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**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)

**2009**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2009 calendar year, or tax year beginning** November 1, 2009, and ending October 31, 20 10

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C Name of organization** Pride Youth Development Foundation  
 Doing Business As \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
1233 Symmes Road  
 City or town, state or country, and ZIP + 4  
Fairfield, OH 45014

**D Employer identification number**  
23 7310734

**E Telephone number**  
( 513 ) 858-6889

**F Name and address of principal officer:** Charles D. Gumbert  
305 Klotter Avenue, Cincinnati, OH 45219

**G Gross receipts \$** 2,350,707

**H(a)** Is this a group return for affiliates?  Yes  No  
**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I Tax-exempt status:**  501(c) ( 3 ) (insert no.)  4947(a)(1) or  527

**J Website:** ▶ \_\_\_\_\_

**K Form of organization:**  Corporation  Trust  Association  Other ▶ \_\_\_\_\_

**L Year of formation:** 1973 **M State of legal domicile:** OH

**Part I Summary**

**1** Briefly describe the organization's mission or most significant activities: The mission is to provide support for Youth athletic activities that help young people develop life skills with an emphasis on self-discipline. The organization provides support for the Pride of Cincinnati Winter Guard. We provide training in dance, aerobic, & marching instruction to young people who travel extensively to perform in a competitive environment in the US.

**2** Check this box  if the organization discontinued its operations or disposed of more than 25% of its net assets.

**3** Number of voting members of the governing body (Part VI, line 1a) 3

**4** Number of independent voting members of the governing body (Part VI, line 1b) 4

**5** Total number of employees (Part V, line 2a) 5

**6** Total number of volunteers (estimate if necessary) 175

**7a** Total gross unrelated business revenue from Part VIII, column (C), line 12 0

**7b** Net unrelated business taxable income from Form 990-B, line 34 0

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h) <u>21106</u>	9,285	23,048
<b>9</b> Program service revenue (Part VIII, line 2g)	5,801	9,578
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,899	4,311
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	310,747	243,130
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	327,732	280,067
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	72,470	74,313
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	73,546	78,669
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <u>4,638</u>		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	102,793	179,136
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	248,809	332,118
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	78,923	(52,051)

	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	300,496	243,779
<b>21</b> Total liabilities (Part X, line 26)	8,132	5,491
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	292,365	238,288

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
 Signature of officer: Charles Gumbert Date: 12/30/10  
 Type or print name and title: Charles Gumbert

**Paid Preparer's Use Only**  
 Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Check if self-employed  Preparer's identifying number (see instructions): \_\_\_\_\_  
 Firm's name (or yours if self-employed), address, and ZIP + 4: \_\_\_\_\_ EIN: \_\_\_\_\_  
 Phone no.: ( ) \_\_\_\_\_

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions. Cat No. 11282Y Form 990 (2009)

SCANNED FEB 02 2011

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**Part III Statement of Program Service Accomplishments**

1 Briefly describe the organization's mission

The mission is to provide support for Youth Athletic activities that help young people develop life skills. The organization provides support for the Pride of Cincinnati Winter Guard. We provide training in dance, aerobic, and marching instruction to young people who travel extensively to perform in a competitive environment.

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  No  
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  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 and allocations to others, the total expenses, and revenue, if any, for each program service reported.

SEE STATEMENT #1

4a (Code: 900099 ) (Expenses \$ 165,423 including grants of \$ 1,815 ) (Revenue \$ 32,626 )  
Expenditures made on behalf of the Pride of Cincinnati Winter Guard. The Winter Guard activity provides dancing, aerobic, and marching instruction to young people who travel extensively to perform in a competitive environment. The Pride of Cincinnati Winter Guard has been a finalist in 18 out of 20 years we have competed in international competitions. In addition, we have been a medalist (top 3) in 10 out of the last 11 years we have competed. The organization is recognized as a leader in the international Winter Guard activity. Annually, there are over 500 Winter Guard units participating in regional, national, and international competitions.

4b (Code: 900099 ) (Expenses \$ 60,220 including grants of \$ 60,220 ) (Revenue \$ 0 )  
Donations to not-for-profit youth athletic organizations (who maintain the same youth athletic orientation which is part of our charitable purpose) which assist with Bingo and other fundraising activities.

4c (Code: 900099 ) (Expenses \$ 9,573 including grants of \$ 9,573 ) (Revenue \$ 0 )  
Donations to other Winter Guards, Drum and Bugle Corps, and related organizations to support their not-for-profit objectives and activities.

4d Other program services. (Describe in Schedule O.)  
(Expenses \$ 2,705 including grants of \$ 2,705 ) (Revenue \$ 0 )

4e Total program service expenses ▶

**Part IV Checklist of Required Schedules**

		Yes	No
<b>1</b>	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	✓	
<b>2</b>	Is the organization required to complete Schedule B, Schedule of Contributors?		✓
<b>3</b>	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		✓
<b>4</b>	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		✓
<b>5</b>	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>		✓
<b>6</b>	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? <i>If "Yes," complete Schedule D, Part I</i>		✓
<b>7</b>	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>		✓
<b>8</b>	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		✓
<b>9</b>	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? <i>If "Yes," complete Schedule D, Part IV</i>		✓
<b>10</b>	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		✓
<b>11</b>	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	✓	
	<ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part VII.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part VIII.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part IX.</i></li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i></li> <li>• 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? <i>If "Yes," complete Schedule D, Part X.</i></li> </ul>		
<b>12</b>	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>		✓
<b>12A</b>	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional.</i>	Yes	No
			✓
<b>13</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		✓
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the United States?		✓
<b>b</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? <i>If "Yes," complete Schedule F, Part I</i>		✓
<b>15</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II.</i>		✓
<b>16</b>	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		✓
<b>17</b>	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 "Yes," complete Schedule G, Part I</i>		✓
<b>18</b>	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 "Yes," complete Schedule G, Part II</i>		✓
<b>19</b>	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	✓	
<b>20</b>	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		✓

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
<b>21</b> 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.	✓	
<b>22</b> 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.		✓
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.		✓
<b>24a</b> 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.		✓
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		✓
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		✓
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		✓
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.		✓
<b>b</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.		✓
<b>26</b> 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.		✓
<b>27</b> 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.		✓
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	✓	
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.		✓
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV.		✓
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.		✓
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.		✓
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.		✓
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.		✓
<b>33</b> 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.		✓
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.		✓
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.		✓
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2.		✓
<b>37</b> 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.		✓
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	✓	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	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>1a</b> 13		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	<b>1b</b> 122		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	✓	
<b>2a</b>	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>2a</b> 2		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	✓	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		✓
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		N/A
<b>4a</b>	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)?		✓
<b>b</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.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		✓
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		N/A
<b>6a</b>	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?		✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		N/A
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?		
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		N/A
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		✓
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		N/A
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		N/A
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		✓
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		✓
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		✓
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b> N/A	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b> N/A	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b> N/A	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b> N/A	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b> N/A	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	<b>12b</b> N/A	

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

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body . . . . .		
1b	Enter the number of voting members that are independent . . . . .		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		✓
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? . . . . .		✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? . . . . .		✓
5	Did the organization become aware during the year of a material diversion of the organization's assets? . . . . .		✓
6	Does the organization have members or stockholders? . . . . .		✓
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .		✓
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	a The governing body? . . . . .	✓	
8b	b Each committee with authority to act on behalf of the governing body? . . . . .	✓	
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 . . . . .		✓

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a		✓
10b	N/A	
11		✓
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	
12a		✓
12b	N/A	
12c	N/A	
13		✓
14		✓
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	
15a	✓	
15b	✓	
16a		✓
16b	N/A	

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed ► Ohio
- 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     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Charles D. Gumbert (Executive Director), 305 Klotter Avenue, Cincinnati, OH 45219, 513-784-1597

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

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

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

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

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

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Charles D. Gumbert (Executive Director) 305 Klotter Avenue, Cincinnati, OH 45219	60	✓		✓	✓	✓	62,040	0	0	
Toni Twaddell (Assistant Director) 3697 Risner Road, Verona, KY 40192	20	✓		✓	✓	✓	12,000	0	0	
Ryan Alm (Chairman of the Board) 790 Oak Ridge Drive, Union, KY 41091	5	✓		✓			0	0	0	
Glenellyn J. Barty (Treasurer) 307 Klotter Avenue, Cincinnati, OH 45219	8	✓		✓			0	0	0	
Angel Hope (Secretary) 6 Tidewater Trace, Batavia, OH 45103	3	✓		✓			0	0	0	
Rocky Binder (Board Member) 411 Nort Long Street, London, KY 40741	2	✓					0	0	0	
Jay Logan (Board Member) 134 William Howard Taft #4, Cincinnati, OH 45	2	✓					0	0	0	
Bart Woodley (Board Member/Design Staff) 2283 Limestone Way, Miamisburg, OH, 45342 (compensation is paid as instructional staff reported as program service expense)	10	✓					6,000	0	0	
There are no Board Members beyond those listed above. There are no employees beyond those listed above. There are no former Board Members who receive any compensation. There is no one who has received any compensation in excess of \$100,000.										



<b>Part VIII Statement of Revenue</b>			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . .	<b>1a</b>				
	<b>b</b> Membership dues . . . . .	<b>1b</b>	18,843			
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	1,685			
	<b>d</b> Related organizations . . . . .	<b>1d</b>				
	<b>e</b> Government grants (contributions).	<b>1e</b>				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	2,520			
	<b>g</b> Noncash contributions included in lines 1a-1f \$					
	<b>h Total.</b> Add lines 1a-1f . . . . . ▶		23,048			
<b>Program Service Revenue</b>	<b>2a</b> <b>WG Appearance fees</b> . . . . .	<b>Business Code</b>				
		900099	974	974		
	<b>b</b> <b>Sale of used WG equipment</b> . . . . .	900099	1,258	1,258		
	<b>c</b> <b>WGI Shares-reimb for expend</b> . . . . .	900099	7,061	7,061		
	<b>d</b> <b>Net reimb for contest tickets</b> . . . . .	900099	285	285		
	<b>e</b> . . . . .					
	<b>f</b> All other program service revenue . . . . .					
<b>g Total.</b> Add lines 2a-2f . . . . . ▶		9,578				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		4,311	4,311		
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . . ▶					
	<b>5</b> Royalties . . . . . ▶					
		(i) Real	(ii) Personal			
	<b>6a</b> Gross Rents . . . . .					
	<b>b</b> Less: rental expenses . . . . .					
	<b>c</b> Rental income or (loss) . . . . .					
	<b>d</b> Net rental income or (loss) . . . . . ▶					
	<b>7a</b> Gross amount from sales of assets other than inventory . . . . .	(i) Securities	(ii) Other			
	<b>b</b> Less: cost or other basis and sales expenses . . . . .					
	<b>c</b> Gain or (loss) . . . . .					
	<b>d</b> Net gain or (loss) . . . . . ▶					
	<b>8a</b> Gross income from fundraising events (not including \$ . . . . . of contributions reported on line 1c). See Part IV, line 18 . . . . . <b>a</b>					
	<b>b</b> Less: direct expenses . . . . . <b>b</b>					
	<b>c</b> Net income or (loss) from fundraising events . . . . . ▶					
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 <b>STATEMENT #2</b> <b>a</b>		2,307,392				
<b>b</b> Less: direct expenses . . . . . <b>b</b>		(2,077,715)				
<b>c</b> Net income or (loss) from gaming activities . . . . . ▶		229,677	229,677			
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . . <b>a</b>		1,110				
<b>b</b> Less: cost of goods sold . . . . . <b>b</b>		(1,545)				
<b>c</b> Net income or (loss) from sales of inventory . . . . . ▶		(435)	(435)			
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11a</b> <b>ATM Service Fees Earned</b> . . . . .		900099	5,026	5,026		
<b>b</b> <b>Unrealized gain ST Investmen</b> . . . . .		900099	4,609	4,609		
<b>c</b> <b>Reconciliation adjustment</b> . . . . .		900099	4,012	4,012		
<b>d</b> All other revenue . . . . .		900099	241	241		
<b>e Total.</b> Add lines 11a-11d . . . . . ▶			13,888			
<b>12 Total revenue.</b> See instructions. . . . . ▶			280,067	243,132		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	\$74,313	\$74,313		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	66,618	33,309	33,309	
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	7,422	3,711	3,711	
10 Payroll taxes	4,629	2,315	2,315	
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	343		343	
g Other				
12 Advertising and promotion				
13 Office expenses	1,852		1,852	
14 Information technology	1,690	411	1,279	
15 Royalties				
16 Occupancy	23,318	9,000	14,318	
17 Travel	16,308	16,308		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	696	696		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	10,855		10,855	
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.)				
a <b>See Statement # 3</b>	124,073	97,858	21,577	4,638
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	\$332,118	\$237,921	\$89,559	\$4,638
26 Joint costs. Check here <input type="checkbox"/> 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				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year		
<b>Assets</b>	1	Cash—non-interest-bearing . . . . .	97,264	1	73,448	
	2	Savings and temporary cash investments . . . . .	85,072	2	45,112	
	3	Pledges and grants receivable, net . . . . .		3		
	4	Accounts receivable, net . . . . .	5,280	4	3,860	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of 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 Part II of Schedule L . . . . .		6		
	7	Notes and loans receivable, net . . . . .		7		
	8	Inventories for sale or use . . . . .	1,700	8	1,700	
	9	Prepaid expenses and deferred charges . . . . .		9		
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	46,369			
	b	Less: accumulated depreciation . . . . .	(40,869)	5,500	10c	5,500
	11	Investments—publicly traded securities . . . . .	105,681	11	114,159	
	12	Investments—other securities. See Part IV, line 11 . . . . .		12		
	13	Investments—program-related. See Part IV, line 11 . . . . .		13		
	14	Intangible assets . . . . .		14		
	15	Other assets. See Part IV, line 11 . . . . .		15		
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	300,496	16	243,779		
<b>Liabilities</b>	17	Accounts payable and accrued expenses . . . . .	8,132	17	5,491	
	18	Grants payable . . . . .		18		
	19	Deferred revenue . . . . .		19		
	20	Tax-exempt bond liabilities . . . . .		20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .		21		
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .		22		
	23	Secured mortgages and notes payable to unrelated third parties . . . . .		23		
	24	Unsecured notes and loans payable to unrelated third parties . . . . .		24		
	25	Other liabilities. Complete Part X of Schedule D . . . . .		25		
	26	<b>Total liabilities.</b> Add lines 17 through 25 . . . . .	8,132	26	5,491	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>					
	27	Unrestricted net assets . . . . .	292,365	27	238,288	
	28	Temporarily restricted net assets . . . . .		28		
	29	Permanently restricted net assets . . . . .		29		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>					
	30	Capital stock or trust principal, or current funds . . . . .		30		
	31	Paid-in or capital surplus, or land, building, or equipment fund . . . . .		31		
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .		32		
33	<b>Total net assets or fund balances</b> . . . . .	292,365	33	238,288		
34	<b>Total liabilities and net assets/fund balances</b> . . . . .	300,496	34	243,779		

**Part XI Financial Statements and Reporting**

**1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_

If the organization changed its method 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? . . .

**b** Were the organization's financial statements audited by an independent accountant? . . . . .

**c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? . . .

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:

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? . . . . .

**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.

	Yes	No
<b>2a</b>		✓
<b>2b</b>		✓
<b>2c</b>	N/A	
<b>3a</b>		✓
<b>3b</b>	N/A	

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

**Public Charity Status and Public Support**

OMB No 1545-0047

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

2009  
**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization <b>Pride Youth Development Foundation</b>	Employer identification number <b>23-7310734</b>
---	---

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  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: \_\_\_\_\_
- 5  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)**.
- 7  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)**.
- 11  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      d  Type III—Other
- e  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).
- f 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
- g 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) and (iii) below, the governing body of the supported organization? . . . . .
- (ii) A family member of a person described in (i) above? . . . . .
- (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . . .

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A) N/A									N/A
(B) N/A									N/A
(C) N/A									N/A
(D) N/A									N/A
(E) N/A									N/A
<b>Total</b>									N/A

**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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>4 Total.</b> Add lines 1 through 3 . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>5</b> 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) . . . . .						N/A
<b>6 Public support.</b> Subtract line 5 from line 4.						N/A

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
<b>7</b> Amounts from line 4 . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . . .	N/A	N/A	N/A	N/A	N/A	N/A
<b>11 Total support.</b> Add lines 7 through 10						N/A
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	N/A
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . ▶ <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) . . . . .	<b>14</b>	N/A %
<b>15</b> Public support percentage from 2009 Schedule A, Part II, line 14 . . . . .	<b>15</b>	N/A %
<b>16a 33 1/3% support test—2010.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 33 1/3% support test—2009.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2009.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization . . . . . ▶ <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar 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.")	22,076	24,825	13,187	9,285	23,048	92,421
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 . . . .	3,449,384	2,960,377	2,606,445	2,638,106	2,318,080	13,972,392
3 Gross receipts from activities that are not an unrelated trade or business under section 513	9,714	7,039	8,164	29,174	5,267	59,358
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .	0	0	0	0	0	0
5 The value of services or facilities furnished by a governmental unit to the organization without charge . . . .	0	0	0	0	0	0
6 <b>Total.</b> Add lines 1 through 5 . . . .	3,481,174	2,992,241	2,627,796	2,676,565	2,346,395	14,124,172
7a Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .	0	0	0	0	0	0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
c Add lines 7a and 7b . . . .	0	0	0	0	0	0
8 <b>Public support</b> (Subtract line 7c from line 6.) . . . .						14,124,172

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6 . . . .	3,481,174	2,992,241	2,627,796	2,676,565	2,346,395	14,124,172
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . . .	3,732	4,135	3,364	1,899	8,920	22,051
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .	0	0	0	0	0	0
c Add lines 10a and 10b . . . .	3,732	4,135	3,364	1,899	8,920	22,051
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . . . .	0	0	0	0	4,012	4,012
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .	3,488,638	3,000,511	2,634,524	2,680,364	2,368,248	14,172,285

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . .

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) . . . .	15	99.66 %
16 Public support percentage from 2005 Schedule A, Part III, line 15 . . . .	16	99.88 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) . . . .	17	0.16 %
18 Investment income percentage from 2005 Schedule A, Part III, line 17 . . . .	18	0.12 %

- 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 . . . .
- b **33 1/3% support tests—2006** 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 . . . .
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . .



**SCHEDULE D  
(Form 990)**

**Supplemental Financial Statements**

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ 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.

Name of the organization: **Pride Youth Development Foundation**  
Employer identification number: **23-7310734**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year . . . . .	N/A	N/A
2 Aggregate contributions to (during year) . . . . .		
3 Aggregate grants from (during year) . . . . .		
4 Aggregate value at end of year . . . . .		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . .  Yes  No

6 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? . . . . .  Yes  No

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7. *N/A*

1 Purpose(s) of conservation easements held by the organization (check all that apply).  
 Preservation of land for public use (e.g., recreation or education)  Preservation of an historically important land area  
 Protection of natural habitat  Preservation of a certified historic structure  
 Preservation of open space

2 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
a Total number of conservation easements . . . . .	2a N/A
b Total acreage restricted by conservation easements . . . . .	2b N/A
c Number of conservation easements on a certified historic structure included in (a) . . . . .	2c N/A
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register . . . . .	2d N/A

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 0

4 Number of states where property subject to conservation easement is located ▶ N/A

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? . . . . .  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? . . . . .  Yes  No

9 In Part XIV, describe how the organization reports conservation 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.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.** Complete if the organization answered "Yes" to Form 990, Part IV, line 8. *N/A*

1a If the organization elected, as permitted under SFAS 116 (ASC 958), 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.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 . . . . .	▶ \$	N/A
(ii) Assets included in Form 990, Part X . . . . .	▶ \$	N/A

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 . . . . .	▶ \$	N/A
b Assets included in Form 990, Part X . . . . .	▶ \$	N/A

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply).
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other N/A
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 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 maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. N/A

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- |  | Amount |
|--|--------|
| <b>c</b> Beginning balance             | N/A    |
| <b>d</b> Additions during the year     | N/A    |
| <b>e</b> Distributions during the year | N/A    |
| <b>f</b> Ending balance                | N/A    |
- 2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV.

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10. N/A

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	N/A				
<b>b</b> Contributions	N/A				
<b>c</b> Net investment earnings, gains, and losses	N/A				
<b>d</b> Grants or scholarships	N/A				
<b>e</b> Other expenditures for facilities and programs	N/A				
<b>f</b> Administrative expenses	N/A				
<b>g</b> End of year balance	N/A				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment  N/A %
  - b** Permanent endowment  N/A %
  - c** Term endowment  N/A %
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                    | Yes                      | No                                  |
|------------------------------------|--------------------------|-------------------------------------|
| <b>(i)</b> unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <b>(ii)</b> related organizations  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No
- 4** Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land				
<b>b</b> Buildings				
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		\$46,369	40,869	\$5,500
<b>e</b> Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				\$5,500

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12. N/A

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives . . . . .	N/A	N/A
(2) Closely-held equity interests . . . . .	N/A	N/A
(3) Other		
(A) -----		
(B) -----		
(C) -----		
(D) -----		
(E) -----		
(F) -----		
(G) -----		
(H) -----		
(I) -----		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ►		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13. N/A

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) N/A	N/A	N/A
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►		

**Part IX Other Assets.** See Form 990, Part X, line 15. N/A

(a) Description	(b) Book value
(1) N/A	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ►	

**Part X Other Liabilities.** See Form 990, Part X, line 25. N/A

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) N/A	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ►	

**2. FIN 48 (ASC 740) Footnote.** In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	N/A
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	N/A
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	N/A

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	N/A
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	
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:		
a	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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

**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, line 2; 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.

Form 990, Part VIII, included in line 11c amounts Bank Reconciliation adjustments - net

Balance of non interest bearing cash accounts used to prepare 2008 return was different on comparative financial statements at year end used to prepare 2009 return by (\$2,005.85). Quickbooks bank reconciliation automatic adjustment resulted in an credit entry to the current fiscal year of \$4,012. Thus, the reconciliation adjustment has been included as a miscellaneous revenue rather than a prior period adjustment.

Unrealized gain on ST investments of \$4,609 included as Miscellaneous revenue on Form 990, Part XIII, included on line 11b with miscellaneous revenues. Investment account balance (PNC Capital Directions) is updated to reflect statement balances from PNC investment management.

**Part XIV** Supplemental Information *(continued)*

none required

Area with horizontal dashed lines for supplemental information.



**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		(event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	<b>1</b> Gross receipts . . . . .	N/A			
	<b>2</b> Less: Charitable contributions . . . . .				
	<b>3</b> Gross income (line 1 minus line 2) . . . . .				
Direct Expenses	<b>4</b> Cash prizes . . . . .				
	<b>5</b> Noncash prizes . . . . .				
	<b>6</b> Rent/facility costs . . . . .				
	<b>7</b> Food and beverages . . . . .				
	<b>8</b> Entertainment . . . . .				
	<b>9</b> Other direct expenses . . . . .				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				( 0 )
	<b>11</b> Net income summary. Combine line 3, column (d), and line 10 . . . . . ▶				0

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
		<b>1</b> Gross revenue . . . . .	357,520	1,910,937	11,224
Direct Expenses	<b>2</b> Cash prizes . . . . .	377,087	1,512,000	10,275	1,899,362
	<b>3</b> Noncash prizes . . . . .	10,500	1,550	0	12,050
	<b>4</b> Rent/facility costs . . . . .	44,550	0	0	44,550
	<b>5</b> Other direct expenses . . . . .	44,064	62,893	0	106,957
	<b>6</b> Volunteer labor . . . . .	<input checked="" type="checkbox"/> Yes 100% <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100% <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes 100% <input type="checkbox"/> No	
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶				( 2,062,918 )	
<b>8</b> Net gaming income summary. Combine line 1, column d, and line 7 . . . . . ▶				216,763	

	Yes	No
<b>9</b> Enter the state(s) in which the organization operates gaming activities: <u>OHIO</u>		
<b>a</b> Is the organization licensed to operate gaming activities in each of these states? . . . . .	9a ✓	
<b>b</b> If "No," explain: ..... .....		
<b>10a</b> Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? <b>b</b> If "Yes," explain: ..... .....	10a	✓
<b>11</b> Does the organization operate gaming activities with nonmembers? . . . . .	11 ✓	
<b>12</b> Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . .	12	✓

**13** Indicate the percentage of gaming activity operated in:

<b>a</b> The organization's facility . . . . .	<b>13a</b>	0 %
<b>b</b> An outside facility . . . . .	<b>13b</b>	100 %

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ **Glenellyn J. Barty**

Address ▶ **307 Klotter Avenue, Cincinnati, OH 45219**

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue?

<b>15a</b>	✓
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**b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ **NA** and the amount of gaming revenue retained by the third party ▶ \$ **NA**.

**c** If "Yes," enter name and address of the third party:

Name ▶ **NA**

Address ▶

**16** Gaming manager information:

Name ▶ **Charles D. Gumbert**

Gaming manager compensation ▶ \$ **0**

Description of services provided ▶ **Manages/oversees volunteers and all bingo operating activities**

Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

<b>17a</b>	✓
------------	---

**b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ **no dollar specification**



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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
N/A					

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Donations are made to other not-for-profit organizations who assist with our fundraising activities or who maintain the same general mission - support or youth athletic activities and support of pageantry arts (drum an bugle corps, winter guards, high school marching bands).

For those organizations assisting with our fund raising activities who will receive donations from us, we require those organizations to document their 501(c)(3) status and to provide us with their tax identification numbers. We do not monitor how they spend the funds donated to them - that is the responsibility of their Boards. We do not make grants only donations.



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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

▶ Attach to Form 990.

OMB No 1545-0047

**2009**

**Open to Public  
Inspection**

Name of the organization

**Pride Youth Development Foundation**

Employer identification number

**23 : 7310734**

The Treasurer prepares Form 990 and related schedules. Form 990 and related schedules are then reviewed by the Executive Director and the Treasurer on a line by line basis as a the final step in assembling the return prior to filing the return with the IRS. The Board Chairman reviews the completed Form 990 and related schedules prior to filing the return with the IRS. A copy of Form 990 and related schedules (filed with the IRS and date stamped for filing date) is provided to each Board Member at the next regularly scheduled quarterly board meeting. The Treasurer reviews the filed documents with the Board Members and answers any questions they may have. Board Members are reminded of their fiduciary responsibilities as Board Members.

**Form 990 - Part Vi - Section C Line 19**

The governing documents are required to be attached to the annual Bingo License Application which is filed with the State of Ohio. The By-Laws of the organization are written to preclude conflict of interest issues under most circumstances although these sections are not specifically titled "Conflict to Interest". In situations, where it might be possible for a conflict of interest to occur (such as discussions of compensation of employees who are also Board Members, or discussion of the rent to be paid to the Executive Director for the office use of an area of his home) the Board Member(s)/Employee(s) are excused (absented) from the discussions and the remaining Board Members discuss the issues. Outside information is used so that salary determinations and rental values are based on responsibilities, time commitment, comparabable market values (for similar position or office space.) The Board Members act in a responsible manner to avoid compensation that would be considered excessive and always act in a manner which is intended to protect the organization's exempt status.

Copies of governing documents, financial statements (including filings with the IRS), and audit reports are made available to any party (public or private) who requests the information. In fact, we have voluntarily provided written copies of these documents and filings to other individuals and organizations who were seeking information about about the types of filings/documents required of not-for-pofit organizations. We are a leader in Winter Guard activity (both on a competitive basis and on an organizational administrative basis) and we strive to help others in the activity strengthen their financial reporting systems and organizational controls.

Name of the organization <b>Pride Youth Development Foundation</b>	Employer identification number <b>23 : 7310734</b>
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**Form 990 - Part III - Section 4d Other program services**

**Donations to other charitable organizations that assist with bingo and other fund raising activities. See Statement #1.**

**Reconciliation of Schedule G Part III Line 8 with Form 990 Part VIII lines 9a through 9c**

**Bingo license application for State of Ohio requires that Supplies revenues of \$3,667 (sale of daubbers) and Concession revenues of \$24,044 be included with reporting of revenues related to the bingo game. Thus, Schedule G, Part III revenues of \$2,279,681 are increased by net amount of \$27,771 to reflect a total of \$2,307,392 reported on Form 990 Part VIII line 9a. Correspondingly, purchase cost of daubbers \$1,637 and concession expenses of \$14,797 have been added to the Form G Part III Line 7 amounts of \$2,062,918. This results in reporting total direct expenses on Form 990 Part VIII line 9b of \$2,077,715. Over all this changes the net income from gaming reported on Schedule G, Part III line 8 of \$216,763 to the \$229,677 reported on Form 990 Part VIII line 9c. See attached Statement #2.**

**Schedule L - Part IV Business Transactions Involving Interested Persons**

**The organization rents the entire basement of the Executive Directors home for use as an office for the Winter Guard. The director has signed a formal lease with the organization and the lease was approved by the Board of Directors. The lease is for \$750 per month, which includes the cost of all utilities except phone. The office is approximately 500 sq. ft. The office is used by the Executive Director and the Assistant Director on a regular basis. In addition, members of the board and Winter Guard staff also use the office. Board meetings have also been held in this space. Since the space has been configured as an office (with a separate entrance) it is not suitable for personal use.**

**Other Comments: Members of the board of directors are reimbursed for approved expenses related to attendance at Winter Guard and Drum Corps Competitions. Board members are also reimbursed for expenses for purchases made directly for the benefit of the Pride of Cincinnati Foundation (when purchases are supported by receipts). Travel and lodging expenses, and accumulated receipts may exceed \$1,000 at the time of submission. However, board members may not make single purchases (single item) in excess of \$500 unless authorized by the Executive Director, the Executive Committee, or the full Board.**

**PART III -- Statement of Program Service Accomplishments**

**Program A -- Operation of the Pride of Cincinnati Winter Guard**

Funds transferred to the Winter Guard as dues earned  
(worked off) by members participating in fund raising activities

**Total Program A                    \$1,815**

**Program B - Donations to Local Youth/Athletic Organizations**

Local Sports Teams

**EIN#**

*Cheerleading*

77-0602082	Mid-West Cheer	11,335	
83-0348666	Star Warriors	160	
31-1351842	Tri Garfield	<u>715</u>	12,210

*Soccer Teams*

31-6061438	Dominators Girls FOSC	2,440	
31-0562824	Klopping Kuguare Soccer	5,990	
31-6061438	FOSC Force	3,355	
20-072314	FOSC Star Thunder	1,370	
31-1395446	Blazing Stars	<u>9,410</u>	22,565

*Baseball/Softball Teams*

31-0740983	Edgewood Roundball Club	60	
42-1611867	Edgewood Youth Baseball	<u>225</u>	285

*Other Athletic Groups*

31-6000089	Lakota Wests Athletics		400
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Local Drill Teams & HS Bands and Music Groups

51-0161689	Fairfield HS Band		19,055
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*Other Musical Groups & Music Related*

23-7274130	Milford HS Marching Band	5,260	
31-6000769	Northwest HS Band	<u>445</u>	5,705

**Total Program B                    \$60,220**

**Program C -- Donations to Drum and Bugle Corps (D&B) Organizations and Winter Guards**

*Winter Guard Organizations*

	Consorto Winter Guard		80
--	-----------------------	--	----

*Drum & Bugle Corps*

31-1181294	Cincinnati Tradition D & B	6,395	
36-2754480	Friends of Drum Corps International (DCI)	<u>3,098</u>	9,493

**Total Program C                    9,573**

**Program D -- Other Donations to Charitable Organizations**

*Scouts Boys & Girls*

31-0816365	Boy Scouts of Americam- Troop 881	485	
31-0679091	Girl Scout Troop 288	<u>2,220</u>	2,705

**Total Program D                    2,705**

**TOTAL program service expenses**

**\$74,313**

**Part VIII- Line 9a - 9c**

**BINGO RECEIPTS**

Regular Bingo Games	\$ 357,520
Raffles (Player Progressive)	11,224
Gross Proceeds from Pull-tabs	1,910,937
Supplies Income (Daubers)	3,667
Revenue from Concession at Bingo	24,044
<b>Total Bingo Revenue</b>	<b>\$ 2,307,392</b>

**LESS: DIRECT BINGO EXPENSES (for Bingo License)**

Advertising	5,702
Bank Charges on Bingo	1,154
Bingo License Fee - Type 1	450
Bingo Supplies - papers, bag, etc	
Paper Bags	511
Papers for Game	9,726
Office Supplies	802
Bingo Equipment	
Equipment Repair	1,338
Equipment Purchases (4 cash registers)	400
Cash Prizes Paid for Bingo Games	348,616
Cash Prizes Paid for Raffles	10,275
Cash Prizes Paid out on Pull Tabs	1,512,000
Cash Short (all bingo transactions)	317
Concession License	431
Concession Expenses	14,366
Dauber purchases	1,637
Decorations for Hall (Holidays/Special Promotion)	184
Door Prizes (Cash and Merchandise)	38,970
Merchandise Prizes on Pull Tabs	1,550
Miscellaneous Expenses	170
Printing	895
Postage	358
Pull Tab Purchases	62,893
Rental of Bingo Hall	44,550
Security for Bingo Games	19,488
Telephone	932
<b>Total Bingo Expenses</b>	<b>2,077,715</b>
<b>Net Income from Bingo</b>	<b>\$229,677</b>

Form 990

PART IX - Statement of Functional Expenses -- Line 24a

	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM SERVICES	MNGMENT & GENERAL	FUNDRAISIN EXPENSES
<b>OTHER EXPENSES</b>				
Alumni (Database & Other)	\$ 665	\$ 665		
Alumni Relations/Volunteer Appreciation	-			
Annual Year End WG Banquet	2,468	2,468		
ATM Expenses (fees and supplies)	1,283		1,283	
Audition Expenses	-			
Bank Charges	332		332	
Board Meeting Expenses	1,035		1,035	
Credit Card Fees - Souvie Booth	-			
Compensation - Independent Instructional Staff -WG	53,075	53,075		
Compensation - Consultants & Professional Instruction	825	825		
Compensation - Souvie Booth Staff	-			
Computer Software and Supplies	-			
Contest Entry Fees	1,800	1,800		
Entertainment	-			
Equipment Purchases - Maint & Repair	1,220		1,220	
Equipment and Props	6,096	6,096		
Equipment Transportation	-			
Food for WG Guard Camps	1,943	1,943		
Insurance	-			
Internet expenses	-			
License and filing fees	4,738		100	4,638
License Instant Bingo - Type II (Pull-tabs)	-			
Lodging/Competitions	12,185	7,931	4,254	
Medical Expenses	157	157		
Meeting Expenses - Staff/Board	-			
Miscellaneous	2,078	20	2,058	
NSF Checks	500	500		
Office Equipment and Supplies	246	246		
Parking reimbursement for competition travel	347	347		
Payroll & Health Insurance Administration Fees	1,352		1,352	
Per Diem for Travel	582		582	
Pest Control Services	-			
Postage	528	339	189	
Printing	205		205	
Public relations	930		930	
Rental Space - Souvie Booth at Contests	-			
Rehearsal & Practice Site Rental	7,925	7,925		
Security	5,583	5,040	543	
Show Music & Research	577	577		
Souvie booth expense	-			
Supplies for guard	70	70		
Taxes	-		3,201	
Telephone	3,201	181	2,117	
Tickets for Contests	2,298			
Uniforms	5,669	5,669		
Van & Trailer Expenses (gas, oil, maint. & repair)	4,165	1,986	2,179	
	-	-	-	-
<b>Totals</b>	<b>\$124,073</b>	<b>\$97,858</b>	<b>\$21,577</b>	<b>\$4,638</b>