Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2009

B Check Addre Name Initial Termi Amen Applic	k if applicabless change e change return		r, or tax year beginning 01-01-200 C Name of organization The American Radio Relay League Inc Doing Business As				dentification number			
Addre	e change return nated	use IRS label or print or type. See Specific Instruc-	The American Radio Relay League Inc Doing Business As	:						
Name Initial Termi Amen	e change return nated ded return	label or print or type. See Specific Instruc-	_			06-60000	10.4			
☐ Initial☐ Termi☐ Amen☐ Applic	return inated ided return	type. See Specific Instruc-	_			06-6000004 E Telephone number				
Termi	inated ided return	Instruc-	None base and attended to a R.O. base of man			-				
Amen Applic	ded return			ıl ıs not delivered to street address	Room/suite	(860) 594	ts \$ 19,081,466			
Applic			225 MAIN STREET			a dioss receipt	15,001,400			
	ation pendir		City or town, state or country, and ZI NEWINGTON, CT 061111494	P + 4	•					
I Tax-		g								
Tax-6		l l	ne and address of principal officer SHELLeY	•		s a group retu				
Tax-			AIN STREET		a ffilia	tes?	ΓYes Γ Nο			
I Tax-		NEWIN	GTON,CT 061111494		H(b) Are al	l affiliates inclu	ıded?			
	exempt stat) (3) ◀ (insert no)	· F 527	_		st (see instructions)			
1 14/ - L			, (3) 4 (III3CIT II0) +347(d)(1) 01	1 321	H(c) Grou	p exemption r	number 🟲			
		ww arrl org			T					
			ion Trust Association Other		L Year of fo	rmation 1914	M State of legal domicile CT			
Part		nmary v describe th	e organization's mission or most :	significant activities						
			est in amateur radio and the estat		etworks					
Governance										
E										
§	2 Chec	k this box 叶	ıf the organization discontinued	its operations or disposed o	f more than	25% of its net	t assets			
	3 Numb	er of voting r	nembers of the governing body (P	art VI, line 1a)			315			
න ග	4 Numb	er of indepen	dent voting members of the gove	rnıng body (Part VI, lıne 1b)			415			
Ĕ l	5 Total	number of en	nployees (Part V , line 2a)				5103			
Activities &	6 Total	number of vo	lunteers (estimate if necessary)				643,000			
٩			ted business revenue from Part V		•		7a 2,678,330			
	b Netu	nrelated busi	ness taxable income from Form 9	90-T, line 34	1	<u> </u>	7b -78,168			
	• • • • • • • • • • • • • • • • • • • •				Prio	r Year	Current Year			
ज्			d grants (Part VIII, line 1h)			1,140,335 9,582,371	1,032,971 9,864,864			
Revenue			revenue (Part VIII, line 2g) . ne (Part VIII, column (A), lines 3			323,263	286,143			
Æ			art VIII, column (A), lines 5, 6d,			1,419,838	1,543,613			
			dd lines 8 through 11 (must equa							
						12,465,807	12,727,591			
			ar amounts paid (Part IX, column			21,517	24,178			
			er for members (Part IX, column (A ompensation, employee benefits (
8	10)	ries, other co	ompensation, employee belients (rait IX, column (A), mes 5-		6,122,753	6,415,223			
Expenses	l6a Prof	essional fund	raising fees (Part IX, column (A),	line 11e)			0			
ੜੇ	b Total	fundraising exp	enses (Part IX, column (D), line 25) 🕒 40	3,220						
	L7 Oth	er expenses ((Part IX, column (A), lines 11a-1	1d, 11f-24f)	6,247,938 5,962,0					
1	L 8 Tota	lexpenses /	Add lines 13–17 (must equal Par	t IX, column (A), line 25)		12,392,208	12,401,431			
	L9 Rev	enue less exp	penses Subtract line 18 from line	12		73,599	326,160			
Not Assets or Fund Balances						of Current ear	End of Year			
Per 2	2 0 Tota	l assets (Par	t X, line 16)			14,863,320	17,820,406			
AB 12			Part X, line 26)			15,272,698	11,982,434			
<u>z</u> z 2	22 Net	assets or fun	d balances Subtract line 21 from	line 20		-409,378	5,837,972			
Part	III Sig	nature Blo	ock							
			rjury, I declare that I have examined thi correct, and complete Declaration of pre							
				, ,		F				
Sign		**** gnature of office			2010- Date	10-05				
Here	- 1.	-	:I		Date					
		rry Shelley cfo pe or print nam	e and title							
	<u> </u>			Date Ch	neck if	Prenarer's iden	ntifying number			
Paid	Prepa signat	rer's ure PAUL E	BALLASY	se	lf	(see instruction				
Prepare	er's Firm's	name (or yours	S & JH COHN LLP	en	npolyed 🕨 🦵					
Use On	ulv If self	employed),	P			EIN 🕨				
	- laddre	ss, and ZIP + 4	180 GLASTONBURY BOULEVARD	Phone no (860) 633-3000						
M = ±1			GLASTONBURY, CT 06033 rn with the preparer shown above) /c.c. unchrustus - \			· · ·			

Cat No 11282Y

Form 990 (2009)

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The purposes for which our Corporation is formed are the following—the promotion of interest in A mateur Radio communication and experimentation, the establishment of A mateur Radio networks to provide electronic communications in the event of disasters or other emergencies, the furtherance of public welfare, the advancement of the radio art, the fostering and promotion of non-commercial intercommunication by electronic means throughout the world, the fostering of education in the field of electronic communication, the promotion and conduct of research and development to further the development of electronic communication, the dissemination of technical, educational and scientific information relating to electronic communication, and the printing and publishing of documents, books, magazines, newspapers and pamphlets necessary or incidental to any of the above purposes

	(Expenses \$	390,492 inc	luding grants of \$) (Revenue \$	1,209)
4d	Other program servi	ces (Describe in Sch	edule O) See also Addit io	nal Data for Description	
	and various other memb		with amateur radio communicat	ions, encodiagement of the exchange of the	as and expertise diffully members
	`	, , , ,		cions, encouragement of the exchange of ide	, , ,
4c	(Code) (Expenses \$	5,804,740 including gra	nts of \$) (Revenue \$	7,034,475)
	Advocacy Advocate for	Amateur Radio issues with	national and international regula	tory agencies and legislatures	
4b	(Code) (Expenses \$	789,472 including gra	nts of \$) (Revenue \$	291,064)
			tion apprx 156,000) to deliver n	ews and information related to Amateur Rad salers	io including product reviews and
4a	(Code) (Expenses \$	2,788,719 including gra		. , ,
4	Section 501(c)(3) an allocations to others,	.d 5.01(c)(4) organizat the total expenses, a	ions and section 4947(a)(nd revenue, if any, for each	on's three largest program services 1) trusts are required to report the a n program service reported	mount of grants and
_	If "Yes," describe the	se changes on Sched	ale O		
3	Did the organization of services?	= :	nake sıgnıfıcant changes ıı	n how it conducts, any program	┌ Yes ┌ No
	If "Yes," describe the	se new services on So	:hedule O		
	the prior Form 990 or	990-EZ?			┌ Yes ┌ No

Part TV	Checklist	of Requir	ed Sche	dules
4: I L T L T	CHECKHSL	UI KEYUII	eu Stile	uuies

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Νο
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		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ 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.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
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
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, Part I	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? If "Yes," complete Schedule F, Part II	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, Part III</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? If "Yes," complete Schedule G, Part 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		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
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

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? If "Yes," complete Schedule I, Parts I and II	21		Νo
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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
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? If "Yes," complete Schedule J	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 questions 24b-24d and complete Schedule K. If "No," go to line 25	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		Νο
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	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	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			
	<i>IV</i>	28a		Νo
Ь	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 of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		Νο
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "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		Νο
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		Νο
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? If "Yes," complete Schedule R, Part I	33		No
	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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
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		Νo
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 11 and 19?	38	Yes	

roilli 990 (.	2009)	
Part V	Statements Regarding Other IRS Filings and Tax Compliance	
		 Т

			Yes	No
а	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a 81			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
	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	103	No
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N (
,	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
:	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
	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		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
ı	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		N
,	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
	required?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	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?	9Ь		
	Section 501(c)(7) organizations. Enter Instruction foce and capital contributions included on Part VIII. line 12			
	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			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
•	against amounts due or received from them)			
3	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			
	vear 120	Ī	İ	ı

225 MAIN STREET NEWINGTON, CT 06111

(860) 594-0200

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.

Se	ction A. Governing Body and Management			
			Yes	No
1a b	Enter the number of voting members of the governing body 1a 15 Enter the number of voting members that are independent 1b 15	-		
р 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1		
2	other officer, director, trustee, or key employee?	2		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		N o
b	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		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►CT , CA , VA			
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 make these available. Check all that apply Own website. Another's website. Upon request			
19	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	ne orga	ınızatıor	n 🕨
	CONTROLLER			

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

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. Use Schedule J-2 if additional space is needed

- 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 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

(A) Name and Title A verage hours per week A	Check this box if the organization did		sate any	/ curi	rent	or fo	rmer c	ffice	r, director, trustee	or key employee	
week or director o		Name and Title Average Position (check all hours that apply)						Reportable compensation	Reportable compensation	Estimated amount of other	
See add'l data			Individual trustee or director	Institutional Trustee	C L 1.		organization (W-	organizations (W- 2/1099-	from the organization and related		
	See add'l data										
											-
	,										

For	n 990 (2009)				Page 8
1b	Total	813,091	5,454		35,632
2	Total number of individuals (including but not limited to those listed above) who receive \$100,000 in reportable compensation from the organization ►5	d more than	•		
				Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highes on line 1a? <i>If</i> "Yes," complete Schedule J for such individual		ee 3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other coincorganization and related organizations greater than \$150,000? If "Yes," complete Schedundividual	•	. 4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated org rendered to the organization? If "Yes," complete Schedule J for such person		5		No
S	ection B. Independent Contractors				
1	Complete this table for your five highest compensated independent contractors that rec \$100,000 of compensation from the organization	eived more than			
	(A) Name and business address	(B) Description of service	es	(C Comper	
7900	h Freret Imlay & Tepper) Wisconsin Avenue Ste 304 esda, MD 20814	Legal			102,157
_					
2	Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►1	who received more tha	n		

Form **990** (2009)

Form 99	•	•	f Davis and					Page 9
Part	/111	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated cam	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
2,₹	c	Fundraising eve	ents 1c					
£ #	d	Related organiz	zations 1d					
હેં≣	e	Government grants	s (contributions) 1e					
교교	f	All other contribution	ons, gifts, grants, and 1f	1,032,971				
ē ₹	g	sımılar amounts no Noncash contri	ot included above butions included in					
돌		lines 1a-1f\$_						
ဝင်း	h	Total. Add lines	s 1a-1f	▶	1,032,971			
<u> </u>				Business Code				
Program Serwce Revenue	2a	membership dues		900,099	5,410,673	5,410,673		
	ь	ADVERTISING INCO	OME	541,800	2,678,330		2,678,330	
	c	CIRCULATION/PUB	BLICATIO	511,120	832,939	832,939		
	d	PROGRAM & SERV	ICE FEES	900,099	499,792	499,792		
2	e	EXAM FEES		900,099	443,130	443,130		
Ĉ. E	f	All other progra	am service revenue					
ξ	g	Total. Add lines	s 2a-2f		9,864,864			
	3		ome (including dividen	+	2,223,223			
			aramounts)	. F	333,801			333,801
	4	Income from inves	stment of tax-exempt bond	proceeds . 🕨				
	5	Royalties		▶	27,928			27,928
			(ı) Real	(11) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	4,591,928					
		assets other than inventory						
	b	Less cost or other basis and	4,639,586					
		sales expenses	-47,658					
	ر ا د	Gain or (loss)	-47,658 s)	<u> </u>	-47,658			-47,658
	d 8a	Gross income f			17,030			17,030
<u> </u>		events (not inc						
Other Revenue		\$	 s reported on line 1c)					
ě			ne 18					
<u>.</u>			а					
ŧ	b		penses b					
0	C		(loss) from fundraising (events 📴				
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19					
			а					
	b		penses b					
	С		(loss) from gaming activ	vities				
	10a	Gross sales of returns and allo						
			а	3,190,792				
	b	Less cost of g	oods sold b	1,714,289				
	С		(loss) from sales of inve		1,476,503			1,476,503
		Miscellaneous	s Revenue	Business Code	20.40-	20.105		
	11a	Other Income		900,099	39,182	39,182		
	b							
	c							
	d	All other reven						
	e	Total. Add lines	5 11 a- 11 d		39,182			
	12	Total revenue.	See Instructions	▶				
					12,727,591	7,225,716	2,678,330	1,790,574 Form 990 (2009)

	990 (2009)				Page 10
Par	IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations m			(D)	
	Il other organizations must complete column (A) but are not required to		(B), (C), and	(D).	(D)
	ot include amounts reported on lines 6b, b, 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 U S $$ See Part IV , line 21 $$				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	24,178	24,178		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	742,399	256,781	342,068	143,550
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	3,982,536	3,169,046	742,090	71,400
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	711,398	522,842	156,640	31,916
9	Other employee benefits	641,407	489,785	 	24,070
10	Payroll taxes	337,483	249,555	'	13,943
11	Fees for services (non-employees)	337,103	2.5,555	.3,363	23,313
a	Management				-
h	Legal	105,746	102,157	3,589	
c	Accounting	40,200	102,137	40,200	
d	Lobbying	87,838	87,838	40,200	
e	Professional fundraising See Part IV, line 17	67,030	07,030		
f	-				
	Investment management fees Other	202 171	172,978	20.102	
9 12	Advertising and promotion	9,250	9,250	29,193	
13	Office expenses	910,343	'	71,375	111,588
14	Information technology	128,584	· ·	82,541	975
15	Royalties	128,384	43,008	02,541	973
16	Occupancy	384,696	276,044	108,652	
17	Travel	·		 	E 406
18	Payments of travel or entertainment expenses for any federal,	360,205	337,718	17,081	5,406
19	state, or local public officials				
20	Interest				
21	Payments to affiliates				
22	,	262.649	106.096	65 663	
22	Depreciation, depletion, and amortization	62,628	196,986 43,840	· · ·	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	02,020	43,640	10,700	
а	printing & publication	2,049,609	2,049,609		
b		417,866	151,495	266,371	_
С	Miscellaneous	369,897	369,510	 	
d	SRVC CHARGES & PROCESSI	221,365	193,356	28,009	_
e	PROGRAM SERVICES	97,285	95,373	 	
f	All other expenses	251,699	202,634	48,693	372
25	Total functional expenses. Add lines 1 through 24f	12,401,431	9,773,423	2,224,788	403,220
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation		, ,	, , , , , ,	,
. —					

Part X Balance Sheet (A) (B) Beginning of year End of year 256.521 863.013 1 1 Cash—non-interest-bearing 2.151.984 2 1.687.263 2 3 3 4 576.184 4 691.651 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 760,167 602,414 155,209 175,957 9 Land, buildings, and equipment cost or other basis Complete 6.199.346 10a 10a Part VI of Schedule D 10b 5.621.171 643.677 578,175 b Less accumulated depreciation 10c 10.319.578 11 13.221.933 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 14.863.320 16 17,820,406 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 428.677 17 446.683 17 Accounts payable and accrued expenses . 18 18 6,258 19 5,223 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 14.837.763 11.530.528 25 Other liabilities Complete Part X of Schedule D 25 26 **Total liabilities.** Add lines 17 through 25 15,272,698 11,982,434 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. -2.423.979 3.681.932 27 Unrestricted net assets 27 28 1.506.777 28 1.644.303 Temporarily restricted net assets Fund 507.824 29 511.737 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances -409,378 5,837,972 33 33 34 Total liabilities and net assets/fund balances 14.863.320 17,820,406 34

Part XI Financial Statements and Reporting

			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		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	▼ Separate basis			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

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

Public Charity Status and Public Support

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

The American Radio Relay League Inc

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

Employer identification number

Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	on in ed in rning	(v) Did you notify the organization in col (i) of your support?		(vi) Is the organizati col (i) orga	on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

11g(iii)

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	organization's benefit and either						
	paid to or expended on its						
	behalf						
3	The value of services or facilities						
-	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averagest	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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

(Complete only if you checked the box on line 9 of Part I.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	09	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	6,475,904	6,464,281	7,124,174	6,457,179	6,4	143,644	32,965,182
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	6,740,201	6,704,361	7,397,603	7,326,490	7,0	544,983	35,813,638
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	Total. Add lines 1 through 5	13,216,105	13,168,642	14,521,777	13,783,669	14,0	088,627	68,778,820
	A mounts included on lines 1, 2, and 3 received from disqualified persons A mounts included on lines 2 and							0
Б	3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of							0
	the amount on line 13 for the year							
с 8	Add lines 7a and 7b Public Support (Subtract line 7c from line 6)							68,778,820
Se	ction B. Total Support	•						
	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 200) 9	(f) Total
	beginning in)				-			
9	A mounts from line 6	13,216,105	13,168,642	14,521,777	13,783,669	14,0	88,627	68,778,820
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from	280,344	330,196	350,400	333,916	3	33,801	1,628,657
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b	280,344	330,196	350,400	333,916		33,801	1,628,657
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					-		3,,
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	52,472	79,323	67,592	63,991		39,182	302,560
13	Total support (Add lines 9, 10c,	13,548,921	13,578,161	14,939,769	14,181,576	14,4	61,610	70,710,037
14	11 and 12) First Five Years If the Form 990 is a check this box and stop here	for the organization	on's first, second	l , thırd, fourth, or f	ifth tax year as a	501(c)(3	organı	zation,
_	<u> </u>							·
	ction C. Computation of Pub							
15	Public Support Percentage for 2009			13 column (t))		15		97 270 %
16	Public support percentage from 200	08 Schedule A , Pa	art III, line 15			16		86 040 %
Se	ction D. Computation of Inv	estment Inco	me Percenta					
17	Investment income percentage for				(f))	17		2 300 %
18	Investment income percentage from	n 2008 Schedule <i>i</i>	A, Part III, line 1	7		18		2 440 %

19a 33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported

33 1/3% support tests—2008. 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

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493278006050

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

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

▶ Se ▶ Se	ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line	-A Doi Part II-E	not c	omplet not co	e Part II-B mplete Pai	rt II-A	n
	ction 501(c)(4), (5), or (6) organizations Complete Part III						
	me of the organization American Radio Relay League Inc	mploye	rıde	ntifica	tion numb	er	
	, 3	6-600	0004	1			
Par	t I-A Complete if the organization is exempt under section 501(c) or is a se	ection	52	7 org	anizati	on.	
1	Provide a description of the organization's direct and indirect political campaign activities in Part	IV					
2	Political expenditures	,		\$			
3	Volunteer hours			· —			
Par	t I-B Complete if the organization is exempt under section 501(c)(3).						
1	Enter the amount of any excise tax incurred by the organization under section 4955		•	\$			
2	Enter the amount of any excise tax incurred by organization managers under section 4955		۰	\$			
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?				┌ Yes	Γı	No
4a	Was a correction made?				☐ Yes	Гι	No
ь	If "Yes," describe in Part IV						
Par	t I-C Complete if the organization is exempt under section 501(c) except s	ectio	า 50	1(c)	(3).		
1	Enter the amount directly expended by the filing organization for section 527 exempt function act	vities	Þ	\$			
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	27					
	exempt funtion activities		•	\$			
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	7 b	۰	¢			
4	Did the filing organization file Form 1120-POL for this year?			* —	☐ Yes	Г	No
5	State the names, addresses and employer identification number (EIN) of all section 527 political were made. For each organization listed, enter the amount hald from the filing organization's funds	-					ıl

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768	(election
	Check If the filing organization belongs to a	an affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	581	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	87,257	
c	Total lobbying expenditures (add lines 1a and 1i	b)	87,838	
d	Other exempt purpose expenditures		12,313,593	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	12,401,431	
f	Lobbying nontaxable amount Enter the amount f	from the following table in both	770,072	
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000	The lobbying nontaxable amount is: 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		
	Grassroots nontaxable amount (enter 25% of lin	ne 1f)	192,518	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	0	

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expe	nditures During 4	-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a	Lobbying non-taxable amount	753,315	778,160	769,610	770,072	3,071,157
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,606,736
_с	Total lobbying expenditures	78,770	84,936	86,007	87,838	337,551
d	Grassroots non-taxable amount	188,329	194,540	192,403	192,518	767,790
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,151,685
f	Grassroots lobbying expenditures				581	581

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1i						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
26H	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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DLN: 93493278006050

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

rai Revenue Service P- Attach to Fo	orm 990. F See separate instructions.			Inspection
ame of the organization ne American Radio Relay League Inc			loyer identific	ation number
art I Organizations Maintaining Donor A	duised Eunds or Other Similar		000004	n Complete if th
organizations maintaining bond Av		rulius (or Account	s. Complete ii ti
	(a) Donor advised funds	(b) Funds and	other accounts
Total number at end of year				
Aggregate contributions to (during year)				
Aggregate grants from (during year)				
Aggregate value at end of year				
Did the organization inform all donors and donor advi funds are the organization's property, subject to the	<u> </u>	onor advi	sed	┌ Yes ┌ No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	nefit of the donor or donor advisor, or for	any othe	r purpose	┌ Yes ┌ No
rt III Conservation Easements. Complete	if the organization answered "Yes"	to Form	n 990, Part I	V, line 7.
Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreated) Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qual	ion or pleasure)	a certified	d historic stru	•
easement on the last day of the tax year			11-13-446	- FI - 6 + I V
Total number of conservation easements		122	неіа ат ти	e End of the Year
		2a		
Total acreage restricted by conservation easements		2b		
Number of conservation easements on a certified his	• •	2c		
Number of conservation easements included in (c) a		2d		
Number of conservation easements modified, transfe	erred, released, extinguished, or termina	ted by th	e organizatior	during
the taxable year ►				
Number of states where property subject to conserva	ation easement is located ►			
Does the organization have a written policy regarding enforcement of the conservation easements it holds?		ndling of	violations, an	d ┌Yes ┌No
Staff and volunteer hours devoted to monitoring, insp	pecting and enforcing conservation ease	ments du	uring the year	-
A mount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easemer	nts during	, the year ► \$	
Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	2(d) above satisfy the requirements of so	ection		┌ Yes ┌ No
In Part XIV, describe how the organization reports contained balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the organization's financi	•	,	
t III Organizations Maintaining Collection Complete if the organization answered		, or Oth	ner Similar	Assets.
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or resea	rch in fui		
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research			•
(i) Revenues included in Form 990, Part VIII, line 1			► \$	
(ii) Assets included in Form 990, Part X				
If the organization received or held works of art, histofollowing amounts required to be reported under SFA		for financ		
Revenues included in Form 990, Part VIII, line 1			► \$	
· · · · · · · · · · · · · · · · · · ·				

Paru	Organizations Maintaining Co	<u>liections of Art</u>	<u>, His</u>	tori	<u>cai ire</u>	<u>asu</u>	res, or C	tne	r Simil	ar Ass	ets (c	ontinued)
3	Using the organization's accession and other items (check all that apply)	records, check any	of th	e foll	lowing th	at are	e a significa	ant u	se of its	collecti	on	
а	Public exhibition		d	Γ	Loan or	exch	nange prog	ams				
b	Scholarly research		e	Γ	Other							
c	Preservation for future generations											
4	Provide a description of the organization's co	llections and expla	ın hov	v the	y further	the o	rganızatıor	ı's ex	empt pu	rpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	Γ	Yes	∏ No
Par	Part IV, line 9, or reported an an						answere	d "Y	es" to F	orm 99	0,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary	for c	ontrıbutı	ons o	or other ass	ets r	iot	Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XI\	and complete the	follow	ing ta	able		Г			A mo	ount	
с	Beginning balance							1c				
d	Additions during the year						ļ	1d				
e	Distributions during the year						Ī	1e				
f	Ending balance						ļ	1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	217							Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV									ĺ		
Par			ans	<u>w</u> ere	ed_"Yes	" to F	orm 990,	Par	t IV, lır	<u>ne</u> 10.		
	·	(a)Current Year) Prior	Year		vo Years Back				(e) Four	Years Back
1a	Beginning of year balance	1,416,296		1	1,449,272							
b	Contributions	110,460			209,098							
С	Investment earnings or losses	205,710			-203,806							
d	Grants or scholarships											
e	Other expenditures for facilities and programs	18,000			38,268							
f	Administrative expenses											
g	End of year balance	1,714,466		1	1,416,296							
2	Provide the estimated percentage of the yea	r end balance held a	is									
а	Board designated or quasi-endowment 🕨	69 000 % %										
b	Permanent endowment ► 31 000 % %											
с	Term endowment ► 0 % %											
3a	Are there endowment funds not in the posses	ssion of the organiza	ation t	that a	are held	and a	dmınıstere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations			•				•		. 3a(i)		No
b	(ii) related organizations					•				3a(ii	' 	No I
ь 4	Describe in Part XIV the intended uses of th	•						•	• •	30		
	t VI Investments—Land, Buildings					0. Pa	art X. line	10.				
		.,qaipiito			Cost or o		(b)Cost or		(c) Acc	cumulated		
	Description of investment				is (investn		basis (oth			eciation	(d) E	Book value
	and		•	-						1.67: -		
	Buildings		•				·	4,693		1,074,62	+	20,072
	.easehold improvements		•				·	8,848		903,46	_	175,385
	iquipment		•	-			4,02	5,805		3,643,08	7	382,718
	Other	rm 000 Bert V selve	• nn (B)	1,50	10(5)						+	E70 175
ıotal	. Add lines 1a-1e <i>(Column (d) should equal Fo</i>	ını 990, Part X, colun	ıın (B)	, iine	10(C).)				•	-	1	578,175

Part VII Investments—Other Securities. See (a) Description of security or category	Torin 990, Part X, line 12	(c) Method of valuation
(including name of security)	(b) Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See		13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
	+	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
	ne 15	
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, lir		(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Descrip	rtion	(b) Book value
Part IX Other Assets. See Form 990, Part X, III (a) Descrip	5.)	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Accrued Pension Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes A ccrued Pension Liability Deferred Life Member Dues	5.)	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,727,591
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,401,431
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	326,160
4	Net unrealized gains (losses) on investments	4	2,182,245
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	3,738,945
9	Total adjustments (net) Add lines 4 - 8	9	5,921,190
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	6,247,350
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	20,363,070
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	7,635,479
3	Subtract line 2e from line 1	3	12,727,591
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	12,727,591
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	14,115,720
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
Ь	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	1,714,289
3	Subtract line 2e from line 1	3	12,401,431
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	12,401,431
Par	t XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, 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	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		dEFINED BENEFIT PENSION PLAN ACTUARIAL GAIN 3738945
Part XII, Line 2d - Other Adjustments		Cost of Goods Sold - Inventory 1714289 defined benefit pension plan actuarial gain 3738945
Part XIII, Line 2d - Other Adjustments		Cost of Goods Sold - Inventory 1714289
		The League adopted the new accounting for uncertainty in income taxes guidance on January 1, 2009. The adoption of that guidance did not result in the recognition of any unrecognized tax benefits and the League has no unrecognized tax benefits at December 31, 2009. The League's U.S. Federal and state information returns prior to calendar year 2006 are closed and management continually evaluates expiring statutes of limitations, audits, proposed settlements, changes in tax law and new authoritative rulings. If the League has unrelated business income taxes, the League will recognize interest and penalties associated with uncertain tax positions as part of the income tax provision and include accrued interest and penalties with the related tax liability in the statements of financial position.

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DLN: 93493278006050

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

Open to Public

Name of the organization						Employer identifica	ation number	
The American Radio Relay Lea	gue Inc					06-6000004		
Part I General Infor	mation on Gra	nts and Assistance						
the selection criteria use	ed to award the grar	substantiate the amount of t nts or assistance? edures for monitoring the us					√ Yes	
Form 990, Part	IV, line 21 for ar	e to Governments and ny recipient that receive 990) if additional space	d more than \$5,000). Check this box if n	io one recipient receiv	ed more than \$5,00	00. Use	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance	
			•	·	•		•	

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

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Education Grants	14		16,313	Fair Market Value	Radio Equipment
Legal Fund	3	1,865			
Midway 2009 DX Expedition	1	6,000			

Part IV Supple	emental Information. Cor	mplete this part to provide the information required in Part I, line 2, and any other additional information.
Ident if ier	Return Reference	Explanation
Other Information	Part IV	Education Grants Applications are ranked based on specific criteria including evidence of a well thought out plan, commitment from school administration, availability of a supporting Amateur Radio club, and the teacher having attended or willing to attend an ARRL Teachers Institute class ARRL purchases all the equipment directly for the grantee No cash is provided to the recipient Legal Fund ARRL will financially assist legal cases pertaining to amateur radio that may have a significant impact on the way Amateur Radio operates All attorney bills are paid directly and no cash is provided to the grant recipient DX Expedition Applicants are ranked based on their ability to show an all inclusive plan, including reasonable expenses and revenue sources Priority is given to multi-national groups and applications showing the greatest enhancements to the condition of Amateur Radio in the proposed location Expenses for annual expeditions far exceed any grant funds given to the recipient
· -		

DLN: 93493278006050

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

The American Radio Relay League Inc

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

			06-600004			
Pa	rt I Questions Regarding Compensation	on				
					Yes	Νo
1a	Check the appropriate box(es) if the organization property Section A, line 1a Complete Part I.		ny of the following to or for a person listed in Form ide any relevant information regarding these items			
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions		Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the creimbursement orprovision of all the expenses des			1b		
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2		
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all		·			
	✓ Compensation committee	Г	Written employment contract			
	Independent compensation consultant	Г	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization	, Part VII	, Section A , line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	ıt?	4a		No
ь	Participate in, or receive payment from, a supplem	ental non	qualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and p		•			
	Only 501(c)(3) and 501(c)(4) organizations only n	nust comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section Apayments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,	, paid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in Part III	ın Regs s	section 53 4958-4(a)(3)? If "Yes," describe	8		No
9	If "Yes" to line 8, did the organization also follow to section 53 4958-6(c)?	he rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name	(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI: (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
Mr David Sumner (1)	158,666 0	0	'''	0 0	7,539 0	166,975 0	0 0
mr Mark Wilson (i)	82,696 0	0	_	0 0	0	82,696 0	0
Mr Paul Rinaldo (i)	23,630	0	_	0 0	0	23,630 0	0

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation

Schedule J (Form 990) 2009

OMB No 1545-0047

2000

Open to Public Inspection

SCHEDULE 0

(Form 990)

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

► Attach to Form 990.

Supplemental Information to Form 990

Name of the organization The American Radio Relay League Inc **Employer identification number**

06-6000004

Form 990, Part VI, Section A, Iline 6 Form 990, Part VI, Section A, Iline 7a Form 990, Part VI, Section B, Iline 11 Form 990, Part VI, Section B, Iline 12c		Full Members are residents of the United States who hold an unexpired Amateur Radio operator's license who have submitted a membership application and paid the annual membership dues. Other non-Full members are those who hold a valid license but are not residents of the U.S. or are residents but do not yet hold a valid license. The organization is governed by a Board of Directors consisting of 15 Directors, each representing a territorial division representing a geographical area as defined in the By Law's. The Directors are elected to terms of 3 years by the full members eligible to vote in each territorial division. To be eligible as a Full Member, an applicant must be a resident of the United States, its possessions, the Commonwealth of Puerto Rico, or a United States citizen temporarily residing elsewhere, and the holder of an unexpired Amateur Radio operator's license or reciprocal operating authorization issued by the United States. In order to be eligible for election, a Director must have been a Full Member for at least four continuous years immediately preceding nomination and throughout the subsequent term of office. The Form 990 is prepared with the assistance of independent accountants and, before filing, is reconciled to the
Form 990, Part VI, Section B, line 11 Form 990, Part VI, Section B, Section B,		division representing a geographical area as defined in the By Law's. The Directors are elected to terms of 3 years by the full members eligible to vote in each territorial division. To be eligible as a Full Member, an applicant must be a resident of the United States, its possessions, the Commonwealth of Puerto Rico, or a United States citizen temporarily residing elsewhere, and the holder of an unexpired Amateur Radio operator's license or reciprocal operating authorization issued by the United States. In order to be eligible for election, a Director must have been a Full Member for at least four continuous years immediately preceding nomination and throughout the subsequent term of office. The Form 990 is prepared with the assistance of independent accountants and, before filing, is reconciled to the
Part VI, Section B, line 11 Form 990, Part VI, Section B,		
Part VI, Section B,		organization's books and records and reviewed and approved by both the Controller and Chief Financial Officer of the organization. Also, prior to filing with the IRS, an electronic copy is provided to members of the Board of Directors.
		When requested by the Ethics and Elections Committee and not less frequently than once a year, each Board Member shall promptly submit a statement to the Committee identifying all business and other affiliations in which the Board Member has a Financial Interest as defined in the organization's By Laws In addition, a Board Member shall promptly disclose to the Ethics and Elections Committee any matter that could reasonably be considered to be a "financial benefit" to such Board Member, whether or not the Board Member believes a conflict exists. After disclosure of the potential conflict of interest, the disinterested members of the Ethics and Elections Committee shall determine whether a conflict of interest exists or continuing and pervasive conflict of interest exists. Neither the Board nor any Committee of the Board shall vote upon any proposed matter, transaction, contract, or arrangement in connection with which an actual or possible conflict of interest has been disclosed by a Board Member until such time as the Ethics and Elections Committee has addressed the actual or possible conflict of interest. Also, each Board Member shall annually sign a statement which affirms that such person (i) Has received a copy of the current conflict of interest policy, (ii) Has read and understands the policy, (iii) Has agreed to comply with the policy, and (iv) Understands that the Association is a non-profit organization and that in order to maintain its federal tax exemption it must engage primarily in activities which accomplish one or more of its tax-exempt purposes
Form 990, Part VI, Section B, Inne 15		A) The compensation of the Chief Executive Officer is determined by the Board of Directors based on a recommendation of the Administration and Finance Committee. The A&F Committee's recommendation is based on the performance of the incumbent in comparison to a set of goals and objectives for the organization and the individual. B) The initial base compensation of the other staff officers is determined by the Chief Executive Officer partially on information of comparable organizations and the annual adjustment, if any, is based on the individual performance of the officer.
Form 990, Part VI, Section C, line 19		The organization's By Law's, Articles of Association and financial statements are all posted on the ARRL wieb site. The conflict of interest policy is included in the By Law's
	Oversight Process	The Organization did not change its oversight process or selection process from the prior year

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DLN: 93493278006050

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasu	ır y
Internal Revenue Service	:

Part I

Name of the organization	Employer identification number
The American Radio Relay League Inc	
	06-6000004

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

Name, address, and EIN of disregarded entity

(b) Primary activity

(c) Legal domicile (state or foreign country)

(d) Total income

End-of-year assets

(f) Direct controlling entity

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity

Legal domicile (state or foreign country)

(d) Exempt Code section

Public charity status (if section 501(c)(3)) Direct controlling entity

The ARRL Foundation Inc

225 main street

newington, CT 061111400 23-7325472

To operate for charitable, educational and scientific purposes

CT

501(c)3

N/A 9

Part III	Identification of Related Organizations Taxab	ble as a Partnership (Co	mplete if the organization answered	d "Yes" on Form	990, Part IV	/, line 34
	because it had one or more related organizations tr	reated as a partnership dur	ing the tax year.)			
	(c)	(-)		(h)	(i)	

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h) (i)
Disproprtionate allocations? Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)

(j) General or managing partner?

Yes No

Yes

No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c)
Legal domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f)
Share of total income
(g)
Share of end-of-year assets

(h) of Percentage year ownership

Pa	rt V	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)			
	Note.	Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	iring th	ne tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receip	pt of (i) ınterest (ii) annuıtıes (iii) royaltıes (iv) rent from a controlled entıty	1a		No
b	Gıft, g	grant, or capital contribution to other organization(s)	1b		No
c	Gıft, gı	rant, or capital contribution from other organization(s)	1 c		No
d	Loans	or loan guarantees to or for other organization(s)	1 d		No
е	Loans	or loan guarantees by other organization(s)	1e		No
f	Sale o	of assets to other organization(s)	1f		No
g	Purch	ase of assets from other organization(s)	1 g		No
h	Excha	ange of assets	1h		No
i	Lease	of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease	of facilities, equipment, or other assets from other organization(s)	1j		No
k	Perfor	rmance of services or membership or fundraising solicitations for other organization(s)	1k		No
ı	Perforr	mance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharın	ng of facilities, equipment, mailing lists, or other assets	1m		No
n	Sharın	ng of paid employees	1n		No
o	Reımb	pursement paid to other organization for expenses	10		No
р	Reımb	pursement paid by other organization for expenses	1р	Yes	
q	Other	transfer of cash or property to other organization(s)	1 q		No
r	Other	transfer of cash or property from other organization(s)	1r		No
(1) (2) (3) (4) (5)	If the a	answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds (a) Transaction type(a-r) (b) Transaction type(a-r)	Amou	(c) It invol	ved
(6)					

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity (b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)

section 501(c)(3) organizations? Yes No (e) Share of end-of-year assets (f) Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Additional Data

Software ID:

Software Version:

EIN: 06-6000004

Name: The American Radio Relay League Inc

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 390,492 including grants of \$) (Revenue \$ 1,209)

Lab Provide technical information and support to members, product review testing and other technical support for the organization

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Dr David Woolweaver Director	10 00	X						0	0	0
mr Brian Mileshosky Director	10 00	X						0	0	0
Mr Bruce Frahm Director	10 00	X						0	0	0
Mr Dennis Bodson Director	10 00	X						0	0	0
Mr Frank Fallon Director	10 00	X						0	0	0
mr Greg Sarratt Director	10 00	X						0	0	0
Mr James Fenstermaker Director	10 00	X						0	0	0
Mr James McCobb Treasurer	5 00	X		Х				38,618	5,454	0
Mr James Weaver Director	10 00	X						0	0	0
Mr Joel Harrison President	10 00	X		Х				0	0	0
Mr John Bellows Director	10 00	X						0	0	0
mr Mickey Cox Director	10 00	X						0	0	0
Mr Richard Norton Director	10 00	X						0	0	0
Mr George Isely Director	10 00	X						0	0	0
Mr Rick Roderick Vice President	10 00	X		Х				0	0	0
Mr Robert V allio Director	10 00	X						0	0	0
Mr Rodney Stafford Int'l VP	10 00	X		Х				0	0	0
Mr Thomas Frenaye Director	10 00	Χ						0	0	0
Mr William Edgar Director	10 00	X						0	0	0
Ms Kay C Craigie First VP	10 00	X		X				0	0	0
Mr Barry Shelley CFO	40 00			Х				122,897	0	13,578
Mr David Sumner CEO	40 00			Х				159,436	0	7,539
Mr Harold Kramer COO	40 00			Х				129,580	0	3,653
Ms Mary Hobart CDO	40 00			Х				138,732	0	4,817
Mr Brennan Price CTO	40 00			Χ				117,502	0	6,045

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

(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)				II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organization (W-	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
mr Mark Wilson former officer							Х	82,696	0	0	
Mr Paul Rinaldo Former Officer							Χ	23,630	0	0	

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
membership dues	900,099	5,410,673	5,410,673		
ADVERTISING INCOME	541,800	2,678,330		2,678,330	
CIRCULATION/PUBLICATIO	511,120	832,939	832,939		
PROGRAM & SERVICE FEES	900,099	499,792	499,792		
EXAM FEES	900,099	443,130	443,130		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
printing & publication	2,049,609	2,049,609		
ADMNINISTRATIVE EXPENSE	417,866	151,495	266,371	
Mıscellaneous	369,897	369,510	387	
SRVC CHARGES & PROCESSI	221,365	193,356	28,009	
PROGRAM SERVICES	97,285	95,373	1,912	