efile	GRAPH	IC print - DO NOT PROCESS As Filed Data -						
٥	90	Return of Organization Exempt From I	nco	me T	ax		ОМВМ	lo 1545-004
ormJ	50	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue benefit trust or private foundation)	Code (except	black lui	ng	2	2010
	of the Treasu venue Service	Let The supervise the second best of the second states and the second states of the	ate rep	orting	requirem	ents		n to Public spection
For t	he 2010							
	t if applicat	e C Name of organization Virginia Highland Civic Association Inc			D Empl	loyer	identific	ation number
	ss change	Doing Business As			58-2	2019	516	
Name	change				E Telep	hone	number	
Initial	return	Number and street (or P O box if mail is not delivered to street address)	Room/	suite	(404)28	1-5303	
Termi	nated	PO Box 8401 Station F						
Ameno	ded return	City or town, state or country, and ZIP + 4			G Gross	recei	pts \$ 314,	499
Applica	ation pend	Atlanta, GA 31106 ng						
		F Name and address of principal officer	H(a)	Is this a	group return	ı for affi	liates?	Yes 🔽 No
		Pamela Papner 854 Highland Terrace						
		Atlanta, GA 30306	H(b)		affiliates in			Yes N
			H(_)		," attach o exempt			nstructions) ►
Tax-e	exempt sta	tus 🔽 501(c)(3) 🔽 501(c)(4) 🛋 (insert no) 🔽 4947(a)(1) or 🔽 527	п(с)	Group	, exempt			
Web	site: 🕨	www.vahi org						
Form o	of organiza	ion 🔽 Corporation 🗍 Trust 🔽 Association 🗍 Other 🕨	LYe	ar of for	nation 19	975	M State o	of legal domicile
Part	-	immary	- 10		nation 15	,,,,,	- State (or legal donnelle
		sts of residents of Virginia-Highland		he com			assets	
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	2 Chec 3 Numb 4 Numb 5 Total 6 Total 7a Total b Net u 8 Con 9 Pro	A this box I f the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2010 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34	more -	than 25	5% of its	net 3 4 5 6 7a 7b		-22,72 Irrent Year
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111111	2 Chec 3 Numb 4 Numb 5 Total 6 Total 7 Total b Net u 8 Con 9 Pro 1 Oth 1 Oth 12 Tot 12	A this box I if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2010 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34	more -	than 25	5% of its Year 1, 176,	net 3 4 5 6 7a 7b 210 464		-22,7 irrent Year 1,62 2,16 185,89
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111111111111111111111111111111111111111	2 Chec 3 Numb 4 Numb 5 Total 6 Total 6 Total 7 Total 6 Total 9 Pro 9 Pro 9 Pro 1 Oth 12 Tot 12 13 Gra 14 Ber 10 10 10 10 10 10 10 10 10 10	A this box I if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2010 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34 Antributions and grants (Part VIII, line 1h) gram service revenue (Part VIII, line 2g) estment income (Part VIII, column (A), lines 3, 4, and 7d) er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line ints and similar amounts paid (Part IX, column (A), line 4)	² more ²	than 25	5% of its Year 1, 176,	net 3 4 5 6 7a 7b 210 464		-22,7 irrent Year 1,62 2,16 185,89
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	2 Chec 3 Numb 5 Total 6 Total 7 Total 6 Total 7 Total 9 Pro 9 Pro 9 Pro 1 Oth 12 Total 10 Inv 1 Oth 12 Total 13 Gra 14 Ber 15 Sal 10 J 10	this box ▶ if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b) number of individuals employed in calendar year 2010 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34 nurber of volunteers (Part VIII, line 1h) gram service revenue (Part VIII, line 2g) estment income (Part VIII, column (A), lines 3, 4, and 7d) iter revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) al revenue —add lines 8 through 11 (must equal Part VIII, column (A), line	² more ²	than 25	5% of its 5% of its Year 1, 176, 178, 178, 133, 133,	net 3 4 5 6 7a 7b 210 464 558 232 232		-22,7: Irrent Year 1,62 2,16 185,89 189,68 99,89 99,89
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Balances EXDAISes Hevenue	2 Chec 3 Numb 5 Total 6 Total 6 Total 7 a Total 9 Pro 9 Pro 9 Pro 1 Oth 1 2 Tot 12 3 Gra 4 Ber 12 3 Gra 4 Ber 10 10 10 10 10 10 10 10 10 10	A this box ▶ if the organization discontinued its operations or disposed of er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 2b) number of individuals employed in calendar year 2010 (Part V, line 2a) . number of volunteers (estimate if necessary) unrelated business revenue from Part VIII, column (C), line 12 nrelated business taxable income from Form 990-T, line 34 nrelated business taxable income from Form 990-T, line 34 ntributions and grants (Part VIII, line 1h) estment income (Part VIII, column (A), lines 3, 4, and 7d) estre revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 	⁻	Prior	5% of its 5% of its 176, 176, 178, 133, 133, 144, of Curresar	net 3 4 5 6 7a 7b 210 464 558 232 232 232 232 232 458 782 782 782 782 782 782 782 782		-22,7: Irrent Year 1,62 2,16 185,89 189,68 99,86 99,86 99,86 89,79 nd of Year

Under penalties of perjury, I declare that I have examined this return, including acco knowledge and belief, it is true, correct, and complete. Declaration of preparer (othe knowledge.

Signature of officer							
Frazier Dworet Treasurer							
r Type or print name and title							
Print/Type preparer's name Cynthia Cline	Preparer's signature	Cynthia Cline					
		-,					
Firm's address 🖡 1214 Reeder Circle NE							
Atlanta, GA 30306							
	Signature of officer Frazier Dworet Treasurer Type or print name and title Print/Type preparer's name Cynthia Cline Firm's name Cynthia L Cline CPA Firm's address 1214 Reeder Circle NE	Signature of officer Frazier Dworet Treasurer Type or print name and title Print/Type preparer's name Cynthia Cline Firm's name Cynthia L Cline CPA Firm's address 1214 Reeder Circle NE					

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

Form	n 990 (2010)				Page 2
Par	t III	Statement of Program Check If Schedule O contains			I	г
1	Brief	ly describe the organization's m	iission			
The Hıgh		e of the association is the prom	otion and furtheranc	e of the common good	, general welfare and interes	ts of residents of Virginia-
2	the pi	ne organization undertake any s nor Form 990 or 990-EZ?			r which were not listed on	∏Yes 🔽 No
3	Dıd ti servi	s," describe these new services ne organization cease conductir ces? s," describe these changes on S	ng, or make sıgnıfıca	nt changes ın how ıt co	onducts, any program	└ Yes \/ No
4	Secti	ribe the exempt purpose achiev on 501(c)(3) and 501(c)(4) org ations to others, the total expen	anızatıons and secti	on 4947(a)(1) trusts	are required to report the an	• •
4a	(Cod	e) (Expenses :	\$ 116,478	including grants of \$) (Revenue \$	266,025)
	Sumr	nerfest - Celebrates the begining of su	Immer with diverse arts,	great food, live musical pe	rformances and much more	
4b	(Cod	e) (Expenses :	\$ 1,082	including grants of \$) (Revenue \$)
	Public office	c Safety - perserve, protect and enhan rs	ce a safe quality of ife fo	or residents and visitors of \	Virginia-Highland by providing a ne	nghborhood patrol of off-duty police
4c	(Cod	e) (Expenses	\$ 26,446	including grants of \$) (Revenue \$)
	Park	Maintenance - maintain and beautify 2	2 local parks in the neigh	borhood		
4d	Othe	er program services (Describe	ın Schedule O)			
	(Exp	enses \$	including grants o	of\$) (Revenue \$)
4e	Tota	I program service expenses +\$	144,00)6		
						Form 990 (2010)

Par	t 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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? $$. $$.	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		
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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> " <i>Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,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, line10? If "Yes," complete Schedule D, Part VI. 🕏	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>	11b		No
С	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? <i>If "Yes," complete Schedule D, Part VIII.</i>	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? <i>If "Yes," complete Schedule D, Part IX.</i>	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 📆	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12Ь		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If</i> " <i>Yes," complete Schedule F, Parts II and IV</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Parts III and IV</i> .	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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes, <i>" complete Schedule G, Part III</i>	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
Ь	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			_
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> .	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
с	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? \cdot .	24d		No
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? <i>If</i> " <i>Yes," complete Schedule L, Part I</i>	25a		No
Ь	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? <i>If</i> " <i>Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <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	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> <i>complete Schedule L, Part IV</i>	28b		No
С	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? <i>If "Yes," complete Schedule L, Part IV</i>	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? <i>If "Yes," complete Schedule M</i>	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? If "Yes," complete Schedule N, Part II	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, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form	990 (2010)			Page 5
Pa	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1 1 1 1 1 0 1 1 1 1 1 1 1			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	- 1c	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this		165	
h	return	<u>)</u>		
5		2b		
_	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," provide an explanation in Schedule O	Зb	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕨	_		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		No
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
-	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			No
h	required?	7g		
8	Form 1098-C?	7h		
J	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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-		
D	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	_		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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		
				ļ
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 13b			
с	Enter the amount of reserves on hand	1		
14-	Did the organization receive any navments for indeer tanning services during the tax year?	14-		Na
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No
				L

Page **5**

	990 (2010) VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7	h held	w and	Page 1 for
Paru	a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or char O. See instructions.		n Sche	
	Check if Schedule O contains a response to any question in this Part VI	• •	지.	
See	ction A. Governing Body and Management			
			Yes	No
	Enter the number of voting members of the governing body at the end of the tax year			
	Enter the number of voting members included in line 1a, above, who are 1b 0			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
	Does the organization have members or stockholders?	6		No
а	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?			No
	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7u 7b		No
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organızatıon's maılıng address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			1
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10Ь		
1a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		N o
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	114		
2a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		No
Ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
с	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	120 12c		
	Does the organization have a written whistleblower policy?	13		No
	Does the organization have a written document retention and destruction policy?	13		No
5	Does the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a		No
	Other officers or key employees of the organization	15b		No
	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 or similar arrangement with a taxable entity during the year?	16a		No
	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?			
		16b		
	ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed⊫GA			
	List the States with which a copy of this form 990 is required to be filed GA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply O wn website Another's website V upon request			
	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

interest policy, and financial statements available to the public. See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization Frazier M Dworet PO Box 8401 Station F

PO Box 8401 Station	
Atlanta,GA 31106	
(404)875-9647	

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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 to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's current key employees, if any See instructions for definition of "key employee "

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours	Posi	(0) cheo	ck al			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Highest compensated employee Key employee Officei Instautional Trustee or director		employee Key employee Officei		Highest compensated employee Key employee		from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) Allıe Coker Member	5 00	х						0	0	0
(2) Frazier Dworet Treasurer	5 00	x						0	0	0
(3) Rob Glancy Member	5 00	х						0	0	0
(4) Ann Guy Vice President	5 00	x						0	0	0
(5) Cındy Kaufman Member	5 00	x						0	0	0
(6) Brian Gross Member	5 00	х						0	0	0
(7) Holly Kılgore Member	5 00	x						0	0	0
(8) Nancy King-Metters Member	5 00	x						0	0	0
(9) Charlie Lefort Member	5 00	x						0	0	0
(10) Pamela Papner President	5 00	x						0	0	0
(11) John Wolfinger Member	5 00	x						0	0	0
(12) Anne Woodward Secretary	5 00	х						0	0	0

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

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

	(A) Name and Title	(B) A verage hours		((tion (hat a	(che		11		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
		per week (describe hours for related organizations in Schedule O)	Highest compensated employee Key employee Officei Institutional Trustee ar director				Highest compensited employ ee	Former	from the organızatıon (W- 2/1099-MISC)	from related organızatıons (W- 2/1099- MISC)	compensation from the organization and related organizations
					-						
1b	Sub-Total			<u> </u>	<u> </u>	· ·	<u> </u>	•			
 	Total from continuation sheets						•				
d	Total (add lines 1b and 1c) .							•			
2	Total number of individuals (incl \$100,000 in reportable compen	udıng but not lın	nited to	thos	e lıs) who	received more tha	n	L]

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individua</i> !	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation			
Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►					

Form 990 (2010) Part VIII Statement of Revenue

Party	/ 7 7 7	Statement of	Revenue						· · · · ·
					(A) Total revenue	(B) Related or	(C) Unrelated	(D) Revenue	
					Total revenue	exempt	business	excluded	
						function	revenue	from	
						revenue		tax under sections	
								512, 513,	
								or 514	
££	1a	Federated campai	gns 1a						
Ē	Ь	Membership dues	1b	1,145					
°,Ĕ	c	Fundraising events	s 1c						
if a	d	Related organizati	ons1d						
Contributions, gifts, grants and other similar amounts		Government grants (co							
ans Sin	e								
er	f	All other contributions, similar amounts not in	gifts, grants, and 1f Icluded above	475					
éé.	g	Noncash contributions	included in lines 1a-1f \$						
Ēž									
S E	h	Total. Add lines 1:	a-1f	. 🕨	1,620				
				Business Code					
lue	2a			Business coue					
ver									
æ	Ь								
IC O	С								
θrΛ	d								
s C	e								
Program Service Revenue	f	All other program	service revenue						
٦°,	·	, in other program							
Æ	g	Total. Add lines 23	a-2f	•					
	3	Investment incom	e (including dividends, inte	rest					1
		and other similar a	amounts)	►	2,167			2,167	1
	4	Income from investme	ent of tax-exempt bond proceeds	►					1
	5	Rovalties							
		,	(I) Real	(II) Personal					
	6a	Gross Rents							
	ь	Less rental							
		expenses							
	C	Rental income or (loss)							
	d		or (loss)	►					
			(1) Securities	(II) O ther					
	7a	Gross amount							
		from sales of assets other							
		than inventory							
	Ь	Less cost or other basis and							
		sales expenses							
	-	Gain or (loss)							
	d	Net gain or (loss)		►					
	8a		n fundraısıng events						
e F		(not including							
1E		<pre>\$</pre>	_ uported on lune 1c)						
é		See Part IV, line 1							
Other Revenue			а	297,512					
je L	Ь	Less direct exper	nses b	124,818					
Ē			ss) from fundraising events		172,694			172,694	
_			n gaming activities. See						1
		Part IV, line 19							
	Ь	Less dırect							
		expenses							
	r	Net income or (los	ں . from gaming activities ،						
		Gross sales of inv							
		returns and allowa							
			а						
	Ь	Less costofgood	lssold b						
			ss) from sales of inventory	►					
	<u> </u>	Miscellaneous F		Business Code					1
	11-	Voice Advertising		541860	13,200		13,200		
		voice Advertising			10,200		,200		
	Ь								
	c								
	d	All other revenue							
	e	Total. Add lines 1	1a-11d	•	40.000				
				•	13,200				
	12	Total revenue. See	e Instructions	►	189,681		13,200	174,861	
					105,001		10/200	1001	

_									
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).									
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			· · ·				
2	Grants and other assistance to individuals in the U S See Part IV , line 22	0							
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	0							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0							
7	Other salaries and wages	0							
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0							
9	Other employee benefits	0							
10	Payroll taxes	0							
а	Fees for services (non-employees)								
	Management	0							
b	Legal	4,913		4,913					
с	Accounting	0							
d	Lobbying	0							
e	Professional fundraising services See Part IV, line 17 .								
f	Investment management fees	0		545					
g	Other	515		515					
12	Advertising and promotion	0		5.240					
13	Office expenses	5,219		5,219					
14 15	Information technology	0							
15	Royalties	0							
10	Occupancy	0							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0							
19	Conferences, conventions, and meetings	0							
20	Interest	23,642							
21	Payments to affiliates	0							
22	Depreciation, depletion, and amortization	0							
23	Insurance	0							
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f Ifline 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)								
а	Parks	26,446	26,446						
b	Donations	15,750		15,750					
с	Printing and Publications	22,324		22,324					
d	Public Safety	1,082	1,082						
е									
f	All other expenses	0							
25	Total functional expenses. Add lines 1 through 24f	99,891	27,528	48,721	0				
26	Joint costs. Check here F [If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

		balance Sheet	(1)		(8)
			(A) Beginning of year		(B) End of year
-	1	Cash—non-interest-bearing	24,282	1	44,434
	2	Savings and temporary cash investments	143,027	2	166,411
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)			
ß				6	
Assets	7	Notes and loans receivable, net		7	
As	8	Inventories for sale or use		8	
-	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> 856,399 Part VI of Schedule D 10a		-	<u> </u>
	Ь	Less accumulated depreciation 10b 1,615	855,164	10c	854,784
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV , line 11		12	
	13	Investments—program-related See Part IV, line 11		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)	1,022,473	16	1,065,629
	17	Accounts payable and accrued expenses .		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
je	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
iabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Lik.		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	813,517	23	766,264
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	813,517	26	766,264
ces		Organizations that follow SFAS 117, check here 🕨 🦵 and complete lines 27 through 29, and lines 33 and 34.			
an	27	Unrestricted net assets		27	
Ba	28	Temporarily restricted net assets		28	
P	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here and complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
set	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds	208,956	32	299,365
<u>ta</u>	33	Total net assets or fund balances	208,956	33	299,365
Z	34	Total liabilities and net assets/fund balances	1,022,473	34	1,065,629
	•				Form 990 (2010)

Par	rt XI Reconciliation of Net Assets Check If Schedule O contains a response to any question in this Part XI .			.୮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		:	189,681
2	Total expenses (must equal Part IX, column (A), line 25)	2			99,891
3	Revenue less expenses Subtract line 2 from line 1	3			89,790
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2	208,956
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		ž	299,365
Par	Financial Statements and Reporting Check If Schedule O contains a response to any question in this Part XII			. [Yes	No
1	Accounting method used to prepare the Form 990 🔽 Cash 🗍 Accrual 🗍 Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			Tes	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
с	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c		No
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i on a separate basis, consolidated basis, or both	ssued			
	🔽 Separate basis 🔰 Consolidated basis 👘 Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the i audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	Зb		

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93493225004061						: 93493225004061		
SCI	HEDULE C		Political C	ampaign and	Lobbying A	Activitie	es	OMBNo 1545-0047
	n 990 or 990-EZ)							2010
(. . .		For Organi	-	t From Income Tax plete if the organizat		• •	d section 527	
	nent of the Treasury Revenue Service			m 990 or Form 990-E			ns.	Open to Public
								Inspection
If the then	-	nswered "Ye	s," to ⊦orm 990	, Part IV, Line 3, or I	Form 990-EZ, Pa	irt V, line 4	6 (Political Car	npaign Activities),
		anizations Co	mplete Parts I-A a	nd B Do not complete	e Part I-C			
				ations Complete Parts		Do not co	mplete Part I-B	
	tion 527 organizat	•	•	B (N / I)				
				, Part IV, Line 4, or I 5768 (election under s				•
				form 5768 (election un				•
				, Part IV, Line 5 (Pro	oxy Tax) or Form	n 990-EZ, P	art V, line 35a	(Proxy Tax), then
	ction 501(c)(4), (5)		zations Complete	Part III				
	me of the organiza nia Highland Civic Ass						Employer iden	tification number
_							58-2019516	
Part	I-A Comple	te if the or	ganization is	exempt under s	ection 501(c) or is a s	section 527	organization.
1	Provide a descri	ption of the or	ganızatıon's dırec	t and indirect politic	al campaıgn activ	vities in Par	τIV	
2	Political expendi	itures					►	\$
3	Volunteer hours							
Dari	TB Comple	te if the or	ganization is	exempt under s	ection 501(c)(3)		
1				the organization und		<u></u>	►	¢
2				organization manage		4955	- -	ዋ
3				, dıd ıt file Form 4720		1999	F	
у 4а	Was a correction				for this year.			ΓYes ΓNo
b	If "Yes," describ							, 165 , 160
_			ganization is	exempt under s	ection 501(c) except	section 501	<u>(c)(3).</u>
1				g organization for sec				\$
2			-	ds contributed to oth	-			۲
-	exempt funtion a		igamzation s ian				▶	\$
3	Total exempt fur	nction expendi	tures Add lines :	1 and 2 Enterhere a	nd on Form 1120)-POL, line	17b 🕨	¢
4	Did the filing org	anization file F	Form 1120-POL fo	or this year?				→ □ Yes □ No
5				tification number (EII	N) of all section ^r	527 politica	al organizations	,
	organization mac amount of politic	de payments al contributior	For each organizans received that	tion listed, enter the were promptly and di ommittee (PAC) If a	amount paid from rectly delivered t	n the filing o o a separat	organızatıon's f e political orga	unds Also enter the nızatıon, such as a
	(a) Name	9	(b) /	Address	(c) EIN	filing or	unt paid from ganization's one, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
_								
								<u> </u>

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

Cat No 50084S Schedule C (Form 990 or 990-EZ) 2010

Schedule	С	(Form	990	or 990-EZ)	2010
o chica al c	-	(1 01111		0. 550 22,	

Sch	edule C (Form 990 or 990-EZ) 2010			Page 2
Pa	rt II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	nd filed Form 5768	6 (election
	Check 🦵 If the filing organization belongs to a	n affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar	xpenditures	(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lobbyıng)		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		
с	Total lobbying expenditures (add lines 1a and 11))		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add lines 1	c and 1d)		
f	Lobbying nontaxable amount Enter the amount f columns			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
		·		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)		
h	Subtract line 1g from line 1a If zero or less, ent	er -0-		
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -		
j	If there is an amount other than zero on either lii section 4911 tax for this year?	ne 1h or line 1i, did the organization file Form 47	20 reporting	└ Yes ┌ No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
с	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2010

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

		(a)			(b)	
		Yes	No		A moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		I			
а	Volunteers?					
Ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
с	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i	-				
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$?					
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
с	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	1 501(c)(5), a	or se	ectio	n
					Yes	N
1	Were substantially all (90% or more) dues received nondeductible by members?		Γ	1		

2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?

3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b		2b	
с	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	
P	art IV Supplemental Information		

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier Ret urn Reference Explanation

2

3

efile GRAPHIC p	orint - DO NOT PROCESS	As Filed Data -			DLN: 9	934932250	04061
CHEDULE D					-	OMBNo 154	5-0047
orm 990)	Supple	mental Financi	al Statements			201	Λ
			ered "Yes," to Form 990			201	U
artment of the Treasury		art IV, line 6, 7, 8, 9, 1		,		Open to P	
nal Revenue Service		to Form 990. 🕨 See se	parate instructions.			Inspect	
ame of the organi rgınıa Hıghland Cıvıc A				Emp	loyer identif	ication numbe	:r
					2019516		
	izations Maintaining Dono ation answered "Yes" to For			unas	or Accoun	i ts. Complet	te if th
j			r advised funds	((b) Funds and	d other accour	nts
Total number a	t end of year						
Aggregate cont	rıbutıons to (durıng year)						
Aggregate gran	ts from (durıng year)						
Aggregate valu	e at end of year						
-	ation inform all donors and donor rganization's property, subject to	_		oradvı	sed	∏ Yes	∏ No
used only for c	ation inform all grantees, donors haritable purposes and not for th	•		-			
	ermissible private benefit	late if the ergenizat	on answered "Vec" t	o Forn	000 Dart		∏ No
	rvation Easements. Comp				<u>11 990, Part</u>	1v, inte 7.	
	onservation easements held by on of land for public use (e g , rec		Preservation of an	hıstor	cally import	antly land are:	а
_	of natural habitat	·····,	Preservation of a c			•	
🔽 Preservatı	on of open space						
Complete lines	2a–2d if the organization held a	qualified conservation	contribution in the form	ofaco	onservation		
	ne last day of the tax year	•					
					Held at t	he End of the	Year
	f conservation easements			2a			
-	restricted by conservation easen			2b			
	servation easements on a certifie			2c			
	servation easements included in		·	2d			
	servation easements modified, tr	ansferred, released, ex	tinguished, or terminate	d by th	ie organizatio	on during	
the taxable yea	ar 🕨						
Number of stat	es where property subject to con	servation easement is	located 🕨				
	nzation have a written policy reg the conservation easements it h		itoring, inspection, hand	dling of	violations, a	and Ves	∏ No
	teer hours devoted to monitoring						
	enses incurred in monitoring, ins			-	g the year 🕨	\$	
170(h)(4)(B)(ı)	servation easement reported on) and 170(h)(4)(B)(11)?					∏ Yes	∏ No
balance sheet,	scribe how the organization repo and include, if applicable, the te n's accounting for conservation e	kt of the footnote to the					
rt IIII Organ	izations Maintaining Colle ete if the organization answe	ctions of Art, Hist		or Otl	her Simila	r Assets.	
art, historical t	cion elected, as permitted under s reasures, or other similar assets : XIV , the text of the footnote to	held for public exhibiti	on, education or researd	:h in fu			2,
historical treas	tion elected, as permitted under s ures, or other similar assets hel owing amounts relating to these	d for public exhibition,					
(i) _{Revenues II}	ncluded in Form 990, Part VIII, I	ıne 1			►\$		
(ii) Assets incl	uded in Form 990, Part X						
If the organizat	non received or held works of art nts required to be reported under			or finan	· · ·		
-	ided in Form 990, Part VIII, line	-			▶ <		
		-					
Assets include	d ın Form 990, Part X				►\$		

For Privacy Act and Paperwork Reduction	Act Notice, see the Intructions for Form 990	Cat No 52283D	Schedule D (Form 990) 2010

Sche	dule D (Form 990) 2010									Page 2
Part	Organizations Maintaining Co	llections of Art	, His	tori	cal Tre	asur	es, or Oth	ner Similar A	Assets (c	continued)
3	Using the organization's accession and othe items (check all that apply)	r records, check any	∕ ofth	ne foll	owing tha	at are a	a sıgnıfıcani	t use of its colle	ction	
а	Public exhibition		d	Γ	Loan or	excha	inge prograr	ns		
b	Scholarly research		e	Γ	Other					
с	Preservation for future generations									
4	Provide a description of the organization's c Part XIV	ollections and explai	ın hov	w the	y further f	the or <u>c</u>	ganızatıon's	exempt purpos	e in	
5	During the year, did the organization solicit assets to be sold to raise funds rather than							ımılar	∏ Yes	
Par	t IV Escrow and Custodial Arrang		-		-			"Yes" to Form		
	Part IV, line 9, or reported an ar									
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ons or	other asset	s not	∏ Yes	∏ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ing ta	able					
									Amount	
с	Beginning balance									
d	Additions during the year						10			
e	Distributions during the year						10			
f	Ending balance						11	Ŧ		
2a	Did the organization include an amount on F		e 21?						∏ Yes	I No
	If "Yes," explain the arrangement in Part XIV									
Ра	rt V Endowment Funds. Complete	(a)Current Year)Prior `				art IV, IINE IU d)Three Years Bac		Years Back
1a	Beginning of year balance		<u> </u>	,				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
b	Contributions									
с	Investment earnings or losses									
d	Grants or scholarships									
e	Other expenditures for facilities and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the yea	r end balance held a	is							
а	Board designated or quasi-endowment 🕨									
b	Permanent endowment 🕨									
с	Term endowment 🕨									
3a	A re there endowment funds not in the posse organization by	-	ation	that a	are held a	ınd adı	mınıstered f	or the	Yes	No
	(i) unrelated organizations		• •	•	• •	• •	· · ·		a(i)	
L	(ii) related organizations								a(ii)	
р 4	Describe in Part XIV the intended uses of th					• •	• • •	••••	3Ь	
	t VI Investments—Land, Building). Par	t X. line 10).		
	Description of investment	<u>,</u>		(a) Cost or o sis (investri	ther	(b)Cost or oth basis (other)	er (c) Accumula		Book value
1a	Land	• • • • • •					839,2	89		839,289
	Buildings						000,2			
	Leasehold improvements		- -							

d Equipment .

. . •

e Other	17,1	1,615			
Total. A dd lınes 1a-1e (Column (d) should equal Form 990, Part X, column (B), lıne 10(c).)					

.

15,495 854,784

Part VIII Investments-Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b) Book value	(c) Metho	d of valuation
(including name of security)		Cost or end-o	F-year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
o thei			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•		
Part VIIII Investments—Program Related. Se	ee Form 990, Part X, line :	13.	
(a) Description of investment type	(b) Book value	(c) Metho	d of valuation
		Cost or end-o	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, I (a) Descr			(b) Book value
	ption		(b) book value
Total (Column (h) chould agual Form 000, Bart X, col (R) luna	15)		
Total. (Column (b) should equal Form 990, Part X, col.(B) linePart XOther Liabilities. See Form 990, Part			
Part XOther Liabilities. See Form 990, Part1(a) Description of Liability	(b) A mount		
Federal Income Taxes			
	1		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)			

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Schedule D (Form 990) 2010 Page 4 Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements 1 189.681 1 Total revenue (Form 990, Part VIII, column (A), line 12) 2 2 99.891 Total expenses (Form 990, Part IX, column (A), line 25) 89.790 3 3 Excess or (deficit) for the year Subtract line 2 from line 1 4 4 Net unrealized gains (losses) on investments 5 5 Donated services and use of facilities 6 6 Investment expenses 7 7 Prior period adjustments 8 8 Other (Describe in Part XIV) 9 9 Total adjustments (net) Add lines 4 - 8 10 10 89,790 Excess or (deficit) for the year per financial statements Combine lines 3 and 9 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 1 Total revenue, gains, and other support per audited financial statements 1 189.681 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 а 2a b Donated services and use of facilities 2Ь Recoveries of prior year grants . . . 2c С Other (Describe in Part XIV) 2d d e Add lines 2a through 2d 2e . . 3 Subtract line **2e** from line **1** . 3 189,681 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a а Ь Other (Describe in Part XIV) 4ь . . . С Add lines 4a and 4b . . . 4c . Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) 5 189,681 5 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return Total expenses and losses per audited financial 99,891 1 1 statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 2a а Donated services and use of facilities . . . Prior vear adjustments 2b ь Other losses 2с С 2d d Other (Describe in Part XIV) e Add lines **2a** through **2d** 2e 3 3 99.891 A mounts included on Form 990, Part IX, line 25, but not on line 1: 4 а Investment expenses not included on Form 990, Part VIII, line 7b . . 4a b Other (Describe in Part XIV) 4b Add lines **4a** and **4b** 4c С . . . Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) 5 5 99,891

Part XIV Supplemental Information

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

Ident if ier Ret urn Reference Explanation

efile GRAPHIC print - D	O NOT PROCESS	As Filed [Data -	DLI	N: 93493225004061
SCHEDULE G	Suppl	emental Ir	formation Rega	rding	OMBNo 1545-0047
Form 990 or 990-EZ)			or Gaming Activit	-	2010
epartment of the Treasury			d "Yes" to Form 990, Part IV, line ore than \$15,000 on Form 990-E		Open to Public
nternal Revenue Service			m 990-EZ. 🏲 See separate instru		Inspection
lame of the organization				Employer id	entification number
rginia Highland Civic Associ)	ation inc			58-201951	.6
Part I Fundraising Ac	ctivities. Complet	e if the organ	ization answered "Yes	" to Form 990, Part I	V, line 17.
1 Indicate whether the orga	anization raised funds	through any of	the following activities C	heck all that apply	
a Mail solicitations		0 /		on-government grants	
b $\bar{\ }$ Internet and e-mails	olicitations		f 🔽 Solicitation of g	overnment grants	
c 🔽 Phone solicitations			g 🔽 Special fundrais	ing events	
d 🔽 In-person solicitation	ıs				
2a Did the organization have or key employees listed i	-		• –		Γ _{Yes} Γ _{No}
b If "Yes," list the ten higher to be compensated at lea					
(i) Name and address of ındıvıdual or entıty (fundraıser)	(ii) Activity	(iii) Did fundraiser ha custody or control of contribution:	· · ·	(♥) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes No	•		
Total		· · · >			
				1	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

		G (Form 990 or 990-EZ) 2010				Page 2
Pai	rt II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Total Events (Add col (a) through
			Fest ival (event type)	Home Tour (event type)	(total number)	col (c))
đ			(event type)	(event type)	(total number)	
H.I.	1	Gross receipts	266,025	5 31,487		297,512
Кечение	2	Less Charitable contributions				
a	3	Gross income (line 1 minus line 2)	266,025	5 31,487		297,512
	4	Cash prizes				
S	5	Non-cash prizes				
ense:	6	Rent/facility costs				
Expenses	7	Food and beverages	10,965	5		10,965
Direct	8	Entertainment				
D	9	Other direct expenses .	105,513	8,340		113,853
	10	Direct expense summary Add lin	ies 4 through 9 in column	(d)		124,818
	11	Net income summary Combine li			🕨	172,694
Par	t III	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or rep	
Revenue		\$10,000 ON FORM 550 EZ, III	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Non-cash prizes				
ណ៍ ច	4	Rent/facility costs				
ΔŪ	5	Other direct expenses				
	6	Volunteer labor	∏Yes % ∏No	∏yes % ∏No	∏Yes % ∏No	_
	7	Direct expense summary Add line	s 2 through 5 ın column (d)		
	8	Net gaming income summary Com	ibine lines 1 and 7 in colu	ımn (d)		
9	Ente	er the state(s) in which the organiza	ation operates gaming ac	tivities		
а		he organization licensed to operate				
Ь		No," Explain				
10a	Wer	e any of the organization's gaming	licenses revoked, susper	nded or terminated during	the tax year?	┌ _{Yes} ┌ _{No}
Ь	If"Y	es," Explain				

Schedule G (Form 990 or 990-EZ) 2010

11	Does the organization operate ga	aming activities with nonmembers	?	··· 「Yes 「No
12	,	•	member of a partnership or other entity	
	formed to administer charitable o	Jamıng?	· · · · · · · · · · · · · · · · · · ·	· · · · ΓYes ΓNo
13	Indicate the percentage of gamin	ig activity operated in		
а			· · · · · · · · · · · · ·	
Ь	An outside facility			L3b
14	Provide the name and address of records	[•] the person who prepares the orga	anızatıon's gamıng/specıal events books a	and
	lecolus			
	Name 🏲			
	Address 🏲			
	revenue [?]		n the organization receives gaming	
Ь		nıng revenue receıved by the orga ed by the thırd party 🏲 \$	inization 🕨 \$ and t	he
с	If "Yes," enter name and address	5		
	Name 🕨			
	Address 🏲			
16	Gaming manager information			
	Name 🏲			
	Gaming manager compensation I	▶\$		
	Description of services provided	•		
17	✓ Director/officer Mandatory distributions	F Employee	☐ Independent contractor	
а	Is the organization required unde	er state law to make charitable dis	tributions from the gaming proceeds to	
	retain the state gaming license?			Г Yes Г No
b	Enter the amount of distributions	required under state law distribu	ted to other exempt organizations or sper	
	in the organization's own exempt	activities during the tax year 🕨	\$	
Par	t IV Complete this part to p instructions.)	provide additional information	for responses to question on Schec	ule G (see
	Identifier	ReturnReference	Explanatio	on

Schedule G (Form 990 or 990-EZ) 2010

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data -		DLN: 93493225004061
SCHEDULE O				OMBNo 1545-0047
(Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ				2010
Department of the Treasury	Complete to prov	Complete to provide information for responses to specific questions on		
Internal Revenue Service	Form 990 or to provide any additional information.			Open to Public
		🕨 🕨 Attach to Form 990) or 990-EZ.	Inspection
Name of the organizat Virginia Highland Civic Assoc			Employe	er identification number
			58-201	9516

ldentifier	Return Reference	Explanation
Form 990 Part VI	19	The Organizastion has limited Documents available on its website including its charter and its yearly strategic plan