

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## Form 990

**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)

OMB No 1545-0047 2011

Open to Public

Department of the Treasury

| Inter                          | nal Revenue    | Service  | The organization may have to use a copy of this return to satisfy state reporting   | ng requirements  | Inspection                                    |
|--------------------------------|----------------|--|---|--|---|
| $\overline{\mathbf{A}}$        | For the 2      | 2011 calend                                      | dar year, or tax year beginning , 2011, and ending  | · · · · · · · · · · · · · · · · · · ·                                      |   |
|                                | Check if app   |  | C , 2017, and chang   |  | er Identification Number                      |
| _                              | _ ``           |  |   |  |   |
|                                | Addres         | ss change  | ADSC - WEST COAST CHAPTER   |  | 2010736                                       |
| ı                              | Name -         | change   | 1390 BROADWAY #B PMB 104  | E Telepho  | ne number                                     |
|                                | Initial r      | return   | PLACERVILLE, CA 95667   | (530   | 0) 344-8012                                   |
|                                | Termin         | nated  |   |  |   |
|                                | $\vdash$       | ded return                                       |   | G Gross re   | eceipts \$ 253,287.                           |
|                                | $\vdash$       |  | <b>5</b> Nov. 14 (14)   |  |   |
|                                | Applica        | ation pending                                    |   | <b>l(a)</b> Is this a group returr<br><b>l(b)</b> Are all affiliates incli | <b>= ''' = '''</b>                            |
|                                |                |  | SAME AS C ABOVE   | If 'No,' attach a list   |   |
| <u> </u>                       | _ Tax-exen     | npt status                                       | 501(c)(3)   X   501(c) ( 6  ) ◀ (insert no )   4947(a)(1) or   527  | , בונכיר ב ווכר  | (555 11.50.50.50)                             |
| J                              | Websit         | te: > WW   | W. ADSCWEST. ORG  | (c) Group exemption nu   | mber ► 3669                                   |
| ĸ                              | Form of c      | organization                                     | Corporation Trust Association Other ► L Year of Formatio  |  | tate of legal domicile                        |
| Pa                             |                | Summar   |   | JI 1111 3  | tate of legal domicile                        |
| Га                             |                |  |   |  |   |
|                                |                |  | be the organization's mission or most significant activities <u>ADVANCE</u> I   |  |   |
| e l                            | _D]            | <u>ISSEMIN</u>                                   | ATE SCIENTIFIC AND INDUSTRIAL DATA TO THE INDUS   | <u>STRY, IMPROY</u>  | <u> </u>                                      |
| ğ                              | <u>(U</u>      | NDER_WH  | ICH_INDUSTRY_OPERATES_AND_PROMOTE_BETTER_UNDERS   | STANDING_BET   | WEEN_MEMBERS_AND_                             |
| Activities & Governance        | _GE            | ENERAL.  | CONTRACTORS   |  |   |
| ١ŏ                             | 2 Ch           | eck this bo                                      | ox In the organization discontinued its operations or disposed of more  | e than 25% of its i  | net assets                                    |
| g                              |                |  | oting members of the governing body (Part VI, line 1a)  |  | 3 1 7   |
| 95                             |                |  | dependent voting members of the governing body (Part VI, line 1b)   |  | 4 0   |
| Ë                              |                |  | of individuals employed in calendar year 2011 (Part V, line 2a)   | ľ  | 5 0   |
| . ₹                            |                |  | of volunteers (estimate if necessary)   | ŀ  | 6 10  |
| Ac                             |                |  | ed business revenue from Part VIII, column (C), line 12   | }  | 7a 0.   |
|                                |                |  | I business taxable income from Form 990-T, line 34  | ŀ  | <b>7b</b> 0.                                  |
| -                              | DINE           | t uniterated                                     | Dusiness taxable income from Form 930-1, line 34  |  |   |
| 20                             |                |  |   | Prior Year   | Current Year                                  |
| <b>6</b>                       | <b>8</b> Co    |  | and grants (Part VIII, line 1h)   | 49,3   |   |
| E C                            | <b>9</b> Pro   |  | vice revenue (Part VIII, line 2g)   | 82,1   | 18. 103,536.                                  |
| \$                             | <b>10</b> Inv  | estment ir                                       | ncome (Part VIII, column (A), lines 3, 4, and 70)   | A.   | 45. 129.                                      |
|                                | 11 Oth         | her revenu                                       | e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)  | 37,9   | 96. 7,266.                                    |
| deirevens                      | <b>12</b> Tot  | tal revenue                                      | e – add lines 8 through 11 (must equal Part VIII, column (A), fline 12)   | 169,5  |   |
| U                              | <b>13</b> Gra  | ants and s                                       | imilar amounts paid (Part IX, column (A), lines 1-3) MAY  | 7  |   |
| =                              |                |  | to or for members (Part IX, column (A), line 4)   |  |   |
| =                              |                |  | مستحري الإلام ستندير  | 67.7   | 05 070  |
| ຼຸ                             | <b>15</b> Sa   | laries, othe                                     | er compensation, employee benefits (Part IX, column (A) (ines 5-10)   | 67,7   | 03. 85,279.                                   |
| 9 e                            | <b>16a</b> Pro | ofessional                                       | fundraising fees (Part IX, column (A), line 11e)  | L  |   |
| 7IA7 ७ ७ NIII<br>Expenses      | <b>b</b> Tot   | tat fundrais                                     | sing expenses (Part IX, column (D), line 25)  |  |   |
| ╠╗                             |                |  |   | 05.1   | 71 00 000                                     |
| $\equiv$                       |                |  | ses (Part IX, column (A), lines 11a-11d, 11f-24e)   | 95,1   | · · · · · · · · · · · · · · · · · · ·         |
| `                              | <b>18</b> To   | tal expens                                       | es Add lines 13-17 (must equal Part IX, column (A), line 25)  | 162,8  |   |
|                                | <b>19</b> Re   | venue less                                       | s expenses Subtract line 18 from line 12  | 6,6  | 80. 34,181.                                   |
| 8 8                            |                |  |   | Beginning of Current   | t Year End of Year                            |
| Net Assets or<br>Fund Balancos | <b>20</b> To   | tal assets                                       | (Part X, line 16)   | 195,9  | 56. 230,137.                                  |
| A B                            | <b>21</b> Tot  |  | es (Part X, line 26)  |  | 0. 0.   |
| žŽ.                            | <b>22</b> Ne   |  |   | 105.0  |   |
|                                | ·              |  | fund balances Subtract line 21 from line 20   | 195,9  | <u>                                      </u> |
| Ра                             | rt II          | <u>Signatur</u>                                  | е віоск   |  |   |
| Und                            | er penalties   | of perjury, I d                                  | leclare that I have examined this return, including accompanying schedules and statements, and to the are (other than others) is based on all information of which preparer has any knowledge | he best of my knowledge  | and belief, it is true, correct, and          |
|                                | ipiete Decia   | nation of piep                                   | are (Orier than properly is based on all information of which preparer has any knowledge  | · · · · · · · · · · · · · · · · · · ·                                      |   |
|                                |                |  | the life of   | 5/12   | 12012   |
| Sig                            | ın             | Signatu  | are of officer  | Date   |   |
| He                             |                | нот.   | N DILLENBERG  | EXECUTIVE D  | TREC  |
|                                |                | ·  | print name and title  | LALCOITYL L  | JIIIC   |
|                                |                | <del>                                     </del> |   | <u> </u>   | , PTIN  |
| _                              |                |  |   | Check L  | <b>」"</b>                                     |
| Pai                            |                | ROBER'   | r attema   Robert attema   5/9/   | self-employe   | P00541864                                     |
|                                | eparer         | Firm's name                                      | ► PHILLIP J. SEXTON, CPA  |  |   |
| Us                             | e Only         | Firm's addre                                     | ess > 8655 MORRO ROAD, SUITE B  | Firm's EIN   | <b>►</b> 77-0293060                           |
|                                |                |  | ATASCADERO, CA 93422  | Phone no   | (805) 466-6885                                |
| May                            | the IRS        | discuss th                                       | us return with the preparer shown above? (see instructions)   | 1. 110.10 110  | X Yes No                                      |

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

TEEA0113L 08/18/11

Form **990** (2011)

| BAA |  | TEEA0102L 07/05/11   | For   | m <b>990</b> (2011)                             |
|-----|--|--|---|---|
| 4 e | (Expenses \$  Total program service expenses ►               | including grants of \$ 56,631.   | ) (Revenue \$   | )   |
| 4 d | Other program services. (Describe in                         |  | ) (Daviere e  | ,   |
|     |  |  |   |   |
|     |  |  |   |   |
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|     |  |  |   |   |
|     |  |  |   |   |
| 4 c | (Code:) (Expenses \$   | including grants of \$   | ) (Revenue \$   | )   |
|     |  |  |   |   |
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|     |  |  |   |   |
|     |  | QUALITY AND SAFETY HAVE BEEN CRE   |   | <u></u>   |
| 4b  | (Code) (Expenses \$  | 4,215. including grants of \$  | (Revenue \$) (Revenue \$)   | 4,700.)   |
|     |  |  |   |   |
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|     |  |  |   | <b>_</b>  |
|     |  |  | ·   | <br>  |
|     |  | ATIONS SUPPORT FOR WEST COAST CH   |   | <del>,                                   </del> |
| 4 a | (Code: Expenses \$   | 52,416. including grants of \$   | ) (Revenue \$ 8   | 2,886.)   |
|     | others, the total expenses, and reven                        | ue, if any, for each program service reported  | -   |   |
| 4   | Section 501(c)(3) and 501(c)(4) organ                        | service accomplishments for each of its three larges<br>nizations and section 4947(a)(1) trusts are required | st program services, as measured by to report the amount of grants and al | expenses.<br>locations to                       |
| -   | If 'Yes,' describe these changes on S                        |  | _   |   |
| 3   | •  | g, or make significant changes in how it conducts, a   | any program services? Yes   | X No  |
|     | If 'Yes,' describe these new services                        | on Schedule O.   | res   | V MO  |
| 2   | Did the organization undertake any si<br>Form 990 or 990-EZ? | gnificant program services during the year which w   | ere not listed on the prior . Yes   | X No  |
| _   |  |  |   |   |
|     |  | EMBERS AND GENERAL CONTRACTORS.  | TES IND INCHOIL DELIER  |   |
|     |  | <u>H_EDUCATION, DISSEMINATE_SCIENTI</u><br>TIONS UNDER WHICH INDUSTRY OPERA                                  |   | TO THE  |
| 1   | Briefly describe the organization's mis                      |  |   |   |
|     |  | a response to any question in this Part III  |   |   |
|     |  | ervice Accomplishments   |   |   |
| Pag | 990 (2011) ADSC - WEST COR                                   |  | 91-2010736  | Page 2  |

Page 3 **Checklist of Required Schedules** Part IV Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 1 Х Schedule A 2 Х 2 Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I 3 Х **Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If 'Yes,' complete Schedule C, Part II* 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III X 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D. 6 Х Part I 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 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III 8 X 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 Х Schedule D. Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? 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, VIII, 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 Х 11 a **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. 11 b Х c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total X assets reported in Part X, line 167 If 'Yes,' complete Schedule D, Part VIII 11 c 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 11 d Х Х 11 e e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part 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 Х 11 f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D. Parts XI, XII, and XIII Х 12a 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 Х 12b Х 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E 13 14a Х 14a Did the organization maintain an office, employees, or agents outside of the United States? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising. business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? 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 . 15 X 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 16 Х Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, X column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions). 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, Х 18 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 X 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20

20 b

b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?

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 United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 Х 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 23 Х 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, and 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 Х b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24h c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part i 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If 'Yes,' complete 25b Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III Х 27 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) a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV X 28a **b** A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV Х 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 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 X Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M30 Х Х 31 Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 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, 34 X 34 line 1 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? Х 35 a **b** 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 Х 35b 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 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is 37 treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197

BAA

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

Х Form 990 (2011)

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| Form 990 (2011) ADSC - WEST COAST CHAPTER  | 91-2010736                | Р   | age 5       |
|--|---------------------------|-----|-------------|
| Part V Statements Regarding Other IRS Filings and Tax Compliance   |                           |     |             |
| Check if Schedule O contains a response to any question in this Part V   |                           | Yes | No          |
| 1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable       1a         b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable       1b  | 2                         | 162 | NO          |
| c Did the organization comply with backup withholding rules for reportable payments to vendors and reportal (gambling) winnings to prize winners?  | able gaming               |     | Х           |
| 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   | 0                         |     |             |
| b If at least one is reported on line 2a, did the organization file all required federal employment tax returns  | <del></del>               |     |             |
| <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)  |                           |     |             |
| 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?  b If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule Q  | 3a<br>3b                  |     | X           |
| 4a At any time during the calendar year, did the organization have an interest in, or a signature or other autifinancial account in a foreign country (such as a bank account, securities account, or other financial acco   | hority over, a unit)?     |     | х           |
| 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 Access 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?   | 5a                        |     | Х           |
| <b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction   | <del></del>               |     | X           |
| c 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 or solicit any contributions that were not tax deductible?   | rganization 6a            |     | Х           |
| b If 'Yes,' did the organization include with every solicitation an express statement that such contributions of<br>not tax deductible?  | or gifts were 6b          |     |             |
| 7 Organizations that may receive deductible contributions under section 170(c).  |                           |     |             |
| a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good services provided to the payor?   | ds and <b>7a</b>          |     | l           |
| <b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?   | 7b                        |     |             |
| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was re-   | equired to file           |     |             |
| Form 8282?   | 7c                        |     | <del></del> |
| d If 'Yes,' indicate the number of Forms 8282 filed during the year  |                           |     |             |
| e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit control to the organization of the property of the organization of the property of the organization of the property of the organization of the | <del>- 1</del>            |     | <b>-</b>    |
| f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?   | <del>1</del>              |     | <b></b>     |
| g If the organization received a contribution of qualified intellectual property, did the organization file Form as required?  | <u>7g</u>                 |     |             |
| h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization<br>Form 1098-C?   | n file a                  |     |             |
| 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess the holdings at any time during the year?   | tions. Did the business 8 |     |             |
| 9 Sponsoring organizations maintaining donor advised funds.  |                           |     |             |
| a Did the organization make any taxable distributions under section 4966?  | 9a                        |     |             |
| <b>b</b> Did the organization make a distribution to a donor, donor advisor, or related person?  | . 9b                      |     |             |
| 10 Section 501(c)(7) organizations. Enter  |                           |     |             |
| a Initiation fees and capital contributions included on Part VIII, line 12   |                           |     |             |
| <b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b   |                           |     |             |
| 11 Section 501(c)(12) organizations. Enter.  |                           |     |             |
| a Gross income from members or shareholders  |                           |     | l           |
| <b>b</b> Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ).   |                           |     |             |
| 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041  | ? 12a                     |     |             |
| <b>b</b> If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b   |                           |     |             |
| 13 Section 501(c)(29) qualified nonprofit health insurance issuers.  |                           |     |             |
| a 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   |                           |     | 1           |
| <b>b</b> Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans   |                           |     |             |
| c Enter the amount of reserves on hand   |                           |     | <u> </u>    |
| 14a Did the organization receive any payments for indoor tanning services during the tax year?   | 14a                       |     | Х           |
| <b>b</b> If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule Q.  | 14b                       |     |             |

Form 990 (2011) ADSC - WEST COAST CHAPTER 91-2010736 Page 6 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. X Check if Schedule O contains a response to any question in this Part VI Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 + Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee or key employee? 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? SEE SCH O X 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? SEE SCHEDULE O 6 X 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body? 7b Х Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X 8a b Each committee with authority to act on behalf of the governing body? X 8ь Is there any officer, director or 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 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates? 10 a Х b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Х 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12<sub>b</sub> c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? Х 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official SEE SCHEDULE Q 15a Х **b** Other officers of key employees of the organization 15<sub>b</sub> If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X taxable entity during the year? 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its

| Section |  |  |
|---------|--|--|

| 17 | List the states with which a copy of this Form 990 is required to be filed ► NONE   |
|----|---|
| 18 | Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply |
|    | Own website   |

Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

SEE SCHEDULE O

participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the

organization's exempt status with respect to such arrangements?

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

► JOHN DILLENBERG 1024 SIMON DRIVE SUITE K PLACERVILLE CA 95667 530-344-8012

16<sub>b</sub>

| - •                |          |        |        |        |      |
|--------------------|----------|--------|--------|--------|------|
| orm <b>990</b> (20 | 011) ADS | C - WE | ST COA | ST CHA | PTER |

91-2010736

Page 7

# 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

| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee |  |   |                       |         |              |                              |          |                                     |  |  |  |
|---|--|---|-----------------------|---------|--------------|------------------------------|----------|-------------------------------------|--|--|--|
|   |  | (C)   |                       |         |              |                              |          |                                     |  |  |  |
| (A)<br>Name and title   | (B) Average hours per week   | Position<br>(do not check more than one box,<br>unless person is both an officer<br>and a director/trustee) |                       |         |              |                              |          | (D)  Reportable compensation from   | <b>(E)</b> Reportable compensation from  | (F) Estimated amount of other compensation               |  |
|   | (describe<br>hours for<br>related<br>organiza-<br>tions in<br>Schedule<br>O) | Individual trustee or director  | Institutional trustee | Officer | Key employee | Highest compensated employee | Former   | the organization<br>(W-2/1099-MISC) | related organizations<br>(W-2/1099-MISC) | from the<br>organization<br>and related<br>organizations |  |
| (1) JOHN DILLENBERG EXECUTIVE DIREC   | 12   | х   |                       |         |              |                              |          | 85,279.                             | 0.                                       | 0.   |  |
| (2) WILL SMITH  | 1  | <del></del>   |                       |         |              |                              |          | 00/2/31                             |  |  |  |
| DIRECTOR  | 1  | x   |                       |         |              |                              |          | 0.                                  | 0.                                       | 0.   |  |
| (3) JAVIER GODINEZ  |  |   |                       |         |              |                              |          |                                     |  |  |  |
| <u> DIRECTOR</u>  | 1  | X   |                       |         |              |                              |          | 0.                                  | 0.                                       | 0.   |  |
| (4) BILL WARFIELD   |  |   |                       |         |              |                              |          |                                     |  |  |  |
| DIRECTOR  | 1 1  | X   | Ш                     |         |              |                              | <u> </u> | 0.                                  | 0.                                       | 0.   |  |
| (5) CHUCK DANACHE   | ┧ .  |   |                       | .,      |              |                              |          |                                     |  | 0  |  |
| SECRETARY   | 1  |   | $\vdash$              | Х       |              |                              | ├        | 0.                                  | 0.                                       | <u> </u>   |  |
| (6) STEVE WILLIAMS TREASURER  | -  |   |                       | х       |              |                              |          | o.!                                 | о.                                       | 0.   |  |
| (7) ALAN RASBAND  | 1  |   | $\vdash$              | _       |              |                              |          | 0.                                  |  | 0.   |  |
| PRESIDENT   | <b>⊣</b> 1   |   |                       | Х       |              |                              |          | 0.                                  | 0.                                       | 0.   |  |
| (8) RICK WALSH  |  |   |                       | -       |              |                              |          |                                     |  |  |  |
| VICE PRESIDENT  | 1  |   |                       | Х       |              |                              |          | 0.                                  | 0.                                       | 0.   |  |
| _(9)  | -  |   |                       |         |              |                              |          |                                     |  |  |  |
| (10)  |  |   |                       |         |              |                              |          |                                     |  |  |  |
| (11)  |  |   |                       |         |              |                              |          |                                     |  |  |  |
| <u>(12)</u>   |  |   |                       |         |              |                              |          |                                     |  |  |  |
| <u>(13)</u>   | -  |   |                       |         |              |                              |          |                                     |  |  |  |
| (14)  |  |   |                       |         |              |                              |          |                                     |  | <del></del>  |  |
|   | 1  |   | Ь                     | L       |              |                              | Ь        |                                     |  |  |  |

| Part VII   Section A. Officers, Directors, I  | rustees,   | ney                   | En                    | ipic                 | ye                 | es, a  | anc           | Hignest Com  | pensated Emp   | ioyees (cont)                                   |
|---|--|-----------------------|-----------------------|----------------------|--------------------|--|---------------|--|--|---|
| (A)<br>Name and title   |  | ge box<br>s offi      | c, unle               | Pos<br>heck<br>ss pe | rson<br>Irecto     | than one of the state of the st | n an<br>tee)  | (D)  Reportable compensation from the organization | (E)  Reportable  compensation from related organizations | (F) Estimated amount of other compensation      |
|   | per<br>week<br>(descr<br>e<br>hours<br>for<br>relate<br>organ<br>zation<br>in<br>Sch C | or director           | Institutional trustee | Officer              | Key employee       | Highest compensated<br>employee  | Former        | the organization<br>(W-2/1099-MISC)                | (W 2/1099-MISC)  | from the organization and related organizations |
|   |  | +                     |                       |                      | _                  |  |               |  |  |   |
|   |  | +                     |                       |                      |                    |  |               |  | · -  |   |
| <u>(17)</u>   |  |                       | <del> </del>          |                      |                    |  |               |  |  |   |
| (18)  |  |                       |                       |                      | <u> </u>           |  |               |  |  |   |
| (19)  |  |                       | <del> </del>          |                      | _                  |  |               |  |  |   |
| (20)  |  |                       |                       |                      |                    |  |               |  |  |   |
| (21)  |  |                       |                       |                      |                    |  |               |  |  |   |
| (22)  |  |                       |                       |                      |                    |  |               |  |  |   |
| (23)  |  |                       |                       |                      |                    |  |               |  |  |   |
| (24)  |  |                       |                       |                      |                    |  |               |  |  |   |
| (25)  |  |                       |                       |                      |                    |  |               |  |  |   |
| 1 b Sub-total c Total from continuation sheets to Part VII, Se  | ction A  |                       |                       |                      |                    |  | <b>V</b> V    | 85,279.<br>0.                                      | 0.<br>0.   | <del></del>                                     |
| d Total (add lines 1b and 1c)  2 Total number of individuals (including but not   | limited to t   | hose                  | liste                 | d ab                 | ove                | ) who  | o re          | 85,279. ceived more than                           | 0.<br>\$100,000 of repor                                 | 0. table compensation                           |
| from the organization   0   |  |                       |                       |                      |                    |  |               |  | ·  | Yes No  |
| 3 Did the organization list any former officer, did<br>on line 1a? If 'Yes,' complete Schedule J for s                  | rector or tru<br>such individ  | ıstee.<br><i>lual</i> | , key                 | em em                | ploy               | ee, d  | or h          | ighest compensat                                   | ed employee  | 3 X   |
| 4 For any individual listed on line 1a, is the sum<br>the organization and related organizations gre<br>such individual | of reporta<br>ater than \$   | ble co<br>150,0       | omp<br>0007           | ensa<br>If '\        | tion<br>Yes'       | and<br>com   | oth<br>oplet  | er compensation<br>e Schedule J for                | from   | 4 X   |
| 5 Did any person listed on line 1a receive or according services rendered to the organization? If '                     | crue compe<br>Yes,' comp   | nsatı<br>ete S        | on fi<br>Sched        | rom<br>dule          | any<br><i>J fo</i> | unre   | elate<br>ch p | ed organization or<br>erson                        | ındıvıdual   | 5 X   |
| Section B. Independent Contractors  |  |                       |                       |                      |                    |  |               |  | h #100 000 -f  |   |
| Complete this table for your five highest components to from the organization Report c  (A)                             | ompensatio   | n for                 | the                   | cale                 | enda               | r yea  | ar ei         | nding with or with                                 | ın the organization                                      | 's tax year.<br>(C)                             |
| Name and business a   | ddress   |                       |                       |                      |                    |  |               | Description  |  | Compensation                                    |
|   | _  |                       |                       |                      |                    |  |               |  |  |   |
|   |  |                       |                       |                      |                    |  |               |  |  |   |
|   |  |                       |                       |                      |                    |  |               |  |  |   |
| 2. Total number of independent control of the   | - د. دا سماسی  | - با اد-              | اء ۽ ادم              |                      | he -               | . l1   | 0 el -        | 200000000000000000000000000000000000000            | ad mare there  |   |
| 2 Total number of independent contractors (incl-<br>\$100,000 in compensation from the organization                     | _  | ot IIn                | шеа                   | i iO T               | 1105               | = IISt   | ea a          | above) who receiv                                  | eu more trian  |   |

| Pai   | t VIII   Statement of Revenue  |                      | <del>-</del>                                     |   |  |
|---|--|----------------------|--|---|--|
|   |  | (A)<br>Total revenue | ( <b>B)</b> Related or exempt function revenue   | (C)<br>Unrelated<br>business<br>revenue | Revenue<br>excluded from tax<br>under sections<br>512, 513, or 514 |
| PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS | 1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lns 1a-1f.  h Total. Add lines 1a-1f  Business Code  2 a UNION LABOR SUPPORT FUND | 98,628.<br>82,886.   | 82,886.  |   |  |
| # E   | b MEETINGS/WORKSHOPS/TRAINI  | 15,950.              | 15,950.  |   |  |
| € .   | c SEMINARS/WORKSHOPS   | 4,700.               | 4,700.   |   |  |
| SE I  | d  |                      |  |   |  |
| RA!   | f All other program service revenue  |                      |  | <del></del>                             | ·-··   |
| Š   | •  | 103,536.             |  | ····                                    |  |
|   | 3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties   | 129.                 |  |   | 129.   |
|   | (i) Real (ii) Personal  6 a Gross rents b Less' rental expenses c Rental income or (loss) d Net rental income or (loss)  |                      |  |   |  |
|   | 7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses c Gain or (loss)  |                      |  |   |  |
|   | d Net gain or (loss)   | <u> </u>             |  | ·                                       |  |
| OTHER REVENUE                                     | 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18   |                      |  |   |  |
| 5   | c Net income or (loss) from fundraising events   | 7,266.               |  |   | 7,266.   |
|   | 9a Gross income from gaming activities See Part IV, line 19  |                      |  |   |  |
|   | b Less direct expenses b   | <u> </u>             |  |   | <del> </del>   |
|   | c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances  |                      |  |   |  |
|   | <b>b</b> Less cost of goods sold <b>b</b>  | 1                    |  |   |  |
|   |  | <u> </u>             |  |   |  |
|   | Miscellaneous Revenue Business Code  |                      |  |   | <b></b>  |
|   | 11a  |                      |  |   | 1  |
|   | b  | <del> </del>         | -  | <del></del>                             | <del> </del>   |
|   | d All other revenue  |                      | <del>                                     </del> | <del></del>                             | <del>                                     </del>                   |
|   |  | <u> </u>             | -  |   |  |
|   |  | 209,559.             | 103,536.   | 0.                                      | 7,395.   |
|   |  | , •                  |  |   | <del></del>  |

## Part IX | Statement of Functional Expenses

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

|    | Check if Schedule O contains a response to any question in this Part IX   |                       |                              |                                     |                                  |  |  |  |  |
|----|---|-----------------------|------------------------------|-------------------------------------|----------------------------------|--|--|--|--|
|    | not include amounts reported on lines<br>7b, 8b, 9b, and 10b of Part VIII.  | (A)<br>Total expenses | (B) Program service expenses | (C) Management and general expenses | ( <b>D)</b> Fundraising expenses |  |  |  |  |
| 1  | Grants and other assistance to governments and organizations in the United States. See Part IV, line 21   |                       |                              |                                     |                                  |  |  |  |  |
| 2  | Grants and other assistance to individuals in the United States See Part IV, line 22  |                       |                              |                                     |                                  |  |  |  |  |
| 3  | Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16  |                       |                              | ·                                   |                                  |  |  |  |  |
|    | Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees  | 85,279.               | 0.                           | 85,279.                             | 0.                               |  |  |  |  |
| 6  | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)   | 0.                    | 0.                           | 0.                                  | 0.                               |  |  |  |  |
| 7  | Other salaries and wages.   |                       |                              |                                     |                                  |  |  |  |  |
| 8  | Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions).   |                       |                              |                                     | =-                               |  |  |  |  |
| 9  | Other employee benefits   |                       |                              |                                     |                                  |  |  |  |  |
| 10 | Payroll taxes   |                       |                              |                                     |                                  |  |  |  |  |
| 11 | Fees for services (non-employees)   |                       |                              |                                     |                                  |  |  |  |  |
|    | a Management  |                       |                              |                                     |                                  |  |  |  |  |
|    | o Legal   |                       |                              |                                     |                                  |  |  |  |  |
|    |   | 1,228.                |                              | 1,228.                              | <del></del>                      |  |  |  |  |
|    | Accounting  | 1,220.                |                              | 1,220.                              |                                  |  |  |  |  |
|    | d Lobbying  |                       |                              |                                     |                                  |  |  |  |  |
|    | Professional fundraising services. See Part IV, line 17   |                       |                              |                                     |                                  |  |  |  |  |
|    | Investment management fees  |                       |                              |                                     |                                  |  |  |  |  |
| 9  | g Other   |                       |                              |                                     |                                  |  |  |  |  |
| 12 | Advertising and promotion   |                       |                              |                                     |                                  |  |  |  |  |
| 13 | Office expenses   | 1,252.                |                              | 1,252.                              |                                  |  |  |  |  |
| 14 | Information technology  |                       |                              |                                     |                                  |  |  |  |  |
| 15 | Royalties   |                       |                              |                                     |                                  |  |  |  |  |
| 16 | Occupancy   | 5,098.                |                              | 5,098.                              |                                  |  |  |  |  |
| 17 | Travel  |                       |                              |                                     |                                  |  |  |  |  |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials  |                       |                              |                                     |                                  |  |  |  |  |
|    | Conferences, conventions, and meetings Interest   | 17,777.               | 17,777.                      |                                     |                                  |  |  |  |  |
| 21 | Payments to affiliates  | 4,575.                |                              |                                     | ·                                |  |  |  |  |
| 22 | Depreciation, depletion, and amortization   | .,                    |                              | -                                   |                                  |  |  |  |  |
| 23 | Insurance   |                       |                              |                                     |                                  |  |  |  |  |
|    | Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) |                       |                              |                                     |                                  |  |  |  |  |
| ,  | UNION LABOR SUPPORT FUND  | 52,416.               | 52,416.                      |                                     |                                  |  |  |  |  |
|    | COMMUNICATIONS/PHONES   | 2,609.                | 52, 110.                     | 2,609.                              |                                  |  |  |  |  |
|    | TRAINING / OFFICE EQUIPMENT   | 2,054.                |                              | 2,054.                              |                                  |  |  |  |  |
|    | d INSURANCE   | 967.                  |                              | 967.                                |                                  |  |  |  |  |
|    | e All other expenses  | 2,123.                |                              | 2,123.                              | ·                                |  |  |  |  |
|    |   | 175,378.              | 70,193.                      | 100,610.                            | 0.                               |  |  |  |  |
|    | Total functional expenses. Add lines 1 through 24e  | 113,316.              | 10,193.                      | 100,010.                            | <u> </u>                         |  |  |  |  |
| 26 | the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.  |                       |                              |                                     |                                  |  |  |  |  |
|    | Check here ► if following   |                       |                              |                                     |                                  |  |  |  |  |
|    | SOP 98-2 (ASC 958-720)  |                       |                              |                                     |                                  |  |  |  |  |

| Pa       | art X    | Balance Sheet   |   |                                 |                                 |      |   |
|----------|----------|---|---|---------------------------------|---------------------------------|------|---|
|          |          |   |   |                                 | <b>(A)</b><br>Beginning of year |      | <b>(B)</b><br>End of year               |
|          | 1        | Cash — non-interest-bearing.  |   |                                 | 12,478.                         | 1    | 16,059                                  |
|          | 2        | Savings and temporary cash investments  |   |                                 | 183,478.                        | 2    | 214,078                                 |
|          | 3        | Pledges and grants receivable, net  |   | 3                               |                                 |      |   |
|          | 4        | Accounts receivable, net .  |   |                                 |                                 | 4    |   |
|          | 5        | Receivables from current and former officers, director and highest compensated employees. Complete Part   | rs, trustee   | es, key employees,<br>edule L   |                                 | 5    |   |
| AS       | 6        | Receivables from other disqualified persons (as defin persons described in section 4958(c)(3)(B), and contributions organizations of section 501(c)(9) volunta organizations (see instructions) | section 4958(f)(1)),<br>mployers and<br>yees' beneficiary |                                 | 6                               |      |   |
|          | 7        |   |   | •                               |                                 | 7    |   |
| Š        | 8        | Inventories for sale or use   |   | -                               |                                 | 8    |   |
| ASSETS   | 9        | Prepaid expenses and deferred charges   |   | -                               |                                 | 9    |   |
| J        |          |   | 1 1   | -                               |                                 | -    |   |
|          | 10 a<br> | Land, buildings, and equipment cost or other basis.<br>Complete Part VI of Schedule D   | 10 a  | 9,437.                          |                                 |      |   |
|          | ı        | Less: accumulated depreciation  | 10b   | 9,437.                          |                                 | 10 c |   |
|          | 11       | Investments — publicly traded securities  |   |                                 |                                 | 11   |   |
|          | 12       | Investments – other securities. See Part IV, line 11  |   | _                               |                                 | 12   |   |
|          | 13       | Investments – program-related See Part IV, line 11  | ļ   |                                 | 13                              |      |   |
|          | 14       | Intangible assets   |   |                                 |                                 | 14   |   |
|          | 15       | Other assets. See Part IV, line 11  |   |                                 |                                 | 15   |   |
|          | 16       | Total assets. Add lines 1 through 15 (must equal line   | 34)   |                                 | 195,956.                        | 16   | 230,137                                 |
|          | 17       | Accounts payable and accrued expenses   |   |                                 | 17                              |      |   |
|          | 18       | Grants payable  |   |                                 |                                 | 18   |   |
|          | 19       | Deferred revenue  |   |                                 |                                 | 19   |   |
| Ļ        | 20       | Tax-exempt bond liabilities   |   |                                 |                                 | 20   | - · · - · · · · · · · · · · · · · · · · |
| A<br>B   | 21       | Escrow or custodial account liability Complete Part   | IV of Sch   | edule D                         |                                 | 21   |   |
| L        | 22       | Payables to current and former officers, directors, tru<br>highest compensated employees, and disqualified pe<br>of Schedule L  | ustees, ke<br>ersons Co                                   | y employees,<br>omplete Part II |                                 | 22   |   |
| Ţ        | 23       | Secured mortgages and notes payable to unrelated the  | hird nartie   | ·<br>ac                         |                                 | 23   |   |
| E<br>S   | 24       | Unsecured notes and loans payable to unrelated third  | =   |                                 |                                 | 24   |   |
|          | 25       | • •   | •   | ted third parties.              |                                 |      | · · · · · · · · · · · · · · · · · · ·   |
|          |          | Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com  | nplete Pa   | rt X of Schedule D              |                                 | 25   |   |
|          | 26       | Total liabilities. Add lines 17 through 25.   |   |                                 | 0.                              | 26   | 0                                       |
| Ĕ        |          | Organizations that follow SFAS 117, check here ►  | and   | complete lines                  |                                 |      |   |
|          | l        | 27 through 29 and lines 33 and 34.  |   |                                 |                                 |      |   |
| Ş        | 27       | Unrestricted net assets   |   |                                 |                                 | 27   |   |
| (SOEET-S | 28       | Temporarily restricted net assets   |   | 28                              |                                 |      |   |
|          | 29       | Permanently restricted net assets   | 150   |                                 |                                 | 29   |   |
| R        |          | Organizations that do not follow SFAS 117, check he   | ere ► X   | and complete                    |                                 |      |   |
| FUZD     |          | lines 30 through 34.  |   |                                 |                                 |      |   |
|          | 30       | Capital stock or trust principal, or current funds  |   |                                 |                                 | 30   |   |
| Ŗ        | 31       | Paid-in or capital surplus, or land, building, or equipment   |   | 1                               |                                 | 31   |   |
| Ä        | 32       | Retained earnings, endowment, accumulated income  | e, or other   | funds                           | 195,956.                        | 32   | 230,137                                 |
| BALAZCES | 33       | Total net assets or fund balances   |   | . [                             | 195,956.                        |      | 230,137                                 |
|          | 34       | Total liabilities and net assets/fund balances  |   |                                 | 195,956.                        | 34   | 230,137                                 |

BAA

Form **990** (2011)

| Form 990 (2011) ADSC - WEST COAST CHAPTER  | 91-2010736       |         | Page <b>12</b> |
|--|------------------|---------|----------------|
| Part XI Reconciliation of Net Assets   |                  |         |                |
| Check if Schedule O contains a response to any question in this Part XI  |                  |         |                |
|  |                  |         |                |
| 1 Total revenue (must equal Part VIII, column (A), line 12)  | 1                | 209     | <u>,559.</u>   |
| 2 Total expenses (must equal Part IX, column (A), line 25)   | 2                |         | <u>, 378 .</u> |
| <b>3</b> Revenue less expenses. Subtract line 2 from line 1  | 3                |         | <u>,181.</u>   |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).   | 4                | 195     | <u>,956.</u>   |
| 5 Other changes in net assets or fund balances (explain in Schedule O)   | 5                |         | <u>0.</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                | 230     | ,137.          |
| Part XII Financial Statements and Reporting  |                  |         |                |
| Check if Schedule O contains a response to any question in this Part XII   |                  |         |                |
|  |                  | Ye      | s No           |
| 1 Accounting method used to prepare the Form 990 X Cash Accrual Other  |                  |         | 1              |
| If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.  |                  |         |                |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant?   |                  | 2a      | X              |
| <b>b</b> Were the organization's financial statements audited by an independent accountant?  |                  | 2b      | X              |
| c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?     | nt of the audit, | 2c      |                |
| If the organization changed either its oversight process or selection process during the tax year, explain Schedule O  |                  |         |                |
| <b>d</b> If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year wer separate basis, consolidated basis, or both  | e issued on a    |         |                |
| Separate basis Consolidated basis Both consolidated and separate basis   |                  |         |                |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth a Audit Act and OMB Circular A-133?  | n the Single     | 3a      | X              |
| <b>b</b> If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits | e required audit | 3 b     |                |
| RAA  |                  | Form 99 | n (2011)       |

TEEA0112L 07/06/11

#### **SCHEDULE C** (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047 2011

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| If the or | ganization ans | wered 'Yes.' to Fo | rm 990. Part IV. line 3 | or Form 990-EZ. Part V. | line 46 (Political Camp | aign Activities), then |
|-----------|----------------|--------------------|-------------------------|-------------------------|-------------------------|------------------------|

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

#### If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete

|     |   | rganizations <sup>.</sup> Complete Part III.  | or Form 990-EZ, Part   | v, line 35a (Proxy Tax),   | then   |
|-----|---|---|--|--|--|
|     | of organization   | Employer identifica   | ation number   |  |  |
| ADS | SC - WEST COAST CHA   | 91-201073   | 6  |  |  |
| Par | t I-A Complete if the or  | rganization is exempt under section   | on 501(c) or is a s  | section 527 organi   | zation.  |
| 1   | Provide a description of the  | organization's direct and indirect political o  | ampaign activities in  | Part IV  |  |
| 2   | Political expenditures  | ▶\$   |  |  |  |
| 3   | Volunteer hours   |   |  |  |  |
| Par | t I-B   Complete if the or  | rganization is exempt under section   | on 501(c)(3).  |  |  |
| 1   | Enter the amount of any exc   | ise tax incurred by the organization under  | section 4955   | ▶\$  |  |
| 2   | Enter the amount of any exc   | ise tax incurred by organization managers   | under section 4955   | ▶\$  |  |
| 3   | If the organization incurred a  | section 4955 tax, did it file Form 4720 for   | this year?   |  | Yes No   |
| 4 a | Was a correction made?  |   |  |  | Yes No   |
| t   | If 'Yes,' describe in Part IV   |   |  |  |  |
| Par | t I-C Complete if the or  | rganization is exempt under section   | on 501(c), excep   | t section 501(c)(3).   |  |
| 1   | Enter the amount directly ex  | pended by the filing organization for section   | n 527 exempt function  | n activities > \$  |  |
| 2   | Enter the amount of the filing function activities  | g organization's funds contributed to other   | organizations for sec  | tion 527 exempt ►\$  |  |
| 3   | Total exempt function expen line 17b  | ditures Add lines 1 and 2. Enter here and   | on Form 1120-POL,  | ▶ \$   |  |
| 4   | Did the filing organization file  | e Form 1120-POL for this year?  |  |  | Yes X No   |
| 5   | Enter the names, addresses  | and employer identification number (EIN)  | of all section 527 pol   | itical organizations to w  | hich the filing  |
|     | organization made payments<br>amount of political contributi<br>segregated fund or a politica | s. For each organization listed, enter the ai<br>ons received that were promptly and direct<br>il action committee (PAC). If additional spa | mount paid from the f<br>tly delivered to a sepa<br>ace is needed, provide | filing organization's fun<br>arate political organizat<br>e information in Part IV | ds. Also enter the lon, such as a separate   |
|     | (a) Name  | <b>(b)</b> Address  | (c) EIN  | (d) Amount paid from filing organization's funds if none, enter-0-                 | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0- |
| (1) |   |   |  |  |  |
| (2) |   |   |  |  | -  |
| (3) |   |   |  |  |  |
| (4) |   |   |  |  |  |
| (5) |   |   |  |  |  |
|     |   |   |  | <del></del>  |  |

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

(6)

Schedule C (Form 990 or 990-EZ) 2011

| Schedule C (Form 990 or 990-EZ) 201                                  |                                       |   | ***                      | 91-2010                          |                             |
|--|---------------------------------------|---|--------------------------|----------------------------------|-----------------------------|
| Part II-A Complete if section 501(                                   |                                       | n is exempt under se  | ction 501(c)(3) and      | d filed Form 5768 (el            | ection under                |
| A Check ► If the filir   | ng organization belo                  | ongs to an affiliated group   | (and list in Part IV eac | ch affiliated group membe        | r's name,                   |
| address,   | EIN, expenses, and                    | d share of excess lobbying  | expenditures)            |                                  |                             |
| B Check ► If the filing  | ng organization che-                  | cked box A and 'limited co  | ntrol' provisions apply  |                                  |                             |
| (The term  | Limits on Lobby<br>'expenditures' mea | ing Expenditures<br>ns amounts paid or incuri   | red.)                    | (a) Filing organization's totals | (b) Affiliated group totals |
| 1 a Total lobbying expenditi   | ures to influence pu                  | blic opinion (grass roots lo  | bbying).                 |                                  |                             |
| <b>b</b> Total lobbying expenditi                                    | ures to influence a l                 | egislative body (direct lobb  | oying).                  |                                  |                             |
| c Total lobbying expenditu   | ures (add lines 1a a                  | nd 1b)  |                          |                                  |                             |
| d Other exempt purpose e   | expenditures                          |   |                          |                                  |                             |
| e Total exempt purpose e   | xpenditures (add lir                  | nes 1c and 1d)  |                          |                                  |                             |
| f Lobbying nontaxable an both columns                                | nount Enter the am                    | ount from the following tal   | ble ın                   |                                  |                             |
| If the amount on line 1e, col  | umn (a) or (b) is:                    | The lobbying nontaxable a   | mount is.                |                                  |                             |
| Not over \$500,000   |                                       | 20% of the amount on line 1e.   |                          |                                  |                             |
| Over \$500,000 but not over \$1,                                     | ,000,000                              | \$100,000 plus 15% of the excess  | over \$500,000           |                                  |                             |
| Over \$1,000,000 but not over \$                                     | 1,500,000                             | \$175,000 plus 10% of the excess  |                          | İ                                |                             |
| Over \$1,500,000 but not over \$                                     | 17,000,000                            | \$225,000 plus 5% of the excess   |                          |                                  |                             |
| Over \$17,000,000  |                                       | \$1,000,000.  |                          |                                  |                             |
| g Grassroots nontaxable a  | amount (enter 25%                     | of line 1f) .   |                          |                                  |                             |
| h Subtract line 1g from lin  | ne 1a If zero or less                 | s, enter -0-  |                          |                                  |                             |
| i Subtract line 1f from lin  |                                       |   |                          |                                  |                             |
| j If there is an amount ot   | her than zero on en                   | ther line 1h or line 1i, did t  | he organization file Fo  | orm 4720 reporting               | Yes No                      |
| section 4911 tax for this  | <del></del>                           |   |                          |                                  | 165 140                     |
| (Som   | e organizations tha                   | 4-Year Averaging Period l<br>It made a section 501(h) el<br>Is below. See the instructi | ection do not have to    | complete all of the five gh 2f.) |                             |
|  | Lobb                                  | ying Expenditures During  | 4-Year Averaging Pe      | riod                             |                             |
| Calendar year (or fiscal year beginning in)                          | <b>(a)</b> 2008                       | <b>(b)</b> 2009   | <b>(c)</b> 2010          | <b>(d)</b> 2011                  | (e) Total                   |
| 2a Lobbying non-taxable amount                                       |                                       |   |                          |                                  |                             |
| <b>b</b> Lobbying ceiling<br>amount (150% of line<br>2a, column (e)) |                                       |   |                          |                                  |                             |
| c Total lobbying expenditures  |                                       |   |                          |                                  | · · · · ·                   |
| <b>d</b> Grassroots nontaxable amount .                              |                                       |   |                          |                                  |                             |
| e Grassroots ceiling<br>amount (150% of line<br>2d, column (e))      |                                       |   |                          |                                  |                             |
| f Grassroots lobbying<br>expenditures                                |                                       |   |                          |                                  |                             |
| BAA  |                                       |   |                          | Schedule C (Forn                 | 1 990 or 990-EZ) 2011       |

| Part II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).   |                  |               |                             |
|--|------------------|---------------|-----------------------------|
| For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity   |                  | 9)            | (b)                         |
|  |                  | No            | Amount                      |
| During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of             |                  |               |                             |
| a Volunteers?  |                  |               |                             |
| <b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .  |                  |               |                             |
| c Media advertisements?  |                  |               |                             |
| d Mailings to members, legislators, or the public?   |                  |               |                             |
| e Publications, or published or broadcast statements?  | <u></u>          |               |                             |
| f Grants to other organizations for lobbying purposes?   | <u> </u>         |               |                             |
| g Direct contact with legislators, their staffs, government officials, or a legislative body?  |                  |               |                             |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?   |                  |               |                             |
| j Total. Add lines 1c through 1i   |                  |               |                             |
| ·  | -                |               |                             |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?   |                  |               | <del></del>                 |
| b If 'Yes,' enter the amount of any tax incurred under section 4912  |                  | ' <b> </b> -  |                             |
| c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912   |                  |               |                             |
| Part III-A   Complete if the organization is exempt under section 501(c)(4), section 501   | (a)(E)           |               | <del></del> -               |
| section 501(c)(6).   | (C)(S)           | , Oi          |                             |
|  |                  |               | Yes No                      |
| 1 Were substantially all (90% or more) dues received nondeductible by members?   |                  |               | 1 X                         |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  |                  |               | 2 X                         |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  |                  |               | 3 X                         |
| Part III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' Canswered 'Yes.'  | (c)(5)<br>OR (b) | or so<br>Part | ection<br>III-A, line 3, is |
| Dues, assessments and similar amounts from members.  |                  | 1             | 43,584.                     |
| 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).   |                  |               |                             |
| a Current year   |                  | 2 a           |                             |
| <b>b</b> Carryover from last year  | •                | 2 b           |                             |
| c Total  |                  | 2 c           |                             |
| 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  |                  | 3             | <del></del>                 |
| S Aggregate amount reported in section 0005(e)(1)(A) notices of nondeductible section 102(e) dues  | '                |               |                             |
| 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and polexient expenditure next year? |                  | 4             | 0.                          |
| 5 Taxable amount of lobbying and political expenditures (see instructions)   |                  | 5             | 0.                          |
| Part IV Supplemental Information   |                  |               |                             |
| Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; F Also, complete this part for any additional information  |                  |               | Part II-B, line 1.          |
|  |                  |               |                             |
|  |                  |               |                             |
|  |                  |               |                             |

| Schedule C (F | orm 990 or 990-EZ) 2011 ADSC | - WEST COAST CHAPTER ation (continued) | 91-2010736   | Page 4       |
|---------------|------------------------------|--|--------------|--------------|
| Part IV       | Supplemental Informa         | ation (continued)                      |              |              |
|               |                              |  |              |              |
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#### SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered 'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

OMB No 1545-0047

2011

Open to Public Inspection

| Name of the organization  |  |                            |  |   |                      | Employer identifica  |   |
|---|--|----------------------------|--|---|----------------------|--|---|
| ADSC - WEST COAST CHAPTER   |  |                            |  |   |                      | 91-201073  | <u>6</u>  |
| Part I Fundraising Activities. Comp<br>Form 990-EZ filers are not re                | lete if the organ<br>juired to compl   | nization ar<br>ete this pa | nswered '\<br>art.                       | es' to Form 990, Part I                           | V, line 1            |  |   |
| 1 Indicate whether the organization   | raised funds thi                       | rough any                  | of the foll                              | owing activities Check                            | all that             | apply.   |   |
| a Mail solicitations  |  |                            | е  | Solicitation of non-                              | governn              | nent grants  |   |
| <b>b</b> Internet and email solicitations   | 3                                      |                            | f  | Solicitation of gove                              | rnment               | grants   |   |
| c Phone solicitations   |  |                            | g  | Special fundraising                               | events               |  |   |
| d n-person solicitations  |  |                            |  | _   |                      |  |   |
| 2a Did the organization have a written employees listed in Form 990, Par            | n or oral agreer<br>t VII) or entity i | nent with<br>in connect    | any individuol<br>tion with p            | dual (including officers, rofessional fundraising | director<br>services | s, trustees or k   | ey Yes X No   |
| <b>b</b> If 'Yes,' list the ten highest paid in compensated at least \$5,000 by the | dividuals or ent<br>e organization.    | tities (func               | draisers) p                              | ursuant to agreements                             | under w              | hich the fundra  | iser is to be   |
| (i) Name and address of individual or entity (fundraiser)                           | (ii) Activity                          | have custoo                | fundraiser<br>dy or control<br>ibutions? | (iv) Gross receipts<br>from activity              | (or r                | nount paid to<br>retained by)<br>aiser listed in<br>olumn <b>(i)</b> | (vi) Amount paid to<br>(or retained by)<br>organization |
|   |  | Yes                        | No                                       |   |                      |  |   |
| 1   |  |                            |  |   |                      |  |   |
| 2   |  |                            |  |   |                      |  |   |
| 3   |  |                            |  |   |                      |  |   |
| 4   |  |                            |  |   |                      |  |   |
| 5   |  |                            |  |   |                      |  |   |
| 6   |  |                            |  |   |                      | <del> </del>   |   |
| 7   |  |                            |  |   |                      |  |   |
| 8   |  |                            |  |   |                      |  |   |
| 9   |  |                            |  |   |                      |  |   |
| 10  |  |                            |  |   |                      |  |   |
| Total   | ,                                      | •                          | ·<br>•                                   |   |                      |  | 0.  |
| 3 List all states in which the organiz or licensing.                                | ation is register                      | red or lice                | nsed to so                               | olicit contributions or ha                        | s been i             | notified it is exe   |   |
|   |  |                            |  |   |                      |  |   |
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|   |  | <b></b> _                  |  |   | <b></b>              |  |   |

| Pai                                    | t II  | Fundraising Events. Complete if more than \$15,000 of fundraising List events with gross receipts great the second statement of | the organization ar event contributions | swered 'Yes' to For                                 | rm 990, Part IV, Iir<br>on Form 990-EZ, | ne 18, or reported   |
|--|-------|---|---|---|---|--|
| R                                      |       |   | (a) Event #1 AUCTIONS (event type)      | (b) Event #2 GOLFING (event type)                   | (c) Other events                        | (d) Total events<br>(add column (a)<br>through column (c)) |
| RE>E2UE                                | 1     | Gross receipts .  | 37,522.                                 | 13,472.   |   | 50,994.  |
| Ĕ                                      | 2     | Less Charitable contributions   |   |   |   | ·  |
|  | _ 3   | Gross income (line 1 minus line 2)  | 37,522.                                 | 13,472.   |   | 50,994.  |
|  | 4     | Cash prizes   |   | 660.  |   | 660.   |
| D                                      | 5     | Noncash prizes  |   | 66.   |   | 66.  |
| DIRECT                                 | 6     | Rent/facility costs   |   |   |   | · · · · · · · · · · · · · · · · · ·                        |
|  | 7     | Food and beverages  |   | 1,907.  |   | 1,907.   |
| E<br>Y<br>P                            | 8     | Entertainment   |   | _   | <u></u>                                 |  |
| EXPENSES                               | 9     | Other direct expenses   | 37,522.                                 | 3,573.  |   | 41,095.  |
| 5                                      |       | Direct expense summary Add lines 4 thr  | - · ·                                   |   | . •                                     | <u>43,728.</u><br>7,266.                                   |
| Pai                                    |       | Net income summary Combine line 3, co<br>Gaming. Complete if the organiza   | ation answered 'Ye                      | s' to Form 990, Part                                | t IV, line 19, or rep                   |  |
|  |       | \$15,000 on Form 990-EZ, line 6a.   | 1                                       | (h) Bull tabe/Instant                               | (a) Other coming                        | (d) Total saming   |
| ##>################################### |       |   | (a) Bingo                               | (b) Pull tabs/Instant<br>bingo/progressive<br>bingo | (c) Other gaming                        | (d) Total gaming<br>(add column (a)<br>through column (c)) |
| Ĕ                                      | _1    | Gross revenue   |   |   |   | ,  |
| F                                      | 2     | Cash prizes   |   |   |   |  |
| D I RECT                               | 3     | Non-cash prizes   |   |   |   |  |
| C S<br>T E<br>S                        | 4     | Rent/facility costs   |   |   | <del></del>                             |  |
|  | 5     | Other direct expenses   |   |   |   |  |
|  | 6     | Volunteer labor   | Yes%                                    | Yes%  | Yes%                                    |  |
|  | 7     | Direct expense summary Add lines 2 thr  | rough 5 in column (d)                   |   | •                                       |  |
|  | 8     | Net gaming income summary Combine   | lines 1, column (d) and                 | line 7 .  |   |  |
|  | ls th | er the state(s) in which the organization of<br>ne organization licensed to operate gamino<br>lo,' explain  | g activities in each of th              | nese states?  |   | Yes No   |
|  |       | e any of the organization's gaming license<br>es,' explain  |   | · · · · · · · · · · · · · · · · · · ·               |   | Yes No   |
| BAA                                    |       |   | TEEA3702L                               | 01/24/12  | Schedule <b>G</b> (Fo                   | rm 990 or 990-EZ) 2011                                     |

| sche | edule G (Form 990 or 990-EZ) 2011 ADSC - WEST COAST CHAPTER  | 91-2010/36         | Page 3    |
|------|--|--------------------|-----------|
|      | Does the organization operate gaming activities with nonmembers?   | Yes                | No        |
| 12   | Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity administer charitable gaming?  | formed to Yes      | No        |
| 13   | Indicate the percentage of gaming activity operated in:  | 1 1                |           |
|      | a The organization's facility  | 13a                | 8         |
|      | h An outside facility .  | 13b                | ૄ         |
| 14   | Enter the name and address of the person who prepares the organization's gaming/special events books   | and records        |           |
|      | Name •   |                    |           |
|      | Address •  |                    | - <b></b> |
| 15 a | a Does the organization have a contact with a third party from whom the organization receives gaming reve  | enue? Yes          | s ∏No     |
|      | b If 'Yes,' enter the amount of gaming revenue received by the organization ▶ \$ an  |                    |           |
|      | of gaming revenue retained by the third party ► \$   |                    |           |
| c    | c If 'Yes,' enter name and address of the third party:   |                    |           |
|      | Name •   |                    |           |
|      | Address ►  |                    | ļ         |
| 16   | Gaming manager information   |                    |           |
|      | Name •   |                    | <b>-</b>  |
|      | Gaming manager compensation ► \$   |                    |           |
|      | Description of services provided ▶   |                    |           |
|      | Director/officer Employee Independent contractor   |                    |           |
| 17   | Mandatory distributions  |                    |           |
|      | a Is the organization required under state law to make charitable distributions from the gaming proceeds to state gaming license?  | Yes                | s No      |
| t    | b Enter the amount of distributions required under state law to be distributed to other exempt organizations   | or spent in the    |           |
| D    | organization's own exempt activities during the tax year • \$  | rad by Dart Line   | Oh.       |
| rai  | rt IV Supplemental Information. Complete this part to provide the explanations requicolumns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as apply this part to provide any additional information (see instructions). | plicable. Also con | nplete    |
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# SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

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  | Employer identification number  |  |  |  |  |  |
|---|---------------------------------|--|--|--|--|--|
| ADSC - WEST COAST CHAPTER   | 91-2010736                      |  |  |  |  |  |
| FORM 990, PART VI, LINE 4 - SIGNIFICANT CHANGES TO ORGANIZATIONAL DOCUMENTS |                                 |  |  |  |  |  |
| THE_BYLAWS_WERE_REVISED_TO_BE_CONSISTENT_WITH_THE_PARENT_ORGANI             | ZATION. THE PARENT              |  |  |  |  |  |
| ORGANIZATION IS THE ASSOCIATION OF DRILLED SHAFT CONTRACTOR, TA             | X ID_#_74-1622293               |  |  |  |  |  |
| FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF MEMBERS OR SHAR       | EHOLDER                         |  |  |  |  |  |
| THE ORGANIZATION HAS CORPORATE AND INDIVIDUAL MEMBERS.                      |                                 |  |  |  |  |  |
| FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLDERS ELECT GOVE         | RNING BODY                      |  |  |  |  |  |
| BOARD MEMBERS ARE ELECTED ON AN ANNUAL BASIS BY THE MEMBERS.                |                                 |  |  |  |  |  |
| FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS                       |                                 |  |  |  |  |  |
| THE FORM 990 IS DISCUSSED AND APPROVED BY THE BOARD PRIOR TO FI             | LING.                           |  |  |  |  |  |
| FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS        | FOR CEO, EXEC. DIR., OR TOP MGT |  |  |  |  |  |
| THE BOARD DISCUSSES AND APPROVES THE EXECUTIVE DIRECTOR'S COMPE             | NSATION.                        |  |  |  |  |  |
| FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AV       | AILABLE                         |  |  |  |  |  |
| GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE AVA             | ILABLE FOR REVIEW AT            |  |  |  |  |  |
| THE ORGANIZATION'S OFFICE.  |                                 |  |  |  |  |  |
| ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~                                     |                                 |  |  |  |  |  |
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