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orm 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2010

OMB No 1545-0047

Open to Public Inspection

A Fo	r the 2	2010 ca		ning 01-01-2010 and ending 12-31-201	.0	_	
_		pplicable	C Name of organization SOCIETY OF VACUUM COATERS			D Employe	ridentification number
_	dress ch	-	Doing Business As			34-662	2249
Na	me chai	nge	,			E Telephon	e number
_ Init	tial retur	rn	Number and street (or P O box 71 PINON HILL PLACE NE	f mail is not delivered to street address)	Room/suite	(505) 89	97-7743
Tei	mınated	d	71 PINON HILL PLACE NE			G Cross ross	ounte d 1 310 775
	ended i		City or town, state or country, ar ALBUQUERQUE, NM 87122	nd ZIP + 4		G Gross rece	eipts \$ 1,219,775
Apı	olication	pending	, , , , , , , , , , , , , , , , , , , ,				
			F Name and address of p VIVIENNE H MATTOX	rincipal officer	H(a) Is this	a group return for a	ffiliates? Yes Vo
			71 PINON HILL PLACE N		H(h) Are a	ll affiliates include	ed?
			ALBUQUERQUE, NM 87:	122			st (see instructions)
r Ta	x-exem	npt status	☐ 501(c)(3)	◀ (Insert no)	1	up exemption	
		<u> </u>		4 (ilisert lib) 4547 (d)(1) (il.) 527			
			/W SVC ORG		<u> </u>		
			Corporation Trust Associa	ation Cother 🗠	L Year of fo	ormation 1984	M State of legal domicile DC
Pa	rt I	Sum	mary				
Governance	T	TO PRO MEMBEF	MOTE TECHNICAL EXCELLE	sion or most significant activities ENCE BY PROVIDING A GLOBAL FORU JNITY, AND THE PUBLIC ON ALL ASPE NOLOGIES		,	•
Ě	_						
Š		Cha-lui	and have better annually	dia a a banana di ha a a a a a a a a a a a a a a a a a a	of man = +1 =	DEO/ -6-3	
			•	discontinued its operations or disposed		1	1
Acuvines &				rning body (Part VI, line 1a) rs of the governing body (Part VI, line 1b		. 4	
<u> </u>				in calendar year 2010 (Part V, line 2a)	-	. 5	
ş			mber of volunteers (estimate i			6	
•			·	Part VIII, column (C), line 12		7a	195,755
	ь	Net unre	lated business taxable incom	e from Form 990-T, line 34		71	-8,032
					Pri	or Year	Current Year
	8	Contri	butions and grants (Part VIII		99,959	90,922	
Revenue	9	Progra	ım service revenue (Part VIII		787,663	784,290	
) John	10		tment income (Part VIII, colu		36,021	· ·	
_	11		revenue (Part VIII, column (A	_	192,128	195,755	
	12			11 (must equal Part VIII, column (A), lın	е	1,115,771	1,119,320
	13			art IX, column (A), lines 1–3)		17,177	11,632
	14	Benefi	ts paid to or for members (Par	t IX, column (A), line 4)			0
ø	15		es, other compensation, emplo	oyee benefits (Part IX, column (A), lines	5 –		0
Expenses	16a	10) Profes	sional fundraising fees (Part I	X, column (A), line 11e)			0
Ð	ь		ndraising expenses (Part IX, column				
Ω	17), lines 11a-11d, 11f-24f)		1,120,201	1,121,918
	18			nust equal Part IX, column (A), line 25)		1,137,378	· · ·
	19			ne 18 from line 12		-21,607	<u> </u>
Net Assets or Fund Balances					_	g of Current Year	End of Year
3 7 W	20					1,285,748	1,350,089
3 E	21					321,506	
	22			ct line 21 from line 20		964,242	1,002,890
Jnde cnow		ties of po		nined this return, including accompanying s te. Declaration of preparer (other than office			
		****				011-10-19	
Sigr Her		VIVIE	ature of officer NNE H MATTOX EXECUTIVE DIRECTO or print name and title	OR .		ate	
		Print/Type		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Date	Check if self-	_ PTIN
Paid	-	preparer's Firm's nai	me MACKIE REID & COMPANY PA	JANEL K REBERT CPA 2	011-10-19	employed 🕨	Firm's FIN
Prep	arer		dress • 4001 INDIAN SCHOOL RD ST	TE 110			Firm's EIN
Use (Only	, 5 au	ALBUQUEDOUE NM 87110				Phone no • (505) 268- 4335

May the IRS discuss this return with the preparer shown above? (see instructions)

ΓYes ΓNο

Par	t III		Program Service e O contains a respon			tIII				.
1	Brief	fly describe the org	anızatıon's mıssıon							
THE	TECH		EXCELLENCE BY PRO TY, AND THE PUBLIC							
2			dertake any significant 90-EZ?		ıces durıng the	year which we	re not listed on	┌ Yes 「	✓ No	
	If "Y∈	es," describe these	new services on Sche	dule O						
3	servi	ces?	ase conducting, or mal		_	ıt conducts, ar	ny program • • • •	┌ Yes │	✓ No	
	It "Ye	es," describe these	changes on Schedule	O						
4	Secti	on 501(c)(3) and !	rpose achievements for following for following for formal for formal for formal for formal for formal for formal f	ns and section	4947(a)(1) tru	sts are require	d to report the am			ınd
4a	(Cod	le) (Expenses \$	ır	cluding grants of \$) (Revenue \$)
	CONI REPU	FERENCES HAVE RESUI UTATION FOR A QUALIT	ANNUAL FORUM FOR THE LTED IN A RAPIDLY GROWII Y TECHNICAL PROGRAM, E ERED THROUGH THE STUD	NG INTERNATION DUCATION PROG	AL ATTENDANCE, A RAM, AND EXHIBIT	GROWING NUMB	ER OF INDUSTRIAL EX	HIBITORS AN	ND A W	'ORLDWIDE
	(Cod	le) (Expenses \$	ır	ncluding grants of \$) (Revenue \$)
	BROA	AD EDUCATION PROGR	UCATIONAL SEMINARS FOR AM INCLUDES A COMPREHI QUE SELF-PACED ON-LINE	ENSIVE LIST OF S						
	(Cod	le) (Expenses \$	ır	ncluding grants of \$) (Revenue \$)
	TECH INCL	HNICAL PUBLICATIONS	- EDUCATIONAL PUBLICATI TITED TO, BULLETINS PUBLI	ONS FOR THE DIS	SEMINATION OF T	ECHNICAL MATER	IAL IN THE FIELD OF N			
	Oth	er program service	s (Describe in Sched	ule O) See als	so Additional Da	ita for Descrip	tion			
		penses \$	•	ing grants of \$) (Rev)	
 4е	Tota	al program service	expenses►\$						•	

			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasiendowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b		No
c	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.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Νο
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νo
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		N o
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-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> " <i>Yes,"</i> complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νο
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Yes Vo			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F-	orm 990	(2010)

Part V	Statements	Regarding	Other I	RS Filings	and Tax	Compliance

	990 (2010) rt V Statements Regarding Other IRS Filings and Tax Compliance			Page :
гœ	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		163	140
	1a 25			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year ²	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕒			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		110
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	, · ·		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		
f	contract?	7f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
9	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	76		
8	Form 1098-C?	7h		
0	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club acilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
h	Enter the amount of reserves the organization is required to maintain by the states			
J	in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	I	l No

b If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*.

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

_Se	ction A. Governing Body and Management							
			Yes	No				
4-								
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	Enter the number of voting members included in line 1a, above, who 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?	2		Νo				
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	Yes					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο				
6	Does the organization have members or stockholders?	6		Νo				
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο				
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at th							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo				
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)							
	venue code.)		Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο				
	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?							
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	10b						
		11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990							
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes					
13	Does the organization have a written whistleblower policy?	13		Νo				
14	Does the organization have a written document retention and destruction policy?	14	Yes					
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?							
а	The organization's CEO, Executive Director, or top management official	15a		Νo				
b	Other officers or key employees of the organization	15b		Νo				
	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		Νο				
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b						
Se	ection C. Disclosure							
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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply							

Own website Another's website Vpon request

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 20 J&M PROFESSIONAL SERVICES 110 ROEHL NW

ALBUQUERQUE, NM 87107

(505) 897-7743

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

Check if Schedule O contains a response to any question in this Part VII

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
(1) CARL M LAMPERT DIRECTOR / T	16 00	х						30,000	0	0
(2) VIVIENNE HARWOOD MATTOX EXECUTIVE DI		х						0	0	0
(3) LADISLAV BARDOS DIRECTOR		х						0	0	0
(4) WOLFGANG DECKER DIRECTOR		х						0	0	0
(5) WOLFGANG DIEHL DIRECTOR		х						0	0	0
(6) BRYANT HICHWA DIRECTOR		х						0	0	0
(7) ALLAN MATTHEWS DIRECTOR		х						0	0	0
(8) DAVID SANCHEZ DIRECTOR		х						0	0	0
(9) ROEL TIETEMA DIRECTOR		х						0	0	0
(10) GARY E VERGASON DIRECTOR		х						0	0	0
(11) SCOTT G WALTON DIRECTOR		х						0	0	0
(12) H ANGUS MACLEOD PAST PRESIDE				х				0	0	0
(13) FRANK T ZIMONE PRESIDENT				х				0	0	0
(14) MICHAEL ANDREASEN TREASURER				х				0	0	0
(15) HANA BARAKOVA SECRETARY				х				0	0	0
(16) LUDVIK MARTINU VICE PRESIDE				х				0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per	1	tion that a	(che				(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estima mount o	ated fother
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former lighest compensated	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	or	from t ganızatı relat organıza	the on and ed
1b	Sub-Total				•	•		P					
c d	Total from continuation sheets Total (add lines 1b and 1c) .						<u> </u>	 	30,000				
<u>u</u> 2	Total number of individuals (inc \$100,000 in reportable compet	luding but not lin	nited to	thos	e lıs				,	n			
												Yes	No
3	Did the organization list any fo i on line 1a? <i>If</i> "Yes," complete Sc				e, k	eye	mploy •	ee, o	r highest compens	ated employee	•		
4	For any individual listed on line				 com	- oens	- sation	- and (other compensation	n from the	3		Νο
	organization and related organization and related organization.	zatıons greater th	nan \$15	0,00	071	f "Y	es," co	mple	te Schedule J for su	ch	4		Νο
5	Did any person listed on line 1a									or individual for	•		-110
	services rendered to the organi	zation? <i>If</i> "Yes," (complet	e Sch	edul	e J f	or such	per:	son		5		Νo
Se	ction B. Independent Cor	ntractors											
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent c	ontra	tors	that received more	e than			
		(A) me and business add							Descr	(B) ription of services		(C Comper	

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ► 1

Form 9		•					Pa	age 9
Part \	VIII	Statement of Revenu	ue		(A)	(B)	(C)	(D)
					Total revenue	Related	Unrelated	
						or exempt	business revenue	excluded
						function		from
						revenue		tax under
						revenue		sections
								512,
								513, or
14 -	1.							514
Contributions, gifts, grants and other similar amounts		Federated campaigns	1a					
95 Z	Ь	Membership dues	. 1b	52,972 ————————————————————————————————————				
કે,	С	Fundraising events	. 1c					
<u> </u>	d	Related organizations	. 1d					
υς Ε	e	Government grants (contributions)	1e					
tio er s		All other contributions, gifts, grants	, and 1f	37,950				
έ₹	١.	similar amounts not included above	2					
Ęğ	g	Noncash contributions included in li	nes 1a-1f \$					
ပည	h	Total. Add lines 1a-1f			90,922			
<u></u>				Business Code				
Program Serwce Revenue	2a	EXHIBITOR BOOTH REGISTRATION			321,200	321,200		
æ	ь	SC - REGISTRATION SVC SC			100,474			
93	c	TECH CONF EARLY REGISTRATION	l		81,462	81,462		
er v	d	EXHIBIT GUIDE ADVERTISING			63,168	63,168		
3 5	e	MISC INC OTHER SVC SPONSORS	Н		55,500	55,500		
<u> </u>	f	All other program service re-	venue		162,486	162,486		
Š	a	Total. Add lines 2a-2f			784,290			
_	_	Investment income (includin			,			
		and other similar amounts)	· .		45,658	45,658		
	4	Income from investment of tax-ex		ľ				
	5	Royalties						
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	ь	Less rental expenses						
	С	Rental income						
	d	or (loss) [Net rental income or (loss)	.					
	_	Weet remediate on (1033)	(ı) Securities	(II) O ther				
	7a		103,150	(ii) o their				
		from sales of assets other						
		than inventory	100,455					
	Ь	Less cost or other basis and	100,455					
		sales expenses Gain or (loss)	2,695					
	d	Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·		2,695	2,695		
ψ		Gross income from fundraisi						
Other Revenue		(not including	. •					
ě		\$ of contributions reported on	line 1c)					
α̈́		See Part IV, line 18						
<u>=</u>			а					
ŏ	Ь	Less direct expenses .	b					
	_	Net income or (loss) from fur						
			ctivities See Part IV, line 19 .					
				b				
		Net income or (loss) from ga						
	10a	Gross sales of inventory, les returns and allowances	S					
		I I I I I I I I I I I I I I I I I I I	a					
	ь	Less cost of goods sold .	. b					
		Net income or (loss) from sa		<u> </u>				
		Miscellaneous Revenue		Business Code				
	11a	BULLETINS - ADVERTISIN	G	541800	168,856		168,856	
		WEBSITE - ADVERTISING		541800	26,899		26,899	
		All other revenue	<u> </u>					
		Total. Add lines 11a-11d		<u> </u>				
			•		195,755			
	12	Total revenue. See Instructi	ons	ļ	1 110 220	022.642	105 755	

	990 (2010)				Page 10
Par	Statement of Functional Expenses				
Δ	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c			(D).	
Do no	ot include amounts reported on lines 6b, p, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	10,000	10,000		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,632	1,632		
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				
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				
а	Fees for services (non-employees) Management	313,740	31,458	282,282	
Ь	Legal	3,968	3,968		_
С	Accounting	6,290	6,290		
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	7,305	7,305		
g	Other				
12	Advertising and promotion				
13	Office expenses	67,674	67,674		
14	Information technology	31,903	, , , , , , , , , , , , , , , , , , ,		
15	Royalties	,			
16	Occupancy	18,825	18,825		
17	Travel	13,087	13,087		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	20,007	13,667		
19	Conferences, conventions, and meetings	367,301	367,301		
20	Interest	,	,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,224	7,224		
23	Insurance	6,589	6,589		
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	-,,===	7,222		
а	READERSHIP COSTS	135,051	135,051		
ь	READERSHIP COSTS	60,947	60,947		
С	DIRECT ADVERTISING EXP	26,333	26,333		
d	OPERATIONS TAXES & FILIN	15,694	15,694		
е	INTERNATIONAL RELATIONS -	15,168	15,168		
f	All other expenses	24,819	24,819		
25	Total functional expenses. Add lines 1 through 24f	1,133,550	851,268	282,282	0
26	Joint costs. Check here ► ☐ If following	_,	131,230		<u> </u>
	SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a				
	combined educational campaign and fundraising solicitation				000 (2010)

Part X Balance Sheet (A) (B) Beginning of year End of year 1 Cash—non-interest-bearing 391.153 2 2 Savings and temporary cash investments 348,566 3 3 94,434 4 54,055 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Assets 6 7 8 Inventories for sale or use 6,713 6.978 Prepaid expenses and deferred charges 27,331 9 56,127 10a Land, buildings, and equipment cost or other basis Complete Part 65.865 10a VI of Schedule D 10b 63.913 ь Less accumulated depreciation 11,725 **10c** 1,952 752.038 873.453 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 2,354 8,958 15 15 16 1,285,748 16 1,350,089 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 20,781 17 31,298 17 Accounts payable and accrued expenses . 18 18 284.402 19 19 313.491 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 16.323 25 2.410 Other liabilities Complete Part X of Schedule D 26 321,506 26 347,199 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 958, 189 997,921 Temporarily restricted net assets 6,053 28 28 4,969 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 964,242 1,002,890 33 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 1.285.748 1,350,089 34

Pal	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		1.1	19,32
2	Total expenses (must equal Part IX, column (A), line 25)	2			133,55
3	Revenue less expenses Subtract line 2 from line 1	3			-14,23
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		g	964,24
5	Other changes in net assets or fund balances (explain in Schedule O)	5			52,87
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		1,0	002,89
Pai	The contains a response to any question in this Part XII				No
1	Accounting method used to prepare the Form 990			res	NO
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
b	Were the organization's financial statements audited by an independent accountant?		2b		Νo
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	sued			
	Separate basis Consolidated basis Both consolidated and separated 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		
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	quired	3Ь		

Additional Data

Software ID:

Software Version:

EIN: 34-6622249

Name: SOCIETY OF VACUUM COATERS

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

4d. Other program services

(Code) (Expenses \$ including grants of \$) (Revenue \$

STUDENT SPONSORSHIPS ARE PROVIDED TO SELECTED INDIVIDUALS TO ENABLE THEM TO ATTEND THE ANNUAL TECHNICAL CONFERENCE STIPENDS ARE PAID DIRECTLY TO THE RECIPIENTS AND SOME PAYMENTS ARE MADE DIRECTLY TO THE BILLING SOURCE TO COVER RELATED EXPENSES OF THE CONFERENCE efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493293001191

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, 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

SeSeIf the	ction $501(c)(3)$ organizations that ction $501(c)(3)$ organizations that	s," to Form 990, Part IV, Line 4, or t have filed Form 5768 (election under t have NOT filed Form 5768 (election u s," to Form 990, Part IV, Line 5 (Pi zations Complete Part III	section 501(h)) (under section 501	Complete Part II-A Do not co (h)) Complete Part II-B Do r	mplete Part II-B not complete Part II-A
Na	me of the organization	·		Employer ider	ntıfıcatıon number
SOC	CIETY OF VACUUM COATERS			34-6622249	
Par	t I-A Complete if the or	ganization is exempt under	section 501(La contraction de la contracti	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect politı	cal campaign act	tivities in Part IV	
2	Political expenditures	3	p g		¢
3	Volunteer hours			r	Ψ
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	5	\$
2	Enter the amount of any excise	e tax incurred by organization manag	jers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	20 for this year?		┌ Yes
4a	Was a correction made?				┌ Yes
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(c) except section 50	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to ot	ther organization	s for section 527 ►	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			⊤ Yes
5	organization made payments l amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid fro lirectly delivered	om the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

_	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a Check If the filing organization checked box	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 11	o)		
d	Other exempt purpose expenditures			
e	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	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	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
	Grassroots nontaxable amount (enter 25% of lin	ne 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j 	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 4	720 reporting	┌ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4	1-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

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

	(election under section 501(h)).					
		(;	a)		(b)	
		Yes	No	A	mour	nt
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	V olunteers?		Νo			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νο			
c	Media advertisements?		Νo			
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	Other activities? If "Yes," describe in Part IV		Νo			
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo			
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c)(5), o	rse	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		Νo
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	II-À,			ctio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
Ь	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					

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

Identifier Return Reference Explanation

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

DLN: 93493293001191

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

	ne of the organization IETY OF VACUUM COATERS		Emp	loyer identifica	tion numbe	er
30C.	ETT OF VACOUM COATERS		34-6	5622249		
Pai	organizations Maintaining Donor A organization answered "Yes" to Form 99				•	
		(a) Donor advised funds	(b) Funds and o	ther accou	nts
•	Total number at end of year					
	Aggregate contributions to (during year)					
	Aggregate grants from (during year)					
	Aggregate value at end of year					
;	\ensuremath{Did} the organization inform all donors and donor adv funds are the organization's property, subject to the	5	or advı	sed	☐ Yes	✓ No
)	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ber conferring impermissible private benefit				☐ Yes	√ No
ar	t III Conservation Easements. Complete	if the organization answered "Yes" to	Forn	າ 990, Part IV	', line 7.	
!	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreat Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual easement on the last day of the tax year	rion or pleasure) Preservation of an Preservation of a c	ertifie	d historic struct	•	a
				Held at the	End of the	Year
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements	5	2b			
C	Number of conservation easements on a certified his	storic structure included in (a)	2c			
d	Number of conservation easements included in (c) a	cquired after 8/17/06	2d			
;	Number of conservation easements modified, transfer the taxable year -		d by th	e organization (during	
•	Number of states where property subject to conserv					
	Does the organization have a written policy regardin enforcement of the conservation easements it holds		lling of	violations, and	┌ Yes	✓ No
	Staff and volunteer hours devoted to monitoring, ins					
	A mount of expenses incurred in monitoring, inspecti		_	; the year ► \$_		
	Does each conservation easement reported on line $\frac{1}{1}$ 70(h)(4)(B)(i) and $\frac{1}{1}$ 70(h)(4)(B)(ii)?				☐ Yes	√ No
	In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's financial ments	staten	nents that desc	rıbes	
ar	Organizations Maintaining Collection Complete if the organization answered		or Otl	ner Similar <i>i</i>	Assets.	
.a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fil	5 116, not to report in its revenue stateme I for public exhibition, education or researc	h ın fu			≥,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or research in			•	
	(i) Revenues included in Form 990, Part VIII, line 1	L		► \$		
	(ii) Assets included in Form 990, Part X			► \$		
!	If the organization received or held works of art, hist following amounts required to be reported under SFA		r finan	cıal gaın, provid	le the	

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

ar'	Organizations Maintaining Co	llections of Art	t, His	<u>tori</u>	<u>cal Tr</u>	easur	es, or O	<u>the</u>	<u>Similar</u>	Asse	ts (co	ntınued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e foll	owing t	hat are	a sıgnıfıca	int us	e of its co	llection		
а	Public exhibition		d	Γ	Loan	orexcha	nge progr	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ıın hov	v the y	furthe	r the org	ganızatıon	's ex	empt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								lar	Γ,	⁄es	√ No
Pai	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar						answere	d "Y€	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	ediary	for c	ontribu	tions or	other ass	ets n	ot	Γ,	í es	√ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ıng ta	ble		_					
										A mou	nt	
С	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance							1 f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lın	e 21?							Γ,	⁄es	▼ No
b	If "Yes," explain the arrangement in Part XIV	/										
Pa	rt V Endowment Funds. Complete	ıf the organızatıo	n ans	were	d "Ye							
		(a)Current Year	(b)	Prior \	'ear	(c)Two	Years Back	(d)⊺	hree Years B	ack (e)	Four Ye	ears Back
la	Beginning of year balance							-				
b	Contributions							_				
С	Investment earnings or losses											
d	Grants or scholarships							<u> </u>				
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
!	Provide the estimated percentage of the yea	r end halance held:										
- а	Board designated or quasi-endowment	T end balance here										
	·											
b	Permanent endowment 🕨											
C \-	Term endowment 🕨		_ 4 4						de la			
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation t	.nat a	re neid	i and ad	ministered	i for t	ne	[Yes	No
	(i) unrelated organizations								[3a(i)		No
	(ii) related organizations									3a(ii)		Νο
b	If "Yes" to 3a(II), are the related organizatio								[3b		Νo
1	Describe in Part XIV the intended uses of th	e organization's en	dowme	nt fu	nds							
Pai	t VI Investments—Land, Building:	s, and Equipme	nt. S	<u>ee F</u>	orm 9	90, Par	t X, line	10.	I			
	Description of investment				a) Cost o sıs (ınve		(b) Cost or basis (oth		(c) Accum deprecia		(d) B	ook value
La	Land											
b	Buildings											
c	Leasehold improvements											
d	Equipment						3	1,165		30,281		884
e	Other					· · · · · · · · · · · · · · · · · · ·	3	4,700		33,632		1,068

Part VIII Investments—Other Securities. See		
(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		·
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Description of investment type	(b) Dook value	Cost or end-of-year market value
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III	ne 15.	
(a) Descrip		(b) Book value
Total (Column (b) should sound Forms 2000 Port Visit (PV)	E)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability		
	(b) A mount	
Federal Income Taxes		
ACRRUED TECHNICAL DIRECTOR'S FEE	2,500	
DUE TO FOUNDATION-DONATIONS	435	
DUE TO FOUNDATION-5K RUN	25	
DUE TO THE FOUNDATION - GOLF		
ACCRUED INCOME TAXES	-550	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	2,410	

'ali	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts
L	Total revenue (Form 990, Part VIII, column (A), line 12)	1
2	Total expenses (Form 990, Part IX, column (A), line 25)	2
	Excess or (deficit) for the year Subtract line 2 from line 1	3
	Net unrealized gains (losses) on investments	4
5	Donated services and use of facilities	5
,	Investment expenses	6
	Prior period adjustments	7
3		8
	Other (Describe in Part XIV)	
•	Total adjustments (net) Add lines 4 - 8	9
)	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10
	Reconciliation of Revenue per Audited Financial Statements With Revenue	
	Total revenue, gains, and other support per audited financial statements	1
	A mounts included on line 1 but not on Form 990, Part VIII, line 12	
а	Net unrealized gains on investments	
Ь	Donated services and use of facilities	-
C	Recoveries of prior year grants	
d	Other (Describe in Part XIV)	_
e	Add lines 2a through 2d	2e
	Subtract line 2e from line 1	3
	A mounts included on Form 990, Part VIII, line 12, but not on line 1	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a	
b	Other (Describe in Part XIV)	
С	Add lines 4a and 4b	4c
	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return
	Total expenses and losses per audited financial statements	1 1
	Amounts included on line 1 but not on Form 990, Part IX, line 25	-
а	Donated services and use of facilities	
b b	Prior year adjustments	-
c	Other losses	-
d	Other (Describe in Part XIV)	1
e	Add lines 2a through 2d	_ 2e
	Subtract line 2e from line 1	3
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	
a L	· · · · · · · · · · · · · · · · · · ·	-
b	,	- I
С	Add lines 4a and 4b	4c
	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5

Identifier Return Reference Explanation

additional information

DLN: 93493293001191

OMB No 1545-0047

2010

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SCHEDULE F (Form 990)

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization SOCIETY OF VACUUM COATERS **Employer identification number**

34-6622249

Pa	General Information "Yes" to Form 990, Page 1990, Page	on on Activi	ties Outside b.	the United States.	Complete if the organiza	ation answered
1	For grantmakers. Does the	•		rds to substantiate th	ne amount of the grants o	r
	assistance, the grantees' el					
	the grants or assistance? .	= -	=			┌ Yes ┌ No
2	For grant makers. Describe in P United States	art V the organ	ızatıon's proced	ures for monitoring the	use of grant funds outside th	е
3	Activites per Region (Use Part	V ıf addıtıonal	space is neede	d)		
	(a) Region		(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)		(f) Total expenditures for region/investments in region
	EUROPE (UNITED KINGDOM)			PROGRAM SERVICE	CONFERENCE/TUTORIAL	4,329
	EAST ASIA (CHINA)			PROGRAM SERVICE	TUTORIAL COURSE	7,719
	GERMANY			PROGRAM SERVICE	CONFERENCE/TUTORIAL	5,219
	Sub-total Total from continuation sheets					17,267
c	to Part I Totals (add lines 3a and 3b)					17,267

Part	Part IV, lı	ne 15, for any					olete if the organizate received more than		
	a) Name of rganization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nun tax-exempt by	hber of recipie the IRS, or fo	ent organizations lis or which the grante	ted above that are i e or counsel has pro	ecognized as chari ovided a section 50:	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	 as . ▶	
3	Enter total nun	nber of other o	organizations or en	tities					(Form 990) 2010

Part III	Grants and Ot	her Assistance to	Individuals	Outside the Unit	ed States. Complete i	f the organization a	nswered "Yes" to Form !	990, Part IV, line 16.
	Use Part V if add	ditional space is ne	eded.		·			

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash	(g) Description of non-cash	(h) Method of valuation
					assistance	assistance	(book, FMV, appraisal, other)
			<u> </u>			1	
			<u>. </u>		!		
			<u>. </u>			1	
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			<u> </u>		!		
			1		!		
			1		,		

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	Г	- 1	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	Γ	-	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	Γ	- 1	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	Γ	- 1	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	Γ	- 1	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	Г	- 1	Νo

Schedule F (Form 990) 2010

information. Identifier	ReturnReference	Explanation
14011111101	T. G.	Explanation

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

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

Attach to Form 990

OMB No 1545-0047

2010

DLN: 93493293001191

pen to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Schedule I

(Form 990)

Name of the organization
SOCIETY OF VACUUM COATERS

Employer identification number

34-6622249

Part I General Inform	mation on Grants	and Assistance				I	
Does the organization mathe selection criteria useDescribe in Part IV the o	d to award the grants	or assistance?					F Yes ☐ ſ
Form 990, Part 1	IV, line 21 for any	Governments and recipient that received eded.	d more than \$5,000	. Check this box if	no one recipient rece	rived more than \$5,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SOCIETY OF VACUUM COATERS FDN SOCIETY OF VACUUM COATERS FOUNDATIO71 PINON HILL PLACE NE ALBUQUERQUE, NM 87122	30-0110080	3	10,000				SCHLO LARSHIP FUNDS
2 Enter total number of sec 3 Enter total number of oth							

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

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

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

Ident if ier	Return Reference	Explanation
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS INSIDE THE UNITED STATES	SCHEDULE I, PAGE 1, PART I, LINE 2	MATCHING GRANT FUNDS AND CONTRIBUTIONS ARE GIVEN TO THE SOCIETY OF VACUUM COATERS FOUNDATION TO BE USED FOR SCHOLARSHIPS THE FOUNDATION'S ACCOUNTING RECORDS ARE AVAILABLE TO THE ORGANIZATION
ADDITIONAL INFORMATION	SCHEDULE I, PAGE 4, PART IV	STUDENT SPONSORSHIPS ARE PROVIDED TO SELECTED INDIVIDUALS TO ENABLE THEM TO ATTEND THE ANNUAL TECHNICAL CONFERENCE STIPENDS ARE PAID DIRECTLY TO THE RECIPIENTS AND SOME PAYMENTS ARE MADE DIRECTLY TO THE BILLING SOURCE TO COVER RELATED EXPENSES OF THE CONFERENCE
		C-1-1-1-7 (F 000) 2010

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DLN: 93493293001191

OMB No 1545-0047

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions with Interested Persons

► Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.

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

2010

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	t the organization OF VACUUM COATERS								mployer ı	dentifica	ation numb	er
			• ,	. 504	() ())		() (4)		4-66222			
Part I	Excess Benefit Trail Complete if the organizat										line 40h	
					<u> </u>							orrected?
1	(a) Name of disq	ualified	person			(b) Desc	cription	of trans	action		Yes	
2 Ent	er the amount of tax ımpos	ed on t	:he orga	nızatıon man	agers o	r disqualified pers	ons dur	ing the	year unde	r		
	tion 4958								•	* \$		
3 Ent	er the amount of tax, if any	, on lın	e 2, abo	ve, reımburs	ed by th	ne organization .			•	* \$		
Part II	Loans to and/or l	From	Intere	sted Pers	sons.							
	Complete if the organiz					0, Part IV, line 26	, or Fori	n 990-	EZ, Part \	, line 38	3 a	
		(b) L	oan to						(f)			
(a) Nam	e of interested person and		om the	(c)0 rig		(d)Balance due	(e) 1 defau		A pproby		(g)Writ	
	purpose	organ	ızatıon?	principal a	amount	(d)Bulunce due			commit			
		То	From				Yes	No	Yes	No	Yes	No
		1										
		-										
		+	1						_			
Total .					▶ \$							
Part III									•		•	
	Complete if the orga	nızatı						27.				
(a) Name of interested pers	on	(een interested pei ganization	rson	(c) A r	nount of g	rant or t	ype of assı	stance
				<u> </u>	14 1110 01	gamzation						

Part IV Business Transactions Involving Interested Perso
--

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the (c) A mount of transaction		(d) Description of transaction	organı	aring of zation's nues?
(1) MANAGEMENT PLUS INC	organization			Yes	No
(1) MANAGEMENT PLUS INC	EXEC DIRECTOR	432,050	MANAGEMENT FEES		No
(2) MANAGEMENT PLUS INC	EXEC DIRECTOR	35,953	OPERATION EXPENSES		No

Part V Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier Return Reference Explanation

Schedule L (Form 990 or 990-EZ) 2010

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DLN: 93493293001191

OMB No 1545-0047

2010

Department of the Treasury
Internal Revenue Service

SCHEDULE 0

(Form 990 or 990-EZ)

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

Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

Name of the organization SOCIETY OF VACUUM COATERS

 ${\bf Employer\ identification\ number}$

34-6622249

ldentifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	TO PROMOTE TECHNICAL EXCELLENCE BY PROVIDING A GLOBAL FORUM TO INFORM, EDUCATE, AND ENGAGE THE MEMBERS, THE TECHNICAL COMMUNITY, AND THE PUBLIC ON ALL ASPECTS OF VACUUM COATING, SURFACE ENGINEERING AND RELATED TECHNOLOGIES

ldentifier	Return Reference	Explanation
ALL OTHER ACHIEV EMENTS DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	STUDENT SPONSORSHIPS ARE PROVIDED TO SELECTED INDIVIDUALS TO ENABLE THEM TO ATTEND THE ANNUAL TECHNICAL CONFERENCE STIPENDS ARE PAID DIRECTLY TO THE RECIPIENTS AND SOME PAYMENTS ARE MADE DIRECTLY TO THE BILLING SOURCE TO COVER RELATED EXPENSES OF THE CONFERENCE

ldentifier	Return Reference	Explanation
MANA GEMENT DELEGATED	FORM 990, PAGE 6, PART VI, LINE 3	A MANAGEMENT COMPANY PROVIDES AN EXECUTIVE DIRECTOR AND NECESSARY PERSONNEL TO PERFORM MANAGEMENT AND OPERATIONAL DUTIES FOR THE SOCIETY AT AN AGREED UPON MANAGEMENT FEE

ldentifier	Return Reference	Explanation
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE FINANCE COMMITTEE REVIEWS THE TAX RETURN AND RECOMMENDS TO THE EXECUTIVE COMMITTEE THAT IT BE ACCEPTED IF THE FINANCE COMMITTEE DOES NOT AGREE WITH THE RETURN, THE TREASURER WORKS WITH THE CPA AND THE SOCIETY'S MANAGEMENT COMPANY (SVC) TO MODIFY IT, AFTER WHICH IT WILL RECOMMEND ACCEPTANCE THE BOARD WILL RECEIVE A COPY OF THE FINAL RETURN WHEN IT IS FILED

ldentifier	Return Reference	Explanation
	FORM 990, PAGE 6, PART VI, LINE 12C	THE SOCIETY ANNUALLY REQUIRES EACH BOARD MEMEBER TO READ THE CONFLICT OF INTEREST POLICY AND SIGN AN ACKNOWLEDGEMENT FORM IF A CONFLICT OF INTEREST ARISES, THE INTERESTED PERSON IS TO CALL IT TO THE ATTENTION OF THE BOARD OF DIRECTRORS FOR RESOLUTION "WHEN THERE IS A DOUBT AS TO WHETHER ANY CONFLICT OF INTEREST EXISTS, THE MATTER SHALL BE RESOLVED BY A VOTE OF THE BOARD OF DIRECTORS, EXCLUDING THE PERSON WHO IS THE SUBJECT OF THE POSSIBLE CONFLICT"

ldentifier	Return Reference	Explanation
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS (CONSTITUTION AND BY LAWS) ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE COPIES OF THE CONFLICT OF INTEREST POLICY AND/OR FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST,

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

DLN: 93493293001191

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2010

Schedule R (Form 990) 2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization SOCIETY OF VACUUM COATERS	I Identification of Disregarded Entities (Complete If the organization answered "Yes" on Form (a) Name, address, and EIN of disregarded entity (b) Primary activity Legal domicile (state or foreign country) Total Total I Identification of Related Tax-Exempt Organizations (Complete If the organization answer or more related tax-exempt organizations during the tax year.) (a) Name, address, and EIN of related organization (b) Primary activity Legal domicile (state organization answer or more related tax-exempt organizations during the tax year.)						
Part I Identification of Disregarded Entities (Co	omplete if the organization	on answered "Yes"	on Form 990, Pa	34-6622249 rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
							It had one (g) Section 512(b)(13) controlled organization Yes No No
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations dur	ganizations (Complete ring the tax year.)	ıf the organızatıon	answered "Yes"	on Form 990, Part	t IV, line 34 becau	se it had	one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 512(b) controlled	
(1) SOCIETY OF VACUUM COATERS FDN						Yes	No
71 PINON HILL PLACE	SCHOLARSHI	NM	501 C3		N/A		No
ALBUQUERQUE, NM 87122 30-0110080							

Cat No 50135Y

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income				(g) Dispro		(h) (i) croprtionate coations? amount in b Schedule (Form 1		e V—UBI Gener In box 20 of mana dule K-1 partr		al or ging	(k) Percentage ownership
								Yes	No			Yes	No			
				ble as a Corpora zations treated as a						nswered "Y	es" on	Form	990,	Part IV,		
(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling Type of en ty (C corp, S o		(e) Type of entity SI C corp, S corp, or trust)		(f) f total income	Shai end-o	y) re of f-year sets		(h) Percentage ownership			

							,
Par	Transactions With Related Organizations (Complete if the organization answered "Ye	es" on Form 990, Pai	rt IV, line 34, 35, 3	5A, or 36.)			
ı	lote. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No
1 Du	ing the tax year, did the orgranization engage in any of the following transactions with one or more related orga	anızatıons lısted ın Part	s II-IV?				
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity			1	.a		No
ь	Gift, grant, or capital contribution to other organization(s)			1	.b	Yes	
c	Gift, grant, or capital contribution from other organization(s)			1	.c		No
d	oans or loan guarantees to or for other organization(s)			1	.d		No
e	oans or loan guarantees by other organization(s)			1	.e		No
f	Sale of assets to other organization(s)			1	.f		No
g	Purchase of assets from other organization(s)			1	.g		No
h	Exchange of assets			1	.h		No
i l	ease of facilities, equipment, or other assets to other organization(s)			1	Li		No
j l	ease of facilities, equipment, or other assets from other organization(s)			1	Lj		No
k	Performance of services or membership or fundraising solicitations for other organization(s)			1	.k		No
I F	erformance of services or membership or fundraising solicitations by other organization(s)			[3	LI		No
m	Sharing of facilities, equipment, mailing lists, or other assets			1	.m		No
n	Sharing of paid employees			1	.n		No
0	Reimbursement paid to other organization for expenses			1	.0		No
р	Reimbursement paid by other organization for expenses			1	.p		No
q	O ther transfer of cash or property to other organization(s)			1	.q	Yes	
r	ther transfer of cash or property from other organization(s)			[1	Lr		No
				_		•	
2	f the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	ıncludıng covered relat	ionships and transact	ıon thresholds			
	(a)	(b) Transaction	(c)	(d Method of deten)	20.000	unt
	Name of other organization	type(a-r)	Amount involved	invol		iy airic	Juni
1) SOO	IETY OF VACUUM COATERS FOUNDATIO	В	10,000	CASH			
2)							
		 		†			

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	Method of determining amount involved
(1) SOCIETY OF VACUUM COATERS FOUNDATIO	В	10,000	CASH
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d Are parti sect 501(d organiz	ners ion :)(3) :ations?	(e) Share of end-of-year assets		ortionate	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(I Gene mana part	agın tner?
			Yes	No		Yes	No		Yes	N
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2010