net rental income or (le	oss)	▶				
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	3,200,908	<u> </u>				/
	b	Less: cost or other basis					"	
		and sales expenses .	2,880,678					
	1 .	Gain or (loss) Net gain or (loss)	320,230	<u>'</u>	320,230			
•	d				320,230			320,230
enne	8a	Gross income from events (not including \$						
-		of contributions reporte						
Ŗ			a		İ	1		
Other	b	Less: direct expenses	-					į
δ		Net income or (loss) from		events >				
	9a	Gross income from gan	ning activities.					T ADDRESS
		See Part IV, line 19	a	1 1		ļ		i.
		Less: direct expenses.						
		Net income or (loss) from	•	vities	_			
	10a	Gross sales of inv						İ
		returns and allowances				ļ		
		Less: cost of goods so Net income or (loss) from			1			
	Ť	Miscellaneous Rev		Business Code	<del></del>		<del></del>	
	11a	1 January J. Francisco			271,549	-		271,549
	ь	Referral fees		561300	6,984		6,984	27 7,0 40
	C	Web-site fees/Advert	ising	541800	332,839	155,509	177,330	
	d	All other revenue .						
	_	Total. Add lines 11a-1	1d	•	611,372			
	12	Total revenue. See in:	structions.	. ▶	21,534,703	312,363	461,193	10,061,971

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complete co	T			<del>,                                      </del>
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members			<b>**</b> **********************************	<b>446</b>
5	Compensation of current officers, directors, trustees, and key employees	3,910,420			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	3,339,400			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	806,664			
9	Other employee benefits	497,820			
10	Payroll taxes	380,684			
11	Fees for services (non-employees):				
а	Management				
b	Legal	98,204			
C	Accounting	46,511			
d	Lobbying	1,345,415			
е	Professional fundraising services See Part IV, line 17		By The State	1 2	
f	Investment management fees .				
g	Other	2,397,543			
12	Advertising and promotion	792,656			
13	Office expenses	446,207			
14	Information technology	423,731		<del></del>	
15	Royalties	984,668	·····		
16	Occupancy	447,933			
17	Travel	447,555			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	3,650,438			
20	Interest				
21	Payments to affiliates	4 207 622			
22	Depreciation, depletion, and amortization.	1,287,632 71,224			
23	Insurance	71,224	18 July 2 4 18 18 18 18 18 18 18 18 18 18 18 18 18		· (n
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)		S. S. S. S. S. S. S. S. S. S. S. S. S. S		
а	Tax Expense	17,568	132 / 1388 /	37 3,000 1,000	7 Y
a h	Dues and Subscriptions	63,696			···-·
c	News Clipping Service	5,102			
d	Contributions	6,400			
e f	All other expenses Misc	13,481			
25	Total functional expenses. Add lines 1 through 24f	21,033,397			
26	Joint costs. Check here ► If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	2.,500,601			

art X	Balance Sheet			Page 1
		(A) Beginning of year		(B) End of year
1	Cash—non-interest-bearing	64,882	1	307,370
2	Savings and temporary cash investments	8,331,142	2	8,667,514
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	659,643	4	247,31
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)(B). Complete Part II of Schedule L		5 6	And the second
Assets 8 8	Notes and loans receivable, net		7	
8   2	Inventories for sale or use		8	
<sup>⊄</sup>   9	Prepaid expenses and deferred charges	413,128	_9	447,285
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		. ,	
l t	Less: accumulated depreciation 10b 2,345,604	835,510	10c	2,123,088
11	Investments—publicly traded securities	3,744,687	11	4,895,591
12	Investments-other securities. See Part IV, line 11		12	
13	Investments—program-related. See Part IV, line 11		13	
14	Intangible assets	1,836,692	14	1,244,378
15	Other assets. See Part IV, line 11	56,477	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	15,942,161	16	17,932,539
17	Accounts payable and accrued expenses	6,051,776	17	5,481,154
18	Grants payable		18	
19	Deferred revenue	4,038,092	19	5,706,718
20	Tax-exempt bond liabilities		20	, , , , , ,
	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22 22 22 22 22 22 22 22 22 22 22 22 2	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
	persons. Complete Part II of Schedule L	424 600	22	
23	Secured mortgages and notes payable to unrelated third parties	131,690	23	75,954
24	Unsecured notes and loans payable to unrelated third parties Other liabilities. Complete Part X of Schedule D	504.447	24	
25 26	Total liabilities. Add lines 17 through 25	524,147	25	743,719
ν <sub>α</sub>	Organizations that follow SFAS 117, check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.	10,745,705	26	12,007,545
27	Unrestricted net assets	5,196,456	27	5,924,994
e   28	Temporarily restricted net assets		28	0,024,004
29	Permanently restricted net assets		29	
27 28 29 30 31 32 33 33	Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			-
۵ ع پ	Constal stock or trust principal or current funds		30	-
20 30 31 31 31		·	31	
A S	Paid-in or capital surplus, or land, building, or equipment fund			
32	Retained earnings, endowment, accumulated income, or other funds  Total net assets or fund balances	5,196,456	32	5 024 004
33	Total liabilities and net assets/fund balances	15,942,161	33	5,924,994
	, otal liabilitios and not absolutians balances	15,942,161	<u>34</u>	17,932,539

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:   Cash  Accrual  Other		,公署	18.3
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.		jagas Andreas	2. 820
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b	<b>✓</b>	<u> </u>
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			1
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	✓	
	If the organization changed either its oversight process or selection process during the tax year, explain in	2.5		
	Schedule O.			
đ	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both	3.13		
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			l
	the Single Audit Act and OMB Circular A-133?	3a	<b>✓</b>	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			l
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b	✓	L

Form **990** (2009)

#### 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

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

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 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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below.

•	Section 527 organizations: Con	mplete Part I-A only.			
If the	e organization answered "Ye Section 501(c)(3) organizations	s," to Form 990, Part IV, line 4, or Fo that have filed Form 5768 (election ur	orm 990-EZ, Part V	I, line 47 (Lobbying Ac Complete Part II-A Do	tivities), then not complete Part II-B
•	Section 501(c)(3) organizations	that have NOT filed Form 5768 (election	n under section 501	(h)) Complete Part II-B.	Do not complete Part II-A
	e organization answered "Ye: Section 501(c)(4), (5), or (6) orga	s," to Form 990, Part IV, line 5 (Prox	y Tax), then		
	me of organization	anizations. Complete Part III		Fmol	oyer identification number
	S Travel Association			53	0231139
Pai	rt I-A Complete if the	e organization is exempt unde	er section 501(c		
1	Provide a description of the	ne organization's direct and indirect	et political campai	gn activities in Part I	V.
2					-0-
3	Volunteer hours				-0-
Pai	rt I-B Complete if the	e organization is exempt und	er section 501(	c)(3).	
1		excise tax incurred by the organiza			8
2		excise tax incurred by organization			·
3 4a	If the organization incurred Was a correction made?	d a section 4955 tax, did it file For			Lyes Lyno
	If "Yes," describe in Part I	· · · · · · · · · · · · · · · · · · ·			· · L Yes L No
		e organization is exempt und	er section 501(	c), except section	501(c)(3).
1		expended by the filing organization			
	activities				-0-
2	527 exempt function activ				-0-
3	line 17b	penditures. Add lines 1 and 2. Er			-0-
4		file Form 1120-POL for this year?			
5		s and employer identification numbe zation listed, enter the amount paid fi			
		were promptly and directly delivered			
		mmittee (PAC). If additional space is			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
N/A					

Page	Δ.	2

Pá	art II-A	Complete if the orga under section 501(h)	anization is exem ).	pt under sectio	n 501(c)(3) and	filed Form 5768	3 (election
A	Check ▶	□ if the filing organize	ation belongs to a	n affiliated grou	ıp.		
В	Check ▶	☐ if the filing organize	ation checked box	x A and "limited	control" provision	ons apply.	
					ed.)	(a) Filing organization's totals	(b) Affiliated group totals
18	Total lo	bbying expenditures to in	ifluence public opini	on (grass roots lo	bbying)		
_			•	\ <b>~</b>			
c	Total lol	bbying expenditures (add	lines 1a and 1b)				
c	i Other e	xempt purpose expenditu	ıres				
e							
f			nter the amount from	the following tab	ole in both		
					nt is:		i jet vijet i
	Over \$50	0,000 but not over \$1,000,0	00 \$100,000 plus	15% of the excess	over \$500,000		
	Over \$1,0	000,000 but not over \$1,500	,000 \$175,000 plus	10% of the excess	over_\$1,000,000.		
				5% of the excess	over \$1,500,000.		
		<del>` ` </del>				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* * * * * * * * * * * * * * * * * * * *
g		•	•				
h		=					
i						4700	
1							
	(The term "expenditures" means amounts paid or incurred.)  a Total lobbying expenditures to influence public opinion (grass roots lobbying)  b Total lobbying expenditures to influence a legislative body (direct lobbying)  c Total lobbying expenditures (add lines 1a and 1b)  d Other exempt purpose expenditures  e Total exempt purpose expenditures (add lines 1c and 1d)  f Lobbying nontaxable amount. Enter the amount from the following table in both columns.  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000  Over \$500,000 but not over \$1,000,000  S100,000 plus 15% of the excess over \$500,000  Over \$1,000,000 but not over \$1,500,000  S225,000 plus 5% of the excess over \$1,500,000  Over \$17,000,000  Grassroots nontaxable amount (enter 25% of line 1f)  Subtract line 1g from line 1a. If zero or less, enter -0-						
		Lol	bbying Expenditure	s During 4-Year	Averaging Period	1	-
			(a) 2006	<b>(b)</b> 2007	(c) 2008	( <b>d)</b> 2009	(e) Total
2a	Lobbying	nontaxable amount					
b							_
С	Total lobb	oying expenditures					
d	Grassroot	s nontaxable amount					
е							
f	Grassroot	s lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2009

			)	_	(b)	
	Ye	es	No		Amoun	t
legislation, including any atter referendum, through the use of:	rganization attempt to influence foreign, national, state or local mpt to influence public opinion on a legislative matter or			or the first		
a Volunteers?		$\dashv$		,		
b Paid staff or management (include	e compensation in expenses reported on lines 1c through 1i)?	_		*		
c Media advertisements?		_				
d Mailings to members, legislators	s, or the public?					
e Publications, or published or bro	oadcast statements?	4				
f Grants to other organizations fo		_		ļ		
g Direct contact with legislators, t	their staffs, government officials, or a legislative body?	$\dashv$				
h Rallies, demonstrations, seminar	rs, conventions, speeches, lectures, or any similar means? .	4				
i Other activities? If "Yes," descri	ibe in Part IV	v 20		ļ		
j Total. Add lines 1c through 1i				ļ		
	the organization to be not described in section 501(c)(3)? .	_		-		
	ny tax incurred under section 4912	3	·	<u> </u>		
		-Ç	است. تدو	ļ	<del></del>	
	a section 4912 tax, did it file Form 4720 for this year?			<u> </u>	••	<u></u>
Part III-A Complete if the org 501(c)(6).	anization is exempt under section 501(c)(4), section 501(	c)(	5), o	r sec	tion	
				<del></del>	Yes	No
1 Were substantially all (90% or n	nore) dues received nondeductible by members?				<del></del>	1
	in-house lobbying expenditures of \$2,000 or less?	•	•	2		7
	yover lobbying and political expenditures from the prior year?	•	•	3		Ż
501(c)(6) if BOTH Pa	art III-A, lines 1 and 2 are answered "No" OR if Part III-A	, li		r sec		ed
501(c)(6) if BOTH Pa "Yes."		i, ii			nswer	
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a	amounts from members bying and political expenditures (do not include amounts of political		ne 3			
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob	amounts from members bying and political expenditures (do not include amounts of political		ne 3		8,50	8,86
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob expenses for which the section a Current year	amounts from members  obying and political expenditures (do not include amounts of political not 527(f) tax was paid).		ne 3		8,50	8,86 0,47
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob expenses for which the section a Current year	amounts from members bying and political expenditures (do not include amounts of political		1 2a 2b 2c		8,50 82	8,86 0,47
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob expenses for which the sectio a Current year b Carryover from last year c Total	amounts from members  obying and political expenditures (do not include amounts of political not 527(f) tax was paid).		1 2a 2b 2c 3	is a	8,50 82	8,86 0,47
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob expenses for which the section a Current year b Carryover from last year c Total Aggregate amount reported in sec	amounts from members  obying and political expenditures (do not include amounts of political n 527(f) tax was paid).	al	1 2a 2b 2c	is a	8,50 82	8,86 0,47
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob expenses for which the section a Current year b Carryover from last year c Total Aggregate amount reported in section if notices were sent and the am excess does the organization aggregate."	amounts from members  obying and political expenditures (do not include amounts of political notation 527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	al ne	1 2a 2b 2c 3	is a	8,50 82	8,86 0,47 -(
501(c)(6) if BOTH Pa "Yes."  1 Dues, assessments and similar a 2 Section 162(e) nondeductible lob expenses for which the section a Current year b Carryover from last year c Total Aggregate amount reported in section If notices were sent and the amexcess does the organization aggregated and political expenditure next year	amounts from members  obying and political expenditures (do not include amounts of political notation 527(f) tax was paid).  ction 6033(e)(1)(A) notices of nondeductible section 162(e) dues	al ne	1 2a 2b 2c 3	is a	8,50 82	8,86 0,47 -( 0,47 6,86

#### SCHEDULE D (Form 990)

Department of the Treasury

## **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 Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization **U S Travel Association** 53 0231139 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts n/a Total number at end of year . . . Aggregate contributions to (during year) 2 Aggregate grants from (during year) . Aggregate value at end of year . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . Yes 🗌 No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Total number of conservation easements . . . . . 2b 2c Number of conservation easements on a certified historic structure included in (a) . . . Number of conservation easements included in (c) acquired after 8/17/06 . . . . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ..... Number of states where property subject to conservation easement is located ▶ ...... Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. n/a b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: \$ ...... 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: 

Schedule	D (	Form	990)	2009
----------	-----	------	------	------

d Equipment Web Site	Pa	Organizations Maintain	ing Collections	of Art, Hi	storical Trea	asures, or	Other Similar As	ssets (continued)
b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 Duning the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	3	Using the organization's acquisition collection items (check all that appl	, accession, and y): n/a	other reco	ds, check an	y of the follo	owing that are a si	gnificant use of its
c	а	Public exhibition		d	Loan o	r exchange	programs	
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.  During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answerted "Yes" to Form 990, Part XIV. In Part IV	b	Scholarly research		е	☐ Other			
Part XIV.  5 Dung the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds atther than to be maintained as part of the organization's collection?	C	Preservation for future general	rions					
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		ation's collection	s and exp	ain how they	further the	organization's exe	mpt purpose in
IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XF   No b If "Yes," explain the arrangement in Part XIV and complete the following table.  C Beginning balance  d Additions during the year  1 Id   Id   Id   Id   Id   Id   Id   Id	5	During the year, did the organization assets to be sold to raise funds rathe	solicit or receive d	onations of ained as pa	art, historical art of the orga	treasures, o	r other similar illection?	Yes No
a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  c Beginning balance d Additions during the year d Id e Distributions during the year 1 Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization include an amount on Form 990, Part X, line 21? Line Tending balance 2 Did the organization shapping of year balance 3 Did the organization shapping organization shap	Pa						ered "Yes" to Fo	rm 990, Part
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 217		included on Form 990, Part X? .					or other assets no	<b>t</b>
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21?  Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. n/a  Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ► % b Permanent endowment ► % c Term endowment ► % 3a Are there endowment ► % 3 Are there endowment I hunds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the Intended uses of the organization's endowment tunds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organization's endowment funds.  Describe in Part XIV the Intended uses of the organiza	b	If "Yes," explain the arrangement in	Part XIV and cor	mplete the	following tab	le.	Aı	mount
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 b if Yes, "explain the arrangement in Part XIV.  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. n/a  Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment I funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) rel	С	Beginning balance				1	С	
e Distributions during the year  f Ending balance  2 Did the organization include an amount on Form 990, Part X, line 217  2 Did the organization include an amount on Form 990, Part X, line 217  3 Did the organization include an amount on Form 990, Part X, line 217  3 Did the organization include an amount on Form 990, Part X, line 217  4 Descributions  5 Did the organization answered "Yes" to Form 990, Part IV, line 10. n/a  6 Did Yes" to Form 990, Part IV, line 10. n/a  6 Did Yes" to Form 990, Part IV, line 10. n/a  6 Did Yes Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. n/a  8 Did Yes Part V Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10. n/a  9 Did Yes Part V Endowment Funds, Complete if the organization that are held and administered for the organization by:  9 Did Yes Part V Endowment Funds not in the possession of the organization that are held and administered for the organization by:  10 Unrelated organizations  11 Did Yes Part V Endowment Funds not in the possession of the organization that are held and administered for the organization by:  12 Describe in Part XIV the intended uses of the organization's endowment funds.  13 Describe in Part XIV the intended uses of the organization's endowment funds.  14 Land  15 Describe in Part XIV the intended uses of the organization's endowment funds.  15 Describe in Part XIV the intended uses of the organization's endowment funds.  16 Describe in Part XIV the intended uses of the organization's endowment funds.  17 Describe in Part XIV the intended uses of the organization's endowment funds.  18 Land  19 Describe in Part XIV the intended uses of the organization's endowment funds.  19 Describe in Part XIV the intended in the part Y the intended in the part Y the part Y the intended in the part Y the part Y the intended in the part Y the part Y the part Y the part Y the part Y the part Y the part Y the part Y the part Y the part Y the part Y the part Y the part Y th	d						d	
f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 217	е						е	
Did the organization include an amount on Form 990, Part X, line 21?  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. n/a  Beginning of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  Provide the estimated percentage of the year end balance held as:  a Board designated or quasi-endowment ▶	f						f	
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years		Did the organization include an amount "Yes," explain the arrangement in	ount on Form 990 Part XIV.	), Part X, li	ne 21? .			
Beginning of year balance . b Contributions . c Net investment earnings, gains, and losses . d Grants or scholarships . e Other expenditures for facilities and programs . f Administrative expenses g End of year balance	Pai	t V Endowment Funds. Co	mplete if the or	ganizatior	answered	"Yes" to F	orm 990, Part IV	, line 10. n/a
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶			(a) Current year	(b) Prio	year (c) T	wo years back	(d) Three years back	(e) Four years back
c Net investment earnings, gains, and losses	1a	Beginning of year balance			Z. \$			(3 1
and losses  d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment ▶ % 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Describen of investment (a) Cost or other basis (investment) (b) Cost or other basis (cither) (c) Accumulated depreciation (d) Book value depreciation  b Buildings c Leasehold improvements 756,109	b	Contributions				alan (NC)		
d Grants or scholarships	С	Net investment earnings, gains,				4.3		
e Other expenditures for facilities and programs .  f Administrative expenses g End of year balance .  2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Term endowment ▶ %  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (nvestment)  (b) Cost or other basis (of Accumulated depreciation)  1a Land b Buildings c Leasehold improvements 756,109 756,109 756,109 561,259 194,850 d Equipment Web Site 2,051,188 2,051,188 1,368,997 682,191 e Other 1,661,396 1,661,396 1,661,396 1,245,047		and losses					Box	
and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	d	Grants or scholarships	<u></u>	ļ			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
g End of year balance .  2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	е				Ē			
Provide the estimated percentage of the year end balance held as:  a Board designated or quasi-endowment ▶								
a Board designated or quasi-endowment ▶	2	Provide the estimated percentage of	f the year end ba	lance held	as:			- <del></del>
b Permanent endowment ▶	а		-					
Term endowment ▶	b							
Ves   No   (i)   unrelated organizations   3a(i)	c							
Ves   No   (i)   unrelated organizations   3a(i)	За	Are there endowment funds not in th	e possession of t	he organiza	tion that are	held and ad	ministered for the	
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment  (a) Cost or other basis (b) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value  (d) Book value  2 Description of investment  (d) Book value  (d) Book value  (d) Book value  2 Description of investment  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value  (d) Book value			,	<b>J</b>				Yes No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIV the intended uses of the organization's endowment funds.  Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.  Description of investment (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value depreciation (d) Book value (investment) (i		(i) unrelated organizations						3a(i)
4 Describe in Part XIV the intended uses of the organization's endowment funds.    Part VI								3a(ii)
Investments		If "Yes" to 3a(ii), are the related orga	anizations listed a	as required	on Schedule	R?		3b
Description of investment   (a) Cost or other basis (investment)   (b) Cost or other basis (other)   (c) Accumulated depreciation   (d) Book value								
tall Land         (investment)         basis (other)         depreciation           b Buildings               c Leasehold improvements         756,109         756,109         561,259         194,850           d Equipment entered of the control of the contro	Par	Investments—Land, Bu	theck all that apply):    Indian					
b Buildings		Description of investment						(d) Book value
c Leasehold improvements     756,109     756,109     561,259     194,850       d Equipment of Other     Web Site     2,051,188     2,051,188     1,368,997     682,191       e Other     1,661,396     1,661,396     415,349     1,246,047	1a	Land				ÇK)		
d Equipment Web Site	b	Buildings						
e Other	C	Leasehold improvements		756,109	756	,109	561,259	194,850
e Other			2	.051.188	2,051	.188	1,368,997	682,191
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ 2.123.088		Other			1,661	.396	415,349	1,246,047
	Total	. Add lines 1a through 1e. (Column (d) i	must equal Form 9	90, Part X,	column (B), lin	e 10(c).) .	•	2.123.088

Part VII Investments—Other Securities.	See Form 990, Part	X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives	- <u> </u>	
Closely-held equity interests		
Other none		
		<u> </u>
		<del> </del>
	<del></del>	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12)		
Part VIII Investments—Program Related.	. See Form 990, Part	X, line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
none		
	<del></del>	
Total. (Column (b) must equal Form 990, Part X, col (B) line 13.) ▶		A CONTRACTOR OF THE STATE OF TH
Part IX Other Assets. See Form 990, Part	X, line 15.	
(8	a) Description	(b) Book value
none	<del></del>	
	<del></del>	
	<del></del>	
<del></del>		
Total. (Column (b) must equal Form 990, Part X, col. (B)	) line 15.)	
Part X Other Liabilities. See Form 990, P	art X, line 25.	
1. (a) Description of liability	(b) Amount	
Federal income taxes		
Deferred rent credit	743,	719
		The state of the s
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶	743,	719

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 XIII, line 2d Other - Expense from the activity of US Travel Association PAC not reported on form 990 but included

on audited financial statements

on audited financial statements

0	
Page	

Part XIV Supplemental Information (continued)	
Part X 2 - Fin 48 Footnote: On January 1,2009. the Association adopted the accounting standard on accounting for	
uncertainty in income taxes, which addresses the determination of whether tax benefits claimed or expected	
to be claimed on a tax return should be recorded in the financial statements. Under this guidance, the	
Association may recognize the tax benefit from an uncertain tax position only if it is more-likely-than-not that	
the tax position will be sustained on examintaion by taxing authorities, based on the technical merits	
of the position. The tax benefits recognized in the financial statements from such a position are measured	
based on the largest benefit that has the greater than 50% likelihood of being realized upon ultimate	
settlement. The guidance on accounting for uncertainty in income taxes also addresses de-recognition,	
classification, interest and penalties on income taxes, and accounting in interim periods. The Association	
had no such position recorded in the financial statements at December 31, 2009. With few exceptions,	
art X 2 - Fin 48 Footnote: On January 1,2009. the Association adopted the accounting standard on accounting for incertainty in income taxes, which addresses the determination of whether tax benefits claimed or expected as be claimed on a tax return should be recorded in the financial statements. Under this guidance, the association may recognize the tax benefit from an uncertain tax position only if it is more-likely-than-not that the tax position will be sustained on examintaion by taxing authorities, based on the technical merits the position. The tax benefits recognized in the financial statements from such a position are measured as on the largest benefit that has the greater than 50% likelihood of being realized upon ultimate attlement. The guidance on accounting for uncertainty in income taxes also addresses de-recognition, assification, interest and penalties on income taxes, and accounting in interim periods. The Association	

## Schedule F (Form 990)

Totals

## Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047
2009
Open to Public

Internal Revenue Service

Name of the organization

U S Travel Association

Department of the Treasury

Inspection
Employer identification number
53 0231139

"Yes" to Form 9	90, Part IV, line 1	4b.	e the United States	. Complete if the organiz	ation answered				
	s' eligibility for th	e grants or as	sistance, and the selec	ne amount of the grants to awa					
2 For grantmakers. Desc United States.	cribe in Part IV th	e organization	's procedures for monit	toring the use of grant fu	nds outside the				
3 Activities per Region. (L	Jse Schedule F-1	(Form 990) if	additional space is nee	ded.)					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region				
South America	1	1	Trade Show	See note below	8,655				
East Asia	1	1	Trade Show	See note below	36,214				
East Asia	0	0	Trade Show	See note below	253,380				
Note to Col (e) above:	Trade s	now to pro	mote travel to	the United States					
					<del></del>				
					<del></del>				
					····				
	-				·····				
					<del> </del>				
					·				
<del></del>				<del>                                     </del>					
		-							

298,249

Page 2	Form 990,	(i) Method of valuation (book, FMV, appraisal, other		l.						
	swered "Yes" to \$5,000	(h) Description of non-cash assistance								
	he organization and ceived more than	(g) Amount of non-cash assistance								
	tes. Complete if ti o one recipient re	(f) Manner of cash disbursement						.,		
	ide the United Sta Check this box if no	(e) Amount of cash grant								
	or Entities Outsider than \$5,000. Can beeded.	(d) Purpose of grant								
	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. □ /a	(c) Region								
	Other Assistan 15, for any recip le F-1 (Form 990	(b) IRS code section and EIN (if applicable)	X X X X X X X X X X X X X X X X X X X						10	7.2.
Schedule F (Form 990) 2009	Part II Grants and Part IV, line Use Schedu	1 (a) Name of organization			78.					

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

Enter total number of other organizations or entities ~

က

Schedule F (Form 990) 2009

Schedule F (Form 990) 2009

Page 3

Page 1

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.

Description of the organization answered "Yes" to Form 990, Part IV, line 16.

(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										
e of grant or assistance (b) Region (c) Number of practice (c) Number of grant or assistance (d) Region (e) Region (e) Number of grant or assistance (f) Number or assistance (f) Number of grant or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Number or assistance (f) Numb										
(a) Type of grant or assistance										

Schedule F (Form 990) 2009

Schedule F (Fo	um 990) 2009	Page 4
Part IV	Supplemental Information  Complete this part to provide the information required in Part I, line 2, and any additional information.	
	Complete this part to provide the information required in Part I, line 2, and any additional information.	<del></del> -
•••••		
•••••	······································	
	······································	
••••••	***************************************	
		• • • • • • • • • •
		• • • • • • • • • • • • • • • • • • • •
		••
	•••••••••••••••••••••••••••••••••••••••	
		•••••
		•••
•••••	•••••••••••••••••••••••••••••••••••••••	
•••••		
		•
	••••••	•••••
• • • • • • • • • • • • • • • • • • • •	•••••••••••••••••••••••••••••••••••••••	••••••

#### 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.

OMB No 1545-0047 Open to Public

0231139

Department of the Treasury Internal Revenue Service Name of the organization

**U. S. Travel Association** 

▶ Attach to Form 990. ▶ See separate instructions. Inspection **Employer identification number** 

**Questions Regarding Compensation** No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions Payments for business use of personal residence ☐ Tax indemnification and gross-up payments Health or social club dues or initiation fees ☐ Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? n/a 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. 9 Compensation committee ✓ Written employment contract ☐ Independent compensation consultant Compensation survey or study ☐ Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?..... 4a 4b **b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . . 4c c Participate in, or receive payment from, an equity-based compensation arrangement?.... If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. n/a For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?.... 5a 5b If "Yes" to line 5a or 5b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: 6a a The organization?.......... 6b **b** Any related organization? . . . . Ç. If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . . . . . . . . . . . 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe 8 in Part III If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

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	f W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name		(f) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a) <b>(</b> ()(a)	reported in prior Form 990 or Form 990-EZ
Roger J Dow	8	635,334.80	391,687.72	0	100,043.70	16,982.57	1,144,048.79	0
Bruce Bommarito	€ (	242,572.78	44,000.00	0	10,241.60	14,730.12	311,544.50	0
Dennis Petroskey	€ €	224,592.07	26,868.00	0	9,922.90	17,159.76	278,542.73	0
Dennis Castleman	€ €	154,838.80	10,500.00	0	6,594.90	5,225.28	177,158.98	0
Gary Oster	€ €	225,421.00	77,475.00	0	10,414.80	14,682.12	327,992.92	0
Suzanne Cook	€€	213,625.38	24,865.00	0	64,204.60	14,823.72	317,518.70	0
Geoffrey Freeman	≘€	261,762.95	48,000.00	0	10,436.20	5,452.32	325,651.47	0
Adam Vance	88	217,634.35	25,834.00	0	9,823.90	18,314.16	271,606.41	0
Patty Hubbard	88	137,604.72	9,579.00	0	40,554.20	14,583.60	202,321.52	0
Alma P Rojas	€€	177,054.61	10,500.00	0	7,540.80	6,925.08	202,020.49	0
Bryan Lewis	εE	139,505.78	9,800.00	0	6,155.30	2,736.36	158,197,44	0
Eric Weber	EE	157,464.33	11,130.00	0	6,962.80	18,259.20	193,816.33	0
	(E)							0
	3							
	8							
	€€							0000 0000
							OCIR	Schedule J (Form 990) 2009

Part III

none

#### 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

Department of the Treasury Internal Revenue Service Name of the organization

Inspection Employer identification number

**U S Travel Association 53** : 0231139 Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? 1 (a) Name of disqualified person (b) Description of transaction Yes No n/a 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (a) Name of interested person and purpose (b) Loan to or from (f) Approved (g) Written (c) Onginal (d) Balance due (e) In default? the organization? by board or agreement? principal amount committee? To From Vac Nο Yes No Yes No n/a Total Part III Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the (c) Amount and type of assistance organization n/a **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (a) Name of interested person (c) Amount of (e) Shanng of (b) Relationship between (d) Description of transaction organization's interested person and the transaction revenues? organization Yes No Barbara Richardson Former board member 165,053 Marketing consultant

#### SCHEDULE M (Form 990)

## **Noncash Contributions**

2009

Open To Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

➤ Attach to Form 990.

Inspection Employer identification number

	Travel Association				53	023	31139	
	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions	(c) Revenues reported of Form 990, Part VIII, line		Method of	(d) f determining renues	g
1	Art – Works of art							
2	Art-Historical treasures							
3	Art – Fractional interests							
4	Books and publications							
5	Clothing and household			***				
-	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property	1 .						
9	Securities-Publicly traded .							
10	Securities-Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities - Miscellaneous .		·					
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation							
17	contribution—Other							
15	Real estate—Residential							
16	Real estate—Commercial	1				•		
17	Real estate - Other	1						
18	Collectibles	1						
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens		· · · · · · · · · · · · · · · · · · ·					
24	Archeological artifacts							
25	Other ► ( See note-Part II )	✓	4	1,661,396			cost	
26	Other ▶ ()							
27 28	Other ► (							
29	Number of Forms 8283 receive					29	-0-	
	which the organization complete	ea Form 82	283, Part IV, Donee Acknow	wieagement	٠ .	25		No
							103	110
30a	During the year, did the organiz							
	it must hold for at least three ye				ot requ	nrea to be	30a	✓
	used for exempt purposes for the					 n.a	000	
	If "Yes," describe the arrangem							
31	Does the organization have a contributions?	-	ptance policy that requir			1-standard	31	1
32a	Does the organization hire or use contributions?	•	rties or related organization	•		II noncash	32a	1
b	If "Yes," describe in Part II.						1	
33	If the organization did not report describe in Part II.	revenues ir	n column (c) for a type of pro	operty for which colum	nn (a) i:	s checked, n/a		,

Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.
Part I, line	25 - Other: Web site built in conjunction with the US Department of Commerce where on completion the
web site	vas donated by the US Department of Commerce to US Travel Association.
	······································
••••	

#### **SCHEDULE O** (Form 990)

## Supplemental Information to Form 990

Complete to provide information for responses to specific questions on

► Attach to Form 990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Form 990 or to provide any additional information.

Name of the organization Employer identification number U. S. Travel Association 53 0231139 Form 990, Part VI B, line 11A -- The form 990 and supporting documentation is prepared by the Controller, it is then reviewed by the Vice President of Finance, next reviewed by the Chief of Staff to the CEO, next reviewed by the Chief Operating Officer and then reviewed and signed by the President/Chief Executive Officer. Form 990, Part VI, line 19 -- The noted documents are made available to the public by request. Form 990, Part VI, line 12 - While a conflict of interest policy has not been adopted the Association has plans to adopt a policy. Form 990 Part I, lines 21and 23; Part X, lines 1,16,27,33 and 34 - Balance Sheet Cash account and Net Assets varies from the audited financial statements by the amount of Cash In Bank for the US Travel PAC. The activities of the US Travel PAC are included as a part of the auditied financial statements but are not included on the form 990.

SCHEDULE R (Form 990)

Department of the Treasury Internat Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. ► Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

0231139 53

(f) Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) م /a 1,246,047 (e) End-of-year assets Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) 2,790,099 (d) Total income (c)
Legal domicile (state
or foreign country) 띰 Primary activity operate web site € Discover America LLC 1100 New York Ave Washington DC (a)Name, address, and EIN of disregarded entity U S Travel Association (26-2307661)Part I Part II

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

Cat. No 50135Y

Schedule R (Form 990) 2009

(f)
Direct controlling entity

Public charity status (if section 501(c)(3))

(d) Exempt Code section

Legal domicile (state or foreign country)

Primary activity

(a)Name, address, and EIN of related organization

u/a

11a

501(c) (3)

20

and Research

1100 New York Ave, Washington DC 20005 (52 0231139)

Travel Industry Association of America Foundation

Travel Industry Grants

Schedule R (Form 990) 2009

General or managing partner? Percentage ownership Yes No Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, Ξ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets (h)
Disproportionate
allocations? Yes No Share of total income (g) Share of end-of-year assets line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Type of entity (C corp, S corp, or trust) Share of total income (d) (a) Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) (d)
(Direct controlling | Primary activity (c)
Legal
domicile
(state or
foreign Name, address, and EIN of related organization Primary activity Name, address, and EIN of related organization Part III Part IV п/а

Schedule R (Form 990) 2009

Schedule R (Form 990) 2009		Page 3
Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34,	, line 34, 35, or 36.)	
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.  1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II—IV?  2 Receipt of (ii) interest (iii) annuities (iiii) royalties or (iv) rent from a controlled entity.  3 Beceipt of (i) interest (iii) annuities (iiii) royalties or (iv) rent from a controlled entity.  4 Giff, grant, or capital contribution from other organization(s).  5 Giff, grant, or capital contribution from other organization(s).  6 Loans or loan guarantees to or for other organization(s).  9 Loans or loan guarantees by other organization(s).	in Parts II–IV?	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f Sale of assets to other organization(s)  g Purchase of assets from other organization(s)  h Exchange of assets  i Lease of facilities, equipment, or other assets to other organization(s)		÷ 19 ÷
<ul> <li>j Lease of facilities, equipment, or other assets from other organization(s)</li> <li>k Performance of services or membership or fundraising solicitations for other organization(s)</li> <li>l Performance of services or membership or fundraising solicitations by other organization(s)</li> <li>m Sharing of facilities, equipment, mailing lists, or other assets</li> <li>n Sharing of paid employees</li> </ul>		-
o Reimbursement paid to other organization for expenses		10 d
q Other transfer of cash or property from other organization(s)	relationships and trar	1q
1	(b) Transaction type (a-r)	(c) Amount involved
(1) n/a		
(2)		
(6)		
(4)		
(5)		
	Sched	Schedule R (Form 990) 2009

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships. Part VI

(B)	(a)	(0)	(D)	(0)	ε	(a)	ε
Name, address, and EIN of entity	Primary activity	nicile	Are all partner	Share of	Disproportionate		General or
			section 501(c)(3) organizations?	end-of-year assets	allocations?	amount in box 20 of Schedule K-1 (Form 1065)	managing partner?
			Yes No		Yes No		Yes No
n/a							
		i					
						Schedule R (Form 990) 2009	n 990) 2009

U S Travel Association List of Board of Directorts As of December 31, 2009

col a	col b	col c	col d	col e	col f
Alısa Bailey	2hr	Director	0	0	0
Andreas Sappok	2hr	Director	0	0	0
Betsy Coleman Wall	2hr	Director	0	0	0
Bill Byrne	2hr	Director	0	0	0
Bob Gallagher	2hr	Director	0	0	0
Bob Lander	2hr	Director	0	0	0
Bonnie Carlson	2hr	Director	0	0	0
Brad Dean	2hr	Director	0	0	0
Brian Hoyt	2hr	Director	0	0	0
Brooke Christian	2hr	Director	0	0	0
Bruce Charendoff	2hr	Director	0	0	0
Bruce Fears	2hr	Director	0	0	0
Bruce Hyde	2hr	Director	0	0	0
Caroline Beteta	2hr	Director	0	0	0
Chad Prosser	2hr	Director	0	0	0
Charles Ahlers	2hr	Director	0	0	0
Chris Malone	2hr	Director	0	0	0
Chris Soder	2hr	Director	0	0	0
Chris Thompson	2hr	Director	0	0	0
Christie Hicks	2hr	Director	0	0	0
Christine Duffy	2hr	Director	0	0	0
Christopher Spyridon	2hr	Director	0	0	0
Chuck Bowling	2hr	Director	0	0	0
Clint Wheeler	2hr	Director	0	0	0
Craig Ray	2hr	Director	0	0	0
D.T. Minich, CDME	2hr	Director	0	0	0
Dan O'Byrne	2hr	Director	0	0	0
Dann Lewis	2hr	Director	0	0	0
David Lim	2hr	Director	0	0	0
Dawn Drew	2hr	Director	0	0	0
Dawn Sweeney	2hr	Director	0	0	0
Dennis Szefel	2hr	Director	0	0	0
Diane Shober	2hr	Director	0	0	0
Don Schumacher	2hr	Director	0	0	0
Don Welsh	2hr	Director	0	0	0
Dorothy Dowling	2hr	Director	0	0	0
Douglas Frechtling	2hr	Director	0	0	0
Douglas Shifflet	2hr	Director	0	0	0
Elliott Ferguson	2hr	Director	0	0	0

U S Travel Association List of Board of Directorts As of December 31, 2009

col a	col b	col c	col d	col e	col f
	COI D	<u> </u>	coi u	COI E	COLI
Fay P. Beauchine	2hr	Director	0	0	0
Felicia Fisher	2hr	Director	0	0	0
Gary Sain, CTC	2hr	Director	0	0	0
George Fertitta	2hr	Director	0	0	0
George Zimmermann	2hr	Director	0	0	0
Greg Hogue	2hr	Director	0	0	0
Greg Ortale	2hr	Director	0	0	0
Hank Todd	2hr	Director	0	0	0
Howard Nusbaum	2hr	Director	0	0	0
Humberto Rivero	2hr	Director	0	0	0
J. Mickey Rowley	2hr	Director	0	0	0
J. Stephen Perry	2hr	Director	0	0	0
James C. May	2hr	Director	0	0	0
James Rasulo	2hr	Director	0	0	0
James Ricketts	2hr	Director	0	0	0
Jan Kostner	2hr	Director	0	0	0
Jeff Miller	2hr	Director	0	0	0
Jeff Senior	2hr	Director	0	0	0
Jeffrey Vasser	2hr	Director	0	0	0
Jerry Mosiello	2hr	Director	0	0	0
Joe D'Alessandro	2hr	Director	0	0	0
Joe Terzi	2hr	Director	0	0	0
John Clark III	2hr	Director	0	0	0
John DeLeva	2hr	Director	0	0	0
John Sprouls	2hr	Director	0	0	0
Jonathan Davies	2hr	Director	0	0	0
Joseph Couceiro	2hr	Director	0	0	0
Joseph McInerney	2hr	Director	0	0	0
Julie Chase	2hr	Director	0	0	0
Kathleen Matthews	2hr	Director	0	0	0
Kaye Ceille	2hr	Director	0	0	0
Kelly Phillips	2hr	Director	0	0	0
Kenneth S. Esterow	2hr	Director	0	0	0
Kevin Kane	2hr	Director	0	0	0
Lalia Rach, Ed.D.	2hr	Director	0	0	0
Leigh von der Esch	2hr	Director	0	0	0
Lewis R. Shomer	2hr	Director	0	0	0
Lisa Simon	2hr	Director	0	0	0
Lori Erdos	2hr	Director	0	0	0

U S Travel Association List of Board of Directorts As of December 31, 2009

Lynn Minges 2hr Director 0 0 0 0 0 Margot Amelia 2hr Director 0 0 0 0 0 0 Margot Amelia 2hr Director 0 0 0 0 0 0 0 Mark Liberman 2hr Director 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	col a	col b	col c	col d	col e	col f
Margot Amelia         2hr         Director         0         0           Maria Sastre         2hr         Director         0         0         0           Mark Liberman         2hr         Director         0         0         0           Matthew Crummack         2hr         Director         0         0         0           Matthew Shay         2hr         Director         0         0         0           Meryl Levitz         2hr         Director         0         0         0           Michael Gallaget         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael Fegley         2hr         Director         0         0         0           Michael J. Deitemeyer         2hr         Director         0         0         0           Michael J. Sagata				001 U	COI E	COLI
Maria Sastre         2hr         Director         0         0         0           Mark Liberman         2hr         Director         0         0         0           Matthew Crummack         2hr         Director         0         0         0           Matthew Shay         2hr         Director         0         0         0           Maura Gast         2hr         Director         0         0         0           Meryl Levitz         2hr         Director         0         0         0           Michael Cerletti         2hr         Director         0         0         0           Michael Fegley         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael J. Deitemeyer         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike	Lynn Minges	2hr	Director	0	0	0
Mark Liberman         2hr         Director         0         0           Matthew Crummack         2hr         Director         0         0         0           Matthew Shay         2hr         Director         0         0         0         0           Meryl Levitz         2hr         Director         0         0         0         0           Michael Cerletti         2hr         Director         0         0         0         0           Michael Gehrisch         2hr         Director         0         0         0         0	Margot Amelia	2hr	Director	0	0	0
Matthew Crummack         2hr         Director         0         0           Matthew Shay         2hr         Director         0         0         0           Maura Gast         2hr         Director         0         0         0           Meryl Levitz         2hr         Director         0         0         0           Michael Cerletti         2hr         Director         0         0         0           Michael Fegley         2hr         Director         0         0         0           Michael Fegley         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Mike Gallagher	Maria Sastre	2hr	Director	0	0	0
Matthew Shay         2hr         Director         0         0           Maura Gast         2hr         Director         0         0         0           Meryl Levitz         2hr         Director         0         0         0           Michael Cerletti         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael J. Deitemeyer         2hr         Director         0         0         0 </td <td>Mark Liberman</td> <td>2hr</td> <td>Director</td> <td>0</td> <td>0</td> <td>0</td>	Mark Liberman	2hr	Director	0	0	0
Maura Gast         2hr         Director         0         0           Meryl Levitz         2hr         Director         0         0         0           Michael Cerletti         2hr         Director         0         0         0           Michael Fegley         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael J. Deitemeyer         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Parm Breaux         2h	Matthew Crummack	2hr	Director	0	0	0
Meryl Levitz         2hr         Director         0         0         0           Michael Cerletti         2hr         Director         0         0         0           Michael Fegley         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Michael McCormick         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Pam Breaux         2hr         Director         0         0         0           Pam Breaux	Matthew Shay	2hr	Director	0	0	0
Michael Cerletti         2hr         Director         0         0           Michael Fegley         2hr         Director         0         0           Michael Gehrisch         2hr         Director         0         0           Michael Gehrisch         2hr         Director         0         0           Michael Massari         2hr         Director         0         0           Michael McCormick         2hr         Director         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0         0           Pam Breaux         2hr         Director         0         0         0         0           Pam Breaux	Maura Gast	2hr	Director	0	0	0
Michael Fegley         2hr         Director         0         0         0           Michael Gehrisch         2hr         Director         0         0         0           Michael J. Deitemeyer         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Nicki E. Grossman         2hr         Director         0         0         0           Pam Breaux         2hr         Director         0         0         0           Pamlea Wright, CTC         2hr         Director         0         0         0           Patrick Lafferty         2hr         Director         0         0         0	Meryl Levitz	2hr	Director	0	0	0
Michael Gehrisch         2hr         Director         0         0         0           Michael J. Deitemeyer         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Michael McCormick         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Nicki E. Grossman         2hr         Director         0         0         0           Pam Breaux	Michael Cerletti	2hr	Director	0	0	0
Michael J. Deitemeyer         2hr         Director         0         0         0           Michael Massari         2hr         Director         0         0         0           Michael McCormick         2hr         Director         0         0         0           Mike Gallagher         2hr         Director         0         0         0           Mike Mason         2hr         Director         0         0         0           Nicki E. Grossman         2hr         Director         0         0         0           Nicki E. Grossman         2hr         Director         0         0         0           Pam Breaux         2hr         Director         0         0         0           Patrick Lafferty         2hr         Director         0         0         0           Patrick Laffe	Michael Fegley	2hr	Director	0	0	0
Michael Massari         2hr         Director         0         0           Michael McCormick         2hr         Director         0         0           Mike Gallagher         2hr         Director         0         0           Mike Mason         2hr         Director         0         0           Mike Mason         2hr         Director         0         0           Nicki E. Grossman         2hr         Director         0         0           Pam Breaux         2hr         Director         0         0           Pam Breaux         2hr         Director         0         0           Pamela Wright, CTC         2hr         Director         0         0           Pamela Wright, CTC         2hr         Director         0         0           Patrick Lafferty         2hr         Director         0         0     <	Michael Gehrisch	2hr	Director	0	0	0
Michael McCormick         2hr         Director         0         0           Mike Gallagher         2hr         Director         0         0           Mike Mason         2hr         Director         0         0           Nicki E. Grossman         2hr         Director         0         0           Pam Breaux         2hr         Director         0         0           Patrick Lafferty	Michael J. Deitemeyer	2hr	Director	0	0	0
Mike Gallagher         2hr         Director         0         0           Mike Mason         2hr         Director         0         0           Nicki E. Grossman         2hr         Director         0         0           Pam Breaux         2hr         Director         0         0           Patricker         2hr </td <td>Michael Massari</td> <td>2hr</td> <td>Director</td> <td>0</td> <td>0</td> <td>0</td>	Michael Massari	2hr	Director	0	0	0
Mike Mason         2hr         Director         0         0           Nicki E. Grossman         2hr         Director         0         0           Pam Breaux         2hr         Director         0         0           Pamela Wright, CTC         2hr         Director         0         0           Patrick Lafferty         2hr         Director         0         0           Patrick Moscaritolo         2hr         Director         0         0           Paul Catoe         2hr         Director         0         0           Paul Catoe         2hr         Director         0         0           Paul Serff         2hr         Director         0         0           Paul Serff         2hr         Director         0         0           Richard Scharf         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robin Carson         2hr         Director         0         0	Michael McCormick	2hr	Director	0	0	0
Nicki E. Grossman 2hr Director 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Mike Gallagher	2hr	Director	0	0	0
Pam Breaux         2hr         Director         0         0           Pamela Wright, CTC         2hr         Director         0         0           Patrick Lafferty         2hr         Director         0         0           Patrick Moscaritolo         2hr         Director         0         0           Paul Catoe         2hr         Director         0         0           Paul Serff         2hr         Director         0         0           Paul Serff         2hr         Director         0         0           Rolard Scharf         2hr         Director         0         0           Richard Scharf         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0	Mike Mason	2hr	Director	0	0	0
Pamela Wright, CTC 2hr Director 0 0 0 0 Patrick Lafferty 2hr Director 0 0 0 0 0 Patrick Lafferty 2hr Director 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Nicki E. Grossman	2hr	Director	0	0	0
Patrick Lafferty         2hr         Director         0         0           Patrick Moscaritolo         2hr         Director         0         0           Paul Catoe         2hr         Director         0         0           Paul Serff         2hr         Director         0         0           Richard Scharf         2hr         Director         0         0           Richard Scharf         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0           Robin Carson         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Ron Officer         2hr         Director         0         0	Pam Breaux	2hr	Director	0	0	0
Patrick Moscaritolo 2hr Director 0 0 0 0 0 Paul Catoe 2hr Director 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Pamela Wright, CTC	2hr	Director	0	0	0
Paul Catoe         2hr         Director         0         0           Paul Serff         2hr         Director         0         0           Richard Scharf         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0           Robin Carson         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Roger Dow         2hr         Director         0         0           Ron Officer         2hr         Director         0         0           Ron Peck         2hr         Director         0         0           Rosemary McCormick         2hr         Director         0         0           Rossi Ralenkotter         2hr         Director         0         0           Scott Anderson         2hr         Director         0         0           Sco	Patrick Lafferty	2hr	Director	0	0	0
Paul Serff         2hr         Director         0         0           Richard Scharf         2hr         Director         0         0           Robert Darbelnet         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0           Robin Carson         2hr         Director         0         0           Robin Carson         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Roger Dow         2hr         Director         0         0           Ron Officer         2hr         Director         0         0           Ron Peck         2hr         Director         0         0           Rosemary McCormick         2hr         Director         0         0           Rossi Ralenkotter         2hr         Director         0         0           Scott Anderson         2hr         Director         0         0 <t< td=""><td>Patrick Moscaritolo</td><td>2hr</td><td>Director</td><td>0</td><td>0</td><td>0</td></t<>	Patrick Moscaritolo	2hr	Director	0	0	0
Richard Scharf 2hr Director 0 0 0 0 0 Robert Darbelnet 2hr Director 0 0 0 0 0 Robert Sullivan 2hr Director 0 0 0 0 0 Robert Y Graff 2hr Director 0 0 0 0 0 Robert Y Graff 2hr Director 0 0 0 0 0 Robert Y Graff 2hr Director 0 0 0 0 0 Rodney Fong 2hr Director 0 0 0 0 0 Rodney Fong 2hr Director 0 0 0 0 0 Roger Dow 2hr Director 0 0 0 0 0 Ron Officer 2hr Director 0 0 0 0 0 Rosemary McCormick 2hr Director 0 0 0 0 Ross Hosking 2hr Director 0 0 0 0 Rossi Ralenkotter 2hr Director 0 0 0 0 0 Rossi Ralenkotter 2hr Director 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Paul Catoe	2hr	Director	0	0	0
Robert Darbelnet         2hr         Director         0         0           Robert Sullivan         2hr         Director         0         0           Robert Y Graff         2hr         Director         0         0           Robin Carson         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Roger Dow         2hr         Director         0         0           Ron Officer         2hr         Director         0         0           Ron Peck         2hr         Director         0         0           Rosemary McCormick         2hr         Director         0         0           Ross Hosking         2hr         Director         0         0           Rossi Ralenkotter         2hr         Director         0         0           Scott Anderson         2hr         Director         0         0           Scott White         2hr         Director         0         0           Shane Berry         2hr         Director         0         0	Paul Serff	2hr	Director	0	0	0
Robert Sullivan 2hr Director 0 0 0 0 Robert Y Graff 2hr Director 0 0 0 0 0 Robin Carson 2hr Director 0 0 0 0 0 Rodney Fong 2hr Director 0 0 0 0 0 Roger Dow 2hr Director 0 0 0 0 0 Ron Officer 2hr Director 0 0 0 0 0 Rosemary McCormick 2hr Director 0 0 0 0 0 Ross Hosking 2hr Director 0 0 0 0 0 Rossi Ralenkotter 2hr Director 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Richard Scharf	2hr	Director	0	0	0
Robert Y Graff         2hr         Director         0         0           Robin Carson         2hr         Director         0         0           Rodney Fong         2hr         Director         0         0           Roger Dow         2hr         Director         0         0           Ron Officer         2hr         Director         0         0           Ron Peck         2hr         Director         0         0           Rosemary McCormick         2hr         Director         0         0           Ross Hosking         2hr         Director         0         0           Rossi Ralenkotter         2hr         Director         0         0           Scott Anderson         2hr         Director         0         0           Scott White         2hr         Director         0         0           Shane Berry         2hr         Director         0         0	Robert Darbelnet	2hr	Director	0	0	0
Robin Carson         2hr         Director         0         0         0           Rodney Fong         2hr         Director         0         0         0           Roger Dow         2hr         Director         0         0         0           Ron Officer         2hr         Director         0         0         0           Ron Peck         2hr         Director         0         0         0           Rosemary McCormick         2hr         Director         0         0         0           Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Robert Sullivan	2hr	Director	0	0	0
Rodney Fong         2hr         Director         0         0         0           Roger Dow         2hr         Director         0         0         0           Ron Officer         2hr         Director         0         0         0           Ron Peck         2hr         Director         0         0         0           Rosemary McCormick         2hr         Director         0         0         0           Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Robert Y Graff	2hr	Director	0	0	0
Roger Dow         2hr         Director         0         0         0           Ron Officer         2hr         Director         0         0         0           Ron Peck         2hr         Director         0         0         0           Rosemary McCormick         2hr         Director         0         0         0           Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Robin Carson	2hr	Director	0	0	0
Ron Officer         2hr         Director         0         0         0           Ron Peck         2hr         Director         0         0         0           Rosemary McCormick         2hr         Director         0         0         0           Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Rodney Fong	2hr	Director	0	0	0
Ron Peck         2hr         Director         0         0         0           Rosemary McCormick         2hr         Director         0         0         0           Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Roger Dow	2hr	Director	0	0	0
Rosemary McCormick         2hr         Director         0         0         0           Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Ron Officer	2hr	Director	0	0	0
Ross Hosking         2hr         Director         0         0         0           Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Ron Peck	2hr	Director	0	0	0
Rossi Ralenkotter         2hr         Director         0         0         0           Scott Anderson         2hr         Director         0         0         0           Scott White         2hr         Director         0         0         0           Shane Berry         2hr         Director         0         0         0	Rosemary McCormick	2hr	Director	0	0	0
Scott Anderson 2hr Director 0 0 0 Scott White 2hr Director 0 0 0 Shane Berry 2hr Director 0 0 0	Ross Hosking	2hr	Director	0	0	0
Scott White 2hr Director 0 0 0 Shane Berry 2hr Director 0 0 0	Rossi Ralenkotter	2hr	Director	0	0	0
Shane Berry 2hr Director 0 0 0	Scott Anderson	2hr	Director	0	0	0
	Scott White	2hr	Director	0	0	0
Sharon Rossi 2hr Director 0 0 0	Shane Berry	2hr	Director	0	0	0
	Sharon Rossi	2hr	Director	0	0	0

U S Travel Association List of Board of Directorts As of December 31, 2009

col a	col b	col c	col d	col e	col f
Chara, Hann,	Ohr	Disastan	•	•	
Sherry Henry	2hr	Director	0	0	0
Stephanie Pace Brown	2hr	Director	0	0	0
Stephen P. Joyce	2hr	Director	0	0	0
Steve Moore	2hr	Director	0	0	0
Steven Hacker, CAE	2hr	Director	0	0	0
Susan Helstab	2hr	Director	0	0	0
Susan Houck	2hr	Director	0	0	0
Susan Whitaker	2hr	Director	0	0	0
Tarun Patel, CHA	2hr	Director	0	0	0
Terry Dale	2hr	Director	0	0	0
Terry MacRae	2hr	Director	0	0	0
Thomas Dow	2hr	Director	0	0	0
Thomas Mahoney	2hr	Director	0	0	0
Thomas Muldoon	2hr	Director	0	0	0
Thomas Polski	2hr	Director	0	0	0
Tim Roby	2hr	Director	0	0	0
Tina Osceola	2hr	Director	0	0	0
Todd Davidson	2hr	Director	0	0	0
Tom Norwalk	2hr	Director	0	0	0
Tom Vitale	2hr	Director	0	0	0
Tyson (Ty) Helms	2hr	Director	0	0	0
William Hardman Jr.	2hr	Director	0	0	0
William Maloney, CTC	2hr	Director	0	0	0
William Pate	2hr	Director	0	0	0
William Talbert III, CDM	E2hr	Director	0	0	0
Woody B Peek	2hr	Director	0	0	0

Page	2
rauo	_

Form 8	8868	(Rev	4-2009)
--------	------	------	---------

V

10111 0000 (110	7 2000)			
Note. Only	e filing for an Additional (Not Automatic) 3-Month Extension, comple complete Part II if you have already been granted an automatic 3-month ex e filing for an Automatic 3-Month Extension, complete only Part I (or	tension on a pre		
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only		al (no copies r	needed).
Type or	Name of Exempt Organization			ntification number
print	U S Travel Association		53	0231139
File by the extended due date for filing the	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use or	nly
	1100 New York Ave, NW Suite 450W		}	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	\$20°5°	1, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	
return See instructions	Washington, DC 20005	(400)		Sales of the sales
Check type	e of return to be filed (File a separate application for each return):			
Form 99		Form 1041-A	☐ Fo	rm 6069
☐ Form 99	90-BL	Form 4720	☐ Fo	rm 8870
☐ Form 99	90-EZ Form 990-T (trust other than above)	Form 5227		
STOP! Do r	ot complete Part II if you were not already granted an automatic 3-mo	onth extension	on a previously	filed Form 8868.
	s are in the care of ▶ US Travel Association			
Telephon	P No. ► ( 202 ) 408-8411 FAX No. ► ( 202	408-12	255	
	anization does not have an office or place of business in the United Sta			▶ □
	or a Group Return, enter the organization's four digit Group Exemption			
	le group, check this box ▶ □ . If it is for part of the group,			
list with the	names and EINs of all members the extension is for.			
4 I requ	est an additional 3-month extension of time until Novembe	r 15	, 20 <b>10</b> .	
5 For ca	lendar year 2009, or other tax year beginning, 20	and endir	ng	, 20
6 If this	tax year is for less than 12 months, check reason:   Initial return	☐ Final return	Change in	accounting period
7 State	in detail why you need the extension			
Addit	in detail why you need the extensionional information is needed from third parties to complete the return	ງ		
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter	the tentative ta		
less a	ny nonrefundable credits. See instructions.		8a \$	. <u></u>
	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refun-			
	ited tax payments made. Include any prior year overpayment allowed a	s a credit and a		
amoui	nt paid previously with Form 8868.		8b \$	
	e Due. Subtract line 8b from line 8a. Include your payment with this form, or,			
with FI	D coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System	n). See instruction	ns. 8c \$	· · · · · · · · · · · · · · · · · · ·
Under penaltie	Signature and Verification s of perjury, I declare that I have examined this form, including accompanying schedules a ct, and complete, and that I am authorized to prepare this form	ind statements, and	i to the best of my	knowledge and belief,
	(1) $1$ $1$			
Signature ▶	Ful f Mun Title ▶ Vice Presiden	t of Finance	Date ►	8/09/2010
		• • • • • • • •		
<u></u>				8868 (Paul 4 2000)
<u> </u>			Form	8868 (Rev. 4-2009)