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 $_{\text{Form}}990$

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)

| 2010

2010

OMB No 1545-0047

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

Open to Public Inspection

A F-	- 4b - 3	0010			•
		calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010 C Name of organization		D Employer i	dentification number
_	ress ch	AMERICAN JAIL ASSOCIATION		52-12451	.73
_	ne char	Doing Business As		E Telephone	
_	ial retur		Doom /t-	•	
_	minated	1135 DDOFFSSIONAL COLIDT	Room/suite	(301) 790	
_	ended r	eturn City or town, state or country, and ZIP + 4 HAGERSTOWN, MD 217405853 pending		G Gross receip	ts \$ 1,614,190
741	nication				
		F Name and address of principal officer GWYN SMITH-INGLEY	H(a) Is this a gr	oup return for affili	ates? Yes No
		1135 PROFESSIONAL COURT HAGERSTOWN, MD 217405853	H(b) Are all af	filiates included	Yes No
		11AGENSTOWN, FID 217403033			(see instructions)
[Ta	x-exem	pt status	H(c) Group	exemption ni	umber 🗠
J W	ebsit e	:► WWW AJA ORG			
K Forr	n of org	anization	L Year of form	ation 1981 I	Y State of legal domicile VA
Pa	rt I	Summary			
		Briefly describe the organization's mission or most significant activities			
01	<u> </u>	NATIONAL ORGANIZATION DEDICATED TO SUPPORTING THOSE WHO WO	RKINANDO	PERATE OU	R NATION'S JAILS
<u> </u>	-				
፸	-				
<u>ş</u>	2 -	Check this box 🔭 if the organization discontinued its operations or disposed of	more than 25°	% of its net a	ssets
Governance		Number of voting members of the governing body (Part VI, line 1a)	more than 25	, от на неса з	19
		Number of voting members of the governing body (Part VI, line 1a)		4	19
Activities &		Total number of individuals employed in calendar year 2010 (Part V., line 2a)		5	19
		otal number of many adals employed in calendar year 2010 (Fart V, line 2a)		6	1
[작		otal unrelated business revenue from Part VIII, column (C), line 12		7a	291,051
		Net unrelated business taxable income from Form 990-T, line 34		7a 7b	-2,663
		The state of the s	Prior Y		Current Year
	8	Contributions and grants (Part VIII, line 1h)	71101	0	0
₫	9	Program service revenue (Part VIII, line 2g)		1,243,676	1,215,537
Revent	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		-7,422	13,420
Ť	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		301,542	314,177
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line			
		12)		1,537,796	1,543,134
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0	0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0
χ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		679,831	697,943
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
÷	ь	Total fundraising expenses (Part IX, column (D), line 25) •0			<u> </u>
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		878,024	970,337
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		1,557,855	1,668,280
	19	Revenue less expenses Subtract line 18 from line 12		-20,059	-125,146
<u>ত্</u>		,	Beginning o	f Current	End of Year
Net Assets or Fund Balances	20	Total assets (Part Y line 16)	Yea	1,983,249	1 2/1 /50
Д	21	Total assets (Part X, line 16)		1,169,908	1,841,459
2 E	22	Net assets or fund balances Subtract line 21 from line 20		813,341	698,849
	t III	Signature Block		013,341	0,045
Unde	r penal	ties of perjury, I declare that I have examined this return, including accompanying sch			
	ledge a ledge.	and belief, it is true, correct, and complete. Declaration of preparer (other than officer)	is based on all	information o	if which preparer has any
		*****	2011	-05-23	
Sign	1	Signature of officer	Date		
Here		GWYN SMITH-INGLEY EXECUTIVE DIRECTOR			
		Type or print name and title			
		Print/Type Print/Type Preparer's signature Preparer's name EDWARD L BUCHANAN Dat		eck if self-	PTIN
Paid		IV CPA IV CPA	en	nployed 🕨 🦵	
	arer	Firm's name F SMITH ELLIOTT KEARNS & COMPANY LLC			Firm's EIN
	Only	Firm's address 480 N POTOMAC STREET HAGERSTOWN MD 21740			Phone no (301) 733- 5020

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

	()					ı uy	
Par		of Program Servi ule O contains a resp					
1	Briefly describe the o	rganızatıon's mıssıon					
SER\ SUCI CER ^T LEAI PRO	ING SENTENCES, OR H PERSONS ARE DETA TIFICATION, INFORM	OTHERWISE LOCAL AINED TO ADVANCE ATION EXCHANGE, ELOPMENT OF PROF ES TO PRESENT AND	LLY CONFINED, ANI PROFESSIONALIS TECHNICAL ASSIS ESSIONAL STANDA ADVANCE THE IN	O TO IMPROVE TH M IN CORRECTIO TANCE, PUBLICAT RDS, PERTINENT TERESTS, NEEDS,	E CONDITIONS AND NS THROUGH TRAIN: IONS, AND CONFERI LEGISLATION, MANA CONCERNS, AND PRO	GEMENT PRACTICES,	1
2	Did the organization u the prior Form 990 or	, •	ant program services	during the year whi	ch were not listed on	Γ Yes Γ No	
	If "Yes," describe thes	e new services on Sc	hedule O				
3	Did the organization c		nake significant chan	ges in how it conduc	cts, any program	┌ Yes ┌ No	
	If "Yes," describe thes	e changes on Schedu	le O				
4		l 501(c)(4) organizati	ons and section 494	7(a)(1) trusts are r	est program services lequired to report the aillice reported		
4a	(Code) (Expenses \$	402,548 includii	ng grants of \$) (Revenue \$	51,870)	_
	COMMUNICATIONS, INCLI EDUCATION AND TRAININ	JDING PUBLICATIONS - TH IG OF MEMBERS THE ART	IE AMERICAN JAIL ASSOCI ICLES ADDRESS CURREN	ATION (AJA) MAGAZINE T ISSUES, PROBLEMS, A	AND OTHER PUBLICATIONS IND AVAILABLE SOLUTIONS	ARE FOR THE PURPOSE OF	
4b	(Code) (Expenses \$	390,584 includii	ng grants of \$) (Revenue \$	615,606)	
		TINGS - THE PRIMARY EXP HOSE ISSUES INVOLVING J			FOR THE EDUCATION AND	AWARENESS OF THOSE IN THE	IAI
4c	(Code) (Expenses \$	280,521 includii	ng grants of \$) (Revenue \$	416,418)	
		SEMINARS - SERVICES PRO AND TRAINING ON CURR			ONAL DEVELOPMENT AND R AGEMENT	ECOGNITION INCLUDING	
4d	· -	ces (Describe in Sch	•		-		
	(Expenses \$	270,809 inc	uding grants of \$) (Revenue \$	131,643)	
4e	Total program service	e expenses►\$	1,344,462				

Part IV	Che	cklist	of Re	auired	Sche	dules
	CIIC	LKIISL	UI NO	uuncu	30110	uuics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes,"</i> complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	2		Νο
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		Νο
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	Yes	
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		
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	Yes	
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		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		Νο
11	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		Νο
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		Νο
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
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	Yes	
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	Yes	
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		Νο
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</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b		Νο
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		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
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		

1 01111	990 (2010)			Page -
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 1^7 If "Yes," complete Schedule I, Parts I and II	21		No
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		Νο
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		No
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		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νο
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
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		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
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		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
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? If "Yes," complete Schedule R, Part V, line 2	36		Νο
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
•	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	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			
h	return			
_		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
Ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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		N
ь	,			- 1
	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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
	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		
	Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
	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?	7с		N
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
_	contract?	7e		Ν
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	,,		
	Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)........			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	•		
а	Is the organization licensed to issue qualified health plans in more than one state?	43.		
	Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
h	If "Vac " has it filed a Form 720 to report these nayments? If "No " provide an explanation in Schodule O	1/16	ı	i

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					
1a	Enter the number of voting members of the governing body at the end of the tax								
La	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		No					
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		No					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No					
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No					
6	Does the organization have members or stockholders?	6	Yes						
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	7a	Yes						
b	governing body?	7a 7b	Yes						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the		163						
	year by the following								
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8b	Yes						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No					
Section B. Policies (This Section B requests information about policies not required by the Internal									
	venue Code.)		Yes	No					
10a	Does the organization have local chapters, branches, or affiliates?	10a	103	No					
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,								
110	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b							
114	mas the organization provided a copy of this Form 990 to an members of its governing body before ming the form?	11a		Νo					
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		No					
13	Does the organization have a written whistleblower policy?	13		No					
14	Does the organization have a written document retention and destruction policy?	14		Νο					
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	Yes						
ь	Other officers or key employees of the organization	15b	Yes						
	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		No					
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	ction C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed ► MD								
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)								

- 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 of Own website. Another's website. Upon request
- 1.9 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization FGWYN SMITH-INGLEY
 1135 PROFESSIONAL COURT

HAGERSTOWN, MD 21740 (301) 790-3930

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 no<u>r any related organization compensated any current officer, director, or trustee</u>

(A) Name and Title	(B) Average hours	Posi [†]	((tion (hat a	che		II.		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) ROBERT LUCAS IMMED PAST PRES , DIRECTO	1 00	х		х				0	0	0
(2) BOBBI LUNA PRESIDENT, DIRECTOR	1 00	х		х				0	0	0
(3) FRANK HECHT PRES ELECT, DIRECTOR	1 00	х		х				0	0	0
(4) KIM SPADARO 1ST VICE-PRES , DIRECTOR	1 00	х		Х				0	0	0
(5) ESTEBAN GONZALEZ 2ND VICE-PRES , DIRECTOR	1 00	х		х				0	0	0
(6) JAMIE LYNN CLAYTON 3RD VICE PRES , DIRECTOR	1 00	Х		х				0	0	0
(7) MICHAEL A SISNEROS SECRETARY, DIRECTOR	1 00	Х		х				0	0	0
(8) SU CUNNINGHAM TREASURER, DIRECTOR	1 00	Х		х				0	0	0
(9) DON BIRD DIRECTOR	1 00	х						0	0	0
(10) DANIEL M MCDONALD DIRECTOR	1 00	х						0	0	0
(11) MARILYN ROGAN DIRECTOR	1 00	х						0	0	0
(12) KAREN DANIELS DIRECTOR	1 00	х						0	0	0
(13) RONALD TORRES DIRECTOR	1 00	х						0	0	0
(14) RONALDO MYERS DIRECTOR	1 00	х						0	0	0
(15) JEFFERY NEWTON DIRECTOR	1 00	х						0	0	0
(16) WAYNE DICKY DIRECTOR	1 00	Х						0	0	0

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

(A) Name and Title	(B) A verage hours		((tion (hat a	che		II		(D) Reportable compensation from the	(E) Reportable compensation		(F) Estima amount o	ited fother
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee		Ke) emplojee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)		compens from t organizati relati organiza	he on and ed
(17) JOHN W JOHNSON DIRECTOR	1 00	х						0		0		0
(18) MITCH LUCAS DIRECTOR	1 00	х						0		0		0
(19) GWYN SMITH-INGLEY EXECUTIVE DIRECTOR	35 00			х				107,777		0	14,16	
(20) RICHARD NEIMILLER DIRECTOR COMMUNICATIONS &	35 00			х				69,570		0		6,412
										+		
										+		
										+		
										+		
1b Sub-Total			•				F					
c Total from continuation sheets to						-	<u></u>	177,347	0			20,576
d Total (add lines 1b and 1c) Total number of individuals (inclu \$100,000 in reportable compens	dıng but not lım	ıted to t	hose	list				•				20,570
		- gamza									T	
3 Did the organization list any form	er officer, direct	tor or tr	ustee	, ke	y en	nploye	e, oi	r highest compensa	ated employee		Yes	No
on line 1a? <i>If "Yes," complete Sche</i>				•	•					3		No
4 For any individual listed on line 1: organization and related organization individual										4		Νο
5 Did any person listed on line 1a re	eceive or accru	e compe	nsat	ıon f	from	any u	nrela	ated organization o	r individual for	_		
services rendered to the organization? If "Yes," complete Schedule I for such person												N o
Section B. Independent Cont												
Complete this table for your five h \$100,000 of compensation from t			depe	nder	nt co	ontrac	tors	that received more	e than			
Name	(A) e and business addi	ress						Descr	(B) ption of services		(C) Compen	

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 **>**0

		2010)					Pa	age 9
Part \	/!!!	Statement of Reven	ue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	excluded from tax under sections
								513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns	. 1c . 1d . 1e , and 1f					
	h	Total. Add lines 1a-1f						
Program Serwice Revenue	c d	CONFERENCE MEMBERSHIP DUES TRAINING SEMINARS TRAINING TAPES & BOOKS SUBSCRIPTIONS		900099 900099 611600 611710 511120	615,606 212,623 203,795 27,647 17,649	212,623		
Iran		All other program service re	venue	311120	,	138,217		
₽og	g	Total. Add lines 2a-2f			138,217 1,215,537			
	4	Investment income (including and other similar amounts) Income from investment of tax-ext Royalties	empt bond proceeds		6,982 23,126			6,98
	b c	Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss)	(ı) Real	(II) Personal				
	c	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss)	(i) Securities 77,494 71,056 6,438	(II) O ther	6,438			6,43
Other Revenue	8a	Gross income from fundraisi (not including \$ of contributions reported on See Part IV, line 18	line 1c)					
Other	С	Less direct expenses . Net income or (loss) from ful						
	b c	Less direct expenses Net income or (loss) from ga Gross sales of inventory, les	b ming activities ▶					
		Less cost of goods sold . Net income or (loss) from sa						
	11~	Miscellaneous Revenue		Business Code 541800	228,841		228,841	
		ADVERTISING INCOME JAIL CERTIFICATION PRO		611710	47,715		47,715	
		SALE OF JAIL DIRECTORY		900004	14,495		14,495	
	d	I All other revenue Total. Add lines 11a-11d	•		291,051			
	12	Total revenue. See Instructi	ons		1,543,134	1,215,537	291,051 orm 990 (2	

Part IX Statement of Functional Expenses

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

A	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).								
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								
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	191,801	131,561	60,240					
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	411,431	351,549	59,882					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	7,723	6,401	1,322					
9	Other employee benefits	43,034	35,668	7,366					
10	Payroll taxes	43,954	35,301	8,653					
а	Fees for services (non-employees) Management								
b	Legal	1,149	1,071	78					
c	Accounting	12,308	10,860	1,448					
d	Lobbying								
е	Professional fundraising services See Part IV, line 17								
f	Investment management fees	2,513		2,513					
g	Other								
12	Advertising and promotion	11,458	11,230	228					
13	Office expenses	350,061	331,989	18,072					
14	Information technology								
15	Royalties	972	972						
16	·	21,119	2,958	18,161					
17	Travel	120,539	96,901	23,638					
18	Payments of travel or entertainment expenses for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	188,638	159,975	· · ·					
20	Interest	42,420	2,056	40,364					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	56,450	28,064	28,386					
23	Insurance	5,971	5,276	695					
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)								
а	TECHNICAL ASSIST/CONSUL	114,406	114,406						
b	REPAIRS & MAINTENANCE	41,841	17,732	24,109					
c	COLLECTIONS & BAD DEBTS	492	492						
d									
e									
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	1,668,280	1,344,462	323,818	0				
26	Joint costs. Check here ► ☐ If following 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								

Parit X Balance Sheet (A) (B) Beginning of year End of year 100 100 1 Cash—non-interest-bearing 196.985 217.225 2 2 3 3 160,554 4 233,126 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 Notes and loans receivable, net 8 8 73,517 9 51,599 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment cost or other basis Complete 1.510.555 10a Part VI of Schedule D 505.590 ь Less accumulated depreciation 10b 1,053,845 10c 1.004.965 11 11 469.897 12 307,668 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 28,351 26,776 14 14 15 15 16 1,983,249 16 1,841,459 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 33.292 17 32,591 17 Accounts payable and accrued expenses . 18 18 421,039 19 19 420.281 674,489 647,351 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 41.088 25 42.387 Other liabilities Complete Part X of Schedule D 26 1,169,908 26 1,142,610 **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 813,341 27 698,849 Temporarily restricted net assets 28 28 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 ¥ 813,341 698,849 33 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 1.983.249 1.841.459 34

Ра	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		1,5	543,13		
2	Total expenses (must equal Part IX, column (A), line 25)	2			568,28		
3	Revenue less expenses Subtract line 2 from line 1	3	-12				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4						
5	Other changes in net assets or fund balances (explain in Schedule O)	5			10,65		
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		6	598,84		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII			৮	•		
				Yes	No		
1	Accounting method used to prepare the Form 990						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No		
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes			
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued					
3а	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		No		
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	3b				

hospital's name, city, and state

section 170(b)(1)(A)(iv). (Complete Part II)

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

1 2

3

Public Charity Status and Public Support

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

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

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).

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

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

Inspection

Name of the organization AMERICAN JAIL ASSOCIATION

Employer identification number

52-1245173

	1	describe	ed in	at normally receives		ai part or its	support from	n a governme	ental unit or f	rom the ger	neral public
_	_			A)(vi) (Complete P	-			- \			
8			•	described in section			•	•			
9	<u>~</u>	=		at normally receives					•	•	· =
		•		ities related to its ex	•	-			` '		
		• • •	_	oss investment incoi				•		tax) from b	usinesses
		acquire	d by the org	janization after June	30,1975	See sect ion	509(a)(2). (0	Complete Pa	rt III)		
LO	Г	An orga	nızatıon orç	ganized and operated	exclusivel	y to test for	public safety	Seesection	509(a)(4).		
11	ı	one or n	nore public	ganized and operated ly supported organiza bes the type of supp b Type II	ations desci orting organ	ribed in sect ni <u>za</u> tion and	:ion 509(a)(1) or section es 11e throu	509(a)(2) S gh 11h	ee section !	
e	Γ	other th	-	ox, I certify that the on managers and oth	-			•		•	•
f				received a written de	termination	from the IF	RS that it is a	Type I, Typ	e II or Type	III support	ıng organızatıon,
		check tl									Г
g				2006, has the organı	zation acce	pted any gıf	t or contribut	ion from any	of the		
			g persons? rson who di	rectly or indirectly c	ontrols aith	eralone or	together with	nersons des	cribed in (ii)		Yes No
				governing body of th	•		-	persons de	ochbed iii (ii)		g(i)
			•	er of a person describ		_	ation.				y(ii)
			•	•	• • •		- h 2				
				led entity of a persoi						110	ı(iii)
h		Provide	the following	ng information about	tne support	ed organiza	tion(s)				
—		I		/:::\			1				
s	(i) Name suppo ganiz	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organiza col (i) lis your gov docum	ie tion in sted in erning	Did you no organiza col (i) o suppo	otify the tion in f your	(vi Is th organiza col (i) org in the U	ne tion in ganized	(vii) A mount of support
				instructions))	Yes	No	Yes	No	Yes	No	
				,,							
otal											

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.)

	dider rate III. If the	organización i	ans to quanty t	maci die tests	iisted below, pic	case complet	c raic III.
S	ection A. Public Support		_				
Cale	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from						
Ü	line 4						
S	ection B. Total Support	1				I	
	endar year (or fiscal year beginning						
Cur	in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
0	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
-	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activities	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is f	or the organization	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	nızatıon,
	check this box and stop here	_	r		•	. , . , .	▶ ┌॔
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2010	(lıne 6 column (f) divided by line	11 column (f))		14	
15	Public Support Percentage for 2009	Schedule A Par	rt II line 14			15	
							
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, chec	
	and stop here. The organization qua	•				2.2.4.204	▶ [
b	33 1/3% support test—2009. If the				oa, and line 15 is :	1/3% or mor کد	. -
17-	box and stop here. The organization				12 16 1C	handler - 4.4	▶
r/a	10%-facts-and-circumstances test-						ın.
	is 10% or more, and if the organization made			•			
	in Part IV how the organization mee	is the facts and	circumstances"	test ine organiz	acion quanifies as	a publicly supp	orted F
L	organization 10%-facts-and-circumstances test-	_2000 Ifthe era	anization did not	chack a hay an lu	no 13 165 166 5	or 17a and line	F1
ט	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat			•		<u>-</u>	clv
	supported organization	aon meets the 16	aces and circuitis	tances test life	. organization qual	iiiies as a publi	ETY ▶ ¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b. check this	box and see	- 1
	instructions	a.a not ender		, , 0 0 , 7 0 0	. 2. 2, 511558 61115		▶ □

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.)

Se	ection A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
-	merchandise sold or services						
	performed, or facilities furnished	ın _{1,236,309}	1,249,674	1,381,033	1,243,676	1,215,537	6,326,22
	any activity that is related to the	1,230,303	1,2+3,07+	1,301,033	1,243,070	1,213,337	0,520,22
	organization's tax-exempt						
	purpose						
3	Gross receipts from activities the	^{it}					
	are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
-	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit						
	to the organization without						
	charge	4 226 200	1 240 674	4 204 022	4 242 676	4 24 5 527	6 226 22
6	Total. Add lines 1 through 5	1,236,309	1,249,674	1,381,033	1,243,676	1,215,537	6,326,22
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
h	A mounts included on lines 2 and	3					
	received from other than	Ĭ					
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of th	ie					
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public Support (Subtract line 7c from line 6)						6,326,22
Se	ection B. Total Support			<u>'</u>		<u>'</u>	
	ndar year (or fiscal year beginning	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	ın)						
9	A mounts from line 6	1,236,309	1,249,674	1,381,033	1,243,676	1,215,537	6,326,22
10a	Gross income from interest,						
	dividends, payments received on		20.210	26 712	21 154	20 100	122.74
	securities loans, rents, royalties	16,447	29,319	36,713	21,154	30,108	133,74
	and income from similar sources						
ь	Unrelated business taxable						
	income (less section 511 taxes)	127					12
	from businesses acquired after	127					12
	June 30, 1975						
C	Add lines 10a and 10b	16,574	29,319	36,713	21,154	30,108	133,86
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include					+	
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,	1,252,883	1,278,993	1,417,746	1,264,830	1,245,645	6,460,09
	11 and 12)	6 11					
14	First Five Years If the Form 990 in check this box and stop here	s for the organization	on s πrst, second,	tnira, fourth, or fi	iπn tax year as a	section501(c)(3) organization, ►
	ection C. Computation of Pu						
15	Public Support Percentage for 20	10 (line 8 column (f) divided by line	13 column (f))		15	97 930 %
16	Public support percentage from 2	009 Schedule A, Pa	art III, line 15			16	98 230 %
	ation D. Committee C.T.		Daw				
<u>S∈</u> 17	ection D. Computation of In Investment income percentage for				(f))	47	2.070.00
		·			(1))	17	2 070 %
18	Investment income percentage fr		•			18	1 770 %
	33 1/3% support tests—2010 If						

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is no more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported

organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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DLN: 93493147008051

OMB No 1545-0047

Political Campaign and Lobbying Activities For Organizations Exempt From Income Tax Under section 501(c) and section 527

(Form 990 or 990-EZ)

SCHEDULE C

► Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Inspection

Department of the Treasury Internal Revenue Service

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

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

▶Se ▶Se fth	ction 501(c)(3) organizations that ction 501(c)(3) organizations that	s," to Form 990, Part IV, Line 4, of the have filed Form 5768 (election under have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 (Form 576).	er section 501(h)) (under section 501	Complete Part II-A Do no (h)) Complete Part II-B	ot comp Do not	plete Part II-B t complete Part	t II-A
Na	me of the organization ERICAN JAIL ASSOCIATION	Zations Complete Fart III				fication numbe	er
Par	t T-A Complete if the or	ganization is exempt under	section 501(52-12451 c) or is a section!		organizatio	
1		ganization's direct and indirect polit	•	•		<u> </u>	<u>/</u>
2	Political expenditures			•	\$:	
3	Volunteer hours						
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).			
1		e tax incurred by the organization u			<u> </u>		
2	Enter the amount of any excise	tax incurred by organization mana	gers under sectio	n 4955	- ±		
3	If the organization incurred a s	ection 4955 tax, did it file Form 47	20 for this year?			Yes	┌ No
4a	Was a correction made?	·	,			Yes	□ No
ь	If "Yes," describe in Part IV					•	·
	•	ganization is exempt under	section 501(c) except section	501((c)(3).	
1		nded by the filing organization for s			<u></u>		
2		rganization's funds contributed to c					
	exempt funtion activities		J	Þ	- \$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b	- ±	.	
4	Did the filing organization file F	Form 1120-POL for this year?					┌ No
5	organization made payments f amount of political contribution	nd employer identification number (i For each organization listed, enter t ns received that were promptly and political action committee (PAC) I	he amount paid fro directly delivered	om the filing organization to a separate political o	n's fui organi	nds Alsoente ızatıon, such a	er the
	(a) Name	(b) Address	(c) EIN	(d) A mount paid fro filing organization' funds If none, enter	s	(e) A mount o	received

			filing organization's funds If none, enter -0-	and promptly and directly delivered to a separate political organization If none, enter -0-
For Paperwork Reduction Act Notice, se	ee the Instructions for Form 990 or 990	- EZ . Ca	t No 50084S Schedule C (F	form 990 or 990-F7\ 2010

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	(election
4	Check I if the filing organization belongs to	an affiliated group		
В	Check	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means a		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	18,694	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	4,845	
c	Total lobbying expenditures (add lines 1a and 1	b)	23,539	
d	Other exempt purpose expenditures		1,644,741	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	1,668,280	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	233,414	
	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		
g	Grassroots nontaxable amount (enter 25% of li	ne 1f)	58,354	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	О	

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expend	litures During	4-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			227,893	233,414	461,307
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					691,961
c	Total lobbying expenditures			5,837	23,539	29,376
d	Grassroots non-taxable amount			56,973	58,354	115,327
е 	Grassroots ceiling amount (150% of line 2d, column (e))					172,991
f	Grassroots lobbying expenditures			927	18,694	19,621

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

		1.	a)		(b)	
		Yes	No		\ moun	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	Volunteers?			_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
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)?					
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					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c)(5), (or se		
	501(c)(6).	501(c)(5), « 		Yes	No
1	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5), (1		
1 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2		
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **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	501(c)(5), (1 2 3	Yes	No
1 2 3 Par	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **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".	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-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". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 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". Dues, assessments and similar amounts from members 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).	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 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". Dues, assessments and similar amounts from members 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). Current year	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-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". Dues, assessments and similar amounts from members 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). Current year Carryover from last year	501(c II-A, 1 2a 2b)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? 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". Dues, assessments and similar amounts from members 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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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	501(c II-A, 1 2a 2b 2c)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-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". Dues, assessments and similar amounts from members 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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3)(5), (1 2 3	Yes	No

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 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation DLN: 93493147008051

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.

Name of the organization

Employer identification number

AMI	RICAN JAIL ASSOCIATION		•	1045170
Da	rt I Organizations Maintaining Donor Ad	luicod Eundo or Othor Simila		1245173
-6	organizations Maintaining Donor Actions organization answered "Yes" to Form 99		ir Fullus	or Accounts. Complete if the
	organization anonorous roc to reminist	(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year		1	
	Aggregate contributions to (during year)	5,	588	
;	Aggregate grants from (during year)		248	
ı	Aggregate value at end of year		832	
;	Did the organization inform all donors and donor advi	·		lead
	funds are the organization's property, subject to the	organization's exclusive legal contro	?	✓ Yes
5	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		•	
25	t II Conservation Easements. Complete	of the organization answered "Ve	os" to Fori	
<u>.</u>	Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure) Preservation Preservation	of a certifie	d historic structure
	easement on the last day of the tax year			Held at the End of the Year
а	Total number of conservation easements		2a	neid at the End of the Year
a b	Total acreage restricted by conservation easements		2b	
_	Number of conservation easements on a certified his	toric structure included in (a)		
C _i			2c	
d	Number of conservation easements included in (c) a		2d	
3	Number of conservation easements modified, transfe	rred, released, extinguished, or term	inated by t	he organization during
	the taxable year 🛌			
	Number of states where property subject to conserva	tion easement is located ►		
;	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		handling o	f violations, and Yes No
•	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation ea	asements d	luring the year ►
	A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easer	ments durin	g the year ► \$
3	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements o	fsection	┌ Yes
)	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's fina		
ar	Complete if the organization answered '			her Similar 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 fin	for public exhibition, education or re	search in 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 items	public exhibition, education, or resea		·
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$
	(ii) Assets included in Form 990, Part X			► \$
2	If the organization received or held works of art, histofollowing amounts required to be reported under SFA	•	ets for finar	ncial gain, provide the

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

	Using the organization's accession and othe	r records, check ar	y of th	ne foll	owing t	hat are	e a signific	ant u	se of its collect	sets (co	
	items (check all that apply)		_	_							
а	Public exhibition		d	ļ	Loan	orexch	nange prog	rams			
b	Scholarly research		e	Γ	Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	aın hov	w the	/ furthe	r the o	rganızatıoı	ı's ex	cempt purpose ı	n	
5	During the year, did the organization solicit									_	_
	assets to be sold to raise funds rather than t		•							Yes	No
Par	Part IV, line 9, or reported an ar	· ·			_		answere	:a "Y	es" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					tions c	or other ass	ets		_ Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ing t	able		ſ		Am	ount	
С	Beginning balance						Ī	1c			
d	Additions during the year						ŀ	1d			
e	Distributions during the year						ļ	1e			
f	Ending balance						Ī	1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	ne 21?				L			Yes	□ No
	If "Yes," explain the arrangement in Part XI\								'		,
	rt V Endowment Funds. Complete		n ans	were	ed "Yes	s" to f	orm 990	. Par	t IV. line 10.		
		(a)Current Year		Prior `			o Years Back		Three Years Back	(e) Four Y	ears Back
1a	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as		•				_		
а	Board designated or quasi-endowment 🕨										
	Permanent endowment										
Ь	Permanent endowment -										
b c	Term endowment										
		ssion of the organiz	zation	that a	ıre held	and a	dmınıstere	d for	the	Yes	No
c	Term endowment Are there endowment funds not in the posse	_	ation	that a	ıre held	and a	dmınıstere	d for	the 3a(No
c	Term endowment Are there endowment funds not in the posse organization by					and a	dmınıstere 	d for		i)	No
с За	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations		 . d on S	iched	 ule R?			d for	3a(i)	No
c 3a b	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	ched	 ule R? nds	 			3a(i)	No
c 3a b	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	ched ent fu ee F	ule R? nds	 90, Pa	 		3a(i)	No
c 3a b	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	iched ent fu ee F	 ule R? nds			10.	3a(i) ii)	No No
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	iched ent fu ee F	ule R? nds orm 99		art X, line (b)Cost or or basis (other	10.	3a(3b (c) Accumulated	i) ii)	
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	iched ent fu ee F	ule R? nds orm 99		art X, line (b)Cost or o basis (other	10.	3a(3b (c) Accumulated	(d) Bo	ok value
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	iched ent fu ee F	ule R? nds orm 99		art X, line (b)Cost or o basis (other	10. other er)	3a(3a(3a(3a(3b(3b(3b(3b(3b(3b(3b(3b(3b(3b	(d) Bo	ook value
c 3a b 4 Par	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	iched ent fu ee F	ule R? nds orm 99		(b)Cost or obasis (other	10. other er)	3a(3a(3a(3a(3b(3b(3b(3b(3b(3b(3b(3b(3b(3b	(d) Bo	ook value
c 3a b 4 Par 1a b c d	Term endowment Are there endowment funds not in the posse organization by (i) unrelated organizations	ns listed as require	d on S	iched ent fu ee F	ule R? nds orm 99		(b)Cost or obasis (other 143	10. other er)	(c) Accumulated depreciation	(d) Bo	ook value 143,813 768,550

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)O ther (A) PAINEWEBBER	307,668	F
· ·	·	
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	307,668	
Part VIII Investments—Program Related. Se		
(a) Description of investment type	(b) Book value	(c) Method of valuation
(a) Bosonphon or involument cyps	(2) 2001. Failed	Cost or end-of-year market value
	·	
Part IX Other Assets. See Form 990, Part X, III (a) Descrip		(b) Book value
(4) 503011	peron	(B) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 3	15)	
Part X Other Liabilities. See Form 990, Part >		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	. ,	
CAPITAL LEASE OBLIGATION	6,383	
COMPENSATED ABSENCES	36,004	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	42,387	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,543,134
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,668,280
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-125,146
4	Net unrealized gains (losses) on investments	4	10,654
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	10,654
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-114,492
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	1,534,183
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,534,183
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b 8,951		
c	Add lines 4a and 4b	4c	8,951
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	1,543,134
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	1,665,767
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	1,665,767
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
с	Add lines 4a and 4b	4c	2,513
5			1,668,280

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

Part XIV Supplemental Information

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

Return Reference	Explanation
	THE ORGANIZATION QUALIFIES AS A TAX-EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND, THEREFORE HAS NO PROVISION FOR FEDERAL INCOME TAXES, EXCEPT AS DETERMINED FOR UNRELATED BUSINESS INCOME THE ORGANIZATION FOLLOWS THE FASB ACCOUNTING STANDARDS CODIFICATION, WHICH PROVIDES GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS AS OF DECEMBER 31, 2010, THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS GENERALLY, THE TAX YEARS BEFORE 2007 ARE NO LONGER SUBJECT TO EXAMINATION BY FEDERAL, STATE OR LOCAL TAXING AUTHORITIES
	REALIZED GAINS ON INVESTMENTS 6,438 INVESTMENT FEES NETTED WITH DIVIDEND INCOME ON FINANCIAL STATEMENT 2,513
	INVESTMENT FEES NETTED WITH DIVIDEND INCOME ON FINANCIAL STATEMENT 2,513
	PART X

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493147008051

OMB No 1545-0047

2010

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE 0

(Form 990 or 990-

Name of the organization AMERICAN JAIL ASSOCIATION 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.

Employer identification number

52-1245173

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		MEMBERS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		EACH YEAR ALL CURRENT MEMBERS ARE REQUESTED TO NOMINATE AND ELECT THE OFFICIALS FOR THE BOARD OF DIRECTORS OF THE AMERICAN JAIL ASSOCIATION (AJA) EACH OF THE CURRENT MEMBERS OF THE ASSOCIATION RECEIVES A BALLOT WITH WHICH TO VOTE FOR ALL OPEN POSITIONS ON THE AJA BOARD OF DIRECTORS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		THE MEMBERSHIP OF THE ASSOCIATION VOTES ON CHANGES TO THE BY-LAWS WHICH WOULD DIRECTLY AFFECT THE MEMBERS AN EXAMPLE BEING, WITH OUR DESIRE TO CREATE A NEW CATEGORY OF MEMBERSHIP "RETIREES" TO INCLUDE RETIRED JAIL PERSONNEL, WE PRESENTED THIS TO THE MEMBERS FOR A VOTE OF APPROVAL

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE EXECUTIVE DIRECTOR PRESENTS THE FORM 990 TO THE EXECUTIVE COMMITTEE OF THE BOARD AT THE ANNUAL CONFERENCE HELD EACH YEAR IN LATE APRIL OR EARLY MAY THEY REVIEW THE FINANCIAL STATEMENTS AS WELL, AND ARE FULLY INFORMED ON THE FINANCIAL STATUS OF THE ASSOCIATION THE TREASURER THEN PRESENTS THE FORM 990 TO THE FULL BOARD

Identifier	Return Reference	Explanation		
	FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMMITTE OF THE BOARD INTERVIEWS, REVIEWS, AND APPROVES THE EXECUTIVE DIRECTOR POSITION THE EXECUTIVE DIRECTOR INTERVIEWS, REVIEWS, AND APPROVES THE TOP MANAGEMENT POSITIONS OF THE ASSOCIATION IN ADDITION TO THE KEY EMPLOYEES THE MANAGING DIRECTOR OF THE APPROPRIATE DEPARTMENT INVERVIEWS, REVIEWS, AND APPROVES THE EMPLOYEES FOR EACH OF THEIR INDIVIDUAL DEPARTMENTS		

Identifie	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION ALREADY POSTS THE BY-LAWS, BOARD OF DIRECTORS, AND RESOLUTIONS ON OUR WEBSITE WE WILL MAKE AVAILABLE TO THE PUBLIC, UPON REQUEST, ANY FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICIES, OR GOVERNING DOCUMENTS

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 10,654

Identifier	Return Reference	Explanation
	FORM 990, PART XI, LINE 2C	THERE HAS BEEN NO CHANGE FROM THE PRIOR YEAR IN THE PROCESS USED BY THE ORGANIZATION REGARDING THE OVERSIGHT OF THE AUDIT AND THE SELECTION OF AN INDEPENDENT ACCOUNTANT

Additional Data

Software ID: Software Version:

EIN: 52-1245173

Name: AMERICAN JAIL ASSOCIATION

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

(Code) (Expenses \$	97,745	ıncludıng grants of \$) (Revenue \$)
ND PERSONNEL I NCLUDING CERTI HE CERTIFICATI	IN THE FIELD OF LOCAL CO IFIED JAIL MANAGER (JCM), ONS OBTAINED FROM THES ES THAT THESE INDIVIDUA	RRECTIONS CERTIFIED E PRESTIGI	THERE ARE THREE CERT JAIL OFFICER (CJO), ANI OUS PROGRAMS PROVIC	SSIONAL STANDARDS OF JAIL M TIFICATIONS PROGRAMS AVAIL D CERTIFIED CORRECTIONAL TF DE DOCUMENTED EVIDENCE TO TO POSSESS A HIGH COMPETEN	ABLE RAINER (CCT COLLEAGUE:
UBLIC POLICIES EVELOP TOOLS T RODUCTS TO INC	CE ASSISTANCE (BJA) JAIL (CIPP) AND CORRECTIONA TO ASSURE COMPETENT JA:	LEADERSHI L MANAGEM IL LEADERSI VE AGENCI	IENT INSTITUTE OF TEXA HIP THIS COLLABORATI) (Revenue \$ FORT WITH CENTER FOR INNOVAS (CMIT) THIS GRANTS PURPOSON IS TO DEVELOP USER-FRIEN DEVELOP THEIR INDIVIDUAL P	SE IS TO IDLY
SSOCIATION (AF ACA) ARE TO DEV	RRECTIONS WEBSITE GRAN	IT - AJA IN C FIVE PUBLIC ORPORATE:	C POLICIES (CIPP), AND A S ALL ASPECTS OF CORR) (Revenue \$ ERICAN PROBATION AND PAROL AMERICAN CORRECTIONAL ASS ECTIONAL OPPORTUNITIES FRO	OCIATION
	UTE OF CORRECTIONS (NIC	C) JAIL DIRE) (Revenue \$ L DIRECTORY GRANT WAS TO PI MATION ON JAILS IN THE UNIT	

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

DLN: 93493147008051

OMB No 1545-0172

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury nternal Revenue Service (99)	•	See separate instruction	s. 🟲 Attach	to your tax re		Sequence No 67				
Name(s) shown on return		Business	or activity to v	which this form	T	dentifying number				
AMERICAN JAIL ASSOCI	IATION	90 PAGE 10		52-1245173						
Part I Election	To Expense (Certain Property Un		179			.2 12 13 17 3			
	•	isted property, comple			plete Part I.					
1 Maximum amount See	the instructions	s for a higher limit for cert	aın busınesses			1	500,000			
2 Total cost of section 1	79 property plac	ced in service (see instru	ctions) .			2				
3 Threshold cost of sect	3 Threshold cost of section 179 property before reduction in limitation (see instructions)									
4 Reduction in limitation	Subtract line 3	from line 2 If zero or les	s enter-O-			4	2,000,000			
		line 4 from line 1 If zero	•	0- If married	filina					
separately, see instruc	•	mie i nom mie i i izero	or 1033, circor	o in married	9	5				
Separatery, See motivate			(b) Cost (b)	usiness use						
6 (a)	roperty	' ' '	ly)	ost						
							1			
							1			
7 Listed property Enter	the amount from	ı lıne 29		. 7			1			
8 Total elected cost of s	ection 179 prop	erty Add amounts in coli	umn (c). lines 6	and 7		8	1			
9 Tentative deduction E		•	(0),			9				
10 Carryover of disallower			rm 1562			10				
•		·		ac instructions)						
11 Business income limitation						11				
12 Section 179 expense		,		n line 11 •		12				
13 Carryover of disallowe	d deduction to 2	011 Add lines 9 and 10,	less line 12	. 13						
Note: Do not use Part										
		Allowance and Othe					ty) (See instructions)			
14 Special depreciation al tax year (see instruction		lified property (other thar	ı lısted property) placed in se	rvice during the	14				
15 Property subject to see	ction 168(f)(1) e	election				15				
16 Other depreciation (inc	cludina ACRS)					16	54,869			
		Do not include listed p	property.) (Se	ee instruction	ns.)		,			
			ction A							
17 MACRS deductions for	assets placed i	n service in tax years be	ginning before 2	2010		17				
18 If you are electing t	o group anv a	ssets placed in service	e durina the t	ax vear into	one or more					
general asset accou		•	_	•	▶□					
		Service During 20:	10 Tax Year	Using the		<u>·</u> recia	ation System			
		(c) Basis for					•			
(a) Classification of	(b) Month and	depreciation	(d) Recovery				(g)Depreciation			
property	year placed in	(business/investment	period	(e) Conventi	on (f) Metho	od	deduction			
	service	use only—see instructions)								
19a 3-year property		only see matractions,								
b 5-year property										
c 7 - year property										
d 10-year property										
e 15-year property										
f 20-year property										
g 25-year property	1		25 yrs	S/L						
h Residential rental			27 5 yrs	MM S/L						
property			27 5 yrs	MM S/L						
i Nonresidential real		39 yrs MM		S/L						
property				мм	S/L					
Sect io	n C—Assets Pla	ced in Service During 2010	D Tax Year Usin	g the Alternat		n Syst	em			
20a Class life			,	S/L						
b 12-year	1	12 yrs			S/L					
c 40-year			40 yrs	ММ	S/L					
Part IV Summar	y (see instruc	tions)								
21 Listed property Enter	amount from line	28				21				
22 Total. Add amounts fro		14 through 17, lines 19 urn Partnerships and So				22	54,869			
23 For assets shown abov	e and placed in	service during the curren	t year, enter the	e 🔲	<u> </u>	<u> </u>	,			
portion of the basis att	ributable to sec	tion 263A costs 🔒 .		23			I			

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

		24a, 24D, COIU															
Section A—Depre	ciation a	nd Other Info	ormat	tion (C	aution	: See 1	the i	nstr	uctio	ons f	or lir	nits f	or pa	sseng	<u>er au</u>	<u>tomot</u>	oiles.)
24a Do you have evider	nce to support	the business/inves	tment us	se claimed	d? ┌ Yes	Гио			24b	If "Ye	es," ıs	the ev	idence	written?	Γ _{Ye}	sГN	D
(a) Type of property (list vehicles first)	(b) Date placed in service	in investment Cost of		(e) Basis for depreciation (business/investment use only)			(f) Recov perio	ery Method/			(h) Depreciation/ deduction			(i) Elected section 179 cost			
25 Special depreciation allo	•		placed i	n service o	during the	tax year	and u	ised n	nore 1	than	25						
26 Property used more	,	•	siness	use							1 23						
	1	%		400								Τ			\top		
		%													_		
27 Property used 50%	I % orless in a		ess use	<u> </u>													
, ,		%							_	i/L -							
		%				S/L - S/L -							4				
28 Add amounts in co	l olumn (h) lir		77 Fnt	er here a	and on lu	ne 21 i	nage	1		28					╁		
29 Add amounts in co		=						•					29	I			
	<u> </u>				mation	on U	se o	of V	ehio	les							
Complete this section	n for vehicles	used by a sole	proprie	tor, part	tner, or o	ther "m	ore t	han	5%	owne	r," or	relate	d pers	son			
If you provided vehicles to	your employee	es, first answer the	question					n exc			mpleti						f)
30 Total business/in		•	g the	(a) Vehicle 1			(b) Vehicle 2		(c) Vehicle 3		3	(d) Vehicle 4		4 Vehicle		(f) 5 Vehicle 6	
year (do not ınclu	de commutir	ig miles) .	• [
31 Total commuting	miles driven	during the year	. [
32 Total other persor	nal(noncomn	nuting) miles dri	ven														
33 Total miles driver through 32	during the y	ear Add lines 3	30														
34 Was the vehicle a	vailable for n	· · · · · · · · · · · · · · · · · · ·	·	Yes	No	Yes	No	+	es .	T No	,	Yes	No	Yes	No	Yes	No
during off-duty ho			. †							+	_					H	1
35 Was the vehicle used primarily by a more than 5% owner or related person?			5%														
36 Is another vehicle		r personal use?															
Section	on C—Que	stions for Er	nploy	ers W	ho Pro	vide \	/ehi	cles	s fo	r Us	e by	The	ir En	nploy	ees		1
Answer these questio 5% owners or related			an exce	eption to	comple	tıng Se	ction	B fo	rvel	nicles	usec	l by e	mploy	ees wh	o are i	not mo	re tha
37 Do you maintain a employees?	written polic	cy statement tha	at proh	ıbıts all _I	personal •	use of	vehic •	cles,	ıncl •	udıng •	comi	mutin	g, by y •	our •	<u> </u>	es	No
38 Do you maintain a		•		•				,				J, ,	your			+	
employees? See t 39 Do you treat all us						ers, une	CLOT	5, 01	1 70	01 1110	Jie ov	viieis			\vdash	\dashv	
								•		•						\dashv	
40 Do you provide movehicles, and reta		· ·	. empid	· ·	• •	•		п уо •	urer		ees a		. ne us	e or the	'		
41 Do you meet the r			lified a	utomobi	le demor	nstratio	n use	e?(S	ee ii	nstru	ctions	s).					
Note: If your ansv	ver to 37, 38	, 39, 40, or 41 i	ıs "Yes	," do not	t comple	te Sect	ion B	for	the c	over	ed ve	hicles				-	
	rtization	, , , , , , , , , , , , , , , , , , ,		•	<u> </u>												
(a) Description of c		(b) Date amortization begins		(c A morti amo	ızable		C	(d) Code ectio		(e) A mortizat period o percenta		ation or	r A mor			(f) tization for iis year	
42 A mortization of co	osts that ben		2010 t	ax vear	(see ins	truction	ns)			1 50							
		, , _ , _ , _ , _ , _ , _ , _ , _	T	,		1	- /			1							
43 A mortization of co	sts that beg	an before your 2	2010 ta	ax year								43					1,575
44 Total. Add amoun	ts ın column	(f) See the inst	ruction	s for wh	ere to re	port						44					1,575