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Form **990**

Department of the Treasury

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

2009

Open to Public Inspection

	- • • -				01 2000 05 20 201			Inspection
				r, or tax year beginning 07 C Name of organization	-01-2009 and ending 06-30-2010	U	D Employer i	dentification number
	еск іта dress ch		ease se IRS	INTERNATIONAL CITYCOUNT	MANAGEMENT ASSOCIATION		36-21677	'55
	me cha	lal	bel or int or	Doing Business As			E Telephone	
	al retu	ty	pe. See ecific				(202) 289	-4262
	mınate	In	struc- ons.	Number and street (or P O b 777 NORTH CAPITOL ST NE N	ox if mail is not delivered to street addres to 500	ss) Room/suite	G Gross receipt	ts \$ 35,198,121
	ended olication	return n pending		City or town, state or country WASHINGTON, DC 20002420		•		
			F Nar	ne and address of principa	officer	H(a) Is th	■ is a group retu	ırn for
			ROBER	RT O'NEILL			ates?	⊤Yes ▽ No
				CAPITOL ST NE INGTON,DC 20002		` `	ll affiliates inclu	·
I Ta	x-exem	npt status	501(c) (3) ◄ (insert no)	(a)(1) or 527		o," attach a lis up exemption r	st (see instructions) number ►
J W	ebsit e	e: ► WWW I	СМА О	RG				
			•	tion Trust Association C	Other 🕨	L Year of fo	ormation 1914	M State of legal domicile IL
Pa	rt I							
	1	•		ie organization's mission oi ELLENCE IN LOCAL GOV	most significant activities ERNANCE			
ဗ								
Governance								
E							_	
Ş	2	Check this	box 🛏	if the organization discor	ntinued its operations or disposed	of more than	25% of its net	t assets
	3	Number of	voting r	members of the governing l	oody (Part VI, line 1a)			32
Activities &	4	Number of	ındeper	ident voting members of th	e governing body (Part VI, line 1b)		42
Ě	5	Total numb	er of er	nployees (Part V, line 2a)				516
륹	6	Total numb	erofvo	olunteers (estimate if nece	ssary)			6
ă	7a	Total gross	unrela	ted business revenue from	Part VIII, column (C), line 12 .		•	7a 104,87
	ь	Net unrela	ted busi	iness taxable income from	Form 990-T, line 34			7b -32,20
					·	Pric	or Year	Current Year
	8	Contribut	lone an	d grants (Part VIII line 1))		2,005,571	1,346,181
9								
eu	9	•		revenue (Part VIII, line 2g		28,846,908	,,	
Reveni	10				lines 3, 4, and 7d)		769,643	715,299
<u> </u>	11			'art VIII, column (A), lines		1,321,970	1,395,732	
	12				t equal Part VIII, column (A), line	e	32,944,092	34,021,786
	13				olumn (A), lines 1-3)		400,124	348,333
	14	Benefits p	aid to c	or for members (Part IX, co	lumn (A), line 4)			0
	15	Salaries,	otherco	ompensation, employee be	5-			
8		10)				17,573,997	17,708,732	
Expenses	16a				mn (A), line 11e)			0
五	b			penses (Part IX, column (D), line			14 572 221	15.000.733
	17				11a-11d, 11f-24f)		14,573,321	15,988,723
	18				ual Part IX, column (A), line 25)		32,547,442	34,045,788
	19	Revenue	less exp	penses Subtract line 18 fr	om line 12		396,650	-24,002
Net Assets or Fund Balances						_	g of Current Year	End of Year
9 4	20	Total ass	ets (Pai	rt X, line 16)			13,068,274	11,812,222
ΑĞ	21						7,641,436	6,373,015
2 2 2 3	22		-	nd balances Subtract line 2			5,426,838	5,439,207
	10111	Signati					3,120,030	3,133,237
		_			nined this return, including accompanying	schedules and s	tatements and to	the hest of my knowledge
					on of preparer (other than officer) is base			
Sign		*****				2011	-02-11	
Here	е	Signatur	e of office	er		Date		
				EXECUTIVE DIRECTOR				
		Type or	print nam	ne and title				
		Preparer's				Check If		ntıfyıng number
Paid		signature) JENNY	' E HERRERA CPA	1 1	self- empolyed 🕨 🦵	(see instruction	ns)
	arer's	Firm's name	(or your	s L RUBINO & MCGEEHIN CHAI		poi/cu F	1	
Use (ıf self-emplo	yed),	P	EIN ►			
J 30 (~···y	address, and	I ZIP + 4	6903 ROCKLEDGE DRIVE S		DI		
				BETHESDA, MD 20817			Phone no	(301) 564-3636
Mayl	the IR	S discuss t	hıs retu		above? (see instructions)			✓ Yes 「No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

THE INTERNATIONAL CITY/COUNTY MANAGEMENT ASSOCIATION'S (ICMA) MISSION IS TO CREATE EXCELLENCE IN LOCAL GOVERNANCE BY ADVOCATING AND DEVELOPING THE PROFESSIONAL MANAGEMENT OF LOCAL GOVERNMENT WORLDWIDE

2	Did the organization undertake the prior Form 990 or 990-E27		program servic	es during the year wl	nich were not listed on	┌ Yes ┌ No
	If "Yes," describe these new se	ervices on Sched	dule O			
3	Did the organization cease corservices?	nducting, or mak	e sıgnıfıcant ch	anges in how it cond	ucts, any program	┌ Yes ┌ No
	If "Yes," describe these change	es on Schedule	0			
4	Describe the exempt purpose a Section 501(c)(3) and 501(c)(allocations to others, the total	(4) organizations	s and section 4	947(a)(1) trusts are	required to report the am	
4a	(Code) (Exp	penses \$	20,236,908 inc	luding grants of \$	330,489) (Revenue \$	22,996,464)
	SERVICES TO LOCAL GOVERNMENTS MANAGEMENT (CPM) ICMA OFFERE INCLUDING A MAJOR PROJECT IN LIPARTNERSHIP WITH IPMA-HR IN PI INFORMATION AMONG PARTICIPANT DEVELOPMENT OF A NEW ONLINE D. 'WHAT WORKS' CASE STUDIES TO T WITH ACCESS TO HIGH-QUALITY, LOCAL GOVERNMENT SERVICES IN PROGRAM IN AFGHANISTAN ICMA MENHANCE THE EFFECTIVENESS OF MESSENCE AT KEY LOCAL GOVERNMORGANIZATIONS IN DOMESTIC PROAGREEMENT WITH THE USENVIROW WHICH HAS BEEN WELL RECEIVED WORLEANS, ATTRACTING MORE THAN THE BILL AND MELINDA GATES FOUN GATES FOUNDATION, ANNIE E CALS	ED CONSULTING SEF ATIN AMERICA, MAD ERFORMANCE MANA IS BY SHIFTING FRO NATA ANALYSIS TOOL THE KNOWLEDGE NE OW COST NATIONAL INTERNATIONAL PR MADE A POSITIVE IM MEIGHBORHOOD CO MENT CONFERENCES DORAMS THE CENTE DOMENTAL PROTECT WITH SEVERAL THOU IS,000 REGISTRANT IS,000 REGISTRANT NDATION PARTNERS	RVICES IN THE ARI DE A PRESENTATON AGEMENT ICMA RE DIM PREPARED DAS L (SCHEDULED FOR TWORK THE NATI L CITIZEN SURVEY OGRAMS ICMA EXI IPACT ON THOUSA UNCILS ICMA COI S AND BY MANITAII ER FOR SUSTAINAB FION AGENCY IN JU USAND DOWNLOAD TS, AND SUCCESSI SHIPS WITH ICMA LTION PROGRAMS TION PROGRAMS	EAS OF PUBLIC SAFETY AN IN SPAIN ON MAJOR PUBFINED CPM'S APPROACH HBOARD REPORTS TO CU. RELEASE IN EARLY 2011 TONAL RESEARCH CENTER AS A MEANS TO GET FEED ANDS OF CITIZENS' LIVES TON THE COMMUNITIES COMPLUS AND PUBLISHED IN EACH ON THE COMPLETED THE ICTULY COMPLETED THE ICTUM ON TIN WIRD ON THE COMPLETED THE ICTULY COMPLETED THE ICTUM ON THE	ND MANAGEMENT SERVICES AN BLIC SAFETY INITIATIVES, AND ITO PROMOTING ANALYSIS AND ISTOM DASHBOARD DEVELOPMED BOOSTING WEBINAR OFFERING PARTNERSHIP CONTINUED TO BACK FROM THEIR RESIDENTS O 17 PROGRAMS IN 16 COUNTHROUGH PROGRAMS THAT IM THAYER IN THE INTERNATION WITH INTERNATIONAL DONOR ETED THE FIVE-YEAR SMART GO "PUTTING SMART GROWTH TO ICMA SUCCESSFULLY HOSTEL MA PUBLIC LIBRARY INNOVATORE RENEWED TO HELP EXPAND	D SÉCURED 25 NEW CONTRACTS MADE CONTACTS IN CHINA VIA APPLICATION OF PERFORMANCE ENT WORKSHOPS, WORKED ON JOS, AND ADDING MANY OF CPM'S PROVIDE LOCAL GOVERNMENTS REGARDING THE QUALITY OF RIES, INCLUDING A NEW MAJOR PROVE THE WATER SUPPLY AND JAL ARENA, INCLUDING A STRONG LS AND OTHER INFLUENTIAL ROWTH NETWORK COOPERATIVE D WORK IN RURAL COMMUNITIES" D BROWNFIELDS 2009 IN NEW ON GRANT PROGRAM FUNDED BY ON ICMA'S HIGH QUALITY
4b	(Code) (Ex	penses \$	2,105,293 inc	luding grants of \$	17,844) (Revenue \$	1,570,459)
טד	PROFESSIONAL DEVELOPMENT PRO GOVERNMENT TRAINING THE 2009 EXCELLENT FROM 85 6% OF EVALUA OVERALL RATING OF 4 OUT 5 ICMA PRODUCED 25 WEB CONFERENCES SUMMITS EACH SUMMIT INCLUDED	DEESSIONAL DEVELO ANNUAL CONFEREN ATION SURVEY RESI UNIVERSITY PROVI AND FIVE WEB WOF	PMENT IS OFFERE NCE TOOK PLACE I PONDENTS ICMA I IDED 23 SENIOR M RKSHOPS, AND OF	D THROUGH THE ANNUAL N MONTREAL, CANADA, W AUNCHED IT'S FIRST VIR ANAGERS WITH THE ICM FERED WORKSHOPS TO A	CONFERENCE, ICMA UNIVERS /HICH RECEIVED AN OVERALL F FUAL ANNUAL CONFERENCE IN A GETTYSBURG LEADERSHIP IN TOTAL OF 144 PAID PARTICIP,	ITY, WORKSHOPS, AND LOCAL AATING OF VERY GOOD OR MONTREAL WHICH RECEIVED AN STITUTE EXPERIENCE ICMA
4c	(Code) (Exp INFORMATION INFORMATION IS PROPUBLISHED THE "MUNICIPAL YEAR ELOCAL ECONOMIC DEVELOPMENT AN ICMA ALSO PUBLISHED "HUMAN RESENURCE ISSUE" AS WELL AS "CAU WAS REDESIGNED, LAUNCHING WIT MORE THAN 10 BOOKS FOR FUTURI 2009 ISSUE A NATIONAL SURVEY WE SURVEY ICMA PARTICIPATED ON THE NETWORK CONTINUED TO GROW AN NETWORKING FUNCTIONALITY ENFORM PERSONAL NETWORKS ICMA	BOOK 2010" WHICH ND THE OTHER STUI SOURCE MANAGEME PITAL BUDGETING A IF PUBLICATION USI VAS CONDUCTED FO HE SURVEY ADVISOF IND PROFESSIONALS HANCEMETNS WERE	MBERS THROUGH INCLUDED TWO A DIES THE EFFECTS ENT AN ESSENTIAL IND FINANCE A GU "INFOCUS" ICMA I ING READER INPUT INFORMATION FIR RY COMMITTEE TO IFROM ALL LEVELS ADDED TO MAINT	RTICLES RELATED TO THIS OF THE CURRENT FISCAL GUIDE, 3RD EDITION, A JIDE FOR LOCAL GOVERN CONTINUED TO OFFER NET ICMA LAUNCHED A COMILE PERSONNEL EXPENDITUDE A FOLLOW UPSAND FUNCTIONS IN LOCAIN BLOGS AND NEW FUN	E ECONOMY ONE ARTICLE STU LE CRISIS ON COMMUNITIES TH COMPLETELY UPDATED LOOK A MENTS, 2ND EDITION "THE IQ EW BOOKS ON AMAZON COM AN PLETELY REDESIGNED PM MAG JURE, ECONOMIC DEVELOPMENT SURVEY ON THE MATURING OF AL GOVERNMENT ARE ACTIVELY ICTIONALITY WAS PLANNED THA	IDIES TRENDS IN APPROACHES TO IROUGHOUT THE UNITED STATES IT TODAY'S COMPLEX HUMAN REPORT SUBSCRIPTION SERIES NO CONTRACTED/DEVELOPED AZINE AS OF THE SEPTEMBER SURVEY, SUSTAINABILITY AMERICA THE KNOWLEGE / EXCHANGING KNOWLEDGE AND
4d	Other program services (Des	scribe in Schedu	ile O) See also	Additional Data for	Description	
	(Expenses \$ 2,37	74,140 ıncludı	ng grants of \$) (Revenue \$	5,166,320)
4e	Total program service expens	es > \$	26,599,488			

Dart TV	Checklist	of Deau	irad S	chadulae
	CHECKHSI	. vi keuu	neu si	uneuures

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
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 the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
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			
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
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 U S ? If "Yes," complete Schedule F, Part II	15	Yes	
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 U S ? If "Yes," complete Schedule F, Part III	16		No
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? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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			
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
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 owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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		No
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? <i>If</i> "Yes," complete Schedule R, Part I	33		No
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		No
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note, All Form 990 filers are required to complete Schedule O	38	Yes	

rt V	Statements	Regarding	Other	TRS F	ilinas	and '	Tax	Comi	oliance
	ota to illoiles	itegai aiiig	•					~~	J.:

			Yes	No
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
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 instructions)	2b	Yes	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country AF, ET, LE, ID, IZ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νο
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

777 NORTH CAPITAL ST NE STE 500

WASHINGTON, DC 20002

(202) 289-4262

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	processes, or changes in Schedule O. See Instructions.							
	ector A. Governing body and Management		Yes	No				
1a	Enter the number of voting members of the governing body 1a 20							
b	Enter the number of voting members that are independent 1b 20							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο				
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο				
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο				
6	Does the organization have members or stockholders?	6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes					
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes					
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		No				
Se	ection B. Policies (This Section B requests information about policies not required by the Internal	9		NO				
	venue Code.)							
			Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo				
b	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?							
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?							
		11	Yes					
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise	126	V 0.0					
c	to conflicts?	12b	Yes					
12	describe in Schedule O how this is done	12c	Yes					
13	Does the organization have a written whistleblower policy?	13	Yes	N. a				
14	Does the organization have a written document retention and destruction policy?	14		No				
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
	The organization's CEO, Executive Director, or top management official	15a	Yes					
D	Other officers or key employees of the organization	15b	Yes					
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο				
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the							
	organization's exempt status with respect to such arrangements?	16b						
	Let the Ctates with which a convertible Form COO is required to be fled \$ 7. AB, CA, CT, II, ME, MA, MC, N	11 817	NINA -	1.0				
17	List the States with which a copy of this Form 990 is required to be filed ►AZ, AR, CA, CT, IL, ME, MA, MS, NO, OK, OR, PA, TN, UT, WA, WI, AK, CO							
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.							
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. See Additional Data Table							
20	State the name, physical address, and telephone number of the person who possesses the books and records of the MINIAGGARWAL	ne orga	nızatıor	n 🕨				

Part VIII 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, and current key employees 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did i	not compen	ffice	r, dırector, trustee	or key employee						
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

16	lotal .	•	•	•	•	•	•	•	•		•	•	•	•	•	•			2,324,300	1	
2	Total num	bero	ofine	dıvıd	luals	s (ın	clu	ding	but	not	lımıt	ed to	o th	ose	lıst	ed a	above)) wł	ho received more th	nan	

\$100,000 in reportable compensation from the organization >32

			'	
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such undividual			

Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
GW CONSULTING INC 5870 TRINITY PKWY 300 CENTERVILLE, VA 20120	FIELD OFFICE SERVICES	864,549
SCOTT JOHNSON 1733 E MCMILIAN ST 2 CINCINNATI, OH 45206	CONSULTING SERVICES	340,840
DESIGN DATA 7606 LINDERBERGH DR GAITHERSBURG, MD 20879	IT SUPPORT	331,366
CASSEDY INSURANCE AGENCY 742 LYNN ST PO BOX 1069 HERNDON, VA 20170	INSURANCE SERVICES	235,750
FREEMAN DECORATING 61 BROWNS LINE TORONTO, ONTARIO M8W 3S3 CA	CONFERENCE SET UP	220,124
2 Total number of independent contractors (including but not limited to those listed above)	who received more than	

\$100,000 in compensation from the organization >24

167,013

Nο

Yes

5

Form 9								Page 9
Part \	<u>/###</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
# # #	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
s, g	c	Fundraising eve	ents 1c					
<u>ağ</u>	d	Related organiz	ations 1d					
E, S	e	Government grants	s (contributions) 1e					
tio sr s	f	All other contribution	ons, gifts, grants, and 1f	1,346,181				ĺ
ē€.	g		butions included in					
E E			<u> </u>		1 246 101			
ें ल	h	Total. Add lines	s 1a-1f	•	1,346,181			
e :				Business Code				
Program Serwce Revenue	2a	TECHNICAL ASSIST	<u> </u>	541,610	22,996,464	22,996,464		
<u>22</u>	Ь .	MEMBERSHIP SERV		900,099	4,757,096	4,757,096		
ě	ر د	PROFESSIONAL DE	<u> </u>	541,900	1,570,459	1,570,459		
Š	d e	RESEARCH/INFORI	-	541,900	831,331	831,331		
Ē	, F		am service revenue	511,190	304,354	304,354	104 970	
j O	'				104,870		104,870	
	g		s 2a – 2f		30,564,574			
	3		ome (including dividend		694,150			694,150
	4		ar amounts) stment of tax-exempt bond p	· · ·	031,130			331,130
	5			▶ ↑	330,577			330,577
		·	(ı) Real	(II) Personal				
	6a	Gross Rents	1,022,384					
	b	Less rental expenses	880,403					
	c	Rental income or (loss)	141,981					
	d		me or (loss)		141,981			141,981
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	132,908					
	Ь	Less cost or other basis and	111,759					
	 c	sales expenses Gain or (loss)	21,149					
	d		s)		21,149			21,149
	8a	Gross income f						
Other Revenue		events (not inc \$	reported on line 1c)					
ţ	b		penses b					
0	С		loss) from fundraising e	events F				
	9a	Gross income f See Part IV, lin	rom gaming activities le 19 a					
	b		penses b					
	10a	Gross sales of returns and allo		vities				
			a	976,201				
	b		oods sold b	184,173	792,028	792,028		
	С	Net income or ((loss) from sales of inve	Business Code	792,028	792,028		
	11a	OTHER REVEN		900,099	131,146			131,146
	ь	J THER REVEN		,	,			·
	c	_						
	d	All other reven	ue					
	e	Total. Add lines	ι s 11a-11d		131 146			
				▶	131,146			
	12	Total revenue.	See Instructions	•	34,021,786	31,251,732	104,870	1,319,003

	990 (2009)				Page 10
Part					
	Section 501(c)(3) and 501(c)(4) organizations m			(D)	
	ll other organizations must complete column (A) but are not required to		(B), (C), and	(D).	(D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$	142,997	142,997		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	17,844	17,844		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	187,492	187,492		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,114,626	440,979	673,647	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	11,487,592	9,126,505	2,326,657	34,430
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	522,648	419,718	100,555	2,375
9	Other employee benefits	3,594,910	2,673,188	908,176	13,546
10	Payroll taxes	988,956	771,623		2,966
11	Fees for services (non-employees)	300,200	771,020	221,557	2,300
a	Management				
h	Legal	24,026	1,420	22,606	
c	Accounting	81,740	1,120	81,740	
d	Lobbying	01,710		01,710	
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g g	Other	6,508,108	5,509,809	998,299	
12	Advertising and promotion	14,047	14,047	330,233	
13	Office expenses	2,259,520	1,647,693	601,068	10,759
14	Information technology	149,530	41,872	· ·	10,733
15	Royalties	84,851	84,851	107,030	
16	Occupancy	1,658,072	1,291,631	338,808	27,633
17	Travel	2,340,501	2,035,500	· · · · · · · · · · · · · · · · · · ·	390
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,340,301	2,033,300	304,011	
19	Conferences, conventions, and meetings	981,402	876,179	99,248	5,975
20	Interest	49	2,0,273	49	3,3.3
21	Payments to affiliates	.,			
22	Depreciation, depletion, and amortization	447,242	7,641	439,601	
23	Insurance	188,922	106,488	· ·	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	, ==	,		
а	MISCELLANEOUS	894,856	840,134	54,636	86
ь	INVT VALUATION RESERVES	355,857		355,857	-
С	FRINGE BNFT ALLOCATION	0		-6,436	6,436
d	SERVICE CNTR ALLO CATION	0	361,877	-364,228	2,351
e					-
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	34,045,788	26,599,488	7,339,353	106,947
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	2.,2.5,.30		.,,23,,555	
		1		<u> </u>	

Part X Balance Sheet (A) (B) End of year Beginning of year 800 800 1 Cash—non-interest-bearing 1 2.871.448 2 1.621.805 2 1,861,952 1,856,242 3 3 4 1.522.809 2.011.993 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 182,192 876.314 527,981 1,203,882 1,027,995 Land, buildings, and equipment cost or other basis Complete 2.668.118 10a 10a Part VI of Schedule D 1.060,832 **10c** 10b 1.814.690 853.428 b Less accumulated depreciation 3.420.938 11 3.850.842 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 67,107 15 61.136 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 13,068,274 16 11,812,222 1.557.861 2.159.381 17 17 Accounts payable and accrued expenses . 18 18 5,469,344 19 4,802,443 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 12.711 12,711 25 Other liabilities Complete Part X of Schedule D 25 26 **Total liabilities.** Add lines 17 through 25 7,641,436 6,373,015 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 4,200,707 3.988.074 27 Unrestricted net assets 27 28 1.226.131 28 1.451.133 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 5,426,838 33 5,439,207 34 Total liabilities and net assets/fund balances 13.068.274 11.812.222 34

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

OMB No 1545-0047

15 NO 1343-00

2009

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Public Charity Status and Public Support

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

Employer identification number

INTERNATIONAL CITYCOUNTY MANAGEMENT ASSOCIATION 36-2167755 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?	
		instructions))	Yes	No	Yes	No	Yes	No		
									-	
									-	
Total										

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	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) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

(Complete only if you checked the box on line 9 of Part I.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,343,868	1,586,994	1,644,858	2,005,571	1,	.346,181	7,927,472
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	26,108,792	22,835,313	27,379,266	29,586,522	31,	435,905	137,345,798
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5	27,452,660	24,422,307	29,024,124	31,592,093	32	782,086	145,273,270
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	6,240	10,175	10,598	10,991		7,910	45,914
b	A mounts 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	15,875,788	9,614,741	11,075,185	13,727,821	16,	244,830	66,538,365
c	Add lines 7a and 7b	15,882,028	9,624,916	11,085,783	13,738,812	16	252,740	66,584,279
8	Public Support (Subtract line 7c from line 6)							78,688,991
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09	(f) Total
9	A mounts from line 6	27,452,660	24,422,307	29,024,124	31,592,093	32,	782,086	145,273,270
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,317,975	1,459,670	2,442,759	2,173,152	2,	047,111	9,440,667
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b	1,317,975	1,459,670	2,442,759	2,173,152	2,	047,111	9,440,667
11	Net income from unrelated business activities not included in line 10b, whether or not the							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	52,490	78,863	82,198			131,146	344,697
13	Total support (Add lines 9, 10c,	28,823,125	25,960,840	31,549,081	33,765,245	34,	960,343	155,058,634
14	11 and 12) First Five Years If the Form 990 is check this box and stop here		on's first, second					
Se	ction C. Computation of Pub	lic Support Pe	ercentage					
15	Public Support Percentage for 2009			13 column (f))		15		50 750 %
16	Public support percentage from 200	08 Schedule A , P	art III, line 15			16		50 260 %

15	50 750 %
16	50 260 %

Section D. Computation of Investment Income Percentage

Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))

Investment income percentage from 2008 Schedule A, Part III, line 17 18

17	6 090	%
18	5 930	%

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

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID:

Software Version:

EIN: 36-2167755

Name: INTERNATIONAL CITYCOUNTY MANAGEMENT

ASSOCIATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program servi	ices				
(Code BRAND & ADVOCACY) (Expenses \$	598,565	including grants of \$) (Revenue \$)
(Code MEMBERSHIP RENEWA) (Expenses \$ L & SERVICES	1,550,573	including grants of \$) (Revenue \$	5,166,320)
(Code OTHER) (Expenses \$	225,002	including grants of \$) (Revenue \$)

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

	Compensated Employees, and Independent Contractors								
(A) Name and Title	(B) Average hours per		(C) ition (che that appl				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	week	Individual trustee or director	Officer Institutional Trustee	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
DARNELL EARLEY PRESIDENT	5 00	Х	Х		_	-	0	0	0
DAVE CHILDS PRESIDENT ELECT	5 00	Х	x				0	0	0
DAVE LIMARDI	5 00	Х	х				0	0	0
PAST PRESIDENT MIKE BAKER	5 00	X	Х				0	0	0
VICE PRESIDENT JIM BENNETT	5 00	X	X				0	0	
VICE PRESIDENT RICK CORTES									
VICE PRESIDENT NO ELENE DUFF	5 00	Χ	Х				0	0	
VICE PRESIDENT	5 00	Χ	Х				0	0	0
SIMON FARBROTHER VICE PRESIDENT	5 00	Х	Х				0	0	0
MATT FULTON VICE PRESIDENT	5 00	X	X				0	0	0
SCOTT HANCOCK VICE PRESIDENT	5 00	X	x				0	0	0
HEATHER HARPER VICE PRESIDENT	5 00	X	Х				0	0	0
CHERYL HILVERT VICE PRESIDENT	5 00	Х	Х				0	0	0
BRUCE MOORE VICE PRESIDENT	5 00	X	Х				0	0	0
THOMAS H MUEHLENBECK VICE PRESIDENT	5 00	X	Х				0	0	0
CHARLES PENNY VICE PRESIDENT	5 00	X	Х				0	0	0
KAREN PINKOS VICE PRESIDENT	5 00	Х	Х				0	0	0
MIKE WALKER VICE PRESIDENT	5 00	Х	Х				0	0	0
ROBERT O'NEILL EXECUTIVE DIRECTOR	37 50		Х				335,167	0	51,721
UMA RAMESH CHIEF FINANCIAL OFFICER	37 50		x				175,376	0	31,256
ELIZABETH KELLAR DEPUTY EXECUTIVE DIR	37 50			Х			237,700	0	35,926
DAVID GROSSMAN DIR INTL PROGRAMS	37 50			X			171,955	0	2,628
WAYNE SOMMER DIR STRATEGIC INITIATIVE	37 50			Х			172,219	0	31,282
RONALD ENZWEILER RESIDENT ADVISOR	37 50				Х		320,976	0	6,324
ROBERT KATZ RESIDENT ADVISOR	37 50				Х		311,690	0	0
JOHN SLOTA RESIDENT ADVISOR	37 50				Х		229,437	0	1,197

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	A verage Position (check hours that apply)				Ш		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
MARK GRUB RESIDENT ADVISOR	37 50					Х		174,503	0	6,679
C SCOTT JOHNSON RESIDENT ADVISOR	37 50					Х		195,545	0	0

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
TECHNICAL ASSISTANCE	541,610	22,996,464	22,996,464		
MEMBERSHIP SERVICES	900,099	4,757,096	4,757,096		
PROFESSIONAL DEVELOP	541,900	1,570,459	1,570,459		
RESEARCH/INFORMATION	541,900	831,331	831,331		
MEMBER PUBLICATIONS	511,190	304,354	304,354		

DLN: 93493042008421

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

SeSeIf th	ection 501(c)(3) organizations that ection 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, or have filed Form 5768 (election under have NOT filed Form 5768 (election uis," to Form 990, Part IV, Line 5 (Prezations Complete Part III	section 501(h)) 0 nder section 501	Complete Part II-A Do (h)) Complete Part II-E	not co 3 Do i	mplete not co	e Part II-B mplete Part	II-A
	ime of the organization ERNATIONAL CITYCOUNTY MANAGEMEN	IT ACCOCIATION		Employe	eridei	ntıfıca	tion numbe	er
TIN I	ERNATIONAL CITTCOUNTY MANAGEMEN	IT ASSOCIATION		36-216	7755			
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a section	527	7 org	anizatio	n.
1	Provide a description of the org	ganization's direct and indirect politic	:al campaign act	ivities in Part IV				
2	Political expenditures			ı	-	\$		
3	Volunteer hours							
Par	Complete if the or	ganization is exempt under s	section 501(c)(3).				
1		tax incurred by the organization und			 -	\$		
2	Enter the amount of any excise	tax incurred by organization manage	ers under section	n 4955	-	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O for this year?				┌ Yes	
4a	Was a correction made?						☐ Yes	┌ No
ь	If "Yes," describe in Part IV							
Par	rt I-C Complete if the or	ganization is exempt under s	section 501(c) except section	n 50	1(c)((3).	
1	Enter the amount directly expe	nded by the filing organization for se	ction 527 exemp	ot function activities	•	\$		
2	Enter the amount of the filing o exempt funtion activities	rganızatıon's funds contributed to otl	ner organizations	for section 527	.	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b	-	¢		
4	Did the filing organization file F	orm 1120-POL for this year?				→	┌ Yes	
5	were made For each organizat contributions received that we	or demployer identification number (EI on listed, enter the amount paid from re promptly and directly delivered to littee (PAC) If additional space is ne	i the filing organi a separate politi	zation's funds Also e cal organization, suc	enter	the an	nount of po	litical
	(a) Name	(b) Address	(c) EIN	(d) A mount paid filing organization funds If none, ento	n's	cor dire	A mount of ntributions and prompt ectly delive separate po ganization enter - (received cly and ered to a plitical If none,

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Pa	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
	Check If the filing organization belongs to a Check If the filing organization checked box		d" provisions apply	,					
<u> </u>	Limits on Lobbying E (The term "expenditures" means ar	Expenditures			(a) Filing Organization's Totals	(b) Affiliated Group Totals			
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lob	bying)						
b	Total lobbying expenditures to influence a legisla	ative body (direct lobby	yıng)						
c	Total lobbying expenditures (add lines 1a and 18	b)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines 1	c and 1d)							
f	Lobbying nontaxable amount Enter the amount f	from the following table	ın both						
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxa 20% of the amount on lir							
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,00	0					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000,0	000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,00	00					
	Over \$17,000,000	\$1,000,000							
		•							
g	Grassroots nontaxable amount (enter 25% of lin	ne 1 f)							
h	Subtract line 1g from line 1a If zero or less, enter	er -0-							
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -							
j	If there is an amount other than zero on either line section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file F	orm 4720 repoi	rtıng	┌ Yes ┌ No			
	(Some organizations that made a columns below. See the	he instructions fo	ection do not l r lines 2a thro	nave to com ugh 2f on pa		ne five			
	Lobbying Exp	enditures During	4-Year Averag	ing Period	I	ı			
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total			
2a	Lobbying non-taxable amount								
b	Lobbying ceiling amount (150% of line 2a, column(e))								
c	Total lobbying expenditures								
d	Grassroots non-taxable amount								

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768	;
	(election under section 501(h)).	

		(a)		(D)	
		Yes	No	A mount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?		No		
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes			
c	Media advertisements?		Νo		
d	Mailings to members, legislators, or the public?		Νo		
е	Publications, or published or broadcast statements?	Yes		1,250	
f	Grants to other organizations for lobbying purposes?	Yes		49,262	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo		
i	Other activities? If "Yes," describe in Part IV		Νo		
j	Total lines 1c through 1i		·	50,512	
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No		
b	If "Yes," enter the amount of any tax incurred under section 4912		'		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	ATTI A Complete if the augmentation is assembly under coation FO4(a)(A) coation	- FA47-	\/=\		

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanat ion
· · · · · · · · · · · · · · · · · · ·	Activities	THE PRIMARY GOAL OF ICMA'S FORM OF GOVERNMENT ADVOCACY ACTIVITIES IS TO DOCUMENT AND PROMOTE THE BENEFITS OF PROFESSIONAL LOCAL GOVERNMENT MANAGEMENT AND THE COUNCIL-MANAGER FORM TO ACHIEVE THIS GOAL, ICMA COLLECTS AND DISSEMINATES CIVIC AND GENERAL EDUCATION MATERIALS ICMA RESPONDS TO REQUESTS FOR FINANCIAL ASSISTANCE FROM BONA FIDE CITIZEN GROUPS TO SUPPORT ADOPTION/RETENTION OF THE COUNCIL-MANAGER FORM OR THE POSITION OF PROFESSIONAL MANAGER

1

DLN: 93493042008421

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

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

Supplemental Financial Statements

Open to Public

ernal	Revenue Service	► Attach to Fo	orm 990. ► See separate instructions.		Inspec	tion
	ne of the organi			Employer ide	entification numb	er
INIE	ERNATIONAL CITYCO	OUNTY MANAGEMENT ASSOCIATION		36-216775	5	
Pa	rt I Organ	izations Maintaining Donor Ac	dvised Funds or Other Similar Fu			te if the
	organiz	zation answered "Yes" to Form 99				
			(a) Donor advised funds	(b) Fund	s and other accou	ints
	Total number a	·				
:		tributions to (during year)				
•		nts from (during year)				
		le at end of year				
•	-		sors in writing that the assets held in don organization's exclusive legal control?	oradvised	☐ Yes	☐ No
•	_	- , , , , , , , , , , , , , , , , , , ,	donor advisors in writing that grant funds efit of the donor or donor advisor, or for ar	•	: A	
	·	ermissible private benefit	ient of the donor of donor davisor, or for dr	iy other purpos	☐ Yes	☐ No
Par	t III Conse	rvation Easements. Complete	ıf the organization answered "Yes" to	o Form 990,	Part IV, line 7.	
	Purpose(s) of c	conservation easements held by the or	rganızatıon (check all that apply)			
	_	ion of land for public use (e g , recreati	<u> </u>	•	. ,	:a
	<u></u>	of natural habitat	Preservation of a c	ertified histori	c structure	
	Preservati	ion of open space				
!	•	s 2a–2d if the organization held a quali he last day of the tax year	ified conservation contribution in the form -	of a conservat	:ion	
				Held	at the End of the	: Year
а	Total number o	of conservation easements		2a		
b	Total acreage	restricted by conservation easements		2b		
С		servation easements on a certified his	` ′	2c		
d	Number of con	servation easements included in (c) ac	cquired after 8/17/06	2d		
;		servation easements modified, transfe ar ►	erred, released, extinguished, or terminate	d by the organ	ızatıon durıng	
ļ	Number of stat	tes where property subject to conserva	ation easement is located ►			
i		nization have a written policy regarding f the conservation easements it holds?	g the periodic monitoring, inspection, hand ?	lling of violatio	ns, and Yes	☐ No
,	Staff and volun	iteer hours devoted to monitoring, insp	pecting and enforcing conservation easem	ents during the	e year ►	
'	A mount of exp	enses incurred in monitoring, inspectii	ng, and enforcing conservation easements	during the year	ar ► \$	
3		servation easement reported on line 2) and 170(h)(4)(B)(ii)?	?(d) above satisfy the requirements of sec	tion	┌ Yes	┌ No
)	balance sheet,	- · · · · · · · · · · · · · · · · · · ·	onservation easements in its revenue and the footnote to the organization's financial	•	•	
ar	t IIII Organ	izations Maintaining Collectio	ons of Art, Historical Treasures, ("Yes" to Form 990, Part IV, line 8.	or Other Sii	milar Assets.	
.a	If the organizat art, historical t	tion elected, as permitted under SFAS treasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or research ancial statements that describes these it	h in furtherand		е,
b	historical treas	, ,	116, to report in its revenue statement a public exhibition, education, or research ir s		•	
	(i) Revenues II	ncluded in Form 990, Part VIII, line 1		► 5	\$	
	(ii) Assets incl	luded in Form 990, Part X			5	
)		•	orıcal treasures, or other sımılar assets fo		· -	
1	_	nts required to be reported under SFA			,	
а	Revenues inclu	uded in Form 990, Part VIII, line 1		► 9	\$	

Assets included in Form 990, Part X

3	Using the organization's accession and other										(CONTII	<u>nuea)</u>
	items (check all that apply)	·		_								
а	Public exhibition		d	ı	Loan	orexcl	nange prog	rams				
b	Scholarly research		e	Γ	O the	r						
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	aın ho	w the	y furth	er the o	rganızatıoı	n's ex	empt purpose	ın		
5	During the year, did the organization solicit o	or receive donation	s of ar	rt, hıs	torıcal	treasu	res or othe	rsım	ılar	_	_	
	assets to be sold to raise funds rather than t									☐ Yes	s	No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	ed "Ye	es" to Form 9	9 90,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					utions o	or other ass	sets r	not	┌ Yes	,	No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	ving t	able		Γ		A r	nount		
С	Beginning balance						Ī	1c				
d	Additions during the year						ļ	1d				
е	Distributions during the year						ļ	1e				
f	Ending balance						Ī	1f				
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	ne 21?	,			L	I		┌ Yes		No
ь	If "Yes," explain the arrangement in Part XIV									,	,	
	rt V Endowment Funds. Complete		n ans	swer	ed "Ye	es" to I	orm 990	, Par	t IV, line 10.			
	•	(a)Current Year) Prior			o Years Back		Three Years Back	(e) Fοι	ır Years	Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment • %											
С	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	zation	that	are hel	d and a	dmınıstere	d for	the			
	organization by	J								Y	es N	0
	(i) unrelated organizations		•					•	3a	``		
	(ii) related organizations								3a			
	If "Yes" to 3a(II), are the related organization							•	3	ь		
4	Describe in Part XIV the intended uses of the rt VI Investments—Land, Buildings)00 Da	rt V lina	10				
Pa	rt VI Investments—Land, Buildings	s, and Equipme	:111. 3						(-) 4			
	Description of investment) Cost o		(b) Cost or basis (oth		(c) Accumulate depreciation) Book	value
	Land		•	_								
	Buildings		•									
С	Leasehold improvements		•	_				18,035		021	17	0,014
d	Equipment		•	<u> </u>			1,51	15,104	928,	668	58	86,436
	Other)4,979	· ·	001		6,978
Tota	al. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	rm 990, Part X, colu	mn (B), line	10(c).) . .			•		85	3,428

Part VII Investments—Other Securities. See (a) Description of security or category		. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, Im		
(a) Descrip		(b) Book value
Tabel (Column (b) about a great Form 2000 Part V. cal (B) line of		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount	

Part	XII Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	<u>its</u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	34,021,786
_	Total expenses (Form 990, Part IX, column (A), line 25)	2	34,045,788
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-24,002
4	Net unrealized gains (losses) on investments	4	36,371
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	36,371
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	12,369
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	35,411,238
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	324,876
3	Subtract line 2e from line 1	3	35,086,362
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	-1,064,576
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	34,021,786
Part 2		per	
1	Total expenses and losses per audited financial statements	1	35,398,869
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,353,081
3	Subtract line 2e from line 1	3	34,045,788
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	34,045,788
Part	XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanat ion
Part XII, Line 4b - Other Adjustments		RENTAL EXPENSES COST OF GOODS SOLD
Part XIII, Line 2d - Other Adjustments		RENTAL EXPENSES COST OF goods sold

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SCHEDULE F

(Form 990)

As Filed Data -

DLN: 93493042008421

OMB No 1545-0047

2009

Statement of Activities Outside the United States

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

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service Name of the organization Employer identification number INTERNATIONAL CITYCOUNTY MANAGEMENT ASSOCIATION 36-2167755 General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or describe specific type of agents in region grants to recipients located in region service(s) in region the region) CENTRAL AMERICA 161.838 1 5 PROGRAM SERVICE MUNICIPAL GOVERNANCE MIDDLE EAST AND NORTH 6 75 PROGRAM SERVICE MUNICIPAL 4,273,317 AFRICA GOVERNANCE SUB-SAHARAN AFRICA 737,005 1 5 PROGRAM SERVICE MUNICIPAL GOVERNANCE SOUTH ASIA 11,707,058 3 100 PROGRAM SERVICE MUNICIPAL GOVERNANCE EAST ASIA & PACIFIC 50 PROGRAM SERVICE MUNICIPAL 369,711 2 GOVERNANCE

Totals ▶

13

235

17,248,929

(a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, othe
		SOUTH ASIA	PROVIDED SMALL INFRASTRUCTURE AND PERFORMANCE INCENTIVE FUNDS TO THE STRATEGIC BUSINESS UNITS OF THE NATIONAL WATER UTILITY AS PER CAWSA'S COOPERATIVE AGREEMENT	77,431	WIRE TRANSFER		INFRASTRUCTURE/EQUIPMENT ITEMS PROCURED BY CAWSA STAFF	Γ F M V
tax-exempt	by the IRS, o	or for which the	ons listed above that grantee or counsel ha	s provided a sect	ion 501(c)(3) equi	valency letter .	· · · · • <u></u>	

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	in Part I, line 2, and any additional information.
Identifier	KeturnKeference	Explanation
Procedure for Monitoring Grants Outside the U S		Schedule F, Part I, Line 2 FIELD OFFICES SEND REPORTS TO THE HOME OFFICE ON A MONTHLY BASIS REPORTS ARE REVIEWED BY THE PROJECT FINANCE OFFICER FUNDS ARE ALSO MONITORED BY PROJECT MANAGERS
		ALEGO TIONITIONED BY TROOPED THANKS ELSO

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047

2009

DLN: 93493042008421

Open to Public

Department of the Treasury Internal Revenue Service

LEXINGTON, VA 24450

Attach to Form 990

Name of the organization						Employer identif	ication number
INTERNATIONAL CITYCOUN	TY MANAGEMENT A:	SSOCIATION				36-2167755	
Part I General Inform	nation on Grants	and Assistance				•	
	d to award the grants or rganization's procedui ner Assistance to	or assistance?	of grant funds in the l	Jnited States the United States		ganization answered	
		0) if additional space i					
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENDLETON PUBLIC LIBRARY502 SW DORION PENDELTON,OR 97801	936002232	CITY OF PENDLETON	60,000				YOUTH VOLUNTEER OPPORTUNITIES AND LITERACY CLASSES
IOWA CITY PUBLIC LIBRARY123 S LINN ST IOWA CITY,IA 52240	426004805	CITY OF IOWA CITY	14,409				LITERACY PROGRAM
MIAMI PUBLIC LIBRARY 200 N MAIN ST MIAMI,OK 74354	736005325	CITY OF MIAMI	11,000				LITERACY PROGRAM
DALLAS PUBLIC LIBRARY 1515 YOUNG ST DALLAS,TX 75201	736005325	CITY OF DALLAS	14,800				CHILD LITERACY PROGRAM
GEORGETOWN COUNTYPO BOX 421270 GEORGETOWN,SC 29442	576000353	GEO RGETO WN COUNTY	13,500				YOUTH ACTIVITIES
FAIRFAX COUNTY PUBLIC LIBRARY600 B INDUSTRIAL ROAD FAIRFAX,VA 22035	540787833	FAIRFAX COUNTY	9,450				YOUTH ACTIVITIES
ROCKBRIDGE REGIONAL 138 S MAIN ST	546001156	BUENA VISTA	15,000				COMPUTER LITERACY AND JOB

2	Enter total number of section 501(c)(3) and government organizations	 . ▶	7
3	Enter total number of other organizations	 . 🕨	0

SKILLS

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

(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
15	16,344			
3	1,500			
	recipients	recipients cash grant 15 16,344	recipients cash grant non-cash assistance	recipients cash grant non-cash assistance (book, FMV, appraisal, other)

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 A COPY OF THE GRANT AGREMENT IS KEPT ON FILE THE GRANTEE SUBMITS QUARTERLY TECHNICAL REPORTS WHICH INCLUDE ACCOMPLISHMENTS, CHALLENGES, AND PLANS FOR THE FUTURE A FINAL TECHNICAL REPORT IS ALSO SUBMITTED

DLN: 93493042008421

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	nme of the organization TERNATIONAL CITYCOUNTY MANAGEMENT ASSOCIATION		Employer identification	on nur	nber	
TINI	ERNATIONAL CITTCOUNTT MANAGEMENT ASSOCIATION		36-2167755			
Pa	art I Questions Regarding Compensation	·				
					Yes	Νo
1a	Check the appropiate box(es) if the organization provided an 990, Part VII, Section A, line 1a Complete Part III to provi					
	First-class or charter travel	Housing allowance or residence for	personal use			
	▼ Travel for companions	Payments for business use of perso	nal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiat	ion fees			
	Discretionary spending account	Personal services (e g , maid, chau	ffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization reimbursement orprovision of all the expenses described abo			1b	Yes	
2	Did the organization require substantiation prior to reimburs officers, directors, trustees, and the CEO/Executive Director			2	Yes	
3	Indicate which, if any, of the following the organization uses torganization's CEO/Executive Director Check all that apply		3			
	▼ Compensation committee ▼	Written employment contract				
		Compensation survey or study				
	Form 990 of other organizations	Approval by the board or compensa	tion committee			
4	During the year, did any person listed in Form 990, Part VII, or a related organization	, Section A , line 1a with respect to t	he filing organization			
а	Receive a severance payment or change-of-control payment	-?		4a		Νo
Ь	Participate in, or receive payment from, a supplemental nonq	qualified retirement plan?		4b		Νo
С	Participate in, or receive payment from, an equity-based con	npensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the	e applicable amounts for each item i	n Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must compl	lete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, line 1a, compensation contingent on the revenues of		ny			
а	The organization?			5a		Νo
b	,			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line 1a, compensation contingent on the net earnings of	did the organization pay or accrue a	ny			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line 1a, payments not described in lines 5 and 6? If "Yes," describe	- · · · · ·	n-fixed	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or ac subject to the initial contract exception described in Regs s in Part III			8		No
9	If "Yes" to line 8 did the organization also follow the rebutta	hle presumption procedure describe	od in Regulations			

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
ROBERT O'NEILL	(I) (II)	254,063 0	38,079 0	43,025 0	41,041 0	10,680 0	386,888 0		
UMA RAMESH	(I) (II)	131,777 0	10,599 0	33,000 0	18,326 0	12,930 0	206,632		
ELIZABETH KELLAR	(ı) (ıı)	216,775 0	6,625 0	14,300 0	25,431 0	10,495 0	273,626 0		
DAVID GROSSMAN	(ı) (ıı)	149,213 0	5,040 0	17,702 0	0	2,628 0	174,583 0		
WAYNE SOMMER	(ı) (ıı)	142,893 0	8,826 0	20,500	18,328 0	12,954 0	203,501		
RONALD ENZWEILER	(ı) (ıı)	184,525 0	7,473 0	128,978 0	0	6,32 4 0	327,300 0		
ROBERT KATZ	(ı) (ıı)	188,988 0	5,908 0	116,794 0	0	0	311,690 0		
JOHN SLOTA	(ı) (ıı)	142,771 0	2,111	84,555 0	0	1,197 0	230,634		
MARK GRUB	(ı) (ıı)	111,588 0	0	62,915 0	0	6,679 0	181,182 0		
C SCOTT JOHNSON	(I) (II)	113,556 0	2,234 0	79,755 0	0	0	195,545 0		

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

	Return Reference	Explanat ion
Part	rt I, Line 1a I	CMA OCCASIONALLY PROVIDES SPOUSAL TRAVEL FOR THE EXECUTIVE DIRECTOR AND INCLUDES IT AS TAXABLE INCOME

Schedule J (Form 990) 2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Information to Form 990

► Attach to Form 990.

Name of the organization INTERNATIONAL CITYCOUNTY MANAGEMENT ASSOCIATION **Employer identification number**

36-2167755

Part VI, Section A, Inine 6 CODE OF ETHICS IS ELIGIBLE TO BE A FULL MEMBER IF THAT PERSON SERVES AS A FULL-TIME ADMINISTRATIVE HEAD OF A LOCAL GOVERNMENT, A FULL-TIME ADMINISTRATIVE ASSISTANT ASSISTANT ININE 6 CITY/COUNTY MANAGER, ASSISTANT DIRECTOR OF A COUNCIL OF GOVERNMENTS OR A STATE/PROVING ASSOCIATION OF LOCAL GOVERNMENT, OR ASSISTANT ADMINISTRATOR, HOWEVER DESIGNATED, HAV SIGNIFICANT GENERAL ADMINISTRATIVE RESPONSIBILITY IN A LOCAL GENERMENT FORSION AND WAS APPOINTED TO THAT POSITION BY THE CITY OR COUNTY MANAGER OR CHIEF ADMINISTRATOR FORM 990, Part VI, Section A, Inine 7a THE REGIONAL VICE PRESIDENTS ARE ELECTED BY A MAJORITY VOTE OF THE CORPORATE MEMBERS PARTY I, Section B, Inine 7b THE CONSTITUTION AND THE CODE OF ETHICS MAY BE AMENDED BY A MAJORITY VOTE OF THE CORPOR MEMBERSHIP FORM 990, Part VI, Section B, Inine 11 Form 990, Part VI, Section B, Inine 12c EACH YEAR THE BOARD MEMBERS, OFFICERS, AND KEY EMPLOYEES SIGN THE CONFLICT OF INTEREST POLICY AND DISCLOSE ANY POTENTIAL CONFLICTS SECTION B, Inine 12c FORM 990, Part VI, SECTION B, Inine 12c THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED BY THE AUDIT AND EVALUATION COMMITTEE VARIO SALARY COMPARISONS OF EXECUTIVE DIRECTORS OF OTHER COMPARABLE ORGANIZATIONS, INCLUDIC SECTION B, Inine 15 FORM 990, Part VI, SECTION B, Inine 15 FORM 990, Part VI, SECTION B, Inine 15 THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED BY THE AUDIT AND EVALUATION COMMITTEE VARIO SALARY COMPARISONS OF EXECUTIVE DIRECTORS OF OTHER COMPARABLE ORGANIZATIONS, INCLUDIC SALARY COMPARISONS OF DIRECTORS OF DIRECTORS OF OTHER COMPARABLE ORGANIZATIONS, INCLUDIC SECTION B, INCLUDIC SECTION BATA FROM THE AUDIT AND EVALUATION COMMITTEE MAKES A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS WHICH VOTES OF FORM THE COMPENDATION THE RESULT IS THEN COMMUNICATED TO THE HIR DIRECTOR AND COP OF THE OTHER OFFICERS AND KEY BIFLOYEES, THE HULL BOARD OF DIRECTORS WHICH VOTES OF PROPROJECTION THE RESULT IS THEN COMMUNICATED TO THE HIR DIRECTOR AND COP OF OTHER COMPONICATION THE RESULT IS THEN	ldentifier	Return Reference	Explanation
Part VI, Section A, Ime 7a Form 990, Part VI, Section A, Ime 7b Form 990, Part VI, Section A, Ime 7b Form 990, Part VI, Section A, Ime 7b Form 990, Part VI, Section B, Ime 7b Form 990, Part VI, Section B, Ime 11 Form 990, Part VI, Section B, Ime 11 Form 990, Part VI, Section B, Ime 11 Form 990, Part VI, Section B, Ime 12c Form 990, Part VI, Section B, Ime 15 Form 990, SALARY COMPARISONS OF EXECUTIVE DIRECTORS OF OTHER COMMUNITEE VARIONS ON PART SILE OF COMMUNITY OF THE AUDIT AND EVALUATION COMMITTEE VARIONS ON PART SILE OF COMMUNITY OF THE AUDIT AND EVALUATION COMMITTEE VARIONS ON PART SILE OF COMMUNITY OF THE AUDIT AND EVALUATION COMMITTEE VARIONS ON PART SILE OF COMMUNITY OF THE AUDIT AND EVALUATION COMMITTEE THE COMMUNICATED TO THE HRD RICE FOR CORE AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR CORE AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR CORE AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR CORE AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR CORE AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR CORE AND EXPENSE OF COMMUNICATED TO THE HRD RICE FOR AND EXPENSE OF COMMITTEE AND EXPE	Part VI, Section A,		ADMINISTRATIVE HEAD OF A LOCAL GOVERNMENT, A FULL-TIME ADMINISTRATIVE ASSISTANT, ASSISTANT CITY/COUNTY MANAGER, ASSISTANT DIRECTOR OF A COUNCIL OF GOVERNMENTS OR A STATE/PROVINCIAL ASSOCIATION OF LOCAL GOVERNMENT, OR ASSISTANT ADMINISTRATOR, HOWEVER DESIGNATED, HAVING SIGNIFICANT GENERAL ADMINISTRATIVE RESPONSIBILITY IN A LOCAL GOVERNMENT POSITION AND WAS
Part VI, Section A, Ine 7b Form 990, Form 990, Part VI, Section B, Ine 11 Form 990, Part VI, Section B, Ine 12c Form 990, Part VI, Section B, Ine 15 Form 990, Part VI, Section C, Ine 15 Form 990, Part VI,	Part VI, Section A,		THE REGIONAL VICE PRESIDENTS ARE ELECTED BY A MAJORITY VOTE OF THE CORPORATE MEMBERS
Part VI, Section B, Iline 11 FORM 990, Part VI, Section B, Iline 12c FORM 990, Part VI, Section B, Iline 12c FORM 990, Part VI, Section B, Iline 12c FORM 990, Part VI, Section B, Iline 15 THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED BY THE AUDIT AND EVALUATION COMMITTEE VARIO SALARY COMPANSONS OF EXECUTIVE DIRECTORS OF OTHER COMPANSABLE ORGANIZATIONS, INCLUDIS COMPENSATION DATA FROM THE AUBIT AND EVALUATION COMMITTEE THAT OVERSES THAT SALARIES OF ICMA STAFF ARE IN LINE THE MARKET PLACE AND ADJUSTMENTS ARE MADE WHERE NEEDED PERIODICALLY AN INDEPENDENT FIF ASKED TO REVIEW THE JOB CLASSIFICATIONS AND SALARIES TO ENSURES THEY ARE WITHIN AN APPROPRIATE RANGE THE LAST STUDY WAS DONE IN FY 2009 WITH ADJUSTMENTS MADE AS NECESSA ALL COMPENSATION PAID IS WITHIN THE BOARD'S APPROVED BUDGET FORM 990, Part VI, Section C, Iline 19 FORM 990, PART XI, FORM 990, PART XI, PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	Part VI, Section A,		THE CONSTITUTION AND THE CODE OF ETHICS MAY BE AMENDED BY A MAJORITY VOTE OF THE CORPORATE MEMBERSHIP
Part VI, Section B, Inne 12c THE EXECUTIVE DIRECTOR'S SALARY IS REVIEWED BY THE AUDIT AND EVALUATION COMMITTEE VARIO SALARY COMPARISONS OF EXECUTIVE DIRECTORS OF OTHER COMPARABLE ORGANIZATIONS, INCLUDIR COMPENSATION DATA FROM THE AUDIT AND EVALUATION COMMITTEE VARIO SALARY COMPARISONS OF EXECUTIVE DIRECTORS OF OTHER COMPARABLE ORGANIZATIONS, INCLUDIR COMPENSATION DATA FROM THE AUDIT AND EVALUATION COMMITTEE THE COMMITTEE MAKES A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS WHICH VOTES ON THE RECOMMENDATION THE RESULT IS THEN COMMUNICATED TO THE HR DIRECTOR AND CFO FOR THE OTHER OFFICERS AND KEY EMPLOYEES, THE HUMAN RESOURCES DIRECTOR ENSURES THAT SALARIES OF ICMA STAFF ARE IN LINE THE MARKET PLACE AND ADJUSTMENTS ARE MADE WHERE NEEDED PERIODICALLY AN INDEPENDENT FIF ASKED TO REVIEW THE JOB CLASSIFICATIONS AND SALARIES TO ENSURE THEY ARE WITHIN AN APPROPRIATE RANGE THE LAST STUDY WAS DONE IN FY 2009 WITH ADJUSTMENTS MADE AS NECESSA ALL COMPENSATION PAID IS WITHIN THE BOARD'S APPROVED BUDGET FORM 990, Part VI, Section C, Ine 19 FORM 990, PART XI, ICMA HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT AND THE SELECTION OF THE AUDIT FIRM T PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	Part VI, Section B,		A DRAFT OF THE FORM 990 IS PROVIDED TO THE AUDIT COMMITTEE FOR REVIEW THE DRAFT IS DISCUSSED VIA CONFERENCE CALL OR AT THE BOARD MEETING A COPY OF THE RETURN IS MADE AVAILABLE TO ALL BOARD MEMBERS BEFORE FILING
Part VI, Section B, Iine 15 SALARY COMPARISONS OF EXECUTIVE DIRECTORS OF OTHER COMPARABLE ORGANIZATIONS, INCLUDING Section B, Iine 15 SALARY COMPANSATION DATA FROM THE AMERICAN RESEARCH COMPANY ON 2,500 ASSOCIATION CEOS, IS PROVIDED ANNUALLY TO THE AUDIT AND EVALUATION COMMITTEE. THE COMMITTEE MAKES A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS WHICH VOTES ON THE RECOMMENDATION THE RESULT IS THEN COMMUNICATED TO THE HIS DIRECTOR AND CFO. FOR THE OTHER OFFICERS AND KEY EMPLOYEES, THE HUMAN RESOURCES DIRECTOR ENSURES THAT SALARIES OF ICMA STAFF ARE IN LINE THE MARKET PLACE AND ADJUSTMENTS ARE MADE WHERE NEEDED PERIODICALLY AN INDEPENDENT FIR ASKED TO REVIEW THE JOB CLASSIFICATIONS AND SALARIES TO ENSURE THEY ARE WITHIN AN APPROPRIATE RANGE THE LAST STUDY WAS DONE IN FY 2009 WITH ADJUSTMENTS MADE AS NECESSAR ALL COMPENSATION PAID IS WITHIN THE BOARD'S APPROVED BUDGET FORM 990, Part VI, Section C, Iine 19 ICMA HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT AND THE SELECTION OF THE AUDIT FIRM T PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	Part VI, Section B,		
Part VI, Section C, Inne 19 ICMA HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT AND THE SELECTION OF THE AUDIT FIRM T PART XI, PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	Part VI, Section B,		PROVIDED ANNUALLY TO THE AUDIT AND EVALUATION COMMITTEE THE COMMITTEE MAKES A RECOMMENDATION TO THE FULL BOARD OF DIRECTORS WHICH VOTES ON THE RECOMMENDATION THE RESULT IS THEN COMMUNICATED TO THE HR DIRECTOR AND CFO FOR THE OTHER OFFICERS AND KEY EMPLOYEES, THE HUMAN RESOURCES DIRECTOR ENSURES THAT SALARIES OF ICMA STAFF ARE IN LINE WITH THE MARKET PLACE AND ADJUSTMENTS ARE MADE WHERE NEEDED PERIODICALLY AN INDEPENDENT FIRM IS ASKED TO REVIEW THE JOB CLASSIFICATIONS AND SALARIES TO ENSURE THEY ARE WITHIN AN APPROPRIATE RANGE THE LAST STUDY WAS DONE IN FY 2009 WITH ADJUSTMENTS MADE AS NECESSARY
PART XI, PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR	Part VI, Section C,		THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST
	PART XI,		ICMA HAS AN AUDIT COMMITTEE THAT OVERSEES THE AUDIT AND THE SELECTION OF THE AUDIT FIRM THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR