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Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4847(a)(1) of the Internal Revenus Code (except black lung benefit trust or private foundation)

Department of the Treasury

032001 02-82-11

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

	-					
A	For t	he 2010 calendar year, or tax year beginning APR 1, 2010 and ending	MAI	31, 20	[1	
B	Check applica	ble:	D	Employer ider	tificat	ion number
		THE HALO TRUST (USA), INC				
Ē	Nert			52-	-215	8152
Ē		Number and street (or P.O. box if mail is not delivered to street address) Room/	suile E	Talephone riun		
Ī			- ا جست			31-1266
ř	- And	City or town, state or country, and ZIP + 4	-	Groen receipts \$	4 4 5	20,733,706.
F						
_	Itlan pend	F Name and address of principal officer: GUY WILLOUGHBY	"	(a) is this e grou for affiliates?	•	Yes X No
		1730 RHODE ISLAND AVE NW SUITE 403, WASHIN	···			
-	Total	17/30 RHODE ISINGED AVE NV BOITE 403, WASHIT AVENUE X 501(c)(1) or				
+		ite: WWW. HALOUSA. ORG	527			. (see instructions)
				(c) Group exam		
			Acar of K	manor 199	/ M 5	ate of legal domicile; MD
ÿΕ	7			WITH O	TOTAL C	AT Mirror
. 8	1		LANI	DWINES OF	II. C	OF THE
		GROUND, NOW		· · · · · · · · · · · · · · · · · · ·		
Governmence	2	Check this box > I if the organization discontinued its operations or disposed of			t asse l	18.
, <u> </u>	8	Number of voting members of the governing body (Part VI, line 1a)			3	<u> </u>
٠ ﴿		Number of Independent voting members of the governing body (Part VI, line 1b)			4	5
2	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)			5	4
Activities	6	Total number of volunteers (estimate if necessary)			8	0
· §	.7 a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.
<u>`</u>	<u> </u>	Net unrelated business taxable income from Form 990-T, line 34			76	0.
				Prior Year		Current Year
7 	8	Contributions and grants (Part VIII, line 1h)		550,74	7.	20,731,899.
- 5	9	Program service revenue (Part VIII, line 2g)).	0.
∵ }	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)	L	4,130	5.	1,807.
F	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)),	0.
, . 	12	Total revenue - add fines 8 through 11 (must equal Part VIII, column (A), fine 12)	20	654,88	1.	20,733,706.
	13	Grants and similar amounts paid (Pait IX, column (A), lines 1-3)		().	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		`	1.	0.
2	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	10	816,864		11,513,166.
ĕ	16a	Professional fundralating fees (Part IX, column (A), line 11e) Total fundralating expenses (Part IX, column (D), line 25) 1 108, 763.).[0.
8	Ь	Total fundralsing expenses (Part IX, column (D), line 25), 11 108, 763.				
Ð	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	5	371,86	<u> </u>	9,598,241.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		188.72).	21,111,407,
	1	Revenue less expenses. Subtract line 18 from line 12	-	466,15		-377,701.
58	1		Ведіня	ing of Current Ye		End of Year
and	20	Total essete (Part X, line 16)		,620,984		4,328,924.
	1121	Total flabilities (Part X. line 26)		501,18	5.	589,272,
墅	22	Not assets or fund balances. Subtract line 21 from line 20		,119,79		3,739,652.
	[4]	Signature Block				
Und	er penz	ities of perjury, I declare that I have examined this return, including accompanying schedules and a	tatements	and to the best o	f my kr	rowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer has	any knowledge.		
				07	119	2011
Sig	n	Signature of officer		Data	1	
Her		GUY WILLOUGHEY PRESIDENT				
	_	Type or print name and title				
		Print/Type preparer's name Pregational a Name	Date	Chick		PTIN
Pale	3	STANLEY J. MORIN, CPA STANLEY J. MORIN, C	2 07	/15/11	pbyed project	
	erer	Frm's name STANLEY J MORIN & ASSOCIATES	(Firm's EIN		
-	Only	Firm's address		THUI S CIM		
	2.7.1	· · · · · · · · · · · · · · · · · · ·		Dhore se	(05	/3)984-2600
Me	the I	S discuss this return with the property shown shows? (see Instructions)		Phone no.	73/	7 Yes 11

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2010)

P۵	m 990 (2010) THE HALO TRUST (USA), INC	52-2158152	Page 2
	art III Statement of Program Service Accomplishments		
_	* Check if Schedule O contains a response to any question in this Part III		
1	Briefly describe the organization's mission		
`	GETTING LANDMINES OUT OF THE GROUND, NOW		
2	Did the organization undertake any significant program services during the year which were not listed on		
	the prior Form 990 or 990-EZ?	Yes [X No
	If "Yes," describe these new services on Schedule O		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes [X No
	If "Yes," describe these changes on Schedule O		
4	Describe the exempt purpose achievements for each of the organization's three largest program services by ex	penses	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of		
	allocations to others, the total expenses, and revenue, if any, for each program service reported		
4a		evenue \$	
	THE HALO TRUST (USA), INC. IS A NON-POLITICAL, NON-RELI		T
	SPECIALIZES IN THE REMOVAL OF THE HAZARDOUS DEBRIS OF W		
	THE HALO TRUST (USA) EMPLOYS APPROXIMATELY 2,007 STAFF		
	ANGOLA, CAMBODIA, ABKHAZIA, GEORGIA, KOSOVO, MOZAMBIQUE		11,
	KARABAKH, SOMALILAND, COLOMBIA, AND SRI LANKA.	, 1421001440	
	THE DIE LINE OF THE PROPERTY O		
4b	(Code \/Evpanson C \particles \formatter \fo		-
40	(Code) (Expenses \$ including grants of \$) (R	evenue \$	
			
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4c	(Code:) (Expenses \$	evenue \$	
		evenue \$	
	Other program services (Describe in Schedule O)	evenue \$	
d		evenue \$	

Form 990 (2010) THE HALO TRUST (USA), INC
Part IV Checklist of Required Schedules

	•		Yes	No
.1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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			v
4		3		<u> </u>
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			X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_4		
3	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	<u> </u>		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
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		_X_
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		<u>X</u>
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, line 10? If "Yes," complete Schedule D,		v	
_	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	<u>X</u>	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		-21
Ū	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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	<u> </u>	
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	<u> </u>	
O	Was the organization included in consolidated, independent audited financial statements for the tax year?	406		v
13	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	12b 13		X
is I4a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	- 10		
_	and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	X	
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 United States? If "Yes," complete Schedule F, Parts II and IV	<u>1</u> 5		X
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 United States? If "Yes," complete Schedule F, Parts III and IV	16		X
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	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			,.
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	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		X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that	20a		X
U	operate one or more hospitals must attach audited financial statements (see instructions)	20b		
	The state of the s		990	2010)

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Form 990 (2010) THE HALO TRUST (USA), INC 52-2158152 Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the 21 United States on Part IX, column (A), line 1? If "Yes," complete Schedule I. Parts I and II 21 X Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, 22 column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J X 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X Schedule K. If "No", go to line 25 24a 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 X 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete X Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified 26 X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete X Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV X 28b 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 X 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X Did the organization liquidate, terminate, or dissolve and cease operations? 31 If "Yes," complete Schedule N, Part I Х 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Х 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 X 34 X is any related organization a controlled entity within the meaning of section 512(b)(13)? 35 a 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 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?

Form 990 (2010)

X

X

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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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

If "Yes," complete Schedule R, Part V, line 2

Note. All Form 990 filers are required to complete Schedule O

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Form 990 (2010) THE HALO TRUST (USA), INC

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			X
			Yes	No
łа	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b				ĺ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			ĺ
	(gambling) winnings to prize winners?	1c		ĺ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X	
b	If "Yes," enter the name of the foreign country ► SEE SCHEDULE O	•		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		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	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		<u>X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u>X</u>
b	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	i		
	to file Form 8282?	7c		<u>X</u>
	If "Yes," indicate the number of Forms 8282 filed during the year			
_	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u>X</u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 1		X
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		<u> </u>
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?	8		
9	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?			_
a	Did the organization make a distribution to a donor, donor advisor, or related person?	9a		
10	Section 501(c)(7) organizations. Enter	9b		
	Initiation fees and capital contributions included on Part VIII, line 12			i
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter			-
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against			l
	amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b		-	
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	L !		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			
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			
С	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
		Form	990	(2010)

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . 1a 6			_
b	Enter the number of voting members included in line 1a, above, who are independent 1b 5] .		
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the			
	governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		_	
	by the following	_		
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		_X_
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates,	l		
	and branches to ensure their operations are consistent with those of the organization?	10b		
	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			4
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b		X
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe		;	
	In Schedule O how this is done	12c		X
13	Does the organization have a written whistleblower policy?	13	v	X
14	Does the organization have a written document retention and destruction policy?	14	X	<u> </u>
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? The organization's CEO, Executive Director, or top management official	450		х
	Other officers or key employees of the organization	15a 15b	Х	_
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	130		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		-	
u	taxable entity during the year?	16a		x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation	.00	-	
_	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		
Sec	tion C. Disclosure		\ <u></u>	
17	List the states with which a copy of this Form 990 is required to be filed AZ, CA, CT, IL, MA, MD, MN, NJ, NY	, PA	, WA	, VA
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available			
	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion 🕨	·	
	<u>ORGANIZATION - 202-331-1266</u>			
	1730 RHODE ISLAND AVE SUITE 403, WASHINGTON, DC 20036			

032008 12-21-10

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 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

hours per week (describe hours for related organizations in Schedule O) GUY WILLOUGHBY PRESIDENT CINDY MCCAIN BOARD MEMBER 1.00 X Description of the part of the properties of the part of the properties of the part of the properties of the part of the par	(A)	(B)	Average Position						(D)	(E)	(F)
Week (describe decided organizations in Schedule O) Wilder W	Name and Title								•		
Composition			—	neck	(all 1	that	app	ly)	·		
GUY WILLOUGHBY PRESIDENT 18.00 X X 0. 0. 0. 0 CINDY MCCAIN BOARD MEMBER 1.00 X 0. 0. 0. 0 MARILYN BURKE BOARD MEMBER 1.00 X 0. 0. 0. 0 MIA HAMWEY BOARD MEMBER 1.00 X 0. 0. 0. 0 MIA HAMWEY BOARD MEMBER 1.00 X 0. 0. 0. 0 MIA HAMPEY BOARD MEMBER 1.00 X 0. 0. 0. 0 MIA HAMPEY BOARD MEMBER 1.00 X 0. 0. 0. 0 MIX HAMPEY BOARD MEMBER 1.00 X 0. 0. 0. 0 MIX HAMPER MIX HAMPEY BOARD MEMBER 1.00 X 0. 0. 0. 0 MIX HAMPER MIX HAMPE		i	ector	İ	ĺ				the		
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SUY WILLOUGHBY 18.00 X X			Indivic	Institu	Office	Keyer	Highe	Forme			organizations
CINDY MCCAIN BOARD MEMBER 1.00 X 0. 0. 0. 0 0 0 0 0 0 0	GUY WILLOUGHBY								_	_	
### BOARD MEMBER	PRESIDENT	18.00	X	_	X	<u> </u>			0.	0.	0
MARILYN BURKE BOARD MEMBER 1.00 X 0.0.0 MIA HAMWEY BOARD MEMBER 1.00 X 0.0.0 0.0.0 0.00	CINDY MCCAIN					}				_	_
BOARD MEMBER	BOARD MEMBER	1.00	X.		_			ļ	0.	0.	0
MIA HAMWEY BOARD MEMBER 1.00 X 0.00 DEBORAH NETLAND BOARD MEMBER 1.00 X 0.00 NICK NOBBS BOARD MEMBER 1.00 X 0.00 NEIL FRASER BECRETARY & TREASURER 18.00 X ANDREW LYONS VICE PRESIDENT VICE PRESIDENT AUGUST CHESKO	MARILYN BURKE	1 22								•	
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DEBORAH NETLAND BOARD MEMBER 1.00 X 0. 0. 0 NICK NOBBS BOARD MEMBER 1.00 X 0. 0. 0 NEIL FRASER SECRETARY & TREASURER 18.00 X 1.00 X 0. 0. 0 ANDREW LYONS VICE PRESIDENT 40.00 X X 98,000. 0. 0		1 00									
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BOARD MEMBER		1.00	<u> </u> ♣	-		-	<u> </u>		U •	<u> </u>	U
NEIL FRASER SECRETARY & TREASURER 18.00 X 0. 0. 0 ANDREW LYONS VICE PRESIDENT KURT CHESKO		1 00	v						0	0	0
SECRETARY & TREASURER		1.00	^		 			<u></u>	U •	<u> </u>	
ANDREW LYONS VICE PRESIDENT KURT CHESKO ANDREW LYONS X X 98,000. 0. 0		18 00			v				_	0	0
VICE PRESIDENT 40.00 X X 98,000. 0. 0		10.00		-	Λ				0.	<u> </u>	
KURT CHESKO		40.00	į		x	x			98 000	0.	0
		70.00	<u> </u>			-			30,000.		
		40.00			x	x			95.630.	0.	0
	VICE FARDIDANI								3370301		

032007 12-21-10

Form 990 (2010)

\$100,000 in compensation from the organization

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

•	•			-	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
ts s	1 a	Federated campaigns	1a	35,718.				
ts, grants amounts	b	Membership dues	1b					
ls, g	c	: Fundraising events	1c					1
<u>a</u> gi	d	Related organizations	1d			Ī		<u> </u> -
Contributions, and other simi	е	y ,	• —	18,771,014.		,		
er S	f	All other contributions, gifts, grai	nts, and					
들		similar amounts not included abo	ove 1f	1925167.				
50	g	Noncash contributions included in line	s 1a-1f \$	<u>32,518</u> .	1.			
OB	h	Total. Add lines 1a-1f		<u> </u>	20_731_899.			
				Business Code				
ice	2 a							
e S	b							
n S	С							-
e a	d							
Program Service Revenue	е			-				ļ
-	f	All other program service reve	enue					
-	9					•		<u> </u>
ļ	3	Investment income (including	i dividends, inter	est, and	1 005			1 005
ĺ		other similar amounts)			1,807.			1,807.
	4	Income from investment of ta	x-exempt bond p	proceeds			-,	
	5	Royalties	(A Dool	(3 Damana)				
	٥.	Cross Borts	(i) Real	(ii) Personal			-	
Į	6 a	Gross Rents Less. rental expenses		 		.		_
	b	5 4 4 6 3		 	-	-		
ļ	c d		L			İ		1
- 1		Gross amount from sales of	(i) Securities	(ii) Other				-
	, a	assets other than inventory	(i) Securities	(ii) Other	-		-	
	h	Less cost or other basis						-
	~	and sales expenses						ļ
	c	Gain or (loss)		 				-
		Net gain or (loss)	-		~	1		
Other Revenue		Gross income from fundraisin			-		-	-
ĕ		contributions reported on line		1				1
٣		Part IV, line 18	a a					1
Ē	h	Less direct expenses	b				•	1
0		Net income or (loss) from fund	_			Ī		
ŀ		Gross income from gaming ac	-					
		Part IV, line 19	а					-
- 1	b	Less direct expenses	b				-	
-		Net income or (loss) from garr	_	—	i			1
		Gross sales of inventory, less	-		7.2F 2 -			
1		and allowances	а					
ĺ	b	Less: cost of goods sold	. b					
L	С	Net income or (loss) from sale	s of inventory	>				
		Miscellaneous Revenu	ie	Business Code				
	11 a							
	b					_		
	С							
		All other revenue		1				
	d	MI OUTER TEVELIDE	•					
	_	Total. Add lines 11a-11d	•	>				

Form 990 (2010) THE HALO TRUST (USA), INC Part IX Statement of Functional Expenses

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

Ďo	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C)	, (D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	rotal expenses	expenses	Managèment and general expenses	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 US				
	See Part IV, lines 15 and 16				
4	Benefits paid to or for members			•	
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	11,513,166.	10,810,997.	645,503.	<u>56,666.</u>
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				
þ	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	87,142.		83,537.	3,605.
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Оссирапсу	615,919.	507,549.	108,370.	
17	Travel	555,075.	353,715.	177,279.	24,081.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		 		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	F (F7		F 657	
22	Depreciation, depletion, and amortization	5,657.		5,657.	
23	Insurance				-
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	VEHICLE EXPENSES	3,655,757.	3,655,757.		· · · · · · · · · · · · · · · · · · ·
ь	DEMINING EQUIPMENT	2,176,445.	2,176,445.		
c	FIELD AND STAFF EXPENSE	1,189,963.	1,189,963.		
d	FREIGHT	429,892.	429,892.		
e	TELEPHONE & COMMUNICATI	387,306.	218,419.	145,088.	23,799.
f	All other expenses	495,085.	458,185.	36,288.	612.
25	Total functional expenses Add lines 1 through 24f	21,111,407.		1,201,722.	108,763.
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				
_					

Pa	rt X	Balance Sheet					
	<u> </u>				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			4,019,231.	1	3,322,310.
	2	Savings and temporary cash investments		Ĺ		2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			583,116.	4	991,061.
	5	Receivables from current and former officers, di	rectors, trustees, k	ey	-		
		employees, and highest compensated employee	es Complete Part	11	· .		
		of Schedule L	•			5	
	6	Receivables from other disqualified persons (as	defined under sec	tion			,
		4958(f)(1)), persons described in section 4958(c		I]	-
		employers and sponsoring organizations of sect	_		,		
		employees' beneficiary organizations (see instru	•	6			
ţ	7	Notes and loans receivable, net	out of the	ļ ļ		7	
Assets	8	Inventories for sale or use		Ī		8	
⋖	9	Prepaid expenses and deferred charges		ľ		9	
	l	Land, buildings, and equipment cost or other	1	ŀ		3	
	iva	basis Complete Part VI of Schedule D	10a	20,659.	•		ē
	<u>ا</u>	Less accumulated depreciation		10,441.	8,168.	10c	10,218.
	11	Investments - publicly traded securities	10, 221.	0,100.	11	10,210.	
	12	Investments - other securities See Part IV, line	11			12	
	13		ŀ		13		
	_	Investments - program-related See Part IV, line Intangible assets	ŀ				
	14	_	}	10,469.	14	5,335.	
	15	Other assets See Part IV, line 11	al line 24)	}	4,620,984.	15	4,328,924.
	16	Total assets. Add lines 1 through 15 (must equ.	ai iirie 34)		92,382.	16 17	180,859.
	17 18	Accounts payable and accrued expenses Grants payable		ŀ	32,302.	18	100,039.
		Deferred revenue		ŀ		1	······································
	19			ŀ		19	
	20	Tax-exempt bond liabilities	Dort IV of Cabodula	. n		20	
ties	21	Escrow or custodial account liability. Complete is				21	
Liabilities	22	Payables to current and former officers, director highest compensated employees, and disqualifi	_			-,-	-
Lia		of Schedule L	ed persons Comp	lete Fait II	,	l f	
	00		stand thursd marting	-		22	
	23 24	Secured mortgages and notes payable to unrelated Unsecured notes and loans payable to unrelated		F	·	1	
	2 4 25	Other liabilities Complete Part X of Schedule D	u triiru parties	-	408,803.	24 25	408,413.
	26	Total liabilities. Add lines 17 through 25		ŀ	501,185.	26	589,272.
	20	Organizations that follow SFAS 117, check he	Y and	complete	301,103.	20	303,272.
ر س		lines 27 through 29, and lines 33 and 34.		Complete		-	-
ĕ	27	Unrestricted net assets		}	2,771,822.	27	2,793,836.
<u>a</u>	28	Temporarily restricted net assets		ħ	1,347,977.		945,816.
ğ	29	Permanently restricted net assets		ŀ	1/34//3///	29	743,010.
Fund Balances	2.3	Organizations that do not follow SFAS 117, cl	hack here	and		23	
Ī,		complete lines 30 through 34.	HOOK HEIG F	and			
S S	30	Capital stock or trust principal, or current funds			30		
Se	30 31	Paid-in or capital surplus, or land, building, or ed	uunment fund	<u> </u>		31	
Net Assets or	32	Retained earnings, endowment, accumulated in		de	·	32	-
Ž	33	Total net assets or fund balances	Come, or other full	-	4,119,799.	33	3,739,652.
	34	Total liabilities and net assets/fund balances		ļ	4,620,984.	34	4,328,924.
	5	TOTAL HADRICES AND HEL 455E(5/10110 DAIA110E5		1	- ,040,304.	1 54	3,340,344

Form **990** (2010)

	n 990 (2010) THE HALO TRUST (USA), INC	52-	215815	52	Pag	e 12
Pa	Int XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI					\mathbf{X}
•1	Total revenue (must equal Part VIII, column (A), line 12)	1	20,7	133	,70	06.
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,1	11	, 4 (<u>7</u> .
3	Revenue less expenses Subtract line 2 from line 1	3	-3	177	,70	01.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,1	19	, 79	99.
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-2	, 44	46.
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	3,7	139	, 65	52.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					X
				Y.	es	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2	a		X	
b	Were the organization's financial statements audited by an independent accountant?		2	ь	K	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		İ		
	review, or compilation of its financial statements and selection of an independent accountant?		2	c 2	K	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	edule O		4		,
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	a no b	-		-	
	separate basis, consolidated basis, or both				-	- ;
	X Separate basis Consolidated basis Both consolidated and separate basis				`	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	igle Auc	dit			
	Act and OMB Circular A-133?		_ 3	a 2	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	lit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		з	<u>ь 2</u>	K	
			Fo	rm 9 9	90 (2	2010)

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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

Open to Public Inspection

Name of the organization Employer identification number THE HALO TRUST (USA) 52-2158152 Part I Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 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) A federal, 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 described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h **b** Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (vi) is the organization in col. (i) organized in the US.? (iii) Type of (iv) Is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col. (i) listed in your organization in col. organization support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes No Yes Yes No LHA For Paperwork Reduction Act Notice, see the Instructions for

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Form 990 or 990-EZ.

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Schedule A (Form 990 or 990-EZ) 2010

(Form 990 or 990-EZ) 2010 THE HALO TRUST (USA), INC 52-2158152 Page 2 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)

Se	ction 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		•				
	include any "unusual grants.")	12,392,900.	12,433,240.	17,949,997	20,650,747.	20,731,899.	84.158.783.
2	Tax revenues levied for the organ-						
	ization'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	12,392,900.	12,433,240,	17,949,997.	20,650,747.	20,731,899.	84 158 783
5	The portion of total contributions						01,130,703.
	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,		1			- '	
	column (f)			1	_	-	
6	Public support. Subtract line 5 from line 4			_			84 158 783
	ction B. Total Support						04,130,703.
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
	Amounts from line 4	12,392,900.	12,433,240.	17,949,997.	20,650,747.	20,731,899,	84,158,783.
8	Gross income from interest.		12,100,110		20,000,747.	20,732,055.	04,150,705.
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	106,167.	113,542.	31,445.	4,136.	1,807.	257,097.
9	Net income from unrelated business			<u> </u>		2/00/1	20110211
	activities, whether or not the					1	
	business is regularly carried on		ļ			1	
10	Other income Do not include gain		1			~	
	or loss from the sale of capital	'					
	assets (Explain in Part IV)					-	
11	Total support. Add lines 7 through 10						84,415,880.
	Gross receipts from related activities,	etc (see instruction	ons)			12	54,415,000,
	First five years. If the Form 990 is for	-		I, fourth, or fifth ta	x year as a section		
	organization, check this box and stop	here			•		▶□
Sec	tion C. Computation of Publ	c Support Per	rcentage				
14	Public support percentage for 2010 (I	ine 6, column (f) di	vided by line 11, co	olumn (f))		14	99.70 %
15	Public support percentage from 2009	Schedule A, Part	II, line 14			15	99.60 %
16a	33 1/3% support test - 2010. If the or	rganization did not	check the box on	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly supp	orted organization				►X
þ	33 1/3% support test - 2009. If the or	rganization did not	check a box on lin	ie 13 or 16a, and I	ine 15 is 33 1/3%	or more, check this	s box
	and stop here. The organization quali	fies as a publicly s	supported organiza	tion			
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac-	ts-and-circumstani	ces" test, check th	is box and stop h	ere. Explain in Pai	t IV how the organ	zation
	meets the "facts-and-circumstances"	_			_		ightharpoons
b	b 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or						0% or
	more, and if the organization meets th	e "facts-and-circui	mstances" test, ch	eck this box and s	stop here. Explain	in Part IV how the	
	organization meets the "facts-and-circ			· ·			▶□
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	<u>, 16b, 17a, or 17b</u>	, check this box a	nd see instructions	<u>, ▶□</u>
					Sche	dule A (Form 990	or 990-EZ) 2010

Schedule A (Form 990 or 990-EZ) 2010 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked th	e box on line 9 of Pa	rt I or if the organization failed to qualify under Part II	If the organization fails to

Section A. Public Support	ow, please com	piete Part II)	 .	 		
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and	(a) 2000	(0) 2007	(6) 2000	(0) 2003	(e) 2010	(I) TOTAL
membership fees received (Do not						
include any "unusual grants ")						
· · · · · · · · · · · · · · · · · · ·						
2 Gross receipts from admissions, merchandise sold or services per-						
formed, or facilities furnished in						!
any activity that is related to the						
organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to			1			
or expended on its behalf						
5 The value of services or facilities					- 1.	
furnished by a governmental unit to						
the organization without charge						
· · · · · · · · · · · · · · · · · · ·						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons						
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		ļ				
c Add lines 7a and 7b	·	ļ .				
8 Public support (Subtract line 7c from line 6)		-	1 -			
Section B. Total Support		·				
alendar year (or fiscal year beginning in) ➤ 📘	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6						
10a Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
· · · · · · · · · · · · · · · · · · ·						
c Add lines 10a and 10b 1 Net income from unrelated business			<u> </u>			
activities not included in line 10b,						
whether or not the business is		ļ.				
regularly carried on		· · · · · · · · · · · · · · · · · · ·				
Other income Do not include gain or loss from the sale of capital				<u> </u>		
assets (Explain in Part IV)						
3 Total support (Add lines 9, 10c, 11, and 12)						_
4 First five years. If the Form 990 is for the	ne organization'	s first, second, thir	d, fourth, or fifth t	ax year as a sectio	n 501(c)(3) organiz	ation,
check this box and stop here						▶□
section C. Computation of Public	Support Pe	rcentage				•
5 Public support percentage for 2010 (lin	e 8, column (f) d	livided by line 13, o	column (f))		15	9/
6 Public support percentage from 2009 S					16	9
ection D. Computation of Invest					139.1	
7 Investment income percentage for 201			ne 13. column (fl)	-	17	9
8 Investment income percentage from 20	•	•	10 10, 00141111 (1))	•	18	9
	•	•	on line 14 and line	a 15 io mara than 7		
9a 33 1/3% support tests - 2010. If the o						i / IS NOT
more than 33 1/3%, check this box and		-		- · · ·		▶∟_
b 33 1/3% support tests - 2009. If the o						_
line 18 is not more than 33 1/3%, check		• =			•	>
O Private foundation. If the organization	did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins	structions	<u>▶</u>

032023 12-21-10

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.

OMB No 1545-0047 Open to Public Inspection

► Attach to Form 990. ► See separate instructions.

Nan	ne of the organization THE HALO TRUST (US	A), INC		E	Employer identification	
Pa	rt I Organizations Maintaining Donor Advise		ther Similar Fund	s or Acc	Complete of	LJZ the
	organization answered "Yes" to Form 990, Part IV, lin		the onimal rune	is of Acc	Complete II	rue
	organization answered tes to Form 990, Fait IV, IIII		advised funds	/b) (Funds and other acco	unto
_	Takal minch as ak and after as	(2) DONO	advised fullds	(0) 1	Turius ariu otirei accor	<u> </u>
1	Total number at end of year				· · · · · · · · · · · · · · · · · · ·	
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year			<u> </u>		
5	Did the organization inform all donors and donor advisors in			ised funds	r	
	are the organization's property, subject to the organization's	J			└─ Yes	L∐ No
6	Did the organization inform all grantees, donors, and donor a	_	-	•		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, o	or for any other purpose	e conferring		
	impermissible private benefit?				Yes	No.
Pa	rt II Conservation Easements. Complete if the org	ganization answei	ed "Yes" to Form 990,	Part IV, line	e 7	
1	Purpose(s) of conservation easements held by the organization		apply)			
	Preservation of land for public use (e.g., recreation or e	education)	Preservation of an h	istorically in	nportant land area	
	Protection of natural habitat		Preservation of a ce	rtified histo	nc structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation	contribution in the form	n of a conse	ervation easement on	the last
	day of the tax year					
					Held at the End of the	ne Tax Year
а	Total number of conservation easements			2	a	
b	Total acreage restricted by conservation easements			2	b	
С	Number of conservation easements on a certified historic str	ucture included ir	n (a)	2	С	
d	Number of conservation easements included in (c) acquired	after 8/17/06, and	I not on a historic struc	ture		
	listed in the National Register			2	d	
3	Number of conservation easements modified, transferred, re-	eased, extinguish	ed, or terminated by th	ne organizat	tion during the tax	
	year ▶					
4	Number of states where property subject to conservation ear	sement is located				
5	Does the organization have a written policy regarding the per	nodic monitoring,	inspection, handling of	f		
	violations, and enforcement of the conservation easements if	t holds?			Yes	☐ No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing co	nservation easements	during the y	year 🕨	
7	Amount of expenses incurred in monitoring, inspecting, and	-			► \$	_
8	Does each conservation easement reported on line 2(d) above	e satisfy the requ	irements of section 17	0(h)(4)(B)(i)	_	
	and section 170(h)(4)(B)(ii)?				Yes	L No
9	In Part XIV, describe how the organization reports conservati				·	
	include, if applicable, the text of the footnote to the organization	:ion's financial sta	tements that describes	s the organi	ization's accounting for	or
D	conservation easements t III Organizations Maintaining Collections or	4 Ant Hintonia	al Transcriptor and	O:	-: A	 .
rai	Complete if the organization answered "Yes" to Form			Juier Sin	nılar Assets.	
10	If the organization elected, as permitted under SFAS 116 (AS					f
ıa	historical treasures, or other similar assets held for public ext					
	the text of the footnote to its financial statements that descri		i, or research in fulfiller	ance or put	olic service, provide, ir	i Part XIV,
_			in its reviewing statemen	-4		
ט	If the organization elected, as permitted under SFAS 116 (AS					
	treasures, or other similar assets held for public exhibition, ed	Jucation, or resea	iron in turtherance of pr	ublic servic	e, provide the followin	g amounts
	relating to these items:				•	
	(i) Revenues included in Form 990, Part VIII, line 1				\$	
	(ii) Assets included in Form 990, Part X				\$	
	If the organization received or held works of art, historical treations of the control of the co			al gaın, pro	vide	
	the following amounts required to be reported under SFAS 1	16 (ASC 958) rela	ting to these items			
	Revenues included in Form 990, Part VIII, line 1		•	•	\$	
Ь	Assets included in Form 990, Part X			•	\$	

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Schedule D (Form 990) 2010

_		O TRUST (U						52-21	5815	2 P	age 2
Pa	rt III Organizations Maintaining (Collections of A	rt, His	torical Tr	easures,	or Othe	er Simila	ar Asse	ts (con	tinued)
3	Using the organization's acquisition, access	ion, and other record	ds, chec	k any of the	following that	at are a s	ignificant i	use of its	collectio	n item	าร
	(check all that apply)										
• а	Public exhibition	(d \square	Loan or exc	hange progr	ams					
b	Scholarly research				,						
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and expla	ın how tl	hev further t	he organizat	ion's exe	mot purpo	se in Par	t XIV		
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be m							Γ	Yes		No
Pa	rt IV Escrow and Custodial Arran					"Yes" to	Form 990	Part IV			
	reported an amount on Form 990, Pa			· · · · · · · · · · · · · · · · · ·				,			
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contribution	ns or other a	ssets not	ıncluded				
-	on Form 990, Part X?		,		10 01 01 101 01		oidada		Yes		No
h	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table				<u> </u>	J 163	_	J 140
~	in too, oxplain the artangement in tarry to	and complete the t	ono wing	table.					Amoun	+	
С	Beginning balance						1c		Airiouri		
d	Additions during the year						1d				
e	Distributions during the year						— — —				
•	Ending balance						1e				
22	Did the organization include an amount on F	orm 900 Part V line	. 212				1f		7.7		7
	If "Yes," explain the arrangement in Part XIV		5211					L.,	Yes		No
	rt V Endowment Funds. Complete		newored	"Ves" to Fo	rm 990 Part	: IV line 1	0				
	The state of the s	(a) Current year						aara baak	(-) Fau		baak
10	Beginning of year balance	(a) Current year	(6)	Prior year	(c) Two yea	IS DACK	(d) Three y		(е) Fou	years	Dack
1a	Contributions										
b			 		 						
C	Net investment earnings, gains, and losses							•			
d	Grants or scholarships		<u> </u>						,		
е	Other expenditures for facilities					ŀ					-
	and programs			 					<u> </u>	-	
Ť	Administrative expenses	· · · · · · · · · · · · · · · · · · ·							_		
g	End of year balance				<u> </u>				<u>.</u>		
	2 Provide the estimated percentage of the year end balance held as										
a	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
C		%									
За	Are there endowment funds not in the posses.	ession of the organiz	ation tha	at are held a	ind administe	ered for ti	ne organiz	ation	1		
	by.									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
	If "Yes" to 3a(ii), are the related organizations								3b		<u> </u>
4 Par	Describe in Part XIV the intended uses of the				-						
rai						···		: 1			
<u>.</u>	Description of investment	(a) Cost or o basis (investr			or other (other)	1 ' '	ocumulate preciation	d	(d) Boo	k valu	e
1a	Land .				- 11-						
b	Buildings										
С	Leasehold improvements										
d	Equipment			2	0,659.		10,44	11.	1	0,2	18.
е	Other .			<u></u>							
Total.	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colur	nn (B), line 1	(0(c))			▶	1	0,2	18.

Schedule D (Form 990) 2010

	edule D (Form 990) 2010 THE HALO TRUST (USA), INC				2158152	Page 4
Ра	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audited Finan	cial Sta	itemen		
1	Fotal revenue (Form 990, Part VIII, column (A), line 12)		1		20,733	
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		21,111	,407.
· 3	Excess or (deficit) for the year Subtract line 2 from line 1		3		-377	701.
4	Net unrealized gains (losses) on investments		4			
5	Donated services and use of facilities		5			
6	Investment expenses		6			
7	Prior period adjustments		7			
8	Other (Describe in Part XIV)		8		-2	,446.
9	Total adjustments (net) Add lines 4 through 8		9			,446.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19	10			,147.
	t XII Reconciliation of Revenue per Audited Financial Statemen	nts With Reve		Retur	<u> </u>	, ,
1	Total revenue, gains, and other support per audited financial statements		<u></u>	1	20,733	706
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			<u>-</u> -	20,133	, / 00 .
	Net unrealized gains on investments	100				
a	Donated services and use of facilities	2a				
b		2b				
С	Recoveries of prior year grants	2c		_		
ď	Other (Describe in Part XIV.)	2d				_
e	Add lines 2a through 2d			2e		0.
3	Subtract line 2e from line 1			3	20,733	<u>,706.</u>
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		"		
b	Other (Describe in Part XIV)	4b				
С	Add lines 4a and 4b			4c		0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	20,733	,706.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents With Expe	nses p	er Retu	irn	
1	Total expenses and losses per audited financial statements			1	21,111	407.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b		7		
С	Other losses	2c		7.		
d	Other (Describe in Part XIV)	2d		-		
e	Add lines 2a through 2d			2e		٥.
3	Subtract line 2e from line 1			3	21,111,	407.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				<u> </u>	1 20 / 6
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV)					
	Add lines 4a and 4b	4b		- .		0
	·			4c	21,111	407
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIV Supplemental Information			5	<u> </u>	,40/.
X, line P AR	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete X, LINE 2: HALO TRUST FILES TAX RETURNS	ete this part to pro	vide any a	additional	I information REVENUE	
	VICE AND VARIOUS STATE CHARITIES AGENCIES.					
<u>: 714 T</u>	TAX POSITION TAKEN THAT REQUIRES DISCLOSU	TE DUSED	ON CC	NAZA	1 FACTS	พทัก
CIR	CUMSTANCES.					
						
PAR	T XI, LINE 8 - OTHER ADJUSTMENTS:					
FOR	EIGN EXCHANGE RATE ADJUSTMENT	,,,,,= , ,=				<u>,446.</u>

Schedule D (Form 990) 2010

SCHEDULE F (Form 990)

Department of the Treasury

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.

2010
Open to Public Inspection

Internal Revenue Service

Employer identification number

Hame of the organization					Employer ident	incation number
THE HALO TRUST	(USA). I	NC		:	52-21581	52
			tside the United States. Comp	lete if the organ		
to Form 990, Par	rt IV, line 14b					
=	_		ds to substantiate the amount of the g		_	
grantees' eligibility for th	ne grants or assi	stance, and the	selection criteria used to award the gr	ants or assistar	nce?	」Yes No
2 For grantmakers. Desc	cribe in Part V the	e organization's	procedures for monitoring the use of g	irant funds outs	side the United St	ates
z Torgrammanoror 2000		o organization o	procedures for mormorning the decicing	ranc rando out	side the childe of	4103
3 Activities per Region (T	he following Part	t I, line 3 table ca	an be duplicated if additional space is	needed)		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	ıs a pro describe	vity listed in (d) gram service, e specific type ce(s) in region	(f) Total expenditures for and investments in region
						-
			PROGRAM SERVICES			
EAST ASIA AND THE						
PACIFIC	- 1	175		MINECLEARAN	ICE	1,317,018,
EUROPE	1	33	PROGRAM SERVICES	MINECLEARAN	ICE	348,889.
			ADMINISTRATIVE SUPPORT			
EUROPE	1	. 7		MINECLEARAN	ICE	528,774,
						320,772,
RUSSIA & NEWLY						
INDEPENDENT NATIONS	2	305	PROGRAM SERVICES	MINECLEARAN	ICE	3,185,185,
						ļ
SOUTH AMERICA	1	2	PROGRAM SERVICES	MINECLEARAN	ICE	165,125,
SOUTH ASIA	2	844	PROGRAM SERVICES	MINECLEARAN	ICE	6,644,737.
					, ,	
SUB-SAHARAN AFRICA	3	637	PROGRAM SERVICES	MINECLEARAN	ICE	8,107,086.
3 a Sub-total	11	2003		;		20,296,814,
b Total from continuation sheets to Part I	0			_		_
c Totals (add lines 3a	0	0				0.
and 3b)	11	2003			-	20 296 814

032071 12-20-10

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

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Schedule F (Form 990) 2010

Schedul	Schedule F (Form 990) 2010	THE	HALO	TRUST	THE HALO TRUST (USA),	, INC	52-2158152	C and	٠
Part II	Grants and Other Assis	tance to O	rganizati	ions or Ent	tities Outsid	le the Unite	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any		.1
	recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000.	ore than \$€	5,000 Ch	eck this bo	x if no one re	ecipient rec	eived more than \$5,000	_ _	
	Part II can be duplicated if additional space is peeded	if additions	al enace is	מקסממת מ					

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(ı) Method of valuation (book, FMV, appraisal, other)
-	- ",							
	.							
-	. g- <u>.</u> :							
	- /							
	۔					-		
-	_3 % ^				į			
 2 Enter total number of recipient organizations listed a the IRS, or for which the grantee or counsel has pro 3 Enter total number of other organizations or entities 	recipient organization he grantee or counsel other organizations or	s listed above that are r has provided a section entities	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 Enter total number of other organizations or entities	foreign country,	recognized as tax-ex	empt by		

Schedule F (Form 990) 2010

25

THE HALO TRUST (USA), INC

Schedule F (Form 990) 2010

52-2158152

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

(h) Method of valuation (book, FMV, appraisal, other)	()						Schedule F (Form 990) 2010
	, ,						hedule F (Fo
(g) Description of non-cash assistance							Sc
(f) Amount of non-cash assistance							
(e) Manner of cash disbursement							
(e) Macash dis							
(d) Amount of cash grant							
(c) Number of recipients					:		
(b) Region							
(a) Type of grant or assistance							
(a) Typ				:			

Schedule F (Form 990) 2010

Yes X No

12100715 761073 16063

for Form 5713)

SCHEDULE M (Form 990)

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

	THE HALO TRUST (USA), INC							52-2158152			
Pa	rt I Types of Property										
		(a) Check if applicable	(b) Number of contributions or tems contributed	(c) Noncash contri amounts report Form 990, Part VI	ted on	Method of contribution	determin		5		
1	Art · Works of art	_									
2	Art - Historical treasures										
3	Art · Fractional interests										
4	Books and publications										
5	Clothing and household goods			-							
6	Cars and other vehicles										
7	Boats and planes										
8	Intellectual property										
9	Securities · Publicly traded										
10	Securities - Closely held stock										
11	Securities - Partnership, LLC, or										
	trust interests										
12	Securities - Miscellaneous	<u> </u>									
13	Qualified conservation contribution -										
	Historic structures										
14	Qualified conservation contribution - Other										
15	Real estate - Residential										
16	Real estate - Commercial										
17	Real estate - Other										
18	Collectibles								<u>-</u>		
19	Food inventory										
20	Drugs and medical supplies										
21	Taxidermy	<u></u>			<u></u>						
22	Historical artifacts										
23	Scientific specimens										
24	Archeological artifacts					<u></u>					
25	Other (SUPPLIES AND)	X	3	32,	518.	MARKET VAL	<u>UES</u>				
26	Other ()					 					
27	Other ()					 					
28	Other (L	<u> </u>	L	 -						
29	Number of Forms 8283 received by the organic		= -								
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowled	gement	29			- 1			
								Yes	No		
30a	During the year, did the organization receive by	-		•					·		
	at least three years from the date of the initial of	contribution	, and which is not	required to be use	d for exem	pt purposes for					
	the entire holding period?						30a		X		
	If "Yes," describe the arrangement in Part II.		4 5				-	=	7-		
31	Does the organization have a gift acceptance p		-	-		utions?	31_		_X		
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sel	II noncash				7.		
	contributions?						32a	 	X		
	If "Yes," describe in Part II								l		
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which colun	nn (a) is ch	ескед,			ĺ		
	describe in Part II.								<u> </u>		

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

Schedule M (Form 990) (2010)

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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.

OMB No 1545-0047

Maria Aevalue Savice	mopouton
Name of the organization THE HALO TRUST (USA), INC	Employer identification number 52-2158152
FORM 990, PART V, LINE 4B, LIST OF FOREIGN COUNTRIES:	
AFGHANISTAN, ANGOLA, CAMBODIA, SRI LANKA,	***
SOMALIA, GEORGIA, UNITED KINGDOM, AZERBAIJAN,	
MOZAMBIQUE, COLOMBIA	·
FORM 990, PART VI, SECTION A, LINE 8B: IN LIEU OF COMMITT	EES.THE OFFICERS
AND KEY EMPLOYEES OF THE ORGANIZATION PROVIDE THE MANAGEM	
OF THE ADMINISTRATION.	
FORM 990, PART VI, SECTION B, LINE 11: FORM IS DISTRIBUTE	
MEMBERS FOR THEIR REVIEW AND COMMENTS. AFTER CONSIDERATI APPROVED FOR FILING.	ON, THE REPORT IS
APPROVED FOR PILLING.	
FORM 990, PART VI, SECTION B, LINE 15B: THE BOARD OF DIRE	CTORS OVERSEE THE
PROCESS OF DETERMINING THE COMPENSATION OF THE OFFICERS A	ND KEY EMPLOYEES.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	OF FORM 990:
AZ, CA, CT, IL, MA, MD, MN, NJ, NY, PA, WA, VA, FL, MI	
FORM 990, PART VI, SECTION C, LINE 19: ORGANIZATION PROMP	LY PROVIDES THE
REQUESTED INFORMATION BY RETURN MAIL, EMAIL, OR FAX.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
FOREIGN EXCHANGE RATE ADJUSTMENT	
PART XI FINANCIAL STATEMENTS AND DEDORTING LINE 2C	

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Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 99	30 or 990-EZ) (2010)	Page 2
Name of the organiza	THE HALO TRUST (USA), INC	Employer identification number $52-2158152$
THE REPORT	IS DISTRIBUTED TO THE BOARD MEMBERS FOR THEIR F	REVIEW AND
COMMENTS.	AFTER CONSIDERATION, THE REPORT IS APPROVED FOR	R PUBLISHING
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