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990 Form

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

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

OMB No 1545-0047

2009

Open to Public

		2009 calendar year,			use a copy or in	07-01 , 2009.	<del>-</del>	·	- 30 20 10
				<del></del>	A CCOCT A MITON		and ending		-30 ,20 10
		pplicable Please use IRS		organization ALUMNI	ASSOCIATION	OF THE USD		l	D Employer identification no.
$\equiv$		tabel or print or	Doing Bus			-	<del></del>		46-6001196
$\overline{}$	me cha	type.		nd street (or PO box if ma	ail is not delivered to	street address)	Roo	m/suite I	E Telephone number
Те	rmınate	Specific Instruc-	City or tow	n, state or country, and ZI	P + 4		•		G Gross receipts
An	nended	-	1	LION, SD 57069				I	s 204,460
☐ Ap	plicatio	n pending F Nan	ne and address o	of principal officer					
							H(a)	Is this a group reti _affiliates?	um for Yes X No
- Tā	x-exem	pt status X 501(c)	(3) <b>√</b> (in	sert no ) 4947(a	)(1) or 527		Н(ъ)	Are all affiliates in	cluded? Yes No
J W	ebsite:	▶ N/A						If "No," attach a lis Group exemption	st (see instructions)
K Fo	rm of o	rganization X Corporati	on Trust	Association Othe	er 🕨	L Year of form	ation	M State of lega	I domicile SD
Pari	NI'	Summary							<del> </del>
	1	Briefly describe the o	rganization's	mission or most sig	nificant activities	PROVIDE :	INFORMATIO	N AND SUPP	ORT FOR
		UNIVERSITY OF	SOUTH DAI	COTA'S ALUMNI.					
Ĝ G									
iv									
Vе iг	2	Check this box ▶	If the organiz	zation discontinued i	ts operations or	disposed of more tha	in 25% of its n	et assets <sub>.</sub>	
t n	3	Number of voting me	mbers of the	governing body (Pa	rt VI, line 1a)	• • • • • • • • •	• • • • • • •	3	17
e n	4	Number of independ	ent voting me	embers of the govern	iing body (Part V	(I, line 1b) • • • •	• • • • • • •	• • • • • 4	0
S c	5	Total number of emp	loyees (Part	V, line 2a) · · · ·	• • • • • • •	• • • • • • • • •	• • • • • • •	5	0
&	6		•	• •		• • • • • • • • • •		• • • • 6	
		Total gross unrelated			• • •			• • • • 7a	0
	ь	Net unrelated busine	ss taxable in	come from Form 990	)-T, line 34 • •		• • • • • •	• • • • 7b	0
R								Prior Year	Current Year
e	8	Contributions and gr	•	•	• • • • • • • •	• • • • • • • • • •	• • •	94,330	178,680
e e	9	Program service rev					• • •		0
n u	10	Investment income (	Part VIII Foolu	min (A) thesa 4 ar	nd (d)	• • • • • • • • • •	• • •	3,417	25,780
е	11	Other revenue (Part	VIII, columnie	A); lines 5; 6d, 80; 9	c=10c, and 11e)		• • •		0
	12	Total revenue - add				A), line 12) • • • •	• • •	97,747	204,460
	13	Grants and similar a	nounts paid (	Asian Colpul (V)	(unes 1-3)		• • • – –		0
E	14	Benefits paid to or fo					• • • – –		0
X P	15	Salaries, other comp Professional fundrais				ines 5-10) • • •	• • •		0
e n							***************************************	106201 A	U
S		Total fundraising exp	· ·		· —	0		88,786	11. A 12. A 12.
e s	17 18	Other expenses (Par Total expenses Add				25)	· · ·	88,786	
	19	Revenue less expen		•			· · ·	8,961	
Mad	13	Nevenue less expen	Ses Subilac	time to nominate 12					· · · · · · · · · · · · · · · · · · ·
Net Assets	20	Total assets (Part X,	line 16)				Beginning	of Current Year 826, 552	End of Year 930, 666
or Fund	21	Total liabilities (Part	•					53,373	53,372
Bal- ances	22	Net assets or fund ba		tract line 21 from lin	e 20 • • • •	• • • • • • • • •		773,179	877,294
Par		Signature Blo				<del></del>	<del>l</del>	7,10,110	07.720
Silvaii	rainai	Under penalties of penu	declare that	have examined this return	, including eccompa	nying schedules and staten	nents, and to the b	est of my knowledge	
<del>-</del>						based on all information of			
ି Sign		1 V Ber	2Xc	$\mathcal{L}(\mathcal{L})$	Comme				1-15-2010
Here	,	Signature of office						Dat	
				6					
OHNNA Paid		Type or print name	and title					<del></del>	
¥		Preparer's				Date	Check if	Preparer's ide	ntifying number
<b>Z</b>		signature	, ,/,	z	1.00		self- employed ▶	(see instructio	ns)
<b>€</b> Prepa	roric	[ 'λ/	(all	Chruch	WIT	11-08-2010		-  POC	187179
Guse O	nlv iei s	Furn's name (artistic	MARK	CROWLEY CPA			EIN	<b>&gt;</b>	
230 0	,	Firm's name (or yours if self-employed).	19 MA	RKET STREET				20-	3426374 1-4425
		address, and ZIP + 4	VERMI	LLION, SD 570	69		Phone	no ▶ 605-62	1-4425
May th	ne IRS	discuss this return v	ith the prepa	rer shown above? (s	ee instructions)				

_	990 (2009) ALUMNI ASSOCIATION OF THE USD	46-6001196	Page 2
	rt III Statement of Program Service Accomplishments		
1	Briefly describe the organization's mission PROVIDE INFORMATION AND SUPPORT FOR UNIVERSITY OF SOUTH DAKOTA'S ALUMNI.		
	TROVIDE INFORMATION AND SUPPORT FOR UNIVERSITY OF SOUTH DAROTA S ALUMNI.		<del></del>
		<del> </del>	
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	· · · Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
•	services? · · · · · · · · · · · · · · · · · · ·	· · · □ Yes	X No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses _		
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants a	nd	
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a	(Code ) (Expenses \$ 9,379 including grants of \$ ) (Revenue	•	
44	(Code) (Expenses \$9,379 including grants of \$) (Revenue PROVIDE INFORMATION AND SUPPORT FOR UNIVERSITY OF SOUTH DAKOTA ALUMNI.	\$	
4b	(Code) (Expenses \$ including grants of \$) (Revenue	\$	)
			····
	The state of the s		
4c	(Code) (Expenses \$ including grants of \$) (Revenue	\$	)
			<del>_</del>
		<del>-</del>	
4.4	Other program convices (Describe in Schodide O.)	·	<del></del>
4d	Other program services (Describe in Schedule O ) (Expenses \$ including grants of \$ ) (Revenue \$	1	
4e	Total program service expenses 9,379		

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	1	х	1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4	х	ľ
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		ł
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		х
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		Х
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		Х
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	х	İ
_	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		Λ (a)	
•	Schedule D, Part VI		§3	İ
_	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			ĺ
_	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	,	``	İ
_	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets		<i>[[]</i>	İ
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	·		ί
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			İ
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			ĺ
•				
12	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
12	Schedule D, Parts XI, XII, and XIII	12		v
124	We do not be a second of the s	12		Х
124	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	`	2.0	İ
12	<del></del>	13		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		X
14a		148		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	446		.,
45	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4.5		
40	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	40		.,
4-	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	ا		
4-	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4-		
46	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ا ۔ ا		
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X

#### Part IV Checklist of Required Schedules (continued) Yes No 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 17 If "Yes," complete Schedule I, Parts I and II ...... 21 Х 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III - - - - -22 Х 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 24a Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? • • • • 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a with a disqualified person during the year? If "Yes," complete Schedule L, Part I ........ 25a Х Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 25b Х 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 Х 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 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . Х A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete 28b X An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M ........... 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, 31 31 Х 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 Х 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I ......... 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, 34 Х Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 Х 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 X 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 Х

, [b	art V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
18	,	i		
	U.S. Information Returns Enter -0- if not applicable	4		
1	b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	4		
4	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		_	
_	gaming (gambling) winnings to prize winners?	1c		
2				
	Statements, filed for the calendar year ending with or within the year covered by this return · · · · · 2a 0	- <u> </u>		
1	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see			
_	instructions)			
3	· · · · · · · · · · · · · · · · · · ·			I
	this return? · · · · · · · · · · · · · · · · · · ·	3a		X
	b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	-	
48				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)? · · · · · · · · · · · · · · · · · · ·	4a		X
	b If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
_	and Financial Accounts	-		
5		5a		X
l l		5b		X
(	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	_		
٠.	Prohibited Tax Shelter Transaction?	5c		
6a				
	• • • • • • • • • • • • • • • • • • • •	6a		X
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			
7		6b		
7	Organizations that may receive deductible contributions under section 170(c).			
í		7-		
		7a 7b		X
		70		
,	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	d If "Yes," indicate the number of Forms 8282 filed during the year	100		X
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	┨		<u> </u>
	benefit contract? ••••••••••••••••••••••••••••••••••••	7e		
1				X
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? • • • • • • • • • • • • • • • • • • •			^
	h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	'9		
	required? · · · · · · · · · · · · · · · · · · ·	7h		i
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	<del></del>		
_	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>		
	a Did the organization make any taxable distributions under section 4966?	9a		X
	b Did the organization make a distribution to a donor, donor advisor, or related person?	9b	-	X
10		<del></del>		
	a Initiation fees and capital contributions included on Part VIII, line 12 · · · · · · · · · · · · · · · · · ·			
	b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities • • • • • • • 10b	1		
11	Section 501(c)(12) organizations. Enter	1	]	
	a Gross income from members or shareholders · · · · · · · · · · · · · · · · · · ·			
	b Gross income from other sources (Do not net amounts due or paid to other sources against	1		
•	amounts due or received from them ) · · · · · · · · · · · · · · · · · ·			
12	· · · · · · · · · · · · · · · · · · ·	12a		
	b If "Yes," enter the amount of tax-exempt interest received or accrued during the year · · · · · · · 12b			<u> </u>

Part VI G

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

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body · · · · · · · · · · · · · · · · · · ·	1 3		至1.3
b	Enter the number of voting members that are independent • • • • • • • • • • • • • • • • • • •	***	2	- 946
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	0		
	any other officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? • • • • • •	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		Х
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? • • • • • • • • • • • • • • • • • • •	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		A 18	<b>**</b>
	the year by the following			200
а	The governing body? • • • • • • • • • • • • • • • • • • •	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal			
	nue Code )			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			_
	form?	11	Х	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	37.4	410	**
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Χ	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	×*23		1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	2.63		
а	The organization's CEO, Executive Director, or top management official	15a	30000000000000000000000000000000000000	See and the Control of the Control o
b	Other officers or key employees of the organization · · · · · · · · · · · · · · · · · · ·	15b		<del></del>
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate		esets:	dax
_	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	7230783	
500	tion C. Disclosure			
<u>Sec</u> 17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
	available for public inspection. Indicate how you make these available. Check all that apply			
	Own website Another's website X Upon request			
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest			
19	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
20	organization KERSTEN JOHNSON (605) 677-6714			
	414 E CLARK VERMILLION, SD 57069		<del></del>	
	ATA D CHANGE ADMITMETON! ON 21003			

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all-of-the-organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

X Check this box if the organization did not compensate a	ny current o	fficer,	dire	ctor,	or t	rustee			·-	
(A)	(B)	(C)				(D)	(E)	(F)		
Name and Title	Average	-	Position (check all that apply)		Reportable	Reportable	Estimated			
	hours per week	I t d nrı dur ı sec ı ee o u o l r	nr su ts ıt	f f c e	e	H c e i g m p h p l e e o y t s e t e d	o m	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
CLAY CUDMORE										
PRESIDENT	5.00			X	ļ					1
JEANETTE PORTER										
VICE-PRESIDENT	3.00			x	l					
KIM KLETSCHKE										
TREASURER	5.00			X	ŀ					
PATRICIA CROWLEY										
DIRECTOR	1.00	Х								
JENNIFER BRIGGS DANKE										
DIRECTOR	1.00	Х								
JULIE DZUBAY										
DIRECTOR	1.00	Х							4	
CRAIG GOTH				_						
DIRECTOR	1.00	X								
MICHAEL LAMBRECHT										
DIRECTOR	1.00	Х								
STEVE NOLAN										
DIRECTOR	1.00	Х								•
REISE OFFICER				1				_		
DIRECTOR	1.00	Х								
MICHAEL SEARS										
DIRECTOR	1.00	Х								
CARLA THOMSEN										
DIRECTOR	1.00	Х					ŀ			
PAUL VAN BUREN									_	
DIRECTOR	1.00	Х			ŀ					
MYRON WALKES										
DIRECTOR	1.00	Х								
ROGER KOZAK		Ì					Γ			
DIRECTOR	1.00	Х								
P J MALONEY										
DIRECTOR	1.00	X								

6	Р	age 8	
ar com f org an	(F) stimated nount of other spensaturom the spanization d relates anization	on n d	
		<del></del>	
		<del></del>	
<u> </u>			
		0	
	Yes	No	
3		X	
4		X.	
5		X	
	-		
	(C)		
	ensation	<u> </u>	

, (А)	(B)			((	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Positi I t d I n r i d u r i s e v t e t d e o u r a o I r	l t n r s u t s i t	O f f c e	All the Key employee	at apply) H c e m p h p o y e t a e d	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
OMAS HOLLAND										
RECTOR	1.00	X		<u> </u>						
				$\vdash$				<u> </u>		
						1				
				<del> </del>	-					-
		ļ		<u> </u>	<u> </u>					
										İ
							ŀ			
			_							
		<u> </u>			<u> </u>					
		1				:				
	<del> </del>				┢	-				<del> </del>
			_	<u> </u>						
		<u></u>								
Total							_	0100.000	L <u></u>	0
Total number of individuals (including but not limited reportable compensation from the organization	to those listed	above	e) w	ho r	ecei	ved m	ore t	than \$100,000 in		0
reportable compensation from the organization							-			Yes
Did the organization list any former officer, director of	or trustee, key	emplo	yee,	, or h	nighe	est cor	nper	nsated		
employee on line 1a? If "Yes," complete Schedule J									• • • • • • •	3
For any individual listed on line 1a, is the sum of rep	-									
the organization and related organizations greater the individual										
Did any person listed on line 1a receive or accrue co									• • • • • • •	
services rendered to the organization? If "Yes," com			-			_				5
ection B. Independent Contractors						-				1 1 1.
Complete this table for your five highest compensate compensation from the organization	ed independer	nt contr	acto	ors t	hat r	eceive	d m	ore than \$100,000	of	
(A)								(B)		(C)
Name and business addre	ss							Description of s	ervices	Compensation
	_							<del> </del>	-	<del></del>
								<del> </del>		<del></del>
						-				<del></del>

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

Page 9

Part V	<u>/III  </u>	Statement of Revenue					
1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	•			(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 campaigns · · · · · · 1					
	b	Membership dues · · · · · · · 1	31,666				
Contri- butions,	С	Fundraising events 10	;				
gats,	d	Related organizations · · · · · · 1	1				
grants	е	Government grants (contributions) • • 10	-				,
and i		- · · · · · · · · · · · · · · · · · · ·	<del>-</del>	1			
other similar	T	All other contributions, gifts, grants, and similar amounts not included above	147,014				,
amounts		<u> </u>		_			ļ
	g	Noncash contributions included in lines 1a-1f	• · · · · · · •	170 600			
	h	Total. Add lines 1a-1f	T	178,680			
			Business Code				ال ـ ـ ـ ا
Program	2a						
	Ь						
Service	С		_				
Revenue	d			_			
ļ	е						
	f	All other program service revenue • • • • •	•				
	g	Total. Add lines 2a-2f			-		I
	3	Investment income (including dividends, interes	st and				
	_	other similar amounts) · · · · · ·		25,780	25,780		
	4	Income from investment of tax-exempt bond pr	oceeds · · · ▶				
	5						
		(i) Real	(II) Personal				, ,
	6a	Gross Rents · · · · · ·	(II) r ersonal	┥ .			, ,
		Less rental expenses		╡ .			
İ	1	Rental income or (loss) • • •					
	l		- <del></del>	<del> </del>			
		(1000)	<del></del>	<u> </u>		· <del>- · · · · · · · · · · · · · · · · · ·</del>	
	7a	Gross amount from sales of assets other than inventory	(ii) Other	-			
	b	Less cost or other basis					
0		and sales expenses · · · ·		4			i i
t	i	Gain or (loss)					
n e							
ř	8a	Gross income from fundraising					
_		events (not including \$					
R e		of contributions reported on line 1c)					ı
v		See Part IV, line 18 · · · · · · · · · a	1				i
e	b	Less direct expenses · · · · · · · · I	·	]			,
n u	С	Net income or (loss) from fundraising events					
e	9a	Gross income from gaming activities				-	
		See Part IV, line 19 · · · · · · · · · · · · · · · · · ·	,				!
	ь	Less direct expenses I					l
	l	Net income or (loss) from gaming activities •					
		Gross sales of inventory, less					
	ļ	returns and allowances - · · · · · · · a					ļ
	l	Less cost of goods sold · · · · · · · · I	<u> </u>	-			
	_ <u> </u>	Net income or (loss) from sales of inventory -	1				<u> </u>
	<u> </u>	Miscellaneous Revenue	Business Code	_}	-		
	11a				-		
	b						
	C		.	<u> </u>			
		All other revenue	<u> </u>	<u> </u>			
	1	7 100 11100 1100 1100	• • • • • • • •				
	12	Total revenue. See instructions · · · · · ·	• • • • • • • •	204,460	25,780	0	0

# Part IX Statement of Functional Expenses

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

	All other organizations must complete column	n (A) but are not requi	red to complete colum	ns (B), (C), and (D).	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to governments and	······································	expenses	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21 · · · · ·				
2	Grants and other assistance to individuals in				•
-	the U.S. See Part IV, line 22 · · · · · · · · · ·				
3	Grants and other assistance to governments,				
3	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16 · · · · · · · · ·				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
•	- · · · -	<u> </u>			
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				
8	Pension plan contributions (include section 401(k)				
_	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes · · · · · · · · · · · · · · · · · · ·				
11	Fees for services (non-employees)	!			
a	Management · · · · · · · · · · · · · · · · · · ·				
b	Legal				
С	Accounting • • • • • • • • • • • • • • • • • • •	1,314		1,314	
d	Lobbying · · · · · · · · · · · · · · · · · · ·	7,500		7,500	
е	Professional fundraising services See Part IV, line 17 •		, , ,		
f	Investment management fees · · · · · · · · · · · · · · · · · ·	12,329		12,329	
g	Other				
12	Advertising and promotion	30,451		30,451	
13	Office expenses · · · · · · · · · · · · · · · · · ·	17,150		17,150	
14	Information technology	10,142		10,142	,
15	Royalties · · · · · · · · · · · · · · · · · · ·				
16	Occupancy · · · · · · · · · · · · · · · · · · ·				
17	Travel · · · · · · · · · · · · · · · · · · ·				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials • • • • •				
19	Conferences, conventions, and meetings • • • • • • •				
20	Interest · · · · · · · · · · · · · · · · · · ·				
21	Payments to affiliates • • • • • • • • • • • • • • • • • • •				
22	Depreciation, depletion, and amortization • • • • • • •				_
23	Insurance · · · · · · · · · · · · · · · · · · ·				
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	POSTAGE & SHIPPING	9,379	9,379		
b	PLAQUES & AWARDS	6,000		6,000	
c	MISCELLANEOUS	1,306		1,306	
d					
e					
f	All other expenses · · · · · · · · · · · · · · · · · ·				
25	Total functional expenses. Add lines 1 through 24f · ·	95,571	9,379	86,192	0
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 · · · · · · · · · · · · · · · · ·				
		ΕΕΛ	·	<del>-</del>	Form 990 (2009)

Form **990** (2009)

Part	: X	Balance Sheet			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	40,644	1	95,795
	2	Savings and temporary cash investments	14,772	2	25,331
	3	Pledges and grants receivable, net	4,774	3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of		l I	
		Schedule L · · · · · · · · · · · · · · · · · ·		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete			
A s		Part II of Schedule L		6	
-s	<b>-7</b> -	Notes and loans receivable, net	35,574	7	23,003
e t	8	Inventories for sale or use		8	
s	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D · · · · · 10a			
	b	Less accumulated depreciation · · · · · · · · · · · · · · 10b	and the second s	10c	A STATE OF THE PARTY OF THE PAR
	11	Investments - publicly traded securities		11	
	12	Investments - other securities See Part IV, line 11		12	***
	13	Investments - program-related See Part IV, line 11	730,788	13	786,537
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	826,552	16	930,666
	17	Accounts payable and accrued expenses	53,373	17	53,372
	18	Grants payable • • • • • • • • • • • • • • • • • • •		18	
L	19	Deferred revenue		19	
i	20	Tax-exempt bond liabilities • • • • • • • • • • • • • • • • • • •	<u> </u>	20	
a b	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
į	22	Payables to current and former officers, directors, trustees, key	4 4 1		ş × *
i		employees, highest compensated employees, and disqualified	2 %		
t		persons Complete Part II of Schedule L	Proposition and Comments of the Comments of th	22	
i	23	Secured mortgages and notes payable to unrelated third parties		23	
S	24	Unsecured notes and loans payable to unrelated third parties	-	24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	53,373	26	53,372
		Organizations that follow SFAS 117, check here X and	Č,		
NF		complete lines 27 through 29, and lines 33 and 34.	4/4 "		
e u	27	Unrestricted net assets	152,309	27	243,853
t n	28	Temporarily restricted net assets	620,870	28	633,441
A	29	Permanently restricted net assets		29	
s B		Organizations that do not follow SFAS 117, check here	, 5 3 <sub>8</sub>		,
s a e l		and complete lines 30 through 34.	* * *		
t a	30	Capital stock or trust principal, or current funds		30	
s n C	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
o e	32	Retained earnings, endowment, accumulated income, or other funds		32	
rs	33	Total net assets or fund balances	773,179	33	877,294
	34	Total liabilities and net assets/fund balances	826,552	34	930,666

_		(0000)	
-orm	990	(2009)	

#### ALUMNI ASSOCIATION OF THE USD

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Form 990 (2009)

Pa	rt XI Financial Statements and Reporting			
	•		Yes	No
1	Accounting method used to prepare the Form 990 X Cash Cash Other			
	If the organization changed its methods of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
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		<del>                                     </del>	
	X Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
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	•	

EEA

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### **Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Employer identification number

ALUMNI ASSOCIATION OF THE USD 46-6001196 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 described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 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) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). |X| An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II ) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) 9 An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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. See section 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 a Type I b Type II c Type III-Functionally integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified 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 g 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 supported organization? 119(1) (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(m) Provide the following information about the supported organization(s) (i) Name of supported EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section governing document? col (i) of your (i) organized in the (see instructions) ) Yes No Yes No Yes Nο Total

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not 100,000 100,000 include any "unusual grants") 200,000 Tax revenues levied for the organization's benefit and either paid to or expended on 320,825 316,266 183,269 94,330 178,680 1,093,370 3 The value of services or facilities furnished by a governmental unit to the organization without charge 320,825 416,266 283,269 94,330 178,680 1,293,370 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) .... Public support. Subtract line 5 from In 4 1,293,370 Section B. Total Support (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Calendar year (or fiscal year beginning in) Amounts from line 4 · · · · 320,825 416,266 283,269 94,330 178,680 1,293,370 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar 3,417 6,391 5,795 4,619 25,780 46,002 sources Net income from unrelated business activities, whether or not the business is regularly carried on . . . . . . . . . . . . 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . . . . . 1,339,372 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here **Section C. Computation of Public Support Percentage** 96.57 % Public support percentage from 2008 Schedule A, Part II, line 14 . . . . . . 15 98.24 % 15 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶X 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Pa	Support Schedule for Org (Complete only if you checked the			ection 509(a)	(2)		
Se	ction A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				,,,====		
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						
3	Gross receipts from activities that are not an unrelated trade or bus under sec 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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b · · · · · · · ·						
8	Public support (Subtract line 7c from line 6) · · · · · · · · · · · · · · · · · ·		E Pa				
	ction B. Total Support		Т	1	1		
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 10a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
11	Add lines 10a and 10b · · · · · · · · · · · Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on · · · · · · · · · · · · · · · · · ·						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	ganızatıon's first, s	second, third, fourth	n, or fifth tax year	as a section 501(c	)(3)	▶ □
<u>Se</u> 15	ction C. Computation of Public Su Public support percentage for 2009 (line 8, c	<del></del>		(f)) · · · · ·		- 15	%
16	Public support percentage from 2008 Sched	ule A, Part III, line	15			- 16	%
Se	ction D. Computation of Investme	nt Income Pe	rcentage				
17	Investment income percentage for 2009 (line			olumn (f))		- 17	
18	Investment income percentage from 2008 Sc		•			- 18	<u> </u>
	33 1/3% support tests - 2009. If the organiza 17 is not more than 33 1/3%, check this box	ition did not check	the box on line 14	, and line 15 is mo	ore than 33 1/3%,	and line	▶□
b	33 1/3% support tests - 2008. If the organizatine 18 is not more than 33 1/3%, check this	ition did not check	a box on line 14 o	r line 19a, and line	e 16 is more than :	33 1/3%, and	
20	Private Foundation: If the organization did n	-		•		_	▶

#### **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.

OMB No 1545-0047 2009

Open to Public

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

- Section 501(c)(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

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	s organization answered "Yes," to Form 98 Section 501(c)(4), (5), or (6) organizations	• • • • • • • • • • • • • • • • • • • •				
	ne of organization	Complete Part III			Employer ide	entification number
	UMNI ASSOCIATION OF THE USD				46-600	
		ization is exempt under secti	on 501(c) or i	e a section		
<u>#Га</u> 1	Provide a description of the organization				ozi orga	inization.
2	Political expenditures · · · · · · ·				<b>S</b>	
3	Volunteer hours				: *—	
•	7 0,2.11.001 110210					
Pa	ttl:Bl Complete if the organ	ization is exempt under secti	on 501(c)(3)			
1	Enter the amount of any excise tax incurr				<b>▶</b> \$	· •
2	Enter the amount of any excise tax incurr					·
3	If the organization incurred a section 495	5 tax, did it file Form 4720 for this year				· Yes No
4a	Was a correction made?					· Tyes No
b	If "Yes," describe in Part IV					
·Pa	rtil-G Complete if the organ	ization is exempt under secti	on 501(c), ex	cept section	501(c)(	3).
1	Enter the amount directly expended by the	e filing organization for section 527 exe	empt function			<del></del>
	activities · · · · · · · · · · · · · · · · · · ·				<b>&gt;</b> \$	
2	Enter the amount of the filing organizatio	n's funds contributed to other organizat	ions for section			
	527 exempt function activities • • • • •				<b>▶</b> \$	
3	Total exempt function expenditures Add	lines 1 and 2 Enter here and on Form	1120-POL,			
	line 17b • • • • • • • • • • • • • • • • • • •				▶ \$	
4	Did the filing organization file Form 1120-	POL for this year?			• • • • • • •	· Yes No
5	State the names, addresses and employe	er identification number (EIN) of all sec	ion 527 political o	rganizations to v	hich paym	nents
	were made For each organization listed,	enter the amount paid from the organiz	ation's funds Alse	o enter the amou	ant of politi	cal
	contributions received that were promptly	and directly delivered to a separate po	litical organization	i, such as a sepa	rate segre	gated
	fund or a political action committee (PAC	) If additional space is needed, provide	information in Pa	rt IV		
	(a) Name	(b) Address	(c) EIN	(d) Amount pa filing organiza funds If none, e	ition's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
	· · · · · · · · · · · · · · · · · · ·					

EEA

Sche	edule C (Form 990 or 990-EZ) 2009 ALUMNI ASSOC	IATION OF THE	USD		46-6001	196 Page 2
Pa	art II-A Complete if the organization	on is exempt ur	nder section 50	)1(c)(3) and filed	Form 5768 (ele	ction
	under section 501(h)).		·		<u> </u>	
Α	Check  if the filing organization belongs	to an affiliated group				
В	Check ▶ ☐ If the filing organization checked		ontrol" provisions a	pply	<del></del>	<u> </u>
		bying Expenditures			(a) Filing	(b) Affiliated
	(The term "expenditures" n	neans amounts paid	or incurred.)		organization's totals	group totals
1a		•	• •	• • • • • • • • •		
b	· · · · · · · · · · · · · · · · · · ·			• • • • • • • • •		
C	Total lobbying expenditures (add lines 1a and 1					
d	Strict Chempt purpose experiences			• • • • • • • • •		H-F-
е	Total exempt purpose expenditures (add lines	1c and 1d) • • • •	• • • • • • • •			
f	Lobbying nontaxable amount Enter the amoun	t from the following t	able in both			
	columns					
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	t is :		
	Not over \$500,000	20% of the an	nount on line 1e			<i></i>
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		**
	Over \$1,000,000 but not over \$1,500,000		10% of the excess			*
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess of	over \$1,500,000	4	ø. »
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of li	ne 1f) • • • • • •	• • • • • • • • • • • • • • • • • • • •			
r	Subtract line 1g from line 1a. If zero or less, en	ter -0- • • • • • •	• • • • • • • •	• • • • • • • • •		
i	Subtract line 1f from line 1c If zero or less, enti-	er -0- • • • • • •	• • • • • • • •	• • • • • • • • •		
j	If there is an amount other than zero on either I					
	section 4911 tax for this year?		• • • • • • • •			Yes No
		4-Year Averaging Pe				
	(Some organizations that columns belo	made a section 501( w. See the instruction	•	•	of the five	
	Lobb	ying Expenditures (	Ouring 4-Year Avera	aging Period	······································	
	Calendar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
	beginning in)	(4) 2000	(5) 2001	(0) 2000	(4,2003	(c) Total
2a	Lobbying non-taxable amount		i			
t	Lobbying ceiling amount (150% of line 2a, column (e))			~		
	: Total lobbying expenditures					
_	d Grassroots nontaxable amount					
•	Grassroots ceiling amount (150% of line 2d, column (e))	* /		2 4	: (4	
_	Grassroots lobbying expenditures					

Pa	complete if the organization is exempt under section 501(c)(3) and has NOT f	iled l	Form	5768		
	, (election under section 501(h)).	(a)			(b)	
		Yes	No	Α	mount	t
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?		X_			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Х			
С	Media advertisements?		Х			
d	Mailings to members, legislators, or the public?		Х			
e	Publications, or published or broadcast statements?		_X_			
—f—	Grants to other organizations for lobbying purposes?		Х			
g	Direct contact with legislators, their staffs, government officials, or a legislative body? • • • • • • • • • • • • • • • • • • •	X			7	,500
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? • • • • • • • • • • • • • • • • • • •	<u></u>	X			
i	Other activities? If "Yes," describe in Part IV		X			
j	Total Add lines 1c through 1i · · · · · · · · · · · · · · · · · ·				7	,500
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? • • • • • • • • • • • • • • • • • • •	<u></u>	Х			<u> </u>
b	If "Yes," enter the amount of any tax incurred under section 4912	,				
С	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?			,		
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501(c	:)(5),	or se	ction		
	501(c)(6).				r <del></del>	T
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? • • • • • • • • • • • • • • • • • • •			1	<u> </u>	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	<b>├</b> ──	<u> </u>
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	<u> </u>	<u> </u>
1	complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, I "Yes."  Dues, assessments and similar amounts from members	ine 3			∌d ——	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political		<b>!</b>			
-	expenses for which the section 527(f) tax was paid).		*			
•	Current year · · · · · · · · · · · · · · · · · · ·		2a			
h	Carryover from last year		2b			
-	Total · · · · · · · · · · · · · · · · · · ·		2c	- <u>-</u>		
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			
	rt IV Supplemental Information		, •			
	plete 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	11				
	complete this part for any additional information					

#### SCHEDULE D (Form 990)

Department of the Treasury

**Supplemental Financial Statements** 

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number ALUMNI ASSOCIATION OF THE USD 46-6001196 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds Total number at end of year · · · · · · · · · · 2 Aggregate contributions to (during year) .... 3 Aggregate grants from (during year) · · · · · · Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06 ........ Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 · · · · · · · · · · · · · · · · · ▶ \$ If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items 

Sched	ule D (Form 990) 2009 ALUMNI ASSOCIATIO	N OF THE	USD				46-60	0119	6	P	age 2
Pa	rt III Organizations Maintaining C	ollections	of Art, His	torical	Treasures	, or C	ther Similar	Ass	ets (cor	ntinue	<u></u>
3	Using the organization's acquisition, accession, ai										
	collection items (check all that apply)										
а	Public exhibition	d 🗍 l	oan or excha	inge progr	ams						
b	Scholarly research	е 🗍 (	Other								
С	Preservation for future generations	_									
4	Provide a description of the organization's collection	ons and explai	n how they fu	rther the o	rganization's	exemp	t purpose in				
	Part XIV				<b>J</b>						
5	During the year, did the organization solicit or receive donations of art, historical treasures, or other similar										
	assets to be sold to raise funds rather than to be r								Ye	s	No
Pa	rt IV Escrow and Custodial Arran										
I a	Part IV, line 9, or reported an amount of	on Form 990 F	Part X line 21	g=e			····· 555,				
1a	Is the organization an agent, trustee, custodian or			ibutions or	other assets	not					
	included on Form 990, Part X? · · · · · ·								□Ye	s í	No
b	If "Yes," explain the arrangement in Part XIV and								∟,.•	,	
-	Too, explain the all alignment in a device and	somplete the it	one or migrable					moui	nt		
С	Beginning balance					1		111001			
d	Additions during the year • • • • • • • •						<del></del>				
e	Distributions during the year • • • • • • •										
f	Ending balance										
2a	Did the organization include an amount on Form 9								Ye	· [	No
b	If "Yes," explain the arrangement in Part XIV	750, Fait A, Illie	521.							; <b>5</b> [	
_		the organizatio	n answered "	Voc" to Fo	rm 000 Port	IV line	10				
Pa	rt V Endowment Funds. Complete if							. т			<del></del>
1a	Beginning of year balance	(a) Current year	(B) Pn	or year	(c) Two years	s back	(d) Three years ba	CK	(e) Four	ears t	ack
b	Contributions · · · · · · · · · · · · · · · · · · ·				\$ × *					-	
C	Net investment earnings, gains, and losses				<del> </del>	*	3	$\dashv$			
d	Grants or scholarships	•	+				*	$\dashv$	<del></del>		
u	Other expenditures for facilities		-				<del> </del>	.4			
e	and programs • • • • • • • • • • • • • • • • • • •				*			* *	. 42	;	
	Administrative expenses				* * *					? ; * *	* ^
f	End of year balance				* *					,	
g		halanaa hald a			L				<del></del>	>	
2	Provide the estimated percentage of the year end		as								
a	Board designated or quasi-endowment	%									
b	Permanent endowment										
C	Term endowment ▶ %	• •									
3a	Are there endowment funds not in the possession	of the organiz	ation that are	held and a	administered	for the			_		
	organization by								_	Yes	No
	(i) unrelated organizations · · · · · · · · ·	• • • • • • •				• • • •	• • • • • • • •	• •	3a(i)		
	(ii) related organizations · · · · · · · · ·	• • • • • • •		• • • • •		• • • •	• • • • • • • •	• •	3a(ii)		
b	If "Yes" to 3a(II), are the related organizations liste	•			• • • • •	• • • •	• • • • • • •	• •	3b		
4	Describe in Part XIV the intended uses of the orga	nızatıon's end									
Pa	rt VI Investments - Land, Building	ıs, and Equ	ipment. S	ee Form 9	990, Part X, II	ne 10					
	Description of investment	(a) Cost of	r other basis	<b>(b)</b> Co:	st or other	(c)	Accumulated		(d) Book	value	
		1	stment)	١,,,	(other)		depreciation		,		
1a	Land · · · · · · · · · · · · · · · · · · ·	• •							_		
b	Buildings · · · · · · · · · · · · · · · · · · ·	• •									
С	Leasehold improvements • • • • • • • • • • • • • • • • • • •	• •									
	F			I							

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

Part VII Investments - Other Securities.	See Form 990, Part X, line 12	
(a) Description of security or category	(b) Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
Financial derivatives	•	
Closely-held equity interests · · · · · · · · · · · · · · · · · ·		
Other		
	-	
	-	
	_	
	-	
Total (Column (h) must equal Form 990 Part X col. (8) line 12.)		
(Column (S) most educar our soot at X, cor (S) title 12)		
Part VIII Investments - Program Related.	See Form 990, Part X, line 13	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
INVESTMENT ACCT USD FOUNDATION	786,537	FMV
-		
	<del>-</del>	
	<del> </del>	
		· <del>····</del>
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	786,537	· · · · · · · · · · · · · · · · · · ·
Part IX Other Assets. See Form 990, Part X, III	<u> </u>	
		1
(a	) Description	(b) Book value
	<del></del>	
Total. (Column (b) must equal Form 990, Part X, col (B) line	15)	• • • • • • • • • • • •
Part X Other Liabilities. See Form 990, Part X	, line 25	
1 (a) Description of liability	(b) Amount	
Federal income taxes	(b) / thoun	*
redefai income taxes		-
		4
		1
		_
-	<del></del>	1
	<del></del>	1
		4
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	•	1
, , , , , , , , , , , , , , , , , , ,		<u> </u>

Sche	dule D (Form 990) 2009 ALUMNI ASSOCIATION OF THE USD	46-6001196	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	<u> </u>	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		204,460
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	95,571
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	108,889
4	Net unrealized gains (losses) on investments	4	(4,774)
5	Donated services and use of facilities	5	
6	Investment expenses • • • • • • • • • • • • • • • • • •	6	<del></del>
7	Prior period adjustments · · · · · · · · · · · · · · · · · · ·	7	
8	Other (Describe in Part XIV ) · · · · · · · · · · · · · · · · · ·	8	<del></del>
9	Total adjustments (net) Add lines 4 through 8 · · · · · · · · · · · · · · · · · ·	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		104,115
_	<del>"" "                                 </del>		104,115
1	rt XII   Reconciliation of Revenue per Audited Financial Statements With Revenue per Total revenue, gains, and other support per audited financial statements	er Return	
•	Amounts-included on-line 1-but not on Form 990, Part VIII, line 12	<del></del>	
	i i		
a	<del></del>	-  .	
b		<b>⊣</b> ;: `	
C	Recoveries of prior year grants · · · · · · · · · · · · · · · · · · ·	<b>⊣</b> ′€	
d	Other (Describe in Part XIV )		
е	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	<del></del>
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	ia.	
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a		
b	Other (Describe in Part XIV ) • • • • • • • • • • • • • • • • • •	<u>\$</u>	
C	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Return	
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	72. ,	• • • • • • • • • • • • • • • • • • • •
а	Donated services and use of facilities · · · · · · · · · · · · · · · · · · ·	v. "	
b	Prior year adjustments • • • • • • • • • • • • • • • • • • •	┤^* -,,	
С	Other losses · · · · · · · · · · · · · · · · · ·	┪ "╽	
d	Other (Describe in Part XIV ) 2d	- 1	
e	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·	2e	
3	Subtract line 2e from line 1 · · · · · · · · · · · · · · · · · ·	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
٠,		1 77	
a			
b	Other (Describe in Part XIV)		
	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	rt XIV Supplemental Information		
	plete 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		
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete		
this p	part to provide any additional information		
			,
		<del></del>	

# SCHEDULE O

Department of the Treasury

Internal Revenue Service
Name of the organization

### Supplemental Information to Form 990

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

Attach to Form 990.

OMB No 1545-0047

2009

Open to Public

Employer identification number

ALUMNI ASSOCIATION OF THE USD	46-6001196							
01. Form 990 governing body review (Part VI, line 11)								
FORM 990 IS REVIEWED BY THE GOVERNING BODY AT THE FISCAL YEAR END MEETING.								
02. Conflict of interest policy compliance (Part VI, line 12c)								
THE BOARD OF DIRECTORS MAKES ITS GOVERNING DOCUMENTS CONFLICT OF INTEREST PO	OLICY AND							
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.								
	<del></del>							