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Decartment of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

CMB No 1545-0047 2009 Open to Public Inspection

| <u>A</u> | For the 2009 | calendar ye | ar or tax year beginnin | | | /30/10 | <u> </u> | | | | | | |
|-------------------------|---|--|---|--|-------------------------|--------------|------------------|------------------|-----------------------|--|----------|--|--|
| а | Check if applicab | | | Inited States Ins | | | | _ [: | D Emp | loyer identification n | umber | | |
| | △ddress change | use IRS | | heatre Technolog | y, Inc. | | | | | | | | |
| | Name change print or Doing Business As 13-6216921 type Number and street (or 2.0 pcx if mail is not delivered to street address) Room/suite E Telephone number | | | | | | | | | | | | |
| = | · · | 1 1 | Number and street (or P O | ocx if mail is not delivered to street ad | dress) | 1 | Room/suite | ļ. | | | | | |
| = | inigal return | See Specific | 315 South C | couse Avenue | | | 200 | | 315-463-6463 | | | | |
| نــا | Termination | Instruc- | City or town, state or ci | | | | | | G Gross rec | ceicis 3 1,946 | ,230 | | |
| | Amended return | tions | Syracuse | NY | 13210 | | | | | | | | |
| \sqcap | Application pend | F Name | and address of principal of | fficer | | | | - [| H(a) Is this | s a group return for | - | | |
| | | Sar | me as C abov | <i>r</i> e | | | | 1. | affilia | ies? Yes | X No | | |
| | | | | | | | | } | H(b) Are a | | No | | |
| | | | | | | | | | If "No | o," attach a list (see instructi | ons) | | |
| | Tax-exempt s | status X | 501(c) (3) ◀ (| insert no) 4947(a)(1) (| or 527 | | | | | | | | |
| J | Website > | www.u | sitt.org | | | | | | H(c) Grou | p exemption number | | | |
| ĸ | Type of organiza | ation X Corp | poration Trust A | ssociation Other | | L Y | ear of formation | n 19 | 960 | M State of legal domicile | NY | | |
| F | art I | Summar | У | | | | | | | | | | |
| | 1 Briefl | y describe th | ne organization's mission | on or most significant activit | ies | | | | | | | | |
| ø) | To | active | ely promote th | e advancement of | the knowled | dge and | d skill | Ls of | f its | | | | |
| ŭ | | | | ate communicatio | | | | | | tions | | | |
| Activities & Governance | | | | of design and p | | | | | | | | | |
| Š | | | | discontinued its operations | | | | | | | | | |
| Ö | • | | _ | ning body (Part VI, line 1a) | у ст. сторосси ст. пт. | | | . 20001 |) 3 | 30 | | | |
| ος S | 3 | _ | _ | of the governing body (Par | + \/Lline 1h\ | | | | 4 | 30 | | | |
| te | 1 | • | • | - · · · · | t vi, inic 1b) | | | | 5 | 7 | | | |
| .≩ | ŀ | | employees (Part V, line | · · | | | | | 6 | 1200 | | | |
| ĕ | | | olunteers (estimate if r | | lina 12 | | | | 7a | | 242 | | |
| | 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, line 34 | | | | | | | | | | 343 | | |
| | b Net u | inrelated bus | siness taxable income t | rom Form 990-1, line 34 | | | D, | or Year | 7b | -50, Current Year | 890 | | |
| | e Cont | ributions one | d grants (Dart VIII Juna : | (h) | | 1 | | | ,132 | | 700 | | |
| a | 8 Contr | 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) | | | | | | | | | | | |
| /eu | 9 Progr |) • • • • • • • • • • • • • • • • • • • | | | | | | | ,584 | / | 801 | | |
| Revenue | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | | | | | | | , 384 | | 801 | | |
| _ | 11 Other | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | | | | | | | 1 046 | 000 | | |
| | | | | | n (A), line 12) | | | | 851 | | | | |
| | , | | | (, column (A), times 1 3) | 155 | } | | | ,682 | 21, | 141 | | |
| | | | | , column (A), line 4) CE | | | | 000 | | | | | |
| S | 15 Salar | nes, other co | ompensation, employee | benefits (Part IX, column (| A); lines 5-10) | } | | 299 | ,331 | 323, | 817 | | |
| penses | 16a Profe | essional fund | draising fees (Part IX, c | olumn A line NOe 17 | 2010 | | | | | <u> </u> | | | |
| | | l fundraising | expenses (Part IX, col | umn (D), line 25) 🕨 🧵 | 2010 131 | | | | | | | | |
| Щ | 11 0000 | | (Part IX, column (A), lin | | اعرا | , | | | ,847 | | | | |
| | 18 Total | l expenses i | Add lines 13-17 (must | equal Part IX Column Fran I | ine Pay | j | 1 | | ,860 | | | | |
| | 19 Reve | enue less ex | penses Subtract line 1 | 8 from line 12 | | | | | ,991 | | 245 | | |
| SOF | 900 | | | | | ļ | Beginning | | | End of Year | 00. | | |
| sset | 틸 20 Total | l assets (Par | | | | | | | ,664 | | | | |
| Net Assets or | 끝 21 Total | • | art X, line 26) | | | | | | .,841 | | | | |
| | | | d balances Subtract li | ne 21 from line 20 | | | | , 311 | <u>, 823</u> | 2,466, | 244 | | |
| | Part II | Signatu | re Block | | | | | | | | | | |
| | | Under penal | es of penjury, I declare th | at I have examined this return, i | ncluding accompanying | ng schedules | and statem | ents, ar | nd to the b | est of my knowledge | | | |
| | | and belief it | is true, correct, and comp | lete Declaration of preparer (of | ner than onicer) is bas | sed on an im | Officiation of | witten pi | reparer na | is any knowledge | | | |
| Si | ign | X43 | D. S. | | · | | | | $\perp \prime \prime$ | 112/10 | | | |
| H | ere | Signatu | re of officer | | | | | | Da | e / | | | |
| | 1 | _ Da | vid Grindle | | | Execu | tive | Dir | ecto | <u>r </u> | | | |
| | | Type or | r print name and title | | | | | | | | | | |
| | | Preparer's | | 0// | / | Date , | , 1 | Check if | F | Preparer's identifying | number | | |
| Pa | aid | signature | Sonda | ? O lunto | ac Cff | 11/8 | ין פגלי | self- employe | . [5 | (see instructions) P007196 | 33 | | |
| Pı | reparer's | | • | el & Vincentini, | | | | | <u> </u> | ► 16-1085 | | | |
| U | se Only | Firm's name | 2010 | W. Genesee St. | # 301 | | | | EIN | | ,,,,, | | |
| | - | if self-emplo address, an | | use, NY 13219-1 | | | | | Phone | e ▶ 315-488-3 | 20116 | | |
| _ | | <u></u> | | | | | | | <u>l</u> no | | | | |
| _ | | | | shown above? (see instruct Notice, see the separate i | | | | | | X Yes | | | |
| DA | | ot and Pape | NOIN REQUELION ACE | monce, see the separate i | กอน นิเนิบแอ. | | | | | Form 990 |) (2009) | | |

| r Form 990 (2009) | United | States | Institute f | for | 13-6216921 | | Page 2 |
|-------------------------------------|--------------------------------------|--|---|---|--|---------------|---------------|
| | | | Service Accomp | | | | 1 490 2 |
| 1 Briefly des To act: members | cribe the organicely property and to | zation's missio comote ti facili | n ne advancem tate commun | ent of the lication amon | knowledge and individuation in the | als and org | ganizations |
| the prior F | orm 990 or 990 | | | s during the year which | were not listed on | | Yes X No |
| services? | | e conducting, o | | nges in how it conducts | , any program | | Yes X No |
| 4 Describe t Section 50 | he exempt purp 11(c)(3) and 50 | oose achieveme 1(c)(4) organiza | nts for each of the org tions and section 4947 | | t program services by e ed to report the amount reported | | |
| are gi | al Confe ven on t | he tech | eld annuall | ts of the the | s & lectures heatre and |) (Revenue \$ | 1,090,396) |
| | | | | | | - | |
| journa | ations - ls publi | .shed & | ing directo produced by | ncluding grants of \$ ry newsletto the organi theatre & f | zation |) (Revenue \$ | 216,357) |
| smalle | tions - S r, inclu | ding in | to the Nat | ncluding grants of \$ ional Confe expo's. Se of theatre & | minars&lect |) (Revenue \$ | 24,837) |
| - | = | (Describe in Sc | | . 21 1 | A1 \ /Dava= * | | |
| (Expense | s \$ gram service 6 | | including grants of 1.015.2 | | 41) (Revenue \$ | | |

Form 990 (2009)

| om | n 990 (2009) United States Institute for 13-6216921 | | P | age : |
|-----|--|-----|-----|--------------|
| Pa | art IV Checklist of Required Schedules | | | |
| | | | Yes | No |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | 7.5 | |
| _ | complete Schedule A | 1 | _X_ | 37 |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? | _2 | | X |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | _ | | v |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | X |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete | | | x |
| _ | Schedule C, Part II | 4 | | _^ |
| 5 | Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) | _ | | |
| _ | notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III | 5 | | |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts where donors have | | | 1 |
| | the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," | | | x |
| _ | complete Schedule D, Part I | 6_ | | |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | x |
| _ | 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," | | | v |
| _ | complete Schedule D, Part III | _ 8 | | X |
| 9 | Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part | | | l |
| | X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," | | ١ . | • |
| | complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in term, permanent, or | | v | |
| | quasi-endowments? If "Yes," complete Schedule D, Part V | _10 | X | |
| 11 | Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, | | x | ĺ |
| | VII, VIII, IX, or X as applicable | 11 | ^ | F |
| • | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete | | | Ė |
| | Schedule D, Part VI | | | É |
| • | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of the total popular proofed in Part X, line 163 if "Yes" complete Schodule D. Part VIII. | | | Ė |
| | 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 | | 1 | É |
| • | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | | | É |
| _ | ■ Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets | | | į |
| | reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | | | Ė |
| _ | ■ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | | | Ė |
| | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | | | É |
| • | 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 | | | Ė |
| - | Schedule D, Parts XI, XII, and XIII | 12 | X | i |
| 12A | Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No | | | |
| | If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A X | | | Ė |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | | 14a | | Х |
| | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, | | | |
| | business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I | 14b | | x |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any | | | |
| | organization or entity located outside the United States? If "Yes," complete Schedule F, Part II | 15 | | x |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance | | | |
| | to individuals located outside the United States? If "Yes," complete Schedule F, Part III | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services | | | |
| | on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on | | | |
| | Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II | 18 | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | | | |
| | If "Yes," complete Schedule G, Part III | 19 | | X |

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

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 12 If "Yes," complete Schedule I, Parts I and II | 21 | | <u> </u> |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the | | | |
| | United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | X | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the | | | |
| | organization's current and former officers, directors, trustees, key employees, and highest compensated | | | 77 |
| | employees? If "Yes," complete Schedule J | 23 | | <u> </u> |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than | | | |
| | \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines | | | • |
| | 24b through 24d and complete Schedule K. If "No," go to line 25 | 24a | | X |
| | 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 | 24- | | |
| | to defease any tax-exempt bonds? | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction | 250 | | v |
| | with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | X |
| D | 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 | 25b | | x |
| 26 | 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or | 230 | | |
| 20 | disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, | 20 | | |
| 2.1 | substantial contributor, or a grant selection committee member, or to a person related to such an individual? | | | |
| | If "Yes," complete Schedule L, Part III | 27 | | x |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, | | | |
| | Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28a | Ī | X |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete | | | |
| - | Schedule L, Part IV | 28b | | X |
| 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 | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | X |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified | | | |
| | conservation contributions? If "Yes," complete Schedule M | 30 | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, | | | _ |
| | Part i | 31 | | <u>X</u> |
| 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 | | <u> </u> |
| 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 | | <u> </u> |
| 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 | | <u>X</u> |
| 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 | | <u> </u> |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related | | } | |
| | organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | \vdash | <u> </u> |
| 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, | _ | | v |
| | Part VI | 37 | | <u>X</u> |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and | 20 | x | |
| | 19? Note. All Form 990 filers are required to complete Schedule O | 38 | - | (2009) |

| Form | 990 (2009) United States Institute for 13-6216 | 921 | | · · · · · · | | P | age 5 |
|------|--|----------|--|-------------|-----------|--------------|--------------|
| Pa | rt V Statements Regarding Other IRS Filings and Tax Compliance | | | | | | |
| | | | | F | | Yes | No |
| 1a | Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of | 4- | 24 | | | | |
| | U.S. Information Returns Enter -0- if not applicable | 1a | 0 | | | | |
| | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable | 1b | | | | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable payments to vendors and reportable payments. | ntable | | ŀ | 1c | X | |
| _ | gaming (gambling) winnings to prize winners? | í | | ŀ | 16 | 1 | |
| | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | 2a | 7 | ŀ | | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return | | <u> </u> | | 2b | X | Ī |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see | . | | F | | | |
| | | | | • | | | |
| 2- | instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year covered | hv | | į | | | |
| 3a | | ٠, | | İ | 3a | X | ĺ |
| h. | this return? If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | | | 1 | 3b | X | |
| b | At any time during the calendar year, did the organization have an interest in, or a signature or other au | thorit | , | Ī | | | |
| 44 | over, a financial account in a foreign country (such as a bank account, securities account, or other final | | , | | | | ļ |
| | | 10101 | | | 4a | | х |
| h | account)? If "Yes," enter the name of the foreign country | | | ľ | | | |
| þ | See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign B | ank | | Ę. | | | |
| | and Financial Accounts | | | į | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | f | 5a | • | x |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction | on? | | Ì | 5b | | Х |
| | If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard | dina | | Ī | | | |
| С | Prohibited Tax Shelter Transaction? | | | } | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | | | Ī | | | |
| O. | organization solicit any contributions that were not tax deductible? | | | | 6a | | x |
| b | If "Yes," did the organization include with every solicitation an express statement that such contribution | s or | | Ţ | | | |
| - | gifts were not tax deductible? | | | | 6b | | } |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | Ī | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go | ods | | | | | |
| • | and services provided to the payor? | | | Ī | 7a | İ | Ī |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | | | 7b | | |
| c | 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 | 7d | | | | | |
| е | Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a pe | rsonal | | | | | į |
| | benefit contract? | | | | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract | ct? | | | 7f | | |
| g | For all contributions of qualified intellectual property, did the organization file Form 8899 as required? | | | ļ | 7g | | <u> </u> |
| h | For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C | as | | | | ļ | |
| | required? | | | ļ | 7h | ļ | ļ |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting | | | | | | 1 |
| | organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring | | | | | | 1 |
| | organization, have excess business holdings at any time during the year? | | | | 8 | ļ | ļ |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | | | | • |
| а | Did the organization make any taxable distributions under section 4966? | | | | <u>9a</u> | ļ | |
| b | Did the organization make a distribution to a donor, donor advisor, or related person? | | | | 9b | | <u> </u> |
| 10 | Section 501(c)(7) organizations. Enter | 1 | 1 | | | | 1 |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | 10a | 1 | | | | I |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | 10b | <u> </u> | | | | |
| 11 | Section 501(c)(12) organizations. Enter | | 1 | | | | |
| а | Gross income from members or shareholders | 11a | | | | | 1 |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against | | 1 | | | | |
| | amounts due or received from them) | 11b | | | | | |
| | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form | | | | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | 12b | <u>' </u> | | | 1 | |

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 | | | | | |
|------------|--|-------|--------------|---------|--------------|---------------|
| | | 1. | . 20 | F | Yes | No |
| 1a | Enter the number of voting members of the governing body | 1a_ | 30 | | | ŧ |
| b | Enter the number of voting members that are independent | 1b | _30 | | | 1 |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | | | | | ŧ |
| _ | any other officer, director, trustee, or key employee? | | | 2 | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct | | | | | ۱ |
| | supervision of officers, directors or trustees, or key employees to a management company or other person? | | | 3 | | X |
| 4 | Did the organization make any significant changes to its organizational documents since the prior Form 990 was fil | ed? | | 4_ | X | - |
| 5 | Did the organization become aware during the year of a material diversion of the organization's assets? | | | 5 | | X |
| 6 | Does the organization have members or stockholders? | | | 6 | X | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members | | | ł | | ł |
| | of the governing body? | | | 7a | X | ├— |
| b | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | | | 7Ь | X | ļ |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | | | ŧ |
| | the year by the following | | | | | ŧ |
| а | The governing body? | | | 8a | X | |
| b | Each committee with authority to act on behalf of the governing body? | | | 8b | X | <u> </u> |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached | | | | | |
| | at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | | 9 | <u> </u> | X |
| | tion B. Policies (This Section B requests information about policies not required by the I renue Code) | ntern | aı | | т | Т |
| | | | | <u></u> | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | | | 10a | | X |
| ь | If "Yes," does the organization have written policies and procedures governing the activities of such chapters, | | | | ł | l |
| | affiliates, and branches to ensure their operations are consistent with those of the organization? | | | 10b | | ├ |
| 11 | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the | | | | | ľ |
| | form? | | | 11 | X | |
| 11a | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | | | ļ |
| 12a | Does the organization have a written conflict of interest policy? If "No," go to line 13 | | | 12a | X | <u> </u> |
| Þ | Are officers, directors or trustees, and key employees required to disclose annually interests that could give | | | | l | |
| | nse to conflicts? | | | 12b | X | ļ |
| С | Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," | | | | | |
| | describe in Schedule O how this is done | | | 12c | X | ļ |
| 13 | Does the organization have a written whistleblower policy? | | | 13 | X | ļ |
| 14 | Does the organization have a written document retention and destruction policy? | | | 14 | X_ | <u> </u> |
| 15 | Did the process for determining compensation of the following persons include a review and approval by | | | | | ĺ |
| | independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | | | ŧ |
| а | The organization's CEO, Executive Director, or top management official | | | 15a | X | ļ |
| b | Other officers or key employees of the organization | | | 15b | X | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) | | | | | İ |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement | | | | | ŧ |
| | with a taxable entity during the year? | | | 16a | ļ | X |
| b | If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate | | | | | |
| | its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard | | | | | İ |
| | the organization's exempt status with respect to such arrangements? | | | 16b | <u> </u> | <u> </u> |
| <u>Sec</u> | tion C. Disclosure | | | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed ▶ NY | | | | | |

Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

X Own website X Another's website X Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Carol Carrigan 315 S. Crouse Avenue

NY 13210

315-463-6463

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) Name and Title | (B) Average | Posi | tion (| | C) kalli | that a | nnlv) | (D) Reportable | (E) Reportable | (F) Estimated |
|--------------------|-------------------|--------------------------------|--|--|--|------------------------------|-----------|--|--|--|
| | hours per week | Individual trustee or director | | Officer | Key employee | Highest compensated employee | | 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 |
| Lea Asbell-Swange | r | | | | | | | | | |
| Director | | X | | | | <u> </u> | | 0 | 0 | |
| Nadine Charlsen | | Ì | l | | ļ | | | | | |
| Director | | X | ļ | | | | | 0 | 0 | |
| Sherry Wagner-Hen | ry | | | | | 1 | | | | |
| Director | | X | <u> </u> | | ļ | ļ | | 0 | 0 | |
| Mike Monsos | | | | | | Ì | | | | |
| Director | | X | <u> </u> | | <u> </u> | <u> </u> | | 0 | 0 | C |
| Mark Shanda | | 1 | | | | ļ | | | | |
| Director | | X | | | | <u> </u> | | 0 | 0 | C |
| Craig Wolf | | i | | | | 1 | | | | |
| Director | | X | | _ | <u> </u> | <u> </u> | _ | 0 | 0 | |
| Dan Culhane | | | | | | | | _ | | |
| Director | | X | <u> </u> | | <u> </u> | <u> </u> | <u> </u> | 0 | 0 | |
| Mary Heilman | | | | | | | | | | |
| Director | | X | <u> </u> | ļ | | <u> </u> | <u> </u> | 0 | 0 | |
| David Krajec | | | | | Į | | | | | |
| Director | | X | <u> </u> | | ļ | <u> </u> | _ | . 0 | 0 | |
| Carolyn Satter | | | | | Ì | | | | | |
| Director | | X | <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> | 0 | 0 | |
| John Uthoff | | 1 | | | | | | | | |
| Director | | X | <u> </u> | <u> </u> | <u> </u> | <u> </u> | | 0 | 0 | |
| Monica Weinzapfel | | 1 | | | ļ | 1 | | | | |
| Director | | X | <u> </u> | ↓ _ | ļ | | | 0 | 0 | |
| Bill Browning | | | 1 | ļ | 1 | | | | | _ |
| Director | | X | <u> </u> | <u> </u> | |] _ | | 0 | 0 | 0 |
| Jonathan Darling | | 1 | | Ì | ļ | 1 | | | | _ |
| Director | | X | <u> </u> | ļ | <u> </u> | — | <u> </u> | 0 | 0 | 0 |
| Linda Essig | | | ļ | | | | ł | | | _ |
| Director | | X | ├ | ├ | ├_ | ┼ | <u> </u> | 0 | 0 | 0 |
| Mitch Hefter | | | 1 | | | | | _ | | |
| Director | | X | <u> </u> | , | ↓_ | ┼- | <u> </u> | 0 | 0 | C |
| Martha Marking | | | | | 1 | | 1 |] | | |
| Director DAA | | X | | <u>1 </u> | $oldsymbol{ol}}}}}}}}}}}}}}}}}}$ | <u> </u> | <u>L_</u> | 0 | 0 | Form 990 (2009 |

DAA

| Part VII Section A. Officers | , Directors, Trus | tees | s, Ke | y En | nplo | yees | , an | d Highest Compensated | Employees (continued) | | | | |
|---|------------------------------|--------------------|----------|--------------|------------|------------------------------|-------------|--|---|---|---------------|--|----------|
| (A) | (B) | | 4 6 | ((| | | 6.3 | (D) Reportable | (E) Reportable | | (F) Estima | | |
| Name and Title | Average hours per week | Individual trustee | | Officer | | Highest compensated employee | Former | compensation from the organization (W-2/1099-MISC) | from from related the organizations (W-2/1099-MISC) | | | ited it of sation he ation ated itions | |
| | | | 9 | | | sated | | | | | | | |
| Kim Scott | | | | | | | | | | | | | |
| Director | ļ | X | | | | | | 0 | 0 | ļ | | | 0 |
| David Grindle | | | | , | | | | | | | | | ^ |
| Executive Director Carl Lefko | | - | | X | | | | 0 | 0 | | | | 0 |
| President | | | | \mathbf{x} | | | | o | 0 | | | | 0 |
| Joel Aldridge | | \vdash | - | - | | - | _ | | | | | | |
| President - Elect | | • | | x | | | | o | 0 | | | | 0 |
| Patricia Dennis | | | | | | | | | | | | | |
| Secretary | | | | X | | | | 0 | 0 | | | | 0 |
| Travis DeCastro | | | | | | | | | | | | | |
| Treasurer | | <u> </u> | <u> </u> | X | | | | 0 | 0 | | | | 0 |
| Kim Williamson | | l | ļ | | 1 | l | | | 0 | | | | ^ |
| VPCommission Bobbi Owen | | ļ | - | X | | - | | 0 | 0 | | | | 0 |
| VPCommunicat | [| | | x | | | | o | o | | | | 0 |
| David Will | | - | - | | _ | - | | | | | | | |
| VP Conferences | İ | | | x | | | | 0 | 0 | | | | 0 |
| Alexandra Bonds | | | | | | | | | | | | | |
| VP Intern | | | | X | | | | 0 | 0 | | 0 | | |
| Holly Monsos | | | | | | | i | | | | | | _ |
| VP Sect & Chapters | | _ | <u> </u> | X | | - | | 0 | 0 | | | | 0 |
| Michael Mehler | | | | x | | | | 0 | o | | | | 0 |
| VP Programming Daniel Denhart | | - | - | ^ | - | ├─ | _ | | | | | | |
| VP Spec Oper | | | - | x | | } | • | o | o | | | | 0 |
| 1b Total | <u> </u> | | | | | | > | | | | | | |
| 2 Total number of individuals (in | cluding but not li | mite | d to 1 | those | list | ed al | oove | e) who received more than \$ | 5100,000 in | | | | |
| reportable compensation from | the organization | <u> </u> | 0_ | | | | | | | | | | |
| | | | | _ | | | | | | f | | Yes | No |
| 3 Did the organization list any for employee on line 1a? If "Yes," | • | | | | • | • | | yee, or highest compensate | d | Ī | 3 | Ī | X |
| 4 For any individual listed on line | e 1a, is the sum | of re | porta | ible o | comp | pens | atior | n and other compensation for | rom | į | | | |
| the organization and related o | rganizations grea | ater t | han | \$150 | ,000 |)? If | 'Yes | s," complete Schedule J for | such | İ | 4 | 1 | X |
| individual 5 Did any person listed on line 1 | a receive or acc | rue c | omp | ensa | ition | from | n any | y unrelated organization for | | | | | |
| services rendered to the organ | nization? If "Yes," | con | nplet | e Sc | hedi | ıle J | for s | such person | | | 5 | | X |
| Section B Independent Contract | | | | | | | | | 0400 000 1 | | | | |
| Complete this table for your five compensation from the organic | | ensa | ted 11 | ndep | end | ent c | ontra | actors that received more tr | nan \$100,000 of | | | | |
| | (A) business address | | _ | | | | | Descan | (B) blon of services | | | (C) mpensat | |
| Peterson-Willard Gro | | | | | 303 | 3 P. | lea | sant Ave | A | | | препзац | <u> </u> |
| North Syracuse | NY | 1 | .32 | 12 | | _ | 5 | Sales-Manageme | en† | | | 108 | ,876 |
| Broadway Press | | | | | | | pr | ingcrest Dr | | | | | |
| Louisville | K | 4 | 02 | 41 | <u>-2'</u> | 755 | E | Editor | | | | 107 | ,528 |
| • | | | | | | | - | | | | | | |
| | | | | | | | +- | | | | | | |
| | | | | | | | | | | | | | |
| | | - | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 2 Total number of independent more than \$100,000 in compe | | _ | | | | ed to | thos | se listed above) who receive | ed | | 2 | | |
| more man a roo,ooo in compe | maation nom the | viya | 2111Z | <u>iuon</u> | | | | | | | 2 | | |

| _ | | (2009) United Stat | | stitute i | or | 13-6216921 | | Page 9 |
|--|----------|---|-------------------------|--|----------------------|--|---|---|
| Pa | rt V | III Statement of Reve | enue | | | | | |
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 |
| ts | 1a | Federated campaigns | 1a | | | | | 0.12, 0.13, 31 314 |
| ran | | Membership dues | 1b | | | | | |
| s, g | i i | Fundraising events | 1c | | į | | | |
| argar | | Related organizations | 1d | | | | | |
| IS, C | | Government grants (contributions) | 1e | | | | | |
| tion | | All other contributions, gifts, grants, | | | | | | |
| ibu | | and similar amounts not included above | 1f | 55,700 | | | | |
| ntri | a | Noncash contributions included in lines 1a | | | | | | |
| S F | _ | Total. Add lines 1a-1f | • | • | 55,700 | | | |
| Program Service Revenue Contributions, gifts, grants | | | | Busn Code | | | | *************************************** |
| ven | 2a | National Conference | Income | | 1,090,396 | 1,090,396 | | |
| Re | ь | Members Dues | | | 508,839 | 508,839 | | |
| /ice | С | Publications | | | 149,014 | 149,014 | | |
| Sen | d | Publications | | 511120 | 67,343 | | 67,343 | |
| 띮 | е | Projects and Events | 1 | | 24,837 | 24,837 | | |
| ogu | f | All other program service reve | nue | | 2,300 | 2,300 | | |
| ٦ | g | Total. Add lines 2a-2f | | • | 1,842,729 | | | |
| | 3 | Investment income (including | dıvıdends, ın | iterest, and | | | ! | |
| | | other similar amounts) | | ▶ [| 47,801 | 47,801 | | |
| | 4 | Income from investment of tax | -exempt bor | nd proceeds 🕨 📗 | | | | |
| | 5 | Royalties | | | , | | , , , , , , , , , , , , , , , , , , , | |
| | | (i) Real | _ | (II) Personal | | | | |
| | 6a | Gross Rents | | | | | | |
| | ь | Less rental exps | | | | | | |
| | | Rental inc or (loss) | | | į | | ł | |
| | d 7a | Net rental income or (loss) Gross amount from (i) Securitie | | (II) Other | | | | |
| | | sales of assets (1) Securitie | s | (ii) Other | | | | |
| | _ | other than inventory | | | | | | |
| | b | Less cost or other | | | | | | |
| | _ | Gain or (loss) | | | | | | |
| | | Net gain or (loss) | | — | 3 | İ | | |
| | | Gross income from fundraising ever | nis | | | | | |
| Other Revenue | - | (not including \$ | | | | | | |
| vel | | of contributions reported on line 1c) | , Ì | | | | | |
| Ϋ́ | | See Part IV, line 18 | a | | | | | |
| the | b | Less direct expenses | ь | | | | | |
| 0 | С | Net income or (loss) from fund | fraising ever | nts > | | | | |
| | 9a | Gross income from gaming activitie | s | | | | | |
| | • | See Part IV, line 19 | a | | | | | |
| i | b | Less direct expenses | ь | | | | | |
| | С | Net income or (loss) from gam | ning act <u>ivities</u> | s b _ | | | | |
| | 10a | Gross sales of inventory, less | } | | | | | |
| | | returns and allowances | a | | | | | |
| | 1 | Less cost of goods sold | b[| | | | | |
| | <u> </u> | Net income or (loss) from sale | | | | | | |
| | <u> </u> | Miscellaneous Revenu | e | Busn. Code | | | | |
| | 11a | | | | | | | |
| | b | | | | | | | |
| | C | All other revenue | | | | | | |
| | d | All other revenue Total, Add lines 11a-11d | | | | | | |
| | 12 | Total Revenue. See instruction | nns | | 1,946,230 | 1,823,187 | 67,343 | 0 |
| _ | | . Juli Revenue. Jee manden | ,,,,, | | -1540,230 | | | Form 990 (2000) |

Part IX Statement of Functional Expenses

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

| | All other organizations must d | | | | <u> </u> |
|---------|---|---|------------------------------|---|---------------------------------------|
| | 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 | | | 1 | |
| | the U.S. See Part IV, line 22 | 21,141 | 21,141 | | |
| 3 | Grants and other assistance to governments, | | | 1 | |
| | organizations, and individuals outside the | } | | 1 | |
| | U S See Part IV, lines 15 and 16 | | | | |
| 4 | Benefits paid to or for members | | | | · · · · · · · · · · · · · · · · · · · |
| 5 | Compensation of current officers, directors, | | | | |
| _ | trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified |) | | 1 | |
| | persons (as defined under section 4958(f)(1)) and | | | | |
| _ | persons described in section 4958(c)(3)(B) | 262 201 | | 262 201 | |
| 7 | Other salaries and wages | 262,381 | | 262,381 | |
| 8 | Pension plan contributions (include section 401(k) | | 1 | } | |
| • | and section 403(b) employer contributions) | 40,470 | | 40,470 | |
| 9 | Other employee benefits | 20,966 | | 20,966 | |
| 10 | Payroll taxes Fees for services (non-employees) | 20,300 | | 20,300 | |
| 11 a | Management | | | | |
| a b | Legal | 19,895 | | 19,895 | |
| C | Accounting | 23,368 | | 23,368 | · - |
| d | Lobbying | | | | |
| e | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | | | | |
| g | Other | | | | |
| 12 | Advertising and promotion | | | | - |
| 13 | Office expenses | | | | |
| 14 | Information technology | | | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 46,640 | | 46,640 | |
| 17 | Travel | 21,157 | | 21,157 | |
| 18 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 716,154 | 716,154 | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 14,969 | | 14,969 | |
| 23 | Insurance | | | | |
| | | | | 1 | |
| 24 | Other expenses Itemize expenses not | 1 | | I | |
| | covered above (Expenses grouped together | | | 1 | |
| | and labeled miscellaneous may not exceed | 1 | | 1 | |
| | 5% of total expenses shown on line 25 below) | 253,505 | 245,771 | 7,734 | |
| a | Printing & Publications Marketing & Promo | 54,967 | <u> </u> | 54,967 | |
| b | Commissions | 45,260 | | 45,260 | |
| c d | Bank Service Charges | 43,363 | | 43,260 | |
| e | Web Site Design | 42,980 | | 42,980 | |
| f | All other expenses | 259,769 | 32,216 | 227,553 | |
| 25 | Total functional expenses. Add lines 1 through 24f | 1,886,985 | 1,015,282 | 871,703 | |
| 26 | Joint costs. Check here ▶ ☐ if following | | | | |
| | SOP 98-2 Complete this line only if the | | (| 1 | |
| | organization reported in column (B) joint costs | | ļ |] | |
| | from a combined educational campaign and fundraising solicitation | | | | |
| DAA | | -, -, -, -, -, -, -, -, -, -, -, -, -, - | - | | Form 990 (2009) |

| | rt X | Balance Sheet | | | 0210321 | | Page II |
|-----------------------------|------|---|--------------|---------|--------------------------|-----|--------------------|
| 10 | | Dalance Officer | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest bearing | | 1 | 100 | 1 | 100 |
| ł | 2 | Savings and temporary cash investments | | | 1,060,440 | 2 | 688,677 |
| | 3 | Pledges and grants receivable, net | | | | 3 | |
| | 4 | Accounts receivable, net | | [| 18,712 | 4 | 14,732 |
| - } | 5 | Receivables from current and former officers, directors, t | rustees, ke | y | | | |
| | | employees, and highest compensated employees. Comp | lete Part II | of | | I | |
| - 1 | | Schedule L | | | | 5 | |
| | 6 | Receivables from other disqualified persons (as defined | under secti | ion | | | |
| | | 4958(f)(1)) and persons described in section 4958(c)(3)(1) | 3) Comple | te | | Ī | |
| _] | | Part II of Schedule L | | | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | | | 7 | |
| SS | 8 | Inventories for sale or use | | [| 92,739 | 8 | 122,218 |
| 4 | 9 | Prepaid expenses and deferred charges | | | 77,642 | 9 | 57,469 |
| - { | 10a | Land, buildings, and equipment cost or | | | | | |
| | | other basis Complete Part VI of Schedule D | 10a | 316,976 | | I | |
| [| b | Less accumulated depreciation | 10b | 253,272 | 74,197 | 10c | 63,704 |
| | 11 | Investments—publicly traded securities | | | 1,149,834 | 11 | 1,688,994 |
| - | 12 | Investments—other securities See Part IV, line 11 | | | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | [| | 13 | |
| | 14 | Intangible assets | | | 14 | | |
| | 15 | Other assets See Part IV, line 11 | | | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34 |) | | 2,473,664 | 16 | 2,635,894 |
| \neg | 17 | Accounts payable and accrued expenses | | | 61,154 | 17 | 80,983 |
| - } | 18 | Grants payable | | Į. | | 18 | |
| | 19 | Deferred revenue | | | | 19 | |
| 1 | 20 | Tax-exempt bond liabilities | | ĺ | | 20 | |
| ပ္က | 21 | Escrow or custodial account liability Complete Part IV of | Schedule | D | | 21 | |
| Liabilities | 22 | Payables to current and former officers, directors, trustee | s, key | | | | |
| اق | | employees, highest compensated employees, and disqui | alified | | | | |
| <u>[</u> 2: | | persons Complete Part II of Schedule L | | | | 22 | |
| 1 | 23 | Secured mortgages and notes payable to unrelated third | parties | į | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third pa | rties | | | 24 | |
| - | 25 | Other liabilities Complete Part X of Schedule D | | | 100,687 | 25 | 88,667 |
| \perp | 26 | Total liabilities Add lines 17 through 25 | | | 161,841 | 26 | 169,650 |
| es | | Organizations that follow SFAS 117, check here | and | | | | |
| 2 | | complete lines 27 through 29, and lines 33 and 34. | | | | 1 | |
| <u>a</u> | 27 | Unrestricted net assets | | | 1,557,118 | 27 | 1,593,165 |
| m | 28 | Temporarily restricted net assets | | | 668,992 | 28 | 757,232 |
| 밀 | 29 | Permanently restricted net assets | - | | 85,713 | 29 | 115,847 |
| 교 | | Organizations that do not follow SFAS 117, check he | | | | | |
| 5 | | and complete lines 30 through 34. | | | | | |
| Net Assets or Fund Balances | 30 | Capital stock or trust principal, or current funds | | | 30 | | |
| Se | 31 | Paid-in or capital surplus, or land, building, or equipment | | | 31 | | |
| As | 32 | Retained earnings, endowment, accumulated income, or | other fund | is | | 32 | |
| e | 33 | Total net assets or fund balances | | | 2,311,823 | 33 | 2,466,244 |
| Z | 34 | Total liabilities and net assets/fund balances | | | 2,473,664 | 34 | 2,635,894 |

Form 990 (2009)

| , | | | | |
|----------------|--------|--------|-----------|-----|
| orm 990 (2009) | United | States | Institute | for |
| | | | | |

13-6216921

Page **12**

| Pa | rt XI Financial Statements and Reporting | | | |
|----------|--|------|-----|----------|
| | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 Cash X Accrual Other | | | |
| | If the organization changed its method of accounting from a prior year or checked "Other," explain in | | | |
| | Schedule O | | 1 | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | 2a | | <u> </u> |
| b | the state of the s | 2b | X | |
| | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of | | | |
| Ū | the audit, review, or compilation of its financial statements and selection of an independent accountant? | 2c | X | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in | | | |
| | Schedule O | | | |
| А | 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 | | | |
| | X Separate basis Consolidated basis Both consolidated and separate basis | | | |
| 22 | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in | 1 | | |
| Ja | the Single Audit Act and OMB Circular A-133? | 3a | | Х |
| . | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the | | | |
| D | required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | 3ь | | |
| | required audit or audits, explain why in Schedule O and describe any steps taken to undergo sach addition | Forn | 990 | (2009) |

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2009

Open to Public Inspection

| lam | e of t | he organizatioi | united State Theatre Tech | s institute for | | | | | 1 - | oyer idei -621 (| ntification nu ƘQ 2 1 | ımber | |
|------------|----------|-----------------|---|---|--------------|---------------------------|-------------|---------------------------|---------------------|---------------------|--------------------------|-------------|------------|
| P: | ırt I | Reas | | Status (All organizations | s must c | omplet | e this | nart) | | | | | |
| | | | | e it is (For lines 1 through 11, cl | | | | part / | 300 11 | ioti dot | 10113 | | |
| 1 | | | | ociation of churches described in | | | | | | | | | |
| 2 | \vdash | | | | ii section | 170(5)(1) | (^)(')· | | | | | | |
| | H | | cribed in section 170(b)(1)(A | e organization described in sec | tion 470/1 | -\/4\/A\/.: | :1 | | | | | | |
| 3 | H | • | • | · · | • | | • | 4.7.4.7 | \ | | - 4 - 11 - · · · · · · | | |
| 4 | | city, and state | • | l in conjunction with a hospital d | iescribed i | n section | ן(פו)טייר ו | тдадш |). Enter | ine nos | pitars name | 1 | |
| 5 | | | on operated for the benefit o b)(1)(A)(iv). (Complete Part | if a college or university owned (| or operate | d by a go | vernmer | ntal unit | describ | ed in | | | |
| 6 | | A federal, sta | te, or local government or go | overnmental unit described in se | ection 170 | (b)(1)(A) | (v). | | | | | | |
| 7 | П | An organizati | on that normally receives a s | substantial part of its support fro | m a gover | nmental i | unit or fro | om the c | eneral | public | | | |
| | | described in s | section 170(b)(1)(A)(vi). (Co | omplete Part II) | • | | | _ | | | | | |
| 8 | | | | 70(b)(1)(A)(vi). (Complete Part | II) | | | | | | | | |
| 9 | X | - | |) more than 33 1/3 % of its supp | | ontributio | ns. men | bershio | fees a | nd aras | s | | |
| • | لتيا | - | | pt functions—subject to certain | | | | | | _ | _ | | |
| | | | | d unrelated business taxable in | | | | | | | | | |
| | | • • | • | 0, 1975 See section 509(a)(2). | | | , | | JII 10330 | | | | |
| 10 | \Box | • | • | exclusively to test for public safe | | • | | | | | | | |
| 11 | | • | • | exclusively for the benefit of, to p | - | | | o carn | out the | | | | |
| | Ш | • | • | ed organizations described in se | | | | • | | ection | | | |
| | | | | ne type of supporting organization | | | | | | COLIOII | | | |
| | | | | c Type III-Functions | | • | . 1 | 一 っ | | har | | | |
| _ | \Box | a Type | | □ | | | d (| | e III–Oti | iei | | | |
| е | | _ | | anization is not controlled directl and other than one or more pub | | | | | | adian | | | |
| | | | | and other than one or more pub | niciy suppt | nteu orga | mzauon | s descii | beu iii s | ection | | | |
| _ | | | ection 509(a)(2) | | - Ton - 1 7 | | T 111 | | | | | | |
| f | | | | rmination from the IRS that it is | a rype i, i | ype II, or | i ype iii | suppon | ing | | | | |
| | | • | check this box | | 4 6 | £ # . | | | | | | | Ш |
| g | | _ | • | ion accepted any gift or contribu | ition from | any of the | ; | | | | | | |
| | | following per | | | | | | | | | | | |
| | | | • | ntrols, either alone or together v | with persor | ns describ | ped in (ii) |) | | | | Yes | No |
| | | , , | | f the supported organization? | | | | | | | 11g(ı | | <u> </u> |
| | | | member of a person describ | | | | | | | | 11g(u | | ├ ─ |
| | | • • | | lescribed in (i) or (ii) above? | | | | | | | 11g(ı | u) <u> </u> | L |
| _ <u>h</u> | _ | | | he supported organization(s) | 1 | | | | | | | | |
| (1) | | e of supported | (ii) EIN | (III) Type of organization | 1 ' ' | organization | | rou notify nization in | (vı) l organızat | s the | | nount of | |
| | org | anızatıon | | (described on lines 1–9 above or IRC section | | sted in your document? | 1 | of your | | zed in the | sup | port | |
| | | | | (see instructions)) | ļ | | | port? | — <u> </u> | S? | | | |
| | | | | | Yes | No | Yes | No | Yes | No | | | |
| | | | | | } |) | } | } | } |) | | | |
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| | | | | | J | ļ | 1 | j | 1 | | | | |
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| | | | |] |] | ļ |] |] |] | | | | |
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| | | | | <u> </u> | | ļ | <u> </u> | ļ | ļ | | | | _ |
| | | | | 1 | 1 | 1 | 1 | 1 | | | | | |

Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (c) 2007 (d) 2008 (b) 2006 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 12 First five years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

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Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I) Section A. Public Support (d) 2008 (e) 2009 Calendar year (or fiscal year beginning in) (c) 2007 (a) 2005 (b) 2006 (f) Total Gifts, grants, contributions, and membership fees received (Do not include 41,921 52,454 73,132 55,700 any "unusual grants") 97,185 320,392 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 1,510,066 1,526,084 1,727,344 1,725,850 1,775,386 8,264,730 organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 1,607,251 1,568,005 1,779,798 1,798,982 1,831,086 8,585,122 Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b Public support (Subtract line 7c from line 6) 8,585,122 Section B. Total Support Calendar year (or fiscal year beginning in) (c) 2007 (d) 2008 (f) Total (a) 2005 (b) 2006 (e) 2009 1,779,798 1,798,982 Amounts from line 6 1,607,251 1,568,005 1,831,086 8,585,122 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar 119,744 135,644 69,584 47.801 73,790 446,563 sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 135,644 7<u>3,</u>790 119,744 69,584 47,801 446,563 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 13 Total support. (Add lines 9, 10c, 11, and 12) 1,687,749 1,915,442 1,868,566 1,878,887 9,031,685 1,681,041 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) 15 95.06% Public support percentage from 2008 Schedule A, Part III, line 15 16 95.26% Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 5 % 17 18 Investment income percentage from 2008 Schedule A, Part III, line 17 5 % 18 19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and stop here. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009 United States Institute for

13-6216921

Page 4

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

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions

OMB No 1545-0047 Open to Public

| lame | of the organization | | Employer identification number |
|------|--|---|---------------------------------|
| | nited States Institute for | | |
| T] | heatre Technology, Inc. | | 13-6216921 |
| | ert I Organizations Maintaining Donor Advised Fur | nds or Other Similar Funds or A | Accounts. Complete if |
| _ | the organization answered "Yes" to Form 990, F | Part IV, line 6 | |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate contributions to (during year) | | |
| 3 | Aggregate grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor advisors in writing that | the assets held in donor advised | |
| | funds are the organization's property, subject to the organization's exclu | sive legal control? | Yes No |
| 6 | Did the organization inform all grantees, donors, and donor advisors in v | vriting that grant funds can be | |
| | used only for charitable purposes and not for the benefit of the donor or | donor advisor, or for any other | _ |
| | purpose conferring impermissible private benefit? | | Yes No |
| Pa | art II Conservation Easements. Complete if the organization | anization answered "Yes" to For | m 990, Part IV, line 7 |
| 1 | Purpose(s) of conservation easements held by the organization (check a | all that apply) | |
| | Preservation of land for public use (e.g., recreation or pleasure) | Preservation of an historically imp | portant land area |
| | Protection of natural habitat | Preservation of certified historic s | structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization held a qualified consen | vation contribution in the form of a conser | vation |
| | easement on the last day of the tax year | | |
| | | | Held at the End of the Tax Year |
| а | Total number of conservation easements | - | 2a |
| b | Total acreage restricted by conservation easements | | 2b |
| С | Number of conservation easements on a certified historic structure inclu | ded ın (a) | 2c |
| d | Number of conservation easements included in (c) acquired after 8/17/0 | 6 | 2d |
| 3 | Number of conservation easements modified, transferred, released, extra | nguished, or terminated by the organization | on during |
| | the taxable year | | |
| 4 | Number of states where property subject to conservation easement is lo | cated > | |
| 5 | Does the organization have a written policy regarding the periodic monit | oring, inspection, handling of | |
| | violations, and enforcement of the conservation easements it holds? | | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, and enforce | ng conservation easements during the ye | ar — — |
| | > | | |
| 7 | Amount of expenses incurred in monitoring, inspecting, and enforcing of | onservation easements during the year | |
| | ▶ \$ | | |
| 8 | Does each conservation easement reported on line 2(d) above satisfy the | ne requirements of section | |
| | 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? | | Yes No |
| 9 | In Part XIV, describe how the organization reports conservation easeme | ents in its revenue and expense statement | t, and |
| | balance sheet, and include, if applicable, the text of the footnote to the o | organization's financial statements that de | scribes |
| | the organization's accounting for conservation easements | | |
| Pa | organizations Maintaining Collections of Art, | Historical Treasures, or Other | Similar Assets. |
| | Complete if the organization answered "Yes" to | Form 990, Part IV, line 8 | |
| 1a | If the organization elected, as permitted under SFAS 116, not to report i | | |
| | art, historical treasures, or other similar assets held for public exhibition, | | public service, |
| | provide, in Part XIV, the text of the footnote to its financial statements th | | |
| b | If the organization elected, as permitted under SFAS 116, to report in its | | |
| | historical treasures, or other similar assets held for public exhibition, edi | ucation, or research in furtherance of publ | ic service, |
| | provide the following amounts relating to these items | | |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | S |
| | (ii) Assets included in Form 990, Part X | | > \$ |
| 2 | If the organization received or held works of art, historical treasures, or | | vide the |
| | following amounts required to be reported under SFAS 116 relating to the | nese items | |
| а | Revenues included in Form 990, Part VIII, line 1 | | · |
| b | Assets included in Form 990, Part X | | > \$ |
| | | | |

| Schod | ule D (Form 990) 2009 United Sta | tes Institut | te for | 13 | -6216921 | Page 2 |
|-------|--|---------------------------|--------------------------|------------------|------------------------------|--------------------------|
| Par | | Collections of Art, | Historical Treas | ures, or O | ther Similar Asse | |
| | Using the organization's acquisition, accession, | , and other records, che | ck any of the following | that are a sig | nificant use of its | |
| | collection items (check all that apply) | | | | | |
| a [| Public exhibition | d 🗍 Loan | or exchange program | s | | |
| ь | Scholarly research | e 🗌 Othe | · | | | - |
| c | Preservation for future generations | | | | | |
| 4 | — Provide a description of the organization's colle | ections and explain how | they further the organi | zation's exem | npt purpose in | |
| | Part XIV | octorio una expiami ne | , | | | |
| 5 | During the year, did the organization solicit or re | eceive donations of art. | historical treasures, or | other similar | | |
| • | assets to be sold to raise funds rather than to b | e maintained as part of | the organization's coil | ection / | | Yes No |
| Par | t IV Escrow and Custodial Arra | ngements. Comple | ete if the organiza | ation answ | ered "Yes" to For | m 990, Part |
| | IV, line 9, or reported an am | ount on Form 990 | , Part X, line 21 | | | |
| 1a | Is the organization an agent, trustee, custodian | or other intermediary fo | or contributions or othe | r assets not | | — — |
| | included on Form 990, Part X? | | | | | Yes No |
| b | If "Yes," explain the arrangement in Part XIV ar | nd complete the following | g table | | | |
| | | | | | | Amount |
| С | Beginning balance | | | | 1c | |
| d | Additions during the year | | | | 1d | |
| е | Distributions during the year | | | | 1e | |
| f | Ending balance | | | | 1f | |
| 2a | Did the organization include an amount on For | m 990, Part X, line 21? | | | | ∐ Yes ∐ No |
| b | If "Yes," explain the arrangement in Part XIV | | | | | |
| Pal | rt V Endowment Funds. Comple | | | o Form 99 | 0, Part IV, line 10 | <u> </u> |
| | - | (a) Current year | (b) Prior year | (c) Two years | back (d) Three years I | pack (e) Four years back |
| 1a | Beginning of year balance | 324,285 | 296,663 | | | |
| b | Contributions | 35,152 | 56,153 | | | |
| С | Net investment earnings, gains, | | | | | |
| | and losses | 19,699 | 28,531 | | | |
| d | Grants or scholarships | | | | | |
| е | Other expenditures for facilities | | | | | |
| | and programs | | | | | |
| f | Administrative expenses | | | | | |
| _ | End of year balance | 379,136 | 324,285 | <u> </u> | <u>,l </u> | |
| 2 | Provide the estimated percentage of the year | end balance held as | | | | |
| а | Board designated or quasi-endowment ▶ | % | | | | |
| | Permanent endowment ► _ 30.56% | | | | | |
| С | Term endowment ► _ <u>69.44</u> % | | | | | |
| 3a | Are there endowment funds not in the possess | sion of the organization | that are held and adm | inistered for th | ne | [<u>,]</u> |
| | organization by | | | | | Yes No |
| | (i) unrelated organizations | | | | | 3a(i) X |
| | (ii) related organizations | | | | | 3a(ii) X |
| b | If "Yes" to 3a(ii), are the related organizations | | | | | 3b |
| 4 | Describe in Part XIV the intended uses of the | organization's endowme | ent funds | 0 D-4 V | lin a 40 | |
| Pa | rt VI Investments—Land, Buildi | ngs, and Equipme | ent. See Form 99 | 10, Part X, | ine iu | (d) Dealeration |
| | Description of investment | (a) Cost or other basi | | | (c) Accumulated depreciation | (d) Book value |
| | | (investment) | basis (othe | '' | acpreciation | |
| 1a | Land | | | | | |
| | Buildings | | | | | |
| С | Leasehold improvements | | 216 | 5,976 | 253,272 | 63,704 |
| | Equipment | | 316 | , , , , , | 233,212 | 03,70 |
| е | Other | | | | | |

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

Schedule D (Form 990) 2009

| chedule D (I | Form 990) 2009 United States Institu | ite for | 13-6216921 | Page 3 |
|--------------|--|---------------------|-------------------------------------|---------------------------------------|
| Part VII | Investments—Other Securities. See Form 9 | 90, Part X, line 12 | | |
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Method of Cost or end-of-yea | |
| nancial deri | ivatives | | | |
| losely-held | equity interests | | | |
| ther | | | | |
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| | | - | | |
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| | (1) 15 000 D 1 (7) (7) (7) | > | | |
| | in (b) mast equal to missor, talex, oc. (2) in the tale | | ······ | |
| Part VIII | (a) Description of investment type | (b) Book value | (c) Method of | valuation |
| | (a) Description of investment type | (0) 200% 12/40 | Cost or end-of-year | |
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| | in (b) made equal to an estat see (-) | <u> </u> | | |
| Part IX | Other Assets. See Form 990, Part X, line 15 | <u> </u> | | 4) 5 |
| | (a) Description | | | (b) Book value |
| | | | | |
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| otal, (Colu | mn (b) must equal Form 990, Part X, col (B) line 15) | | > | |
| Part X | Other Liabilities. See Form 990, Part X, line | 25 | , | |
| | (a) Description of liability | (b) Amount | | |
| ederal inco | ome taxes | | | |
| Custo | mer deposits & registrations | 88,667 | | |
| | | | | |
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| | | | | |
| | | | | |
| | | ł | | |

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

88,667

^{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

| Sche | dule D (Form 990) 2009 United States Institute for | 13-621692 | | Page 4 |
|----------|--|---------------------------|-----------------|------------------|
| Pa | rt XI Reconciliation of Change in Net Assets from Form 990 to | Audited Financial Staten | <u>nents</u> | S |
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | | 1 | 1,946,230 |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | | _2 | 1,886,985 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | | 3 | 59,245 |
| 4 | Net unrealized gains (losses) on investments | | 4 | 95,176 |
| 5 | Donated services and use of facilities | | 5 | |
| 6 | Investment expenses | | 6 | |
| 7 | Prior period adjustments | | 7 | |
| 8 | Other (Describe in Part XIV) | | 8 | 0 |
| 9 | Total adjustments (net) Add lines 4 through 8 | | 9 | 95,176 |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | | 10 | 154,421 |
| | rt XII Reconciliation of Revenue per Audited Financial Statemer | nts With Revenue per Re | turn | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 2,041,406 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12 | | | |
| | Net unrealized gains on investments | 2a 95,176 | | |
| | Donated services and use of facilities | 2b | 1 | |
| | Recoveries of prior year grants | 2c | 1 | |
| | Other (Describe in Part XIV) | 2d | 1 | |
| | Add lines 2a through 2d | | 2e | 95,176 |
| _ | Subtract line 2e from line 1 | | 3 | 1,946,230 |
| 3 | |] [| Ť | 2/3/230 |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | 4a | 1 | |
| | Investment expenses not included on Form 990, Part VIII, line 7b | 4b | 1 | |
| | Other (Describe in Part XIV) | 40 | 4c | 1 |
| | Add lines 4a and 4b | | 5 | 1,946,230 |
| <u>5</u> | Total revenue Add lines 3 and 4c (This must equal Form 990, Part I, line 12) If XIII Reconciliation of Expenses per Audited Financial Statement | onte With Expenses per l | | |
| | · · · · · · · · · · · · · · · · · · · | ents with Expenses per i | 1 | 1,886,985 |
| 1 | Total expenses and losses per audited financial statements | | '- | 1,000,983 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | 2a | | |
| | Donated services and use of facilities | 2b | 1 | |
| þ | Prior year adjustments | 26 2c | | |
| C | Other losses | 2d 0 | | |
| d | | 20 | 1 | |
| _ | Add lines 2a through 2d | | 2e | 1,886,985 |
| 3 | Subtract line 2e from line 1 |] [| 3 | 1,000,903 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 1 | |
| | Other (Describe in Part XIV) | 4b | 1. | |
| | Add lines 4a and 4b | | 4c | 1 996 995 |
| | Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18) | | 5 | 1,886,985 |
| Pa | art XIV Supplemental Information | 4 14 5 4044 44 | | |
| | plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line | | | |
| | 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line | s 2d and 4b Also complete | | |
| | part to provide any additional information | _ | | |
| _P | art V, Line 4 - Intended Uses for Endowment | <u>Funds</u> | | |
| ф | o Support new initiatives, ongoing programs, | . possible emerge | enci | ies, and |
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| _c | ertain_unique_needsIn_addition,_to_provide | grants and awar | c <u>d</u> s_ | _t <u>o</u> |
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SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Part

| CHEDULE I | Grants and Other Assistance to Organizations, Governments, and Individuals in the United States | 2009 |
|---|---|---|
| epartment of the Treasury | Complete if the organization answered "Yes" on Form 990, Part IV, lines 21 or 22. ▶ Attach to Form 990 | Open to Public Inspection |
| ame of the organization Un | ame of the organization United States Institute for Theatre Technology, Inc. | Employer identification number 13-6216921 |
| Part I General I | General Information on Grants and Assistance | |
| 1 Does the organization the selection criteria us | Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? | X Yes No |
| 2 Describe in Part IV the Part II Grants ar Form 990 Part IV ar | Describe in Part IV the organization's procedures for monitoring the use of grant furing single states. Complete if the organization answered "Yes" to form 1 or any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV, line 21, for any recipient space is needed. Part IV and Schedule I-1 (Form 990) if additional space is needed. | nization answered "Yes" to received more than \$5,000 Use □ |

| - | (a) Name and address of organization or government | (p) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (c) IRC (d) Amount of cash grant (e) Amount of non-cash (book, FMV, appraisal, fappicable assistance other) | (book, FMV, appraisal, other) | (g) Description of non-cash assistance | or assistance |
|---|--|----------------|-------------------------------------|--------------------------|---|-------------------------------|---|---------------|
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Enter total number of section 501(c)(3) and government organizations

Enter total number of other organizations

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

Schedule I (Form 990) 2009

13-6216921

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

Part III

USITT

| | I Red Part IV and Schedule I-1 (FOITH 990) II additional | | ומו סטמכני וס ווככתכת | | | |
|---------|---|-----------------------|--|-----------------------------------|---|--|
| (a | (a) Type of grant or assistance | (b) Number of | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other) |
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| Part IV | Supplemental Information. Complete this part to provide the information lequiled in Fair 1, in 6.2, and any other descriptions. | Complete this part to | provide the injoirnal | חווופלחוופת ווו ב שור ו' | וווס ב, מווס מוון סמוס מכניי | |

- Procedures for Monitoring the Use of Grant Funds Part I, Line 2 The receipient signs an aggreement whereby they agree to the conditions of

the grant/award. The receipient must send progress reports and a final

report to the Chairman of the Grants and Fellowships Committee.

Schedule I (Form 990) 2009

| Page 2 | |
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| 13-6216921 | he Instead Chates (Cobedials (Form 000) Dart (if) |
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| Schedule 1-1 (Form 990) 2009 United States Institute for | Institute for | 13-6216921 | 6921 | | Page Z |
|--|--------------------------|--------------------------|--------------------------------------|---|--|
| Part II Continuation of Grants and Other Assistance to Individuals in the United States (Schedule I (Form 990), Part III | er Assistance to Indivi- | duals in the United Stat | tes (Schedule I (Form 5 | 990), Part III) | |
| | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
| Award | 1 | 1,000 | | | |
| אַרייניאַ | H | 1,000 | | | |
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| Grant for Fellowship | 1 | 8,101 | | | |
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SCHEDULE J-2 (Form 990)

Continuation Sheet for Form 990

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the Organization

➤ See the Instructions for Form 990. United States Institute for

Inspection Employer Identification number

Theatre Technology, Inc. 13-6216921 Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Part I **Employees** (A) (C) (D) (E) (F) (B) Average hours Position (check all that apply) Reportable Reportable Estimated Name and Title per week compensation compensation amount of Individual trustee or director Highest Institutional trustee Key employee from from related other the organizations compensation (W-2/1099-MISC) organization from the compensated (W-2/1099-MISC) organization and related organizations Sylvia Hillyard Pannell 0 X 0 Immed Past President

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009 Open to Public

inspection

Name of the organization

United States Institute for Theatre Technology, Inc.

Employer identification number 13-6216921

Form 990, Part I, Line 6

Volunteers consist mainly of the Board of Directors and other members of the organization. The organization relies on over 1000 volunteers to effectively operate. They are actively involved with activities that promote the advancement of the knowledge and skills of other USITT's members and to facilitate communication among other individuals and organizations engaged in all aspects of design and production in the performing arts.

Form 990, Part III, Line 4d - All Other Achievements

Grants & awards - given to individuals to be used for the enhancement and promotion of the theatre and fine arts.

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents

The By-Laws were ammended to change the organization from an operational

Board of Directors to a governance Board of Directors.

Form 990, Part VI, Line 6 - Classes of Members or Stockholders

The members of USITT shall consist of persons, corporations, partnerships, and unincorporated associations interested in furthering the arts of theatre planning and design, construction, equipment, aesthetics, presentation, operation, and training. There are eight classes of membership each with voting privilege.

Form 990, Part VI, Line 7a - Election of Members and Their Rights

Officers will be elected by the membership via U.S. mail or electronic ballot. The term served is dependent on the position held.

Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members Any changes to the Certificate of Corporation must be approved by the majority of members. In addition, Officers must be elected by members.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990

A copy of 990 is sent to the Executive Director and the Treasurer for their review before filing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Each Director and Officer of USITT will be required from time to time to sign a statement which affirms such person has received, read, understands, and agrees to comply with the conflict of interest policy. In addition, periodic reviews will be Conducted by USITT Officials to ensure that transactions and arrangements with interested directors and officials conform to USITT's conflict of interest policy.

Form 990, Part VI, Line 15a - Compensation Process for Top Official
From July 1, 2009 through April 1, 2010, the Executive Committee
reviewed management's top official's (employee) performance. The Executive
Committee determined the annual compensation based on performance in tandem
with salary comparability data.

Effective April 2, 2010, the Compensation Committee now evaluates the past performance and compensation of the Executive Director and recommends to

Name of the organization

United States Institute for

Employer identification number 13-6216921

the Board of Directors any changes in compensation, benefits, and/or duties and responsibilities.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The Executive Committee reviews the key employees' performance. The

Executive Committee determines the annual compensation based on performance in tandem with salary comparability data.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

USITT United States Institute for 13-6216921

FYE. 6/30/2010

Federal Statements

Taxable Interest on Investments

| Description | Amount | Unrelated Business Code | Postal Code | Acquired after 6/30/75 |
|-----------------|-------------|----------------------------|----------------|------------------------|
| Interest Income | \$ 3,817 | | | |
| Total | \$ 3,817 | | - | |

Taxable Dividends from Securities

| Description | _ | Amount | Unrelated Business Code | Postal Code | Acquired after 6/30/75 |
|-------------|----|--------|-------------------------|----------------|------------------------|
| Dividends | \$ | 43,984 | | | |
| Total | \$ | 43,984 | | | |

USITT United States Institute for 13-6216921 FYE: 6/30/2010

Federal Statements

| | Fund Raising | v _r | \$ |
|--|-------------------------|---|------------|
| | Management & General | \$ 35,896 27,529 22,844 21,266 18,473 16,178 11,560 11,560 11,560 11,560 11,542 7,835 7,835 7,542 6,131 3,937 2,647 | \$ 227,553 |
| - All Other Expenses | Program Service | 18,716 | \$ 32,216 |
| Form 990, Part IX, Line 24f - All Other Expenses | Total Expenses | \$ 35,896 22,844 22,844 21,266 18,473 16,178 13,500 11,500 11,500 11,560 | \$ 259,769 |
| | Description | Presidents Expenses Contract Network Mgmt Organizational Assessment Postage & Mailing Commissioners Fund Office Expenses International Activities ESTA Technical Standards Branding Expenses Telephone ESTA Donations & Travel Sections & Chapters Executive Director Reloca Office Supplies Membership & Development Equipment expenses Insurance | Total |

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

► See separate instructions ► Attach to your tax return.

to your tax return.

Attachment Sequence No 67

OMB No 1545-0172 2009

Name(s) shown on return

United States Institute for Theatre Technology, Inc.

Identifying number 13-6216921

| | ess or activity to which this form relates adirect Depreciat | | | | | | | | |
|----------------------------------|---|--|--|--|----------|--|---|------------------|---|
| | rt l Election To Expe | nse Certain Prop | | | | | | _ | |
| | Note: If you have | | | | u con | iplete P | art I | | |
| 1 | Maximum amount. See the instru | • | | sses | | | | 1_ | 250,000 |
| 2 | Total cost of section 179 property | • | | | | | | 2 | |
| 3 | Threshold cost of section 179 pro | | | nstructions) | | | | 3_ | 800,000 |
| 4 | Reduction in limitation Subtract I | | • | | | | | 4 | |
| 5 | Dollar limitation for tax year Subtract I | | less, enter -0- If mar | | | | | 5 | |
| 6 | (a) Descripti | on of property | | (b) Cost (business us | e only) | (c) E | lected cost | | <u> </u> |
| | | | | | | | | | [|
| | | | | | | | | | <u> </u> |
| 7 | Listed property Enter the amoun | | | | 7 | | | | |
| 8 | Total elected cost of section 179 | | | s 6 and 7 | | | | 8 | |
| 9 | Tentative deduction Enter the sr | | | | | | | 9 | |
| 10 | Carryover of disallowed deductio | • | | | | | | 10 | |
| 11 | Business income limitation Ente | | | | (see ir | structions |) | 11 | |
| 12 | Section 179 expense deduction | | | _ | | | | 12 | |
| 13 | Carryover of disallowed deduction Do not use Part II or Part III below | | | 2 | 13 | | | | <u> </u> |
| | | | | registion (Do.n. | | luda liat | ad pran | | \ (Coo. mot.) |
| | rt II Special Deprecia | | | | | iuue iist | eu prope | EILY | (See instr) |
| 14 | Special depreciation allowance for | | tner than listed pro | perty) piaced in serv | /ice | | | | |
| | during the tax year (see instruction | | | | | | | 14 | |
| 15 10 | Property subject to section 168(f) | | | | | | | 15 16 | 14,969 |
| 16 Da | Other depreciation (including AC | ation (Do not Incl | ide listed pror | orty) (See inst | ructio | ne \ | | 10 | 14,909 |
| <u> </u> | III WACKS Deprecia | ation (DO not men | | ion A | uçuo | 113 / | | | |
| | | | | | | | | | |
| | MACRS daductions for assats of | acad in sarvice in tax v | eare healanina he | fore 2009 | | | | 17 | 1 0 |
| 17 18 | MACRS deductions for assets pl | • | | | accounts | check her | . ▶ □ | 17 | 0 |
| 17 18 | If you are electing to group any assets | s placed in service during t | the tax year into one | or more general asset a | | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | If you are electing to group any assets | • | the tax year into one | or more general asset a Tax Year Using th | e Gene | | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | If you are electing to group any assets | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | | | stem | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 18_ | If you are electing to group any assets Section B- | -Assets Placed in Service during to the Assets Placed in Service (b) Month and year | rvice During 2009 (c) Basis for depre | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | stem | |
| 18 | If you are electing to group any assets Section B- (a) Classification of property 3-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | stem | |
| 18 | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | stem | |
| 18 19a b | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 7-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | stem | |
| 19a b c | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 7-year property 10-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | stem | |
| 19a b c | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | stem | |
| 19a b c | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 7-year property 10-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the colation enture (d) Recovery | e Gene | ral Depre | ciation Sy | nod | |
| 19a b c d e f | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the eciation ent use trons) (d) Recovery period | e Gene | ral Depre | ciation Sy (f) Meth | nod | |
| 19a b c d e f | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | or more general asset a Tax Year Using th eciation ent use thous) (d) Recovery period period 25 yrs | e Gene | eral Depre | ciation Sy (f) Mett | rstem | |
| 19a b c d e f | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 7-year property 10-year property 15-year property 20-year property Residential rental | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the celebrate state of the cel | e Gene | eral Depre | ciation Sy (f) Mett | nod | |
| 19a b c d e f g h | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | rvice During 2009 (c) Basis for depri | Tax Year Using the column of t | e Gene | MM MM | S/L S/L | nod | |
| 19a b c d e f g h | If you are electing to group any assets Section B- (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property | -Assets Placed in Service during the Assets Placed in Service (b) Month and year placed in | the tax year into one rvice During 2009 (c) Basis for depri (business/investmonly-see instruc | cor more general asset at Tax Year Using the ectation ent use tions) (d) Recovery period 25 yrs 27 5 yrs 27 5 yrs 27 5 yrs 39 yrs | e Gene | MM MM MM MM | S/L S/L S/L S/L S/L | rstem | (g) Depreciation deduction |
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| 19a b c d e f g h i 20a b c P 21 | Section B— (a) Classification of property 3-year property 5-year property 10-year property 15-year property 20-year property 25-year property Residential rental property Nonresidential real property Class life 12-year 40-year Listed property Enter amount for Total. Add amounts from line 12 | Assets Placed in Service (b) Month and year placed in Service Assets Placed in Service Assets Placed in Service Assets Placed in Service Assets Placed in Service Ostructions.) om line 28 I, lines 14 through 17, line our return Partnership | the tax year into one rvice During 2009 (c) Basis for deprice (business/investmently—see instruction only—see ins | 25 yrs 25 yrs 27 5 yrs 27 5 yrs 39 yrs Tax Year Using the 12 yrs 40 yrs | (e) C | MM MM MM MM MM MM MM MM MM MM MM MM MM | S/L S/L S/L S/L S/L S/L S/L S/L S/L S/L | sstem mod System | (g) Depreciation deduction |