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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.

OMB No 1545-0047 2010

Open to Public Inspection

<u>A</u>	For the 2	2010 calendar year, or tax year beginning , and ending			
В	Check if app	l		D Employer i	dentification number
$\sqcup$	Address cha			E 4 1 C	24140
Ш	Name chang	· I	December	54-16 E Telephone r	
	Initial return		Room/suite C	• • •	39-0500
	Terminated	City or town, state or country, and ZIP + 4	<u> </u>	000 1	33 0300
$\Box$	Amended re			G Gross receipts\$	2,766,349
$\equiv$	Application (		114		
Ш	, фриосион ј	CM LO, MD	H(a) is this a g	roup return for affiliate	
		POKFULAM ROAD	l ' -	affiliates included?	☐ Yes ☐ No
		HONG KONG AE CHINA	IT "N	o," attach a list. (se	ee instructions)
	Tax-exem				_
_	Website		ar of formation 1	exemption number	
	Form of org	Corporation   Trust   X   Association   Other ▶   L Ye	ar or rormation 1	. <u>990   M S</u>	tate of legal domicile NJ
<u>-r</u>		riefly describe the organization's mission or most significant activities:			
	' "	THE MISSION OF ILTS IS TO RAISE THE STANDARD OF CARE FO	R LIVER	TRANSPLAN'	 T
Activities & Governance		PATIENTS AND TO PROMOTE EDUCATION AND RESEARCH BY DISSE			••
Ē		EXCHANGING INFORMATION.	••• • •		
Š	2 CI	heck this box  if the organization discontinued its operations or disposed of pore than 26	% of its net as	ets.	
<u>ග</u> නේ	3 N	umber of voting members of the governing body (Part VI, line 1a)		3 1	1
8	4 N	umber of independent voting members of the governing body (Part VI, line 🎁 🗼 🚊		4 1.	1
Ž	5 To	otal number of individuals employed in calendar year 2010 (Part V, line 2a)	2011	5 0	
Act	1		185	6 1	9
200		otal unrelated business revenue from Part VIII, column (C), line 12  OGDEN	· IIT ·	7a	
5	b N	et unrelated business taxable income from Form 990-T, line 34 L. OUDLIN	Prior Ye	7b	Current Year
≕\$	8.0	ontributions and grants (Part VIII, line 1h)		7,500	1,131,613
26 BI		maram control revenue (Part VIII, line 2a)		0,076	817,100
Revenue		evestment income (Part VIII, inite 2g)		7,154	30,188
. Æ		ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,163	1,150
	1	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,99	3,585	1,980,051
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1–3)	1	0,000	36,089
	14 B	enefits paid to or for members (Part IX, column (A), line 4)			
8	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			
penses	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)			······································
Expe		otal fundraising expenses (Part IX, column (D), line 25) ▶	1 71	2 071	1 500 000
ш	1 " "	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)		3,971 3,971	1,593,220
	1	otal expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		9,614	1,629,309 350,742
ъ:	19 R	evenue less expenses. Subtract line 18 from line 12	Beginning of Cu		End of Year
Net Assets or	20 T	otal assets (Part X, line 16)	1,98	9,324	2,384,099
Į.	된 21 T	otal liabilities (Part X, line 26)	9	4,842	66,884
2	된 22 N	let assets or fund balances. Subtract line 21 from line 20	1,89	4,482	2,317,215
	Part II	Signature Block			
Ų	Jnder pena	alties of perjury, I declare that I have examined this return, including accompanying schedules and statements, ct, and comple <b>x</b> . Declaration of preparer (other than officer) is based on all information of which preparer has a	and to the best of	of my knowledge a	nd belief, it is
	rue, correc	st, and complete. Declaration of preparer (other trial officer) is based on all information of which preparer has a		1	<del></del>
e:	an l	THE PERMIT	<del></del>	5/20 /	
	gn ere	Signature of officer reeman Trascuer		2/1	/
110	-16	Type or print name and title		<u> </u>	
_		Print/Type preparer's name Preparer's signature	Date	Check	if PTIN
Pa	id	Joseph S. Brunner Joseph S. Brunner			red P00454627
Pr	eparer		PAS		22-3345709
Us	e Only	100B CENTRE BOULEVARD			
_		Firm's address MARLTON, NJ 08053-4128		Phone no 8	<u>56-810-2160</u>
_		S discuss this return with the preparer shown above? (see instructions)	<u> </u>	<u></u>	Yes No
Fo	r Paperv	work Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2010

DAA	Findiam on the orkeness and Time of the Ti	Form <b>990</b> (2010
	enses \$ including grants of \$ ) (Revenue \$ 1,300,514	
	r program services. (Describe in Schedule O.)	
		· · · · · · · · · · · · · · · · · · ·
•		
		• •
•		• • • •
4c (Coo	e· ) (Expenses \$ including grants of \$ ) (Revenue \$	
• ••	······································	
•••		
• • • • • • • • • • • • • • • • • • • •		• • • • • •
4b (Cod	e: ) (Expenses \$ including grants of \$ ) (Revenue \$	
	· · · · · · · · · · · · · · · · · · ·	
		•
•		
MEDI	orin i wor noblowing, who have distributed in the control of the c	
	AND PROVIDE ONGOING EDUCATION IN THESE AREAS TO CAL PROFESSIONALS, RESEARCHERS AND EDUCATORS.	
FIEI	D OF LIVER TRANSPLANTATION, LIVER TRANSPLANT PATIENT	
FORU	M FOR THE EXCHANGE OF IDEAS AND ADVANCEMENTS IN THE	
4a (Cod MEET	e: )(Expenses \$ 1,300,514 including grants of \$ 36,089 ) (Revenue \$ ING, MEMBER JOURNALS AND INTERNET WEBSITE PROVIDE A	,
4- /0	1 200 514 2C 000 x =	
=	s, the total expenses, and revenue, if any, for each program service reported.	
	ribe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section (3)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to	
	s," describe these changes on Schedule O.	
servi	$\cdot$	Yes X No
	ne organization cease conducting, or make significant changes in how it conducts, any program	
•	Form 990 or 990-EZ? s," describe these new services on Schedule O.	Yes X No
	ne organization undertake any significant program services during the year which were not listed on the	□ v <sub></sub> ▽
		·
	ANGING INFORMATION.	
	MISSION OF ILTS IS TO RAISE THE STANDARD OF CARE FOR LIVER T ENTS AND TO PROMOTE EDUCATION AND RESEARCH BY DISSEMINATING	
	y describe the organization's mission.	
	Check if Schedule O contains a response to any question in this Part III	
Part III	2010) INTERNATIONAL LIVER TRANSPLANTATION 54-1624149  Statement of Program Service Accomplishments	Page 2

Form 990 (2010) INTERNATIONAL LIVER TRANSPLANTATION 54-1624149 **Checklist of Required Schedules** Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," X complete Schedule A .... .... Χ Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions) 2 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 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 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. Χ 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," X complete Schedule D. Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II X Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," X complete Schedule D, Part III 8 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," X complete Schedule D, Part IV Did the organization, directly or through a related organization, hold assets in term, permanent, or quasiendowments? If "Yes," complete Schedule D, Part V X 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 11a 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 Χ 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 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 Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e 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. ---12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D. Parts XI, XII, and XIII 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 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 Х 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV Х 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance Х to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV 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 Χ Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 Χ Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 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 20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)

	checklist of Required Schedules (Continued)		<del></del>	r —
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			l 🗸
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	+	X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States	22		X
22	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		+	1^
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			1
	organization's current and former officers, directors, trustees, key employees, and highest compensated	23		Х
24-	employees? If "Yes," complete Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	+-	^
24a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	$\overline{}$	<del>  ^</del>
	Did the organization invest any proceeds or tax-exempt bories beyond a temporary period exception:  Did the organization maintain an escrow account other than a refunding escrow at any time during the year	1271	<del>'</del>	<del> </del>
·	to defease any tax-exempt bonds?	240	.	ļ
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240		1
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		+	$\vdash$
LVa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	.	X
Ь	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		1	<del>                                     </del>
-	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?		1	
	If "Yes," complete Schedule L, Part I	25b	,	X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1		<del> </del>
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
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		X
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	288	•	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28t		X
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	280	:	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"		i	
	complete Schedule N, Part II	_32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			1
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		l	
	IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	<u> </u>	X
а	Did the organization receive any payment from or engage in any transaction with a	ŀ		
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2 Yes X	No	1	
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	<u> </u>	X
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	<u>'                                    </u>	X
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	<u> </u>	X

DAA

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response to any question in this Part V			1	المله
4.	Enter the number recorded in Rey 2 of Come 1006. Enter 0, if not employed	Г	-+	Yes	No
1a		0	l	ŀ	
b c			İ	ŀ	
·	reportable gaming (gambling) winnings to prize winners?	;	1c	х	
2a			<del>'</del>		
<b>_</b> u	Statements, filed for the calendar year ending with or within the year covered by this return  2a	0		1	
b	, , , , , , , , , , , , , , , , , , , ,	<del></del>	2b	- 1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3a			3a	1	Χ
b			3b		
4a		y			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial		- 1		
	account)?		4a		X
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 Account	nts			ĺ
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
С	, 3	}	5c		<b></b>
6a	, , , , , , , , , , , , , , , , , , ,				v
	organization solicit any contributions that were not tax deductible?	-	6a	$\longrightarrow$	_X_
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).	-	- 00	-	
a	<b></b>				ļ
<b>.</b>	and services provided to the payor?		7a		į
b			7b		
С					
	required to file Form 8282?	<u> </u>	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			. 1	
е	, , , , , , , , , , , , , , , , , , , ,	,	7e		<u> </u>
f		-	7f		<b></b>
g	1 1 3,	·	.7g		<b></b>
h	<b>3</b>	: a Form 1098-C?	7h		
8	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?	į	8	-	
9	Sponsoring organizations maintaining donor advised funds.		-		<del>                                     </del>
a			9a	,	
b		Ī	9b		
10	Section 501(c)(7) organizations. Enter				
а	Lat I				İ
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			į l	
11	Section 501(c)(12) organizations. Enter				İ
а	Gross income from members or shareholders 11a				ŀ
b	· ' '				
40-	against amounts due or received from them )		40-		
12a	1 1	-	12a		<del> </del>
b 42					·
13	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	ŀ	13a		<del>                                     </del>
а	Note. See the instructions for additional information the organization must report on Schedule O	ŀ	.04		$\vdash$
b					
-	the organization is licensed to issue qualified health plans				1
С					<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Χ
<u>b</u>	o If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		<u> </u>
DAA	A		Form	1 990	(2010)

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Form 990 (2010)	INTERNATIONAL	LIVER	TRANSPLANTATION	54-1624149

Page 7

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

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 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

X Check this box if neither the org	•	y rel	ated	orga	nıza	tions	cor	npensated any current offic	er, director, or trustee	
(A) Name and Title	(B) Average	(C) Position (check all that apply)						(D) Reportable	(E) Reportable	(F) Estimated
·	hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
(1) DR. MICHAEL A. F PAST PRESIDENT	AMSAY 2.00	Х						0	0	0
	ID PHD	├^		<u> </u>		-		0	<u> </u>	<u> </u>
DIRECTOR	2.00	X						0	0	0
(3) DIDIER SAMUEL MI	PHD	1			i	_			<u> </u>	
DIRECTOR	2.00	X			İ			0	0	0
(4) JACK LAKE MD								<u> </u>	<u> </u>	
EDITOR	2.00	X						0	0	0
(5) ELIZABETH POMFRE										
DIRECTOR	2.00	X		<u> </u>	<u> </u>			0	0	0
	DMAN MD	١								
DIRECTOR	2.00	X		_	<u> </u>	<u> </u>		0	0	0
(7) PATRIZIA BURRA N		X							_	^
DIRECTOR  (8) JOHN R. KLINCK N	2.00	1-	-	-	├─	-		0	0	0
DIRECTOR	2.00	X	1					0	0	0
(9) DR C M LO	2.00	1	-		-			0		<u> </u>
PRESIDENT	2.00			Х				O	0	0
(10) RICHARD FREEMAN,							-	<u> </u>		
SEC TREAS	2.00			Х	]			0	0	0
(11) JUAN C. GARCIA-V		İS	ME		PΗ	D				
PRESIDENT-ELECT	2.00	L		Χ	L			0	0	0
(12)										
(13)					-					
(14)		-								
(15)		-	_	-	_		-			
\· <del>·</del>										
(16)										
DAA	<u> </u>		<u> </u>	Ь	l	<u> </u>	<u> </u>		·	Form <b>990</b> (2010)

Form 990 (2010)

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

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

-	rt Y		ent of Reve		<u>,,,</u>					r age o
					-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated camp	aigns	1a						
E I		Membership due	-	1b	-					
gE.		Fundraising ever	• •	1c						
ar a		Related organiza	•	1d						
S,E		Government grants (co		1e						
ris i		All other contributions,	•			-				
at a		and similar amounts no		1f	1,	131,613			•	
	а	Noncash contributions	ıncluded ın lines 1a-	-		,				
Contributions, gifts, grants and other similar amounts	_	Total. Add lines		·			1,131,613			
Program Service Revenue						Busn. Code				
Ç.	2a	MEETING F	REVENUE				646,335	646,335		
2	b	MEMBERSHI					109,665	109,665		
ic	С		SUBSCRIPTION	NS			61,100	61,100		
Sen	d	•	•				-			
Ē	е		•							
ogu	f	All other program		nue						
4	g	Total. Add lines	2a-2f		•	. ▶	817,100			
	3					est,				
		and other simila				•	26,318			26,318
	4	Income from inv	estment of tax	c-exemp	ot bond p	roceeds 🕨	-			
	5	Royalties .	<u></u>							<del> </del>
		ļ_	(ı) Real		(II) F	Personal				
	6a	Gross Rents								
	Ь	Less rental exps		-						
		Rental inc or (loss)								†
	d 7a	Net rental incom	ie or (loss) (i) Secuntie:	<u>.                                    </u>	(11)	Other				
		sales of assets		,168	(11)	Outer				
		other than inventory  Less cost or other	1301	, 100		· <del></del> -				
	D	basis & sales exps	786	, 298						
	c	Gain or (loss)		,870						
		Net gain or (loss				<b>&gt;</b>	3,870	3,870		
_		Gross income from	•							
Pne		(not including \$	•	ŀ						
9		of contributions re	ported on line 1c	j.						Į.
Ř		See Part IV, line 1	8	. a						
Other Revenu	ь	Less: direct exp	enses	ь						<b> </b>
U		Net income or (	•	7	events	<u> ▶</u>				
	9a	Gross income from		es						
		See Part IV, line 1		а						
		Less: direct exp		þ						
	ı	Net income or (		r	tivities .	<u> ▶</u>			·····	
	10a	Gross sales of i								
		returns and allo		a b			1			
	1	Less: cost of go Net income or (	•		venton.		†			<b>†</b>
	۲		laneous Revenu		verilory	Busn. Code				
	11a		•••			1	1,150	1,150		
	b						1,130	2,200		
	C	• • • • • • • • • • • • • • • • • • • •								
	d									
	е						1,150			
	12	Total revenue.				<b>.</b>	1,980,051			0 26,318
										Form 990 (2010)

**Statement of Functional Expenses** Part IX

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).

	<u> </u>	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b,	(A) Total expenses	Program service	Management and general expenses	(D) Fundraising expenses
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and	İ		1	
_	organizations in the U.S. See Part IV, line 21		<del></del>		
2	Grants and other assistance to individuals in	3,000	3,000	1	
_	the U.S. See Part IV, line 22	3,000	3,000	<del></del>	
3	Grants and other assistance to governments,			1	
	organizations, and individuals outside the	22 000	22 000		
_	U S See Part IV, lines 15 and 16	33,089	33,089		***************************************
4	Benefits paid to or for members				<u></u>
5	Compensation of current officers, directors,				
_	trustees, and key employees		<del></del>		
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			····	<del></del>
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				***
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	288,861	141,631	147,230	
b	Legal	1,603		1,603	<del>-</del>
С	Accounting	7,000		7,000	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	16,138		16,138	····
g	Other				
12	Advertising and promotion	18,777	8,212	10,565	
13	Office expenses	23,882	19,823	4,059	
14	Information technology	31,919		31,919	
15	Royalties				
16	Occupancy				
17	Travel	167,658	139,837	27,821	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	890,785	822,804	67,981	_
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	8,699	5,207	3,492	
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If	1			
	line 24f amount exceeds 10% of line 25, column	<b>!</b>		1	
	(A) amount, list line 24f expenses on Schedule O)				
а	SUBSCRIPTION EXPENSE	56,355	56,355		
b	AWARDS/PLAQUES	49,742	49,742		
С	BANK/CREDIT CARD CHARGES	17,035	11,235	5,800	
d	POSTAGE	5,794	3,663	2,131	· · ·
е	CURRENCY LOSS	4,990	4,990		
f	All other expenses	3,982	926	3,056	
25	Total functional expenses. Add lines 1 through 24f	1,629,309	1,300,514	328,795	<del></del>
26				,	
	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				

**Balance Sheet** (A) (B) Beginning of year End of year 33,094 36,870 Cash-non-interest bearing 973,757 2 1,307,715 2 Savings and temporary cash investments Pledges and grants receivable, net 78,612 Accounts receivable, net .... Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 7 Notes and loans receivable, net Inventories for sale or use <u>100,659</u> 87,214 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 10c b Less: accumulated depreciation 803,202 875,627 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 13 13 Investments—program-related. See Part IV, line 11 14 14 Intangible assets 15 2,384,099 989,324 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 22,867 17 Accounts payable and accrued expenses .... 17 18 18 Grants payable  $69,7\overline{15}$ 44,017 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 25-66,884 94,842 Total liabilities. Add lines 17 through 25 Balances Organizations that follow SFAS 117, check here ▶ X and complete lines 27 through 29, and lines 33 and 34. 1,894,482 27 2,317,215 27 Unrestricted net assets 28 Temporanly restricted net assets ...... Fund 29 Permanently restricted net assets .... ... Organizations that do not follow SFAS 117, check here ▶ ☐ and ō complete lines 30 through 34. Capital stock or trust principal, or current funds .... Assets 31 Paid-in or capital surplus, or land, building, or equipment fund 31 32 Retained earnings, endowment, accumulated income, or other funds 32 2,317,215 , 894, 482 33 1,989,324 2,384,099 Total liabilities and net assets/fund balances ...

Form	990 (2010) INTERNATIONAL LIVER TRANSPLANTATION 54-1624149			Pa	ge <b>12</b>
	art XI Reconciliation of Net Assets	•		,	
	Check if Schedule O contains a response to any question in this Part XI			•	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,98		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,62		
3	Revenue less expenses. Subtract line 2 from line 1	3	3.5	50,	<u>742</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,89		
5	Other changes in net assets or fund balances (explain in Schedule O)	5		71,	<u>991</u>
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	2,31	17,	<u>215</u>
Pa	irt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		<u>-</u>		
				Yes	No
1	Accounting method used to prepare the Form 990:		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				ŧ
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	<u> </u>
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.		Į Į		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were				[
	issued on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				l
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	<u></u>	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2010)

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

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

INTERNATIONAL LIVER TRANSPLANTATION SOCIETY

Employer identification number 54-1624149

P	art i	Reaso	on for Pub	olic Charity	Status (All	organization	s must c	complet	e this	part.)	See ir	structi	ons		
he	orga	nization is not	a private foul	ndation becaus	e it is: (For line:	s 1 through 11,	check only	one box.	)						
1	$\bigcap$		•		ociation of chur	_									
2	П				A)(ii). (Attach S										
3	П				ce organization		ection 170(	b)(1)(A)(i	ii).						
4	Ħ	•	•	•	d in conjunction		-		-	(1)(A)(ii	i). Ente	r the hos	pital's name	).	
•		city, and state	•											•	
5		•		 for the benefit o	of a college or u	niversity owned	d or operate	ed by a go	ovemme	ntal uni	t descni	ed in	•		•
•	لـــا	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)													
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).													
7	H	A rederal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public													
•	ш	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)													
8	$\Box$						4 (( \								
9	X	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  X An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross													
9		-		-											
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses													
			-		0, 1975. See se					,	usii iese	.03			
40	$\Box$	• -	-		exclusively to te										
10	<del> - </del>				exclusively to te	•	•			to carn	out the				
11	Щ				ed organization										
					he type of supp							ection.			
				<del></del>	_				Г			hor			
_		a Type I b Type II c Type III—Functionally integrated d Type III—Other													
e	Ш	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)													
				agers and oure	si utan one or n	iore publicity su	pported or	jailizauoi	13 06301	bed iii s	occuoii .	003(a)( 1)	,		
		or section 509		d a writtan dete	ermination from	the IDS that it	is a Tyna I	Type II (	or Type I	III eunna	ortina				
f		organization,			annitiation from	tile in S tilat it	is a Type I,	Type II, C	or type	iii suppe	July				
_		•			tion accepted a	ny gift or contr	 bution from	 anv of th			•	•			
g				as ule Organiza	uon accepted a	ing girt or contai	Duuon non	i arry or u	10						
		following per		, or indirectly of	ontrols, either a	long or togethe	r with nere	ne deecr	ibed in (	bae (ii				Yes	No
		., .	-	•		<del>-</del>	i willi perso	nis descr	ibed iii (	ii) ai iu			[11g(i)	+	110
		` '	•	• -	supported orga bed in (ı) above			• • • • • • • • • • • • • • • • • • • •		•	•••		<u>- 119()</u> 11g(ii		
		• •			described in (i)	• •			• •		• • • • •		11g(ii		_
_		• •					• • • • • •	•• ••			• •		[1380	'/1	<u> </u>
h	N Norm				the supported o	rganization(s). If organization	(iv) le the	organization	(v) Did v	ou notify	(iv)	s the	(vii) An	nount of	
(I)		e of supported ganization	(11	) EIN	1 ' ' ''	l on lines 1–9	1	sted in your		nzation in	organizat	on in col		port	
	·	•			above or	IRC section	governing	document?	∞l (i)	of your port?		zed in the			
					(see ins	tructions))	Yes	No	Yes	No	Yes	No			
(A)							1	<del>,,</del>		<del> </del>		<del>''''</del>			
(~)					ł		1	ł		i	ł	ľ			
(B)					<del>                                     </del>	-	+			-	<del>                                     </del>	1			
(0)									<u> </u>	ŀ		1 1			
(C)				<del></del>		<del></del>	+		1						
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(D)				<del></del>			<del> </del>		<del></del>		+	<del>                                     </del>			
U															
(E)		-	_	···				<u> </u>		1					
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·-,											<u> </u>				

Schedule A (Form 990 or 990-EZ) 2010 INTERNATIONAL LIVER TRANSPLANTATION 54-1624149

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.)

Sec	tion A. Public Support							
Caler	ndar year (or fiscal year beginning in) ▶	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 201	0	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include 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							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20°	10	(f) Total
7	Amounts from line 4							
8	Gross income from interest, 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					<u> </u>		
12	Gross receipts from related activities, etc.	(see instructions)		• • • • • • • • • • • • • • • • • • • •			12	
13	First five years. If the Form 990 is for the	organization's first	t, second, third, fo	urth, or fifth tax yea	ar as a section 50°	I(c)(3)		
	organization, check this box and stop her							<b>_</b> _
Sec	tion C. Computation of Public S	upport Percen	tage		<del></del>			
14	Public support percentage for 2010 (line 6	i, column (f) divide	d by line 11, colun	nn (f))			14	%
15	Public support percentage from 2009 Sch	edule A, Part II, lin	e 14				15	<u>%</u>
16a	33 1/3% support test—2010. If the organ	zation did not che	ck the box on line	13, and line 14 is 3	33 1/3% or more, o	check this		
	box and stop here. The organization qual							▶ 📙
b	33 1/3% support test—2009. If the organ							
	check this box and stop here. The organize							▶ 📙
17a	10%-facts-and-circumstances test—201							
	10% or more, and if the organization mee				· · · · · · · · · · · · · · · · · · ·			
	Part IV how the organization meets the "fa organization	acts-and-circumsta		ganization qualifie	s as a publicly sup	ported		
b	10%-facts-and-circumstances test—200				6a, 16b, or 17a, an	d line		
	15 is 10% or more, and if the organization	meets the "facts-a	and-circumstance:	s" test, check this t	box and stop here	•		
	Explain in Part IV how the organization me supported organization	eets the "facts-and	-circumstances" to	est. The organization	on qualifies as a p	ublicly		▶ □
18	Private foundation. If the organization did	d not check a box of	on line 13, 16a, 16	b, 17a, or 17b. che	 eck this box and se	 ee		L
	instructions					••••		•

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.)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	1,013,248	870,775	1,026,032	1,197,500	1,131,613	5,239,168
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	611,110	534,029	692,795	853,239	818,250	3,509,423
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge			44.0			
6	Total. Add lines 1 through 5	1,624,358	1,404,804	1,718,827	2,050,739	1,949,863	8,748,591
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						<del></del>
8	Public support (Subtract line 7c from line 6.)						8,748,591
Sec	tion B. Total Support	t					0,140,331
	ndar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	1,624,358	1,404,804	1,718,827	2,050,739	1,949,863	8,748,591
10a		32,418	53,106	50,586	35,854	26,318	198,282
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	32,418	53,106	50,586	35,854	26,318	198,282
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .					0	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	<u>-</u>		L			
13	Total support. (Add lines 9, 10c, 11, and 12.)	1,656,776	1,457,910	1,769,413	2,086,593	1,976,181	8,946,873
14	First five years. If the Form 990 is for the organization, check this box and stop her	•	, second, third, for	urth, or fifth tax yea	ar as a section 501	(c)(3)	▶ [
Sec	ction C. Computation of Public S			<u> </u>	·		
15	Public support percentage for 2010 (line 8	3, column (f) divided	d by line 13, colum	ın (f))		15	97.78%
<u>16</u>	Public support percentage from 2009 Sch					16	97.45%
	ction D. Computation of Investme					14-1	- 0/
17	Investment income percentage for 2010 (					17	2 %
18	Investment income percentage from 2009 33 1/3% support tests—2010. If the orga					<del></del>	2 %
19a	17 is not more than 33 1/3%, check this b	ox and stop here.	The organization	qualifies as a publi	cly supported orga	nızation	<b>&gt;</b> 🗓
b	33 1/3% support tests—2009. If the orga						. ┌
	line 18 is not more than 33 1/3%, check the						· · · · · · • • • • • • • • • • • • • •
20	Private foundation. If the organization di	a not check a box o	on line 14, 19a, or	TAD' CUECK THIS PO	x and see instruct	IONS	P

4.

Schedule A (Fo	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	Page 4
	· ·	
••• •••		
		•••
		•
		•••
		••
- ••		•

#### 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.

OMB No 1545-0047 2010

Open to Public Inspection

Employer identification number Name of the organization INTERNATIONAL LIVER TRANSPLANTATION 54-1624149 SOCIETY Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part ! organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements ...... **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06, and not on a histonic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ . . . . Does the organization have a written policy regarding the periodic monitoring, inspection, handling of | Yes | No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? ...... In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X ...

Description of investment

(a) Cost or other basis (other)

(b) Cost or other basis (other)

(c) Accumulated depreciation

1a Land

b Buildings

c Leasehold improvements

d Equipment

e Other

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

Schedule D (Form 990) 2010

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

<u>sche</u>	dule D (Form 990) 2010 INTERNATIONAL LIVER TRANSPLANT			<u>, Page 4</u>
Pa	Reconciliation of Change in Net Assets from Form 990 to	<b>Audited Financial State</b>	ements	,
1	Total revenue (Form 990, Part VIII, column (A), line 12)	•	1	1,980,051
2	Total expenses (Form 990, Part IX, column (A), line 25)		2	1,629,309
3	Excess or (deficit) for the year Subtract line 2 from line 1		3	350,742
4	Net unrealized gains (losses) on investments		4	71 <b>,</b> 991
5	Donated services and use of facilities		5	
6	Investment expenses .		6	
7	Prior period adjustments	·	7	
8	Other (Describe in Part XIV.)		8	
9	Total adjustments (net). Add lines 4 through 8		9	71,991
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	422,733
P	irt XII Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per I	Return	
1	Total revenue, gains, and other support per audited financial statements .	•	1	2,052,042
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1		
а	Net unrealized gains on investments	2a 71,99	1	
b	Donated services and use of facilities	2b	4 1	
С	Recoveries of prior year grants	2c	4 1	
d	Other (Describe in Part XIV.)	2d	4	
е	Add lines 2a through 2d		2e	71,991
3	Subtract line 2e from line 1		3	1,980,051
4	Amounts 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	4	
b	Other (Describe in Part XIV.)	4b	4 1	
C	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,980,051
P	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe	r Retur	<u>n</u>
1	Total expenses and losses per audited financial statements		11	1,629,309
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	Donated services and use of facilities	2a	-	
b		2b	-	
C	Other losses	2c	-	
d		2d	- 1	
е	Add lines 2a through 2d		2e	1 (00 000
3	Subtract line 2e from line 1		3	1,629,309
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-	
b	Other (Describe in Part XIV.)	4b	┥. ╽	
	Add lines 4a and 4b	••••	4c	1 (20 200
******	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	1,629,309
	art XIV Supplemental Information	and and 4. Dod N/ Base 45	and 05:	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 3, 6, and 4b; and Root XIII, lines 3d and Ab; and Root XI			
	V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d an	iu 40. Also complete this part	ro broviae	
any	additional information.			
• •				
			••	
• •				

Schedule D (Form 990) 2010 INTERNATIONAL LIVER TRANSPLANTATION 54-1624149	Page <b>5</b>
Part XIV Supplemental Information (continued)	
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	•••
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#### SCHEDULE F (Form 990)

**Statement of Activities Outside the United States** 

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SOCIETY

INTERNATIONAL LIVER TRANSPLANTATION

Employer identification number 54-1624149

General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990. Part IV. line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the X Yes No grants or assistance? ... ...... For grantmakers. Describe in Part V the organization's procedures for monitoring the use of grant funds outside the Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is (f) Total (a) Region a program service, expenditures for offices in the employees, agents, region (by type) (e g, region and independent fundraising, program describe specific type of and investments service(s) in region contractors services, investments. in region grants to recipients in region located in the region) CHINA 294,100 MEETING MEETING (1) (2) (3) (4) (5) (6) (7) (8) (10)(11) (12)(13)(14)(15)(16)(17)294,100 3a Sub-total **b** Total from continuation sheets to Part I c Totals (add 294,100 Page 2

Schedule F (Form 990) 2010 INTERNATIONAL LIVER TRANSPLANTATION 54-1624149

(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, (h) Description of non-cash assistance Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 Part II can be duplicated if additional space is needed. (g) Amount of non-cash assistance (f) Manner of cash disbursement CHECK 20,000 (e) Amount of cash grant CONFERENCE SUPPORT (d) Purpose of (c) Region ZURICH (b) IRS code section and EIN (if applicable) (a) Name of organization Part II (11) (£13) (8) (10) (22) 2 8 3 (2) (6) 8 6

Enter total number of other organizations or entities

140

**£** 

(₹

Schedule F (Form 990) 2010

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter က ~

Schedule F (Form 990) 2010 INTERNATIONAL LIVER TRANSPLANTATION 54-1624149

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed	if additional	space is needed					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) SCHOLORSHIP	ASIA	1	10,000	CHECK			
(2)		-					
(3)							
(4)		-					
(5)							
(6)							
(5)							
(6)							
(6)							
(5)	:						
(10)							
(13)							
(12)							
(14)							
(15)							
(16)							
(21)							
(18)							
						Schedule	Schedule F (Form 990) 2010

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Pa	art 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, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
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, Annual Return to Report Transactions with Foreign Trusts and		
	Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
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)	. Yes	X No
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)	. Yes	X No
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)	. Yes	X No
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)	Yes	X No

Part,V	Supplemental Information  Complete this part to provide the information required in Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
•••	

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

#### Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047 **2010** 

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization INTERNATIONAL LIVER TRANSPLANTATION SOCIETY	Employer identification number 54-1624149
Form 990, Part VI, Line 3 - Management Delegated	
ASSOCIATION HEADQUARTERS IS THE MANAGEMENT COMPANY THAT	HAS BEEN CONTRACTED
_WITH ILTS	
Form 990, Part VI, Line 6 - Classes of Members or Stockh	olders
MEMBERS	
Form 990, Part VI, Line 7a - Election of Members and The	ir Rights
YES MEMBERS ELECT BOARD OF DIRECTORS	
Form 990, Part VI, Line 11b - Organization's Process to	Review Form 990
EXECUTIVE COMMITTE REVIEWS 990 PRIOR TO MAILING	
Form 990. Part VI. Line 12c - Enforcement of Conflicts P	olicy
APPROPRIATE CORRECTIVE ACTION, UP TO AND INCLUDING REMOV	<u> </u>
FROM BOARD IF NECESSARY.	
Form 990, Part VI, Line 19 - Governing Documents Disclos	ure Explanation
No documents available to the public	
Form 990, Part XI, Line 5 - Other Changes in Net Assets	Explanation
UNREALIZED GAIN ON INVESTMENTS.	

54 <b>-</b> 1624149	F	ederal State	ements			
•	Taxa	able Interest on	Investmen	<u>ts</u>		
Descript			<del></del>			
Descript	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US _Obs (\$ or %)
	\$ 3,245		14			
Total	\$ 3,245		11			
	Taxal	ole Dividends fro	om Securit	<u>ies</u>	•	
Descript	ion					
	Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs (\$ or %)
	\$ 23,073		14			
Total	\$ 23,073					
				·		

<del></del>	<u>'</u>	
		Fund Raising S
		S 2, 541
Statements	Form 990, Part IX, Line 24f - All Other Expenses	Program Service \$ 926
Federal Sta	90, Part IX, Line 24f	Total 2, 541 1, 441 3, 982 3, 982
	Form 9	່ທີ່ ທີ່
54-1624149		Description LECTURESHIP INTIATIVE TELEPHONE Total

# International Liver Transplantation Society Bylaws

#### Article I GENERAL

The name of the organization shall be: International Liver Transplantation Society ("the Society").

### Article II OFFICES

The Society shall have such offices, within or without the Commonwealth of Virginia, as shall be determined from time to time by the Council.

# Article III MISSION AND GOALS

Consistent with the Society's purposes, as set forth in the Articles of Incorporation, the mission of the Society is to promote and disseminate multidisciplinary scientific advances in liver transplantation worldwide. The Society has therefore established the following goals in furtherance of its purposes and mission:

- To promote research and other scientific inquiry into questions that relate to the practice of liver transplantation;
- To promote teaching excellence in liver transplantation;
- To advocate for issues, programs or projects that impact favorably on liver transplantation research, teaching, or program development; and
- To collaborate with existing public and private organizations to promote and encourage education and research in the science and clinical practice of liver transplantation internationally.

# Article IV MEMBERSHIP

A. There shall be three classes of membership in the Society: Regular, Allied Health Professional and Trainee.

B. The eligibility requirements for the various classes of membership in the Society are as follows:

**Regular:** A physician or scientist engaged in the field of liver transplantation or especially interested in liver transplantation shall be eligible to become a Regular Member of the Society. Regular members in good standing have the right to vote and to serve on the Council.

**Allied Health Professional Member:** Any individual who is actively engaged in the science or clinical practice of liver transplantation, but who does not qualify for either Regular or Trainee membership, shall be eligible to become an Allied health Professional Member of the Society. Allied Health Professional Members in good standing have the right to vote but may not serve on the Council.

Approved June, 2010

<u>Trainee Member</u>: A physician, scientist, or health care professional interested in the field of liver transplantation who is in full time training shall be eligible to become a Trainee Member of the Society. No person shall continue as a Trainee Member upon completion or discontinuance of the training entitling such person to such membership. A letter documenting the applicant's trainee status must accompany the membership application and/or renewal. One may hold this class of membership for a maximum of 3 years. Trainee Members in good standing have the right to vote but may not serve on the Council.

- C. The Council shall have the power to expel any member of the Society for failure to continue to meet membership eligibility requirements, failure to pay dues or other financial obligations owing to the Society, violation of these Bylaws or any policies or procedures duly adopted by the Council, or any conduct which, in the judgment of the Council, is contrary to the best interests of the Society. Such a member may be expelled only after he/she has had notice in writing of the reason for expulsion and, except with respect to expulsion due to nonpayment of dues or other financial obligations owing to the Society, an opportunity to appear in person or by counsel in a hearing by the Council to be held thereon. Upon such expulsion, all his/her rights and privileges as a member of the Society shall be forfeited and terminated.
- D. An annual meeting of the membership of the Society shall be held at a time and location determined by the Council, generally during the Society's annual Congress. At the annual membership meeting, such business as may properly come before the meeting, as determined by the Council, shall be transacted. At any meetings of the members, properly called and announced as required herein, the number of members appearing for said meeting shall constitute the quorum necessary for transaction of the business of the meeting.

### Article V DUES AND AUDIT

Dues amounts shall be determined annually, according to class of membership, by the Council. Dues payments are non-refundable.

An audit of the Society's financial status shall be performed yearly and the results thereof shall be presented by the Treasurer to the membership during the annual membership meeting.

The Society's fiscal year shall be January 1 - December 31.

#### Article VI AMENDMENTS

These Bylaws may be amended, repealed or altered in whole or in part by a vote of the Council at any regular meeting or any special meeting called for that purpose, provided that a copy of the proposed amendment shall be included with the meeting notice.

### Article VII RULES AND REGULATIONS

Rules and Regulations consistent with the Society's Articles of Incorporation and these Bylaws may be developed and adopted by the Council to clarify and interpret the policy and operation of the Society and shall be contained in a document accessible to the entire membership.

To the extent not inconsistent with applicable law, the Articles of Incorporation, these Bylaws and the Rules and Regulations adopted from time to time by the Council, the meetings and operation of the Society shall be governed by the latest edition of Robert's Rules of Order, Newly Revised.

## ARTICLE VIII OFFICERS AND COUNCIL

The elected Officers of the Society shall be the President, President-Elect, Immediate Past President, Secretary and Treasurer. Officer terms commence at the conclusion of the annual membership meeting following the officer's election. Sitting members of the Council and any person who has served on the Council during the five years immediately preceding the Nominating Committee's presentation to the Council of a slate of officer candidates shall be eligible to serve as an officer of the Society.

**The Council:** The Council shall consist of the President, President-Elect, Immediate Past President, Secretary, Treasurer and seven Council members at-large. Council members may not vote by proxy. All members of the Council must be members of the Society in good standing.

The Council shall meet at least two times a year: once during the winter and during the Annual Congress. The presence of a majority of the voting members of the Council will constitute a quorum for the transaction of business.

If <u>any</u> office (other than that of Immediate Past President) becomes vacant for any reason (and there is no officer to move up automatically to the vacant position), then a successor to fill the vacant office will be appointed by vote of the existing Council members.

If the position of Immediate Past President becomes vacant, then it shall remain unfilled until the current President advances to such position.

**President:** The President is responsible to pursue the goals of the Society, represents the interests of the Society towards other societies and the general public, and presides at Council and membership meetings. The President serves a one year term, following which he or she succeeds to the office of Immediate Past President. The President may not succeed himself or herself.

**President-Elect:** The President-Elect shall be elected by the Council at the first Council meeting of each calendar year. The President-Elect shall serve a term of one year, following

which he or she automatically succeeds to the office of President. The President-Elect shall perform the duties of President in case of unavailability of the President.

**Secretary:** The Secretary shall be elected by the Council to serve a three year term. The Secretary shall perform the usual duties of a Secretary, be responsible for maintaining the records of the Society and act under the supervision of the Council which shall define his/her various duties.

**Treasurer:** The Treasurer, who must reside in North American, shall be elected by the Council to serve a three-year term. The Treasurer shall perform the usual duties of a Treasurer, be responsible for overseeing the funds of the Society, and act under supervision of the Council which shall define his/her various duties.

**Immediate Past President:** The Immediate Past-President shall preside at Council and membership meetings in the absence of both the President and the President-Elect. The Immediate Past President shall serve as chair of the Nominating Committee.

**Council Members-At-Large:** Seven Council members at-large shall be elected by the Council to serve staggered terms of four years commencing at the conclusion of the annual membership meeting following the Council member's election. Under ordinary circumstances, Council members at-large may not serve two consecutive terms. If for any reason a Council member at-large is unable to complete his/her term of office, a successor will be appointed by the President with the concurrence of the Council to serve to serve the remainder of the original Council member's term of office.

**Nomination and Election of Officers:** Prior to the Council meeting at which officers are to be elected, the Nominating Committee shall develop a slate consisting of one candidate for each officer position to be filled. The Nominating Committee slate shall be presented to the Council at the meeting at which officers are to be elected. Additional nominations of eligible candidates may be made by members of the Council. The Council shall determine the precise manner in which the election shall be held, and the candidate receiving the greatest number of votes shall be elected to each office to be filled.

**Nomination and Election of Council Members-At-Large:** Prior to the Council meeting at which Council members-at-large are to be elected, the Nominating Committee shall solicit nominations from the membership of the Society and develop a slate consisting of two candidates for each Council member-at-large position to be filled. The Nominating Committee slate shall be presented to the Council at the meeting at which Council members-at-large are to be elected. Additional nominations may not be made. The Council shall determine the precise manner in which the election shall be held, and the candidate receiving the greatest number of votes shall be elected to each Council member-at-large position to be filled

# Article IX COMMITTEES

Committees may be created only by these Bylaws or by resolution of the Council to function in a manner provided for herein or in the aforesaid resolution. Each committee shall have no less than three members, all of whom must be members of the Society in good standing. Committee chairpersons shall be appointed by the President, with the approval of the Council. Committee members shall be appointed by the President, with the approval of the Council, unless the right to appoint shall be delegated by the Council to the committee chair.

A committee member, including the chairperson, shall, except as otherwise provided in these Bylaws, serve for three years and may be re-appointed for an additional three years, but may not serve for more than six consecutive years.

The Executive Committee, which shall be composed of the President, President-Elect, Secretary, Treasurer and Immediate Past President, shall be authorized to act on behalf of the Council and the Society between meetings of the Council. Actions taken by the Executive Committee shall be reported promptly to the Council.

The Nominating Committee shall identify, research, cultivate, and recruit persons willing to serve on the Council and shall develop slates of candidates for officer positions and Council member-at-large positions. The members of the Committee shall be the President, President-Elect, Secretary, Treasurer, Immediate Past President, one additional senior member of the Council appointed by the President and the chair of the Vanguard Committee.

# Article X NON-DISCRIMINATION

There shall be no discrimination on the basis of color, race, religion, creed, national origin, age, gender, sexual orientation, marital status or disability in decisions concerning eligibility for membership, committee assignments or office or concerning any other business or activity of the Society.

# Article XI CONFLICTS OF INTEREST

Conflicts of interest shall be disclosed and resolved pursuant to the Society's Conflict of Interest policy.

Revised—July 2001 Revised-July, 2005 Revised and approved by membership June 18, 2010