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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

OMB No 1545-0047

Open to Public

			endar year, or tax year beginning C Name of organization	01-01-2013 , 2013, and endin	g 12-31-2013		or ida	entification number
	eck if a Iress ch	ipplicable	TOASTMASTERS INTERNATIONAL				_	
_	ne cha	-	Doing Business As			95-1	30007	6
	ial retu	_						
_			Number and street (or P O box if ma PO BOX 9052	ail is not delivered to street address) R	oom/suite	E Teleph	one nun	nber
	minate			1770		(949)	858-8	8255
_	ended		City or town, state or province, count MISSION VIEJO, CA 926909052	try, and ZIP or foreign postal code				
J App	olication	n pending						\$ 41,218,955 ———————————————————————————————————
			F Name and address of prine DANIEL REX	cıpal officer	H(a)	Is this a group	returr	n for □ Yes 🔽 No
			PO BOX 9052			subordinates) 1 ES J* NO
			MISSION VIEJO, CA 92690	09052	H(b)	Are all subord	ınates	┌ Y es ┌ No
	x-exem	npt status	▼ 501(c)(3)	nsert no)		included? If "No." attach	n a list	(see instructions)
		<u> </u>	W TOASTMASTERS ORG	1317(4)(1) 61		_		
					H(c)	Group exemp	tion nu	mber 📭
			Corporation Trust Association	Other 🕨	L Ye	ear of formation 19	924 M	State of legal domicile CA
Pa	rt I		mary					
		•	escribe the organization's mission VIDE EDUCATION PROGRAMS	-	ON PURITO	SDEAKING AN	IDIEA	DEDCHID CKILLS
e e] -	WORLD	VIDE EDUCATION PROGRAMS	TO IMPROVE COMMONICATE	ON, PUBLIC	SPLAKING, AI	ND LEP	ADERSHIP SKILLS
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Ë	, -	Chack th		continued its operations or disp	ocad of mara	than 25% of its	not a	coto
Governance		CHECK II	is box F) If the organization dis	continued its operations of disp	osed of more	chan 25 % of its	s net a:	ssets
	3 1	Number	of voting members of the governi	ng body (Part VI, line 1a)			3	19
<u>କ</u>	4 1	Number	of independent voting members o	f the governing body (Part VI, li	ne 1 b)		4	19
Activities &	5	Total nu	mber of individuals employed in c	alendar year 2013 (Part V, line	2a)		5	161
្ន			mber of volunteers (estimate if ne	• •			6	103,003
			related business revenue from Pa				7a	28,750
	ь	Net unre	lated business taxable income fr	om Form 990-T, line 34			7b	0
	1						· 1	
		C + -	hubiana and monte (Daub VIIII lun			Prior Year	017	Current Year
<u> </u>	8		butions and grants (Part VIII, lin			28,	817	15,474
venue	9	Progra	m service revenue (Part VIII, lir	ne 2g)		28, 27,959,	767	15,474 29,636,697
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Land Balances Expenses And Balances	9 10 11 12 13 14 15 16a b 17 18 19 20 21 22 11 r pena	Progra Invest Other Total (1) Grants Benefi Salario 5-10) Profes Total fu Other Total (1) Reven Total (2) Reven Sign alties of dge and as any ki	m service revenue (Part VIII, line ment income (Part VIII, column revenue (Part VIII, column revenue (Part VIII, column (A), line venue—add lines 8 through 11	ne 2g)	A), line	28, 27,959, 1,153, -15, 29,126, 7,722, 18,463, 26,186, 2,939, eginning of Curre Year 43,272, 6,456, 36,815, chedules and states chedules and stat	767 376 685 275 0 0 686 0 682 368 907 ent 345 574 771	15,474 29,636,697 1,933,982 147,312 31,733,465 0 0 8,599,520 0 19,964,446 28,563,966 3,169,499 End of Year 49,101,499 7,172,736 41,928,763

Firm's name FSINGERLEWAK LLP

Firm's address ► 10960 WILSHIRE BLVD STE 700

LOS ANGELES, CA 900243783

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

Paid

Preparer

Use Only

Firm's EIN 🕨 95-2302617

Phone no (310) 477-3924

✓ Yes ☐ No

Par	t III	Statement of Program S Check if Schedule O contains a			II	٦
1	Briefl	y describe the organization's mi	ssion			
WOF ART ACT BET WOF	RLDWID S OF S UALIZ TERME RLDWID	STERS INTERNATIONAL IS THE PEREALITY THROUGH ITS ME PEAKING, LISTENING AND THE ATION, ENHANCE LEADERSHINT OF MANKIND IT IS BASIC DE NETWORK OF CLUBS, THER PROGRAMS	MBER CLUBS, TO A INKING-VITAL (CO P POTENTIAL, FO TO THIS MISSION	STMASTERS INTERN ONTINUED ON SCHEI STER HUMAN UNDER: I THAT TOASTMASTE	IATIONAL HELPS MEN AND DULE O)SKILLS THAT PRO STANDING AND CONTRIB ERS INTERNATIONAL CON	O WOMEN LEARN THE MOTE SELF- UTE TO THE TINUALLY EXPANDS ITS
2	Did th	ne organization undertake any sig	gnıfıcant program se	rvices during the year	which were not listed on	
	•	or Form 990 or 990-EZ?				
_		s," describe these new services				
3		ne organization cease conducting ces?	j, or make significar	t changes in how it cor	nducts, any program	
	If "Y e	s," describe these changes on S	chedule O			
4	exper	ribe the organization's program s ises Section 501(c)(3) and 501 tal expenses, and revenue, if an	(c)(4) organizations	are required to report		
4a		e) (Expenses \$ ICATION OF MANUALS, MAGAZINES AND LOP COMMUNICATION SKILLS AND APPL				
4b	(Code	e) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
4 c	(Code	e) (Expenses \$		including grants of \$) (Revenue \$)
4d		er program services (Describe in enses \$	Schedule O) including grants of	f \$) (Revenue \$)
4e	Tota	I program service expenses 🕨	22,879,975			

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	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? <i>If "Yes," complete Schedule D, Part 1</i>	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part $X^{f E}$	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, 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	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Charles Cabadala Caratana a managana ang tatana ang barana bisa Part V			
	Check if Schedule O contains a response or note to any line in this Part V	•	Yes	▽ No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 58			110
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
٠	gaming (gambling) winnings to prize winners?	1c	Yes	
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			
b	by this return	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
1a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4 a	Yes	
ь	AS,CA,CH,IN,MY,MX,NZ,SA,SN,SF,KS,TW,AE,			
	If "Yes," enter the name of the foreign country •UK, NG, GM, JM, JA, RP, CE See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5-		5a		No
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
c -	Does the organization have applied gross resourts that are normally greater than \$100,000, and did the	5с 6а		No
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	ба		NO
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	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 required to file Form 8282?	7c		Νo
A	If "Yes," indicate the number of Forms 8282 filed during the year	70		INO
u	Thes, indicate the number of Forms 8282 med during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		No
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
э a	Did the organization make any taxable distributions under section 4966?	9a		
_	Did the organization make a distribution to a donor, donor advisor, or related person?	9a 9b		
b n		טפ		
0_	Section 501(c)(7) organizations. Enter Introduce for and control control to be seen and control to be seen and control to be seen as a			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1				
	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3				
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes" has it filed a Form 720 to report these payments? If "No" provide an explanation in Schedule O	14a		110

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

Check if Schedule O contains a response or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

56	ection A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19			
	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	1b	19			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management con			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	rıor Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the or	ganız	ation's assets? .	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power more members of the governing body?		elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?		nembers, stockholders,	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body? \cdot . \cdot .			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>			9		No
Se	ection B. Policies (This Section B requests information about policies not i	requi	red by the Internal R	eveni	ue Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes Yes	No
	Did the organization have local chapters, branches, or affiliates?	ivitie		10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the act	ivitie: on's e	xempt purposes?	10b	Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	ivitie on's e s gov	xempt purposes? erning body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	ivitie: on's e s gov orm 9	xempt purposes? erning body before filing	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its the form?	on's es gov orm 9	xempt purposes? erning body before filing 90 rests that could give	10b	Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's es s government of s gove	xempt purposes? erning body before filing	10b 11a 12a	Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members of its the form? Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	s gov orm 9 y inte	xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	s gov s gov orm 9 y inte	xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes Yes Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	sy inte	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review.	on's ess governments on some some some some some some some some	xempt purposes? erning body before filing 90 rests that could give olicy? If "Yes," describe d approval by beration and decision?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the	civities on's e s gov form 9 y inte the p ewan	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annually rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	civities on's e s gov form 9 y inte the p ewan	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Folid the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	ivities on's e s gov form 9 y inte the p ew an	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Fold the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization follow and written policy or procedure requiring the organization.	ivities on's e s gov form 9 y inte the p ewan e deli	erning body before filing 90	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this FDI the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?	civities on's e s gov form 9 y inte the p ewan e deli	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Found the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization in joint venture arrangements under applicable federal tax law, and take	civities on's e s gov form 9 y inte the p ewan e deli	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	civities on's e s gov form 9 y inte the p ewan e deli	xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes Yes Yes	

- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►JOHN BOND PO BOX 9052
 MISSION VIEJO, CA 926909052 (949) 858-8255

Form 990	(2013	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an d r/tru	heck sofficer (stee) Highest compensated	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han on is	ne l both	box, an	heck unless officer stee)	6	(I Repor comper from organiza	rtable nsation i the tion (W-	(E) Reportable compensation from related organizations (W	'-	(F) Estima mount of compens from t	ted fother ation he		
		for related organizations below dotted line)	Individual trustie or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		ganizati relate organiza	ed		
												_				
1b	Sub-Total			•			1	•								
C	Total from continuation sheet	-	ection /	٠.	•	•	•			1,307,131		0		162,202		
	Total (add lines 1b and 1c). Total number of individuals (inc	cluding but not	lımıted	to the	156	liste	d abov		ho receive			٩		102,202		
_	\$100,000 of reportable compe						a abov	C) W	no receive	a more ci	idii					
													Yes	No No		
3	Did the organization list any fc	ormer officer, dir	ector o	r trus	tee,	key	emplo	yee	, or highes	t compen	sated employee					
	on line 1a? If "Yes," complete S	chedule J for suc	ch indiv	dual	•	•		•				3		No		
4	For any individual listed on line organization and related organ															
	ındıvıdual		•		•	•		•				4	Yes			
5	Did any person listed on line 1 services rendered to the organ			•				•	_		or individual for					
	services rendered to the organ	izacioni. 11 163	, compi	cic J	cricu	uic s	10134	cii pi	C13011 .		[5		No		
Se	ction B. Independent Co															
1	Complete this table for your five compensation from the organization												ax vear			
		(A)	-	4 (1011	101			u. , c	ar criaing		(B)		(C)		
WALS	NORTH PRINT GROUP 2180 MAIDEN L∕	ame and business									cription of services MAILING SERVICES	+	Comper 1	,614,189		
ASENE	DIA USA INC 701C ASHLAND AVE FOLCE	ROFT PA 19032								SHIPPING				,563,063		
	HEALTHCARE OF CALIFORNIA 5476 C					693					HEALTH INSURANCE		1,110,326			
	INGLABS INC TOTAL 4916 N RAVENSW										NAL MATERIAL EO PRODUCTION	+	383,528			
	MAN AUDIO VISUAL SOLUTIONS INC 16									SERVICES				380,681		
	Fotal number of independent coi \$100,000 of compensation from			not	ıımıt	edt	o thos	e IIst	ted above)	who rece	ived more than					

		Check if Sched	ule O contains a respor	nse or note to any lir	ne in this Part VIII			
				í	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s g	1a	Federated cam	paigns 1a					
ant un'	ь	Membership du	ıes 1b					
Gr. mo	c	Fundraising ev	ents 1c					
Contributions, Gifts, Grants and Other Similar Amounts	d		zations 1d					
Gii iila		Government grant						
ns, Sirr	e	_						
ıtio er (f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	15,474				
tributio Other	g		ions included in lines		i	i		
Contr and (1a-1f \$			15,474			
C.	h	Iotal. A dd line:	s 1 a - 1 f	· · · · •	13,474			
e e				Business Code				
ren	2a	MEMBERSHIP FEES	S	900099	23,455,105	23,455,105		
B	Ь	DIST CONFERENC	E INCOME	900099	4,149,794	4,149,794		
166	c	OTHER DISTRICT	INCOME	900099	961,698	961,698		
Ser.	d	ANNUAL CONVENT	TON INCOME	900099	790,440	790,440		
Program Serwce Revenue	е	CHARTER FEES		900099	192,875	192,875		
X ⊕	f	All other progra	am service revenue		86,785	58,035	28,750	
ž	g	Total. Add line:	s 2a-2f		29,636,697			
	3		ome (including dividen		555 400			555 400
			aramounts)	l l	555,499			555,499
	4		stment of tax-exempt bond	` <u>.</u>	389			389
	5	Royalties .	() Dool	(II) Personal	307			307
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
	_	expenses Rental income						
	C	or (loss)						
	d	Net rental inco	me or (loss)					
	7a	Gross amount	(ı) Securities	(II) O ther				
	′ °	from sales of assets other	9,182,645					
		than inventory						
	Ь	Less cost or other basis and	7,804,162					
	c	sales expenses Gain or (loss)	1,378,483					
	d		ss)		1,378,483			1,378,483
	8a		from fundraising					_,
ne		events (not inc						
Other Revenue		\$of contributions See Part IV, lir	s reported on line 1c) ne 18 a					
ihe.	ь	Less direct ex	penses b					
δ	С	Net income or	(loss) from fundraising	events				
	9a		from gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	С	Net income or	(loss) from gamıng actı	vities				
	10a	Gross sales of						
		returns and allo	owances . a	1,828,251				
	ь	less costofa	oods sold b	1,681,328				
	c		(loss) from sales of inve		146,923	146,923		
		Mıscellaneou		Business Code				
	11a							
	ь		_					
	С							
	d	All other reven	ue					
	e		s 11a-11d					
	12	Total revenue	See Instructions	_				
	ı	. J.a. ievellue.		📂	31 733 465	20 754 870	28 750	1 934 371

	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All				
D	Check if Schedule O contains a response or note to any line in this		(B)	(c)	 (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	778,082		778,082	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	6,891,455	5,114,159	1,777,296	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	293,651	210,774	82,877	
9	Other employee benefits	34,708		34,708	
10	Payroll taxes	601,624	422,360	179,264	
11	Fees for services (non-employees)				
а	Management				
b	Legal	261,768		261,768	
C	Accounting	56,170		56,170	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	235,909		235,909	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	463,973	286,731	177,242	
12	Advertising and promotion	125,723	125,723		
13	Office expenses	115,824	60,098	55,726	
14	Information technology	42,369	42,369		
15	Royalties				
16	Occupancy	95,547	95,547		
17	Travel	609,561	432,016	177,545	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	83,239	46,350	36,889	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	717,025	340,857	376,168	
23	Insurance	1,027,289	675,153	352,136	
24	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)				
а	DISTRICT EXPENSE	8,925,562	8,925,562		
b	MAGAZINE	2,330,067	2,330,067		
c	TRANSPORTATION	847,757	606,458	241,299	
d	POSTAGE	716,333	705,613	10,720	
е	All other expenses	3,310,330	2,460,138	850,192	
25	Total functional expenses. Add lines 1 through 24e	28,563,966	22,879,975	5,683,991	0
26	Joint costs. Complete this line only if 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)				

Part X Balance Sheet

ГСІ	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X		_	
		,,,,,,,,,,,,,,	(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	4,204,149		5,089,495
	2	Savings and temporary cash investments	10,127,137		12.606.574
	3	Pledges and grants receivable, net	10, 127, 107	3	12,000,074
	4		72,080	4	131,952
	-	Accounts receivable, net	72,080	4	131,952
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
χ. Θ.	7	Notes and loans receivable, net		7	
4	8	Inventories for sale or use	978,828	8	778,391
	9	Prepaid expenses and deferred charges	747,407	9	800,410
	10a	Land, buildings, and equipment cost or other basis Complete	·	9	000,410
	Ь	Part VI of Schedule D Less accumulated depreciation	4	10c	4,514,692
	11	Investments—publicly traded securities	22,614,442	11	25,179,985
	12	Investments—other securities See Part IV, line 11	, ,	12	, ,
	13	Investments—program-related See Part IV, line 11		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)	43,272,345	16	49,101,499
	17	Accounts payable and accrued expenses	1,767,004	17	2,035,871
	18	Grants payable	1,121,221	18	
	19	Deferred revenue	4,689,570	19	5,136,865
	20	Tax-exempt bond liabilities	1,000,010	20	3,100,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
es es	22			21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u> </u>		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule		25	
	26	D	6,456,574	26	7,172,736
<u></u>	20	Total liabilities. Add lines 17 through 25	0,400,014	20	1,112,130
Fund Balance	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	36,798,546	27	41,914,383
<u>छ</u>	28	Temporarily restricted net assets	17,225	28	14,380
<u> </u>	29	Permanently restricted net assets	,===	29	
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
or F		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ř	33	Total net assets or fund balances	36,815,771	33	41,928,763
_	34	Total liabilities and net assets/fund balances	43,272,345	34	49,101,499

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		31,	733,465
2	Total expenses (must equal Part IX, column (A), line 25)	2		28,	563,966
3	Revenue less expenses Subtract line 2 from line 1	3		3,:	169,499
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		36,8	315,771
5	Net unrealized gains (losses) on investments	5		1,9	943,493
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		41,9	928,763
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

EIN: 95-1300076

Name: TOASTMASTERS INTERNATIONAL

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Form 990, Part VII - Compensation Compensated Employees, and Inde				Tru	ste	es, k	(ey	Employees, High	nest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion (nan o n is b	ne booth a	ox, ι an o ⁄trus	inless fficer tee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		_,,	related organizations
JOHN LAU	10 00	х		х				0	0	0
IMMEDIATE PAST PRESIDENT GEORGE YEN	10 00									
INTERNATIONAL PRESIDENT		X		х				0	0	0
MOHAMMED MURAD INTERNATIONAL PRESIDENT ELECT	10 00	х		х				0	0	0
JIM KOKOCKI	10 00	×		х				0	0	0
FIRST VICE PRESIDENT	10.00							Ů	0	
MIKE STORKEY FROM AUG 13 SECOND VICE PRESIDENT	10 00	x		×				o	0	0
MICHAEL NOTARO UNTIL AUG 13	10 00	×		x				0	0	0
PAST INTERNATIONAL PRESIDENT								0	0	
JIM SULTAN UNTIL AUG 13 INTERNATIONAL DIRECTOR	6 00	x						0	0	0
DAVID MCCALLISTER UNTIL AUG 13	6 00	х						0	0	0
INTERNATIONAL DIRECTOR ANDREW LITTLE UNTIL AUG 13	6 00									
INTERNATIONAL DIRECTOR		х						0	0	0
VIKI KINSMAN UNTIL AUG 13	6 00	Х						0	0	0
INTERNATIONAL DIRECTOR WENDY HARDING UNTIL AUG 13	6 00	X						0	0	0
INTERNATIONAL DIRECTOR GEORGE THOMAS UNITL AUG 13	6 00									
INTERNATIONAL DIRECTOR BALRAJ ARUNASALAM UNTIL AUG 13	6 00	×						0	0	0
INTERNATIONAL DIRECTOR		х						0	0	0
MIKE BARSUL	6 00	х						0	0	0
PATRICIA HANNAN	6 00	,,								
INTERNATIONAL DIRECTOR		Х						0	0	0
LORI LOCOCO INTERNATIONAL DIRECTOR	6 00	x						0	0	0
KRISTINA KIHLBERG	6 00	х						0	0	0
INTERNATIONAL DIRECTOR DON GRIFFITH	6 00									
INTERNATIONAL DIRECTOR MIKE HELM	6 00	X						0	0	0
INTERNATIONAL DIRECTOR		х						0	0	0
JOSEPH GOMEZ INTERNATIONAL DIRECTOR	6 00	х						0	0	0
KAREN BLAKE FROM AUG 13	6 00	×						0	0	0
INTERNATIONAL DIRECTOR SHARON HILL FROM AUG 13	6 00									
INTERNATIONAL DIRECTOR KHALED MATALAGAITU FROM AUG 13	6 00	X						0	0	0
INTERNATIONAL DIRECTOR	0 00	х						0	0	0
DEEPAK MENON FROM AUG 13 INTERNATIONAL DIRECTOR	6 00	х						0	0	0
RICHARD PECK FROM AUG 13	6 00	x						0	0	0
INTERNATIONAL DIRECTOR	J							<u> </u>		

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Ind	epenaent Cor	ntracto	rs					1	I	
(A) Name and Title	(B) Average hours per week (list any hours	Posit more th perso and a	ion (d nan o n is b	ne b	ox, u an of	nless ficer	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
ALAN SHANER FROM AUG 13	6 00	х						0	0	0
INTERNATIONAL DIRECTOR		^							Ů	v
TOM JONES FROM AUG 13	6 00	х						0	0	0
INTERNATIONAL DIRECTOR										
DANIEL REX	40 00			х				349,090	0	30,962
CHIEF EXECUTIVE OFFICER										
SALLY NEWELL-COHEN COO, SECRETARY/TREASURER	40 00			х				203,462	0	25,113
HAMIDREZA FARAJIAN	40 00				x			152,543	0	16,912
TECHNOLOGY SERVICES DIRECTOR								132,313		10,312
JOHN BOND	40 00					х		147,017	0	28,685
CONTROLLER MONIQUE BERRY										
MARKETING COMMUNICATIONS DIRECTOR	40 00					х		123,652	0	8,540
DARCI MAENPA	40 00					х		120,743	0	25,846
MEMBER SUPPORT DIRECTOR								,		,
KRISTEN ROLAPP	40 00					x		107,245	0	16,761
DISTRICT SERVICES MANAGER STEVE LOE	40 00									
LOGISTICS MANAGER						Х		103,379	0	9,383

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DLN: 93493321054114

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public **Inspection**

Name	of	the	orga	niza	tion
OASTN	1AS	TERS	INTE	RNAT	IONAL

Employer identification number

						1						
(i) N sup _l orgai	port	ed	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is a conganization organization of (i) list your gove docume	on in ted in rning	(v) Did you the organizin col (i) o suppor	zation of your	(vi) Is organiza col (i) organiza the U	tion in ganized	mon	nount of etary port
h		Provide	the followin	ng information about	tne supporte	ea organizat	cion(s)					
L		(iii) A 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)				11g	· ·	
				er of a person descri			••			11g		
				irectly or indirectly o governing body of th			_	persons de	scribed in (ii) 11 g	Yes ı(i)	No
g		Sınce A followin	g persons?	2006, has the organi								, , , , , , , , , , , , , , , , , , ,
f		If the o	rganization	received a written de	etermınatıon	from the IR	S that it is a	Туре I, Тур	e II, or Type	III support	ıng organı	zatio <u>n,</u>
е Г		By chec	king this b	ox, I certify that the on managers and otl	organization	ıs not cont	rolled directly	or indirect	ly by one or	more disqua	lified pers	ons
11		one or i	more public that descri	ganized and operated ly supported organiz bes the type of supp b Type II c	ations descr or <u>ti</u> ng organ	ıbed ın sect ızatıon and	ion 509(a)(1 complete line) or section s 11e th <u>ro</u> u	509(a)(2) S igh 11h	see section 5	509(a)(3).	Check
10	_			ganized and operated								
				oss investment inco ganization after June						tax) from bu	ısınesses	
				ities related to its ex								
9 🔽	_			at normally receives					outions, men	nbership fees	s, and gros	ss
7 T 8 T	_	describ	ed ın sectio	at normally receives on 170(b)(1)(A)(vi). described in sectior	(Complete F	art II)		-	ental unit or	from the gen	eral public	:
6 F	-	A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).			
- ,		_	•	A)(iv). (Complete P	_		-,	,,	9			
5 Г	-	hospita An orga	l's name, ci anization op	ty, and state erated for the benefi	t of a college	or universi	tv owned or o	perated by	a governmer	ntal unit desc	ribed in	_
4				n organization operat	ted ın conjun	ction with a	hospital des	cribed in se	ction 170(b)	(1)(A)(iii). E	nter the	
з Г				perative hospital se								
2	-	A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)					
1	-	A churc	h, conventi	on of churches, or as	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).			
he orga	anız			e foundation becaus								
Part 1	I	Keas	on tor Pu	blic Charity Sta	tus (All org	ganızatıons	s must com	olete this p	oart.) See i	nstructions	ons.	

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	32,977	27,927	40,950	28,817	15	5,474 146,145
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	16,713,157	21,845,756	24,767,862	29,937,114	31,464	1,948 124,728,837
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified	16,746,134	21,873,683	24,808,812	29,965,931	31,480	0,422 124,874,982
b	persons A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the						0
c 8	year Add lines 7a and 7b Public support (Subtract line 7c						124,874,982
	rom line 6) ction B. Total Support						
	ndar year (or fiscal year	(-) 2000	(I-) 2010	(-) 2011	(4) 2012	(-) 2012	(6) Tabal
	beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	
9 10a	A mounts from line 6 Gross income from interest,	16,746,134	21,873,683	24,808,812	29,965,931	31,480	124,874,982
LUa	dividends, payments received on securities loans, rents, royalties and income from similar sources	702,863	682,795	536,668	625,352	555	3,103,566
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b Net income from unrelated	702,863	682,795	536,668	625,352	555	3,103,566
11	business activities not included in line 10b, whether or not the						
12	business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)	17,448,997	22,556,478	25,345,480	30,591,283	32,036	
14	First five years. If the Form 990 is check this box and stop here	for the organizati	on's first, second	, thırd, fourth, or 1	fifth tax year as a	a 501(c)(3) o	organization, ►
Se	ction C. Computation of Pul	olic Support Po	ercentage				F1
15	Public support percentage for 201			13, column (f))		15	97 570 %
16	Public support percentage from 20	12 Schedule A, P	art III, line 15			16	96 960 %
Se	ction D. Computation of Inv	estment Inco	me Percenta	ge			
17	Investment income percentage for	2013 (line 10c, c	olumn (f) divided	by line 13, colum	n (f))	17	2 430 %
18	Investment income percentage fro					18	3 040 %
19a	33 1/3% support tests—2013. If th	e organization did	not check the bo	x on line 14, and	line 15 is more t	han 33 1/3%	, and line 17 is not

►V more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		formation. Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 000 o	000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

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

DLN: 93493321054114

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

nai Rever	ille Service	10113 13 dt 4WW.113.90V/101111330.			Tilshect	IUII
	f the organization STERS INTERNATIONAL			oloyer identifica 1300076	ition numbe	r
art I	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990				. Complet	e ıf th
	organization answered Tes to Form 950	(a) Donor advised funds		(b) Funds and	other accou	nts
Tota	al number at end of year					
Agg	gregate contributions to (during year)					
Agg	gregate grants from (during year)					
Agg	gregate value at end of year					
	the organization inform all donors and donor adviso ds are the organization's property, subject to the or		nor adv	ısed	☐ Yes	┌ No
use	the organization inform all grantees, donors, and doed only for charitable purposes and not for the beneful of				┌ Yes	┌ No
rt II		the organization answered "Yes"	to Forr	n 990. Part I\	/, line 7.	
	pose(s) of conservation easements held by the organ Preservation of land for public use (e g , recreation Protection of natural habitat Preservation of open space	anization (check all that apply) or education)	n histor certifie	ically important	t land area ture	
	mplete lines 2a through 2d if the organization held a sement on the last day of the tax year	i qualified conservation contribution in	the forr	n of a conserva	tion	
				Held at the	End of the	Year
Tot	al number of conservation easements		2a			
Tot	al acreage restricted by conservation easements		2b			
Nur	mber of conservation easements on a certified histo	ric structure included in (a)	2c			
	mber of conservation easements included in (c) acq toric structure listed in the National Register	uired after 8/17/06, and not on a	2d			
	mber of conservation easements modified, transferr tax year ►	ed, released, extinguished, or terminat	ed by th	ne organization	during	
Nur	mber of states where property subject to conservati	on easement is located ►				
Doe	es the organization have a written policy regarding t orcement of the conservation easements it holds?			f violations, and	│ ├─Yes	┌ No
Sta ⊾ -	ff and volunteer hours devoted to monitoring, inspec	cting, and enforcing conservation ease	ments o	during the year		
	ount of expenses incurred in monitoring, inspecting	, and enforcing conservation easement	ts durın	g the year		
Doe	· es each conservation easement reported on line 2(c I section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of se	ction 1	70(h)(4)(B)(ı)	┌ Yes	┌ No
bala	Part XIII, describe how the organization reports cor ance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia				
rt II		s of Art, Historical Treasures,	or Ot	her Similar	Assets.	
wor	he organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide, in Part XIII, the text of the footnote t	16 (ASC 958), not to report in its reve ts held for public exhibition, education	, or rese	earch in furthera		С
If t wor	he organization elected, as permitted under SFAS 1 ks of art, historical treasures, or other similar asse vice, provide the following amounts relating to these	16 (ASC 958), to report in its revenue ts held for public exhibition, education	statem	nent and balanc		С
(i)	Revenues included in Form 990, Part VIII, line 1			► \$		
	Assets included in Form 990, Part X					
Ift	he organization received or held works of art, historiously amounts required to be reported under SFAS					
Rev	venues included in Form 990, Part VIII, line 1			► \$		
	sets included in Form 990. Part X			· · · · · · · · · · · · · · · · · · ·		
A 5	seis included in FOIM 990. Part X			■ 35		

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance d Additions during the year e Distributions during the year f Ending balance 11 15 16 17 17 18 19 19 10 11 11 11 11 12 13 14 15 16 16 17 16 17 18 18 19 19 19 19 19 19 19 19	a Public exhibition	an or exch her ther the o cal treasu anization anization e 21. ibutions o	provided in P	ams s exempt p similar r d "Yes" to ets not 1c 1d 1r	Form 99 Amo	Yes Ount Yes	□ No □ No □ arrs back
b Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes N Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part XI, Inc. 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XI, Inc. 21. 1b Is the organization and an amount on Form 990, Part XI, Inc. 21. 1c Beginning balance 1c Amount 1d Amount 1e Did the organization include an amount on Form 990, Part X, Inc. 21? 2a Did the organization include an amount on Form 990, Part X, Inc. 21? 2b If "Yes," explain the arrangement in Part XIII Check here if the organization has been provided in Part XIII 2c Provide the estimated properties of the current year of (b)Proc year b (c)Proc years back (d)Thee years back (e)Proc years back 2c Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment 2d Describe in Part XIII and complete the organization that are held and administered for the organization by (1) unrelated organizations 3a(t) Ves No organization by (1) unrelated organizations listed as required on Schedule R? 3b Part XI Land, Buildings, and Equipment. Complete if the organization an answered "Yes' to Form 990, P	b Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they furst XIII 5 During the year, did the organization solicit or receive donations of art, historia assets to be sold to raise funds rather than to be maintained as part of the organization to be maintained as part of the organization. Part IV inne 9, or reported an amount on Form 990, Part X, line 9, or reported an amount on Form 990, Part X, line 11 included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIII and complete the following tables. c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII Check here if the explanation in Part V Endowment Funds. Complete if the organization answered to Contributions. c Net investment earnings, gains, and losses d Grants or scholarships. c Net investment earnings, gains, and losses d Grants or scholarships. c Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the current year end balance (line 1g, co a Board designated or quasi-endowment land to the organization that are organization by lines 2a, 2b, and 2c should equal 100% 3 Are there endowment funds not in the possession of the organization that are organization by (i) unrelated organizations.	ther the oral treasurantzation of e 21. Ibutions of the control o	organization' ures or other 's collection' n answered or other asse	s exempt process similar? I "Yes" to ets not 1c 1d 1e 1f art XIII Part IV, I	Form 99 Amo	Yes Ount Yes	□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical trassures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. If "Yes," explain the arrangement in Part XIII and complete the following table If "Yes," explain the arrangement in Part XIII and complete the following table Beginning balance A Additions during the year Distributions during the year It lie and the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part XIII. Seguing of year balance A Beginning of year balance Ontributions Ontributions Ontributions Ontributions A Grants or scholarships Other expenditures for facilities and programs. A difference of the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quesi-endowment Permanent endowment The percentages in lines 2e, 2b, and 2c should equal 100% A are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations Feet No. 10 per part X III the intended uses of the organization is endowment funds Describion of property On the organization of property On the organization or part X III the intended uses of the organization or solice with the organization of property On the organization of property On the organization of the organization of property	Provide a description of the organization's collections and explain how they fur Part XIII During the year, did the organization solicit or receive donations of art, historia assets to be sold to raise funds rather than to be maintained as part of the organization solicit or receive donations of art, historia assets to be sold to raise funds rather than to be maintained as part of the organization to receive donations of art, historia assets to be sold to raise funds rather than to be maintained as part of the organization an agent, trustee, custodian or other intermediary for continction of part X, line 9, or reported an amount on Form 990, Part X, line 21 for Yes," explain the arrangement in Part XIII and complete the following tables and diditions during the year end balance Distributions during the year end diditions during the year end balance Did the organization include an amount on Form 990, Part X, line 21? Diff"Yes," explain the arrangement in Part XIII Check here if the explanation in Part V Endowment Funds. Complete if the organization answered to Contributions. Contributions (a)Current year (b)Pror year (a)Current year (b)Pror year (c)Pror year (b)Pror year (c)Pror year (c)Pro	ther the ocal treasuanization e 21. Ibutions constitutions constitution	orovided in P	similar? I "Yes" to ets not 1c 1d 1e 1f art XIII Part IV, I	Form 99 Amo	Yes Ount Yes	□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 921. Is Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table If "Yes," explain the arrangement in Part XIII and complete the following table If "Yes," explain the arrangement in Part XIII and complete the following table of the organization include an amount on Form 990, Part X, line 21? If Ending balance It Amount It It It It It It It	Provide a description of the organization's collections and explain how they fur Part XIII During the year, did the organization solicit or receive donations of art, historic assets to be sold to raise funds rather than to be maintained as part of the organization assets to be sold to raise funds rather than to be maintained as part of the organization Part IV	an treasu anization' anizatior e 21. Ibutions c	orovided in P	similar? I "Yes" to ets not 1c 1d 1e 1f art XIII Part IV, I	Form 99 Amo	Yes Ount Yes	□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
Part XIII 5 Dump the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV, line 90, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIII and complete the following table C Beginning balance 1d Additions during the year 1d Id	Part XIII 5 During the year, did the organization solicit or receive donations of art, historia assets to be sold to raise funds rather than to be maintained as part of the organization assets to be sold to raise funds rather than to be maintained as part of the organizative part IV	an treasu anization' anizatior e 21. Ibutions c	orovided in P	similar? I "Yes" to ets not 1c 1d 1e 1f art XIII Part IV, I	Form 99 Amo	Yes Ount Yes	□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
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Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Ca)Current year Cb)Pnor year b (c)Two years back Cd)Three years back Ce)Four	Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIII Check here if the explanation in Part V Endowment Funds. Complete if the organization answered (a)Current year (b)Pnor year (a)Current year (b)Pnor year (c)Pnor year (d)Pnor year (d)Pn	Yes" to I	provided in P	art XIII Part IV, I			<u> </u>
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Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a)Current year (b)Pnor year (b)C)Two years back (d)Three years back (e)Four yea	Part V Endowment Funds. Complete if the organization answered (a)Current year (b)Prior year 1a Beginning of year balance	Yes" to I	Form 990,	Part IV, l	ıne 10.		ears back
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Complete Complet	Part V Endowment Funds. Complete if the organization answered (a)Current year (b)Prior year 1a Beginning of year balance	Yes" to I	Form 990,	Part IV, l		(e) Four ye	ars back
Beginning of year balance	Beginning of year balance	b (c) Tv	wo years back	(d)Three ye	ears back ((e) Four ye	ears back
b Contributions	b Contributions						
d Grants or scholarships	c Net investment earnings, gains, and losses d Grants or scholarships						
d Grants or scholarships	d Grants or scholarships						
e Other expenditures for facilities and programs	e Other expenditures for facilities and programs						
and programs	and programs						
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organization by (i) unrelated organizations	organization by (i) unrelated organizations						
(i) unrelated organizations	(i) unrelated organizations	eld and a	admınıstered	for the			
(ii) related organizations					- 40		No_
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R?						-	
4 Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b)Cost or other (c) Accumulated (d) Book value.	` ,				-	<u>' </u>	
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b)Cost or other (c) Accumulated (d) Book value.							
11a. See Form 990, Part X, line 10. Description of property (a) Cost or other (b)Cost or other (c) Accumulated (d) Book value.			wered 'Yes'	to Form	990, Par	t IV, lır	——— 1е
	11a. See Form 990, Part X, line 10.						
						(d) Bo	ok value
1a Land	1a Land		1,246,	598			1,246,598
b Buildings	b Buildings		4	206	3,038,093		1,516,113
c Leasehold improvements	c Leasehold improvements		4,554,				
d Equipment	d Equipment		4,554,				160 911
e Other	e Other			139	1,429,295		400,844
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)	Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), I	vestment)	1,890, 4,434,			1	1,291,137

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments
A mounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains on investments
A Net unrealized gains on investments
b Donated services and use of facilities
c Recoveries of prior year grants
d Other (Describe in Part XIII)
Add lines 2a through 2d
3 Subtract line 2e from line 1
A mounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b . 4a 235,909 b Other (Describe in Part XIII)
a Investment expenses not included on Form 990, Part VIII, line 7b . 4a 235,909 b Other (Describe in Part XIII)
b Other (Describe in Part XIII) 4b 4c 4c 235,7 c Add lines 4a and 4b 4c 235,7 4c 235,7 5 31,733,7
c Add lines 4a and 4b
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)
Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Comple
if the organization answered 'Yes' to Form 990, Part IV, line 12a.
1 Total expenses and losses per audited financial statements
2 Amounts included on line 1 but not on Form 990, Part IX, line 25
a Donated services and use of facilities
b Prior year adjustments
c Other losses
d Other (Describe in Part XIII)
e Add lines 2a through 2d
3 Subtract line 2e from line 1
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 235,909
b Other (Describe in Part XIII)
c Add lines 4a and 4b
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)
Part XIII Supplemental Information

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

THE ORGANIZATION HAS BEEN DESIGNATED AS TAX-EXEMPT UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND IS ALSO EXEMPT FROM STATE FRANCHISE TAXES UNDER SECTION 23701(D) OF THE CALLFORNIA REVENUE AND TAXATION CODE AND IS NOT GENERALLY SUBJECT TO FEDERAL OR STATE INCOME TAXES HOWEVER, THE ORGANIZATION IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF TH PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION NO INCOME TAX PROVISION HAS BEEN RECORDED AS, IN THE OPINION OF MANAGEMENT, THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS IS NOT MATERIAL TO THE BASIC FINANCIAL STATEMENTS TAKEN AS A WHOLE EFFECTIVE JULY 1, 2009, THE ORGANIZATION ADOPTEI FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION TOPIC NO 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ("ASC 740") ASC 740 CLARIFIES FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS IN ACCORDANCE WITH FASB STATEMENTS NO 109, ACCOUNTING FOR INCOME TAXES, AND PRESCRIBED A RECOGNIZION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IN ACCORDANCE WITH ASC 740, THE ORGANIZATION RECOGNIZES THE IMPACT OF TAX POSITIONS IN THE FINANCIAL STATEMENTS IF THAT POSITION IS MORE LIKELY THAN NO OF BEING SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION THE ORGANIZATION HAS DETERMINED THAT THE ADOPTION OF ASC 740 DID NOT RESULT IN THE RECOGNIZATION AND LABELITY FOR UNRECOGNIZES THE IMPACT OF TAX POSITIONS IN THE FINANCIAL STATEMENTS IF THAT POSITION OF ASC 740 DID NOT RESULT IN THE RECOGNIZATION FOR ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS THE ORGANIZATION RECOGNIZATION FOR ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS THE ORGANIZATION RECOGNIZATION FOR ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS THE ORGANIZATION TAX POSITIONS IN INCOME TAX EXPENSE DURING THE YEAR ENDED	Detum Deference	Evalenation
CODE SECTION 501(C)(3) AND IS ALSO EXEMPT FROM STATE FRANCHISE TAXES UNDER SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE AND IS NOT GENERALLY SUBJECT TO FEDERAL OR STATE INCOME TAXES HOWEVER, THE ORGANIZATION IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF TH PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION NO INCOME TAX PROVISION HAS BEEN RECORDED AS, IN THE OPINION OF MANAGEMENT, THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS IS NOT MATERIAL TO THE BASIC FINANCIAL STATEMENTS TAKEN AS A WHOLE EFFECTIVE JULY 1, 2009, THE ORGANIZATION ADOPTED FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION TOPIC NO 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ("ASK 740") ASC 740 CLARIFIES FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS IN ACCORDANCE WITH FASS STATEMENTS NO 109, ACCOUNTING FOR INCOME TAXES, AND PRESCRIBED A RECOGNIZION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IN ACCORDANCE WITH ASC STATEMENTS OR STANDARD SOURCE WITH ASC TAXES WITH ASC STATEMENTS IN ACCORDANCE WITH FASS STATEMENTS NO 109, ACCOUNTING FOR INCOME TAXES, AND PRESCRIBED A RECOGNIZION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IN ACCORDANCE WITH ASC TAXEN THE PROTECT OF TAX POSITION SIN THE FINANCIAL STATEMENTS IF HAT POSITION IS MORE LIKELY THAN NO OF BEING SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION THE ORGANIZATION HAS DETERMINED THAT THE ADOPTION OF ASC 740 DID NOT RESUL' IN THE RECOGNIZENT OF ANY LIABILITY FOR UNRECOGNIZES THE IMPACT OF TAX BENEFITS THE ORGANIZATION AND PONALTIES RELATED DECEMBER 31, 2013 AND 2012, THE ORGANIZATION DID NOT RECOGNIZE ANY AMOUNT II POTENTIAL INTEREST AND PENALTIES ASSOCIATED WITH HUNCERTAIN TAX POSITIONS THE FOLLOWING TABLE SUMMARIZES THE OPEN TAX YEARS FOR EACH MAJOR JURISDICTION JURISDICTION OPEN TAX YEARS FOR EACH MAJOR JURISDICTION JURISDI	Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS PART XII, LINE 2D - OTHER ADJUSTMENTS COSTS OF EDUCATIONAL MATERIALS 1,681,328 ADJUSTMENTS CHEDULE D, PART XIII THE 2010 INFORMATIONAL RETURN WAS AUDITED BY THE IRS WHICH RESULTED IN A "NO	PART X, LINE 2	CODE SECTION 501(C)(3) AND IS ALSO EXEMPT FROM STATE FRANCHISE TAXES UNDER SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE AND IS NOT GENERALLY SUBJECT TO FEDERAL OR STATE INCOME TAXES HOWEVER, THE ORGANIZATION IS SUBJECT TO INCOME TAXES ON ANY NET INCOME THAT IS DERIVED FROM A TRADE OR BUSINESS, REGULARLY CARRIED ON, AND NOT IN FURTHERANCE OF TH PURPOSES FOR WHICH IT WAS GRANTED EXEMPTION NO INCOME TAX PROVISION HAS BEEN RECORDED AS, IN THE OPINION OF MANAGEMENT, THE NET INCOME, IF ANY, FROM ANY UNRELATED TRADE OR BUSINESS IS NOT MATERIAL TO THE BASIC FINANCIAL STATEMENTS TAKEN AS A WHOLE EFFECTIVE JULY 1, 2009, THE ORGANIZATION ADOPTED FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION TOPIC NO 740, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ("ASC 740") ASC 740 CLARIFIES FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTERPRISE'S FINANCIAL STATEMENTS IN ACCORDANCE WITH FASB STATEMENTS NO 109, ACCOUNTING FOR INCOME TAXES, AND PRESCRIBED A RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN IN ACCORDANCE WITH ASC 740, THE ORGANIZATION RECOGNIZES THE IMPACT OF TAX POSITIONS IN THE FINANCIAL STATEMENTS IF THAT POSITION IS MORE LIKELY THAN NO OF BEING SUSTAINED ON AUDIT, BASED ON THE TECHNICAL MERITS OF THE POSITION THE ORGANIZATION HAS DETERMINED THAT THE ADOPTION OF ASC 740 DID NOT RESUL' IN THE RECOGNITION OF ANY LIABILITY FOR UNRECOGNIZED TAX BENEFITS THE ORGANIZATION RECOGNIZES POTENTIAL ACCRUED INTEREST AND PENALTIES RELATED TO UNCERTAIN TAX POSITIONS IN INCOME TAX EXPENSE DURING THE YEAR ENDED DECEMBER 31, 2013 AND 2012, THE ORGANIZATION DID NOT RECOGNIZE ANY AMOUNT IN POTENTIAL INTEREST AND PENALTIES ASSOCIATED WITH UNCERTAIN TAX POSITIONS THE FOLLOWING TABLE SUMMARIZES THE OPEN TAX YEARS FOR EACH MAJOR
ADJUSTMENTS SCHEDULE D, PART XIII THE 2010 INFORMATIONAL RETURN WAS AUDITED BY THE IRS WHICH RESULTED IN A "NO		
		COSTS OF EDUCATIONAL MATERIALS 1,681,328
	SCHEDULE D, PART XIII	

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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As Filed Data -

DLN: 93493321054114

SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Vam	e of the organization				Employer ident	ification number
ΓΟΑ	STMASTERS INTERNATIONAL				95-1300076	
Pa	rt I General Information "Yes" to Form 990, Par			e United States. Co	omplete if the organiz	ation answered
1	For grantmakers. Does the or other assistance, the grantee to award the grants or assista	s' eligibility fo	r the grants or	assistance, and the s	election criteria used	T Yes No
2	s and other					
3	Activites per Region (The follow	ing Part I, line 3	table can be du	iplicated if additional spa	ce is needed)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	See Add'l Data					
(2)						
(3)						
(4)						
(5)						
	Sub-total Total from continuation sheets to Part I	0	518 0			4,329,531 0
c	: Totals (add lines 3a and 3b)	0	518			4,329,531

Pa						ited States. Compl duplicated if additior			to Form 990,
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(:	1)								
(:	2)								
(:	3)								
(4	4)								
2						ies by the foreign co (c)(3) equivalency l			
3	Enter total nur	nber of other or	ganizations or ent	rities					

Schedule F (Form 990) 2013

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

Part III can be	duplicated if addit	ional space is ne	eeded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
	1			l .			

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Γ	Yes	V	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Г	Yes	V	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	<u>ح</u> ا	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	V	. No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	দ	. No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).	Г	Yes	V	No

Schedule F (Form 990) 2013

Schedule F (Form 990) 2013 Page 5

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART 1, LINE 3 (F)	THE ORGANIZATION HAS TWENTY-NINE DISTRICTS OUTSIDE OF THE UNITED STATES, FIFTY-SEVEN DISTR ICTS IN THE UNITED STATES, AND FIVE DISTRICTS THAT ARE BOTH INSIDE AND OUTSIDE THE UNITED STATES TO ACCOUNT FOR DISTRICT EXPENDITURES THOSE 9 CATEGORIES ARE MARKETING, COMMUNICATION AND PUBLIC RELATIONS, EDUCATION AND TRAI NING, SPEECH CONTESTS, ADMINISTRATIVE, TRAVEL, OTHER, LEADERSHIP INSTITUTE, AND DISTRICT S TORE

Additional Data

Software ID: Software Version:

EIN: 95-1300076

Name: TOASTMASTERS INTERNATIONAL

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
NORTH AMERICA			PROGRAM SERVICE AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	1,091,230
EAST ASIA AND THE PACIFIC			PROGRAM SERVICE AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	1,788,000
EUROPE			PROGRAM SERVICE AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	395,415

Form 990 Schedule F I	orm 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region						
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICE AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	496,524						
CENTRAL AMERICA AND THE CARRIBBEAN			AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	78,364						
SUB-SAHARAN AFRICA			PROGRAM SERVICE AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	164,972						

Form 990 Schedule F	<u>Part I - Activi</u>	<u>ties Outside T</u>	he United States		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service (s) in region	(f) Total expenditures for region
SOUTH AMERICA		_	AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	5,150
SOUTH ASIA			AND ADMINISTRATION	CLUB BUILDING AND LEADERSHIP TRAINING	309,876

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DLN: 93493321054114

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

7

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization TOASTMASTERS INTERNATIONAL

95-1300076 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence 굣 Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III Compensation committee $\overline{\mathsf{v}}$ Written employment contract Independent compensation consultant 굣 Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? Yes 4a 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo Participate in, or receive payment from, an equity-based compensation arrangement? **4**c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? Νo 5b Νo Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Νo Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Nο If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	FW-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation		
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990		
(1)DANIEL REX CHIEF EXECUTIVE OFFICER	(i) (ii)	349,090 0	0	0	13,788 0	17,174 0	380,052 0	0		
(2)SALLY NEWELL- COHEN COO, SECRETARY/TREASURER	(i) (ii)	203,462	0 0	0	10,458	14,655 0	228,575 0	0		
(3)HAMIDREZA FARAJIAN TECHNOLOGY SERVICES DIRECTOR	(i) (ii)	152,543 0	0	0	288	16,624 0	169,455 0	0		
(4)JOHN BOND CONTROLLER	(i) (ii)	147,017 0	0	0	12,285 0	16,400 0	175,702 0	0 0		

Schedule J (Form 990) 2013

Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
•	AS PER A CONFIDENTIALITY AGREEMENT SIGNED BY THE ORGANIZATION, THE SEPARATION PAYMENT TO AN EMPLOYEE IS NOT OPEN FOR PUBLIC INSPECTION

Schedule J (Form 990) 2013

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SCHEDULE 0

(Form 990 or 990-EZ) Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ. ▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493321054114

Inspection

Name of the organization TOASTMASTERS INTERNATIONAL	www.irs.gov/form990. Employer identification number
990 Schedule O, Supplem	ental Information
Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THERE ARE TWO CLASSES OF VOTING MEMBERS CLUBS AND INDIVIDUAL DELEGATES AT LARGE.
FORM 990, PART VI, SECTION A, LINE 7A	ALL MEMBERS OF THE GOVERNING BODY ARE ELECTED BY THE MEMBERSHIP CLUBS HAVE TWO VOTES AND DELEGATES AT LARGE HAVE ONE
FORM 990, PART VI, SECTION A, LINE 7B	APPROVAL BY THE VOTING MEMBERSHIP IS REQUIRED FOR BYLAW AMENDMENTS AND OTHER STRUCTURAL CHANGES, AS STATED IN THE BYLAWS
FORM 990, PART VI, SECTION B, LINE 11	FORM 990 IS PROVIDED TO THE BOARD VIA ELECTRONIC COPY EXECUTIVE DIRECTOR AND LEGAL COUNSE
FORM 990, PART VI, SECTION B, LINE 12C	L REVIEWED FORM 990 PRIOR TO FILING AND EXECUTIVE COMMITTEE WAS INFORMED DURING DRAFTING ON AN ANNUAL BASIS, THE EXECUTIVE COMMITTEE REVIEWS THE DISCLOSURE FORMS SUBMITTED AND ENFORCES COMPLIANCE AS NEEDED
FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION HAS A WRITTEN POLICY IN PLACE OUTLINING PROCEDURES FOR EXECUTIVE COMPENSA
B, LINE 13	TION REVIEW THE EXECUTIVE COMMITTEE OF THE BOARD ANNUALLY REVIEWS THE EXECUTIVE COMPENSAT ION, ALTHOUGH THE BOARD MAKES THE FINAL DECISION
FORM 990, PART VI, SECTION C, LINE 19	DETERMINATION LETTER, FORM 990 AND 990-T ARE AVAILABLE UPON REQUEST FORM 1023 IS NOT REQU IRED TO BE DISCLOSED BECAUSE THE APPLICATION WAS FILED BEFORE JULY 15, 1987 AND THE ORGANI
FORM 990, PART IX, LINE 24E	ZATION DID NOT HAVE A COPY AS OF THAT DATE. CREDIT CARD FEES PROGRAM SERVICE EXPENSES 627,874 MANAGEMENT AND GENERAL EXPENSES 0
TORNO 330, TARTER, LINE 24L	FUN DRAISING EXPENSES 0 TOTAL EXPENSES 627,874 NEW MEMBER CHARTER KITS PROGRAM SERVICE EXPE NSES 413,054 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES
	41 3,054 AUDIO VISUAL PROGRAM SERVICE EXPENSES 281,652 MANAGEMENT AND GENERAL EXPENSES 27,
	554 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 309,206 SOFTWARE PROGRAM SERVICE EXPENSES 0
	MANAGEMENT AND GENERAL EXPENSES 256,617 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 256,617 TRAINING & DEVELOPMENT PROGRAM SERVICE EXPENSES 252,078 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 252,078 RECRUITING PROGRAM SERVICE EXPENSES 0
	MANAGEMENT AND GENERAL EXPENSES 190,397 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 190,397 TRANSLATION COSTS PROGRAM SERVICE EXPENSES 108,854 MANAGEMENT AND GENERAL EXPENSES 0 FU
	NDRAISING EXPENSES 0 TOTAL EXPENSES 108,854 EQUIPMENT RENTAL PROGRAM SERVICE EXPENSES 9 5,308 MANAGEMENT AND GENERAL EXPENSES 2,340 FUNDRAISING EXPENSES 0 TOTAL EXPENSES
	97,64 8 CLUB OFFICER MAILING PROGRAM SERVICE EXPENSES 95,635 MANAGEMENT AND GENERAL
	EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 95,635 MISCELLANEOUS PROGRAM SERVICE EXPENSES
	57,695 MANAGEMENT AND GENERAL EXPENSES 23,881 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 81.
	576 BOOKSTORE PROGRAM SERVICE EXPENSES 79,779 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRA
	ISING EXPENSES 0 TOTAL EXPENSES 79,779 BUILDING R&M PROGRAM SERVICE EXPENSES 79,336 MA NAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 79,336 INTERNET S
	ERVICES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 75,434 FUNDRAISING E XPENSES 0 TOTAL EXPENSES 75,434 PROPERTY TAXES PROGRAM SERVICE EXPENSES 74,648
	MANAGEM ENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 74,648 ACCOUNTING SOFT
	WARE PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 65,926 FUNDRAISING EXPE
	NSES 0 TOTAL EXPENSES 65,926 TELEPHONE PROGRAM SERVICE EXPENSES 46,114 MANAGEMENT AND
	GENERAL EXPENSES 16,230 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 62,344 AWARDS AND RECOGNI TION PROGRAM SERVICE EXPENSES 57,706 MANAGEMENT AND GENERAL EXPENSES 1,792
	FUNDRAISING EXPENSES 0 TOTAL EXPENSES 59,498 DUES AND SUBSCRIPTIONS PROGRAM SERVICE EXPENSES
	36,787 MANAGEMENT AND GENERAL EXPENSES 16,802 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 53,589 E MPLOYEE RELATIONS PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 44,109
	FUN DRAISING EXPENSES 0 TOTAL EXPENSES 44,109 PHOTOGRAPHY PROGRAM SERVICE EXPENSES 37,923
	MANAGEMENT AND GENERAL EXPENSES 52 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 37,975 BANK CH ARGES PROGRAM SERVICE EXPENSES 2,903 MANAGEMENT AND GENERAL EXPENSES 34,149
	FUNDRAISING EXPENSES 0 TOTAL EXPENSES 37,052 SHIPPING PROGRAM SERVICE EXPENSES 33,146 MANAGEMENT
	AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 33,146 ENGRAVING PROGRAM SERVICE EXPENSES 28,719 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0
	TOTAL EXPENSES 28,719 EDUCATION AND TRAINING PROGRAM SERVICE EXPENSES 735 MANAGEMENT AND GENE
	RAL EXPENSES 27,410 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 28,145 OFFICE EQUIPMENT - R&M PROGRAM SERVICE EXPENSES 5,241 MANAGEMENT AND GENERAL EXPENSES 19,866 FUNDRAISING
	EXPE NSES 0 TOTAL EXPENSES 25,107 TEAM DEVELOPMENT PROGRAM SERVICE EXPENSES 23,611 MANAGEME
	NT AND GENERAL EXPENSES 800 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 24,411 SUPPLIES PROG RAM SERVICE EXPENSES 23,693 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TO
	TAL EXPENSES 23,693 PAYROLL PROCESSING PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERA L EXPENSES 21,155 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 21,155 OFFICER/DIRECTOR DISTRIB UTIONS PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSES 18,088 FUNDRAISING
	EX PENSES 0 TOTAL EXPENSES 18,088 CONFERENCE CALLS PROGRAM SERVICE EXPENSES 11,771
	MANAGE MENT AND GENERAL EXPENSES 4,920 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 16,691 TRADESHOW
	PROGRAM SERVICE EXPENSES 16,350 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES
	0 TOTAL EXPENSES 16,350 SPEAKERS PROGRAM SERVICE EXPENSES 15,592 MANAGEMENT AND GENERA L EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,592 MATERIAL USAGE PROGRAM SERVI
	CE EXPENSES 14,012 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPEN
	SES 14,012 TAXES AND LICENSES PROGRAM SERVICE EXPENSES 0 MANAGEMENT AND GENERAL EXPENSE S 2,283 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,283 BAD DEBT PROGRAM SERVICE EXPENSES A MANAGEMENT AND CENTRAL EXPENSES 2,077 FUNDRAIGHT EXPENSES 2,077
	0 MANAGEMENT AND GENERAL EXPENSES 2,077 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 2,077 EQ

UIPMENT - R&M PROGRAM SERVICE EXPENSES 1,731 MANAGEMENT AND GENERAL EXPENSES -20

ISING EXPENSES 0 TOTAL EXPENSES 1,711 SALES TAX PROGRAM SERVICE EXPENSES 0 MANAGEMENT

AND GENERAL EXPENSES -1,670 FUNDRAISING EXPENSES 0 TOTAL EXPENSES -1,670 ALLOCATED EXPE NSES PROGRAM SERVICE EXPENSES -61,809 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING

EXP

ENSES 0 TOTAL EXPENSES -61,809

FUNDRA

DLN: 93493321054114 OMB No 1545-0172 **Depreciation and Amortization** (Including Information on Listed Property) Department of the Treasury Internal Revenue Service (99) ► See separate instructions. Attach to your tax return. Sequence No 179 Business or activity to which this form relates Identifying number Name(s) shown on return **FORM 990 PAGE 10** TOASTMASTERS INTERNATIONAL 95-1300076 Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 1 500,000 Total cost of section 179 property placed in service (see instructions) · · · · · 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 2,000,000 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0- · · · · · · Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0 - If married 5 (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 Tentative deduction Enter the smaller of line 5 or line 8 · · · · · · 9 Carryover of disallowed deduction from line 13 of your 2012 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2014 Add lines 9 and 10, less line 12 .▶ 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 Property subject to section 168(f)(1) election 15 MACRS Depreciation (Do not include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2013 · · · · · · If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here . . . Section B—Assets Placed in Service During 2013 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service only—see instructions) 19a 3-year property **b** 5-year property **c** 7-year property **d** 10-year property **e** 15-year property f 20-year property S/L g 25-year property 25 yrs 27 5 yrs MM S/L h Residential rental property 27 5 yrs ΜМ S/L ΜM i Nonresidential real property ΜМ Section C-Assets Placed in Service During 2013 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L c40-year 40 yrs ΜМ S/L Summary (see instructions.) Part IV 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions • • 22 717,025 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs Form **4562** (2013) For Paperwork Reduction Act Notice, see separate instructions. Cat No 12906N

Form 4562 (2013) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.) Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre		nd Other I															
24a Do you have evider	nce to support	the business/inv	estment u	ise claimed	o? ┌ Yes	Γ _{No}			24l	If "Yes,	' is the	ev ider	ice writ	ten?	T _{Ye}	s I N	0
(a) Type of property (list vehicles first)	(b) Date placed in service	Date placed in investment Cost o		(e) Basis for depreciation (business/investment use only)			(f) Recov perio	ery	(g) / Method/ Convention		(h) Depreciation/ deduction			,	(i) Elected section 179 cost		
25Special depreciation allowance for qualified listed property placed 50% in a qualified business use (see instructions)					during the	tax year	and u	ısed m	ore		5						
26 Property used more	use						•										
%																	
		% %							-		_				1		
27 Property used 50%	orless in a		iness us	e	<u> </u>												
		%		_	S/L -												
		%						S/L -			_				4		
28 Add amounts in co	lumn (h.) lun		ıb 27 En	ter here s	and on lu	21					<u> </u>			T			
29 Add amounts in co		-				16 21,	page	1					29	╁			
29 Aud amounts in Co	Jiuiiiii (1), iiii			—Infor		on II		• • •			•	1	29	<u>—</u>			
Complete this section	for vehicles										or rel	ated p	erson				
If you provided vehicles to									eptio	n to comp					e vehic		
30 Total business/inv			-		(a) (b) Vehicle 1 Vehicle 2		-	(c) Vehicle 3		Ve	(d) Vehicle 4		(e) Vehicle 5		(f) 5 Vehicle 6		
31 Total commuting i	miles driven	during the ve	ar .							+		+					
32 Total other persor											+		+				
33 Total miles driven during the year Add lines 30 through 32																	
34 Was the vehicle a		ersonal use		Yes	No	Yes	Yes No		Yes No		Ye	Yes No		Yes N		No Yes No	
during off-duty ho	urs? .										1		\top				
35 Was the vehicle us owner or related p		by a more tl	nan 5%														
36 Is another vehicle	avaılable fo	r personal us	e? .														
Section Answer these question 5% owners or related	ns to determ		et an exc													not mo	re than
	•			nibits all i	personal	use of	vehi	cles,	ıncl	udıng co	mmu	tıng, b	y you	r	Y	es	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?									110								
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners																	
39 Do you treat all us	e of vehicles	s by employe	es as pei	rsonal us	e?												
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of vehicles, and retain the information received?																	
41 Do you meet the re				automobi	le demor	nstratio	n us	e? (S	ee ı	nstructi	ons)						
Note: If your answ	<i>ı</i> er to 37.38	. 39. 40. or 4	1	s." do not	t comple	te Sect	ion E	· 3 for t	he d	overed	vehic	les					
	rtization	<u>, , , , , , , , , , , , , , , , , , , </u>		<u>, </u>	•												
(b)							(4)		Τ ((e)							
(a) Date Description of costs amortization		A mort				Code ection A mortiza		od or	r A Mor		(f) rtization for nis year						
43 A month and the	oto that ha	begins	2012			+=======				perc	entag	e					
42 A mortization of co	ists that beg	ms auring yo	ur 2013	ıax year	(see insi	Tuction	15)			1		1					
43 A mortization of co	sts that beg	an before voi	ur 2013 t	ax year							43	1					
		/ -		,	_		-			- -							

44 Total. Add amounts in column (f) See the instructions for where to report