Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public Inspection

A	For th	e 2009 calend	dar year, or tax year beginning and ending		
В	Check if applicat	le Please C I	Name of organization	D Employer iden	tification number
	Addre	ess label or print or UN	NITED STATES ROWING ASSOCIATION		
Ē	Name		Doing Business As		6275472
	initial returr	1 -	Number and street (or P.O. box if mail is not delivered to street address) Room/st		
	Term:	n- Specific 2	WALL STREET		751-0702
	Amer		City or town, state or country, and ZIP + 4	G Gross receipts \$	5,798,880.
	Appli		RINCETON, NJ 08540	H(a) Is this a group	
	pend	^{ng}	and address of principal officer:GLENN MERRY	for affiliates?	Yes X No
			AS C ABOVE	H(b) Are all affiliates	ıncluded? Yes No
			X 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527	If "No," attach	a list (see instructions)
			USROWING.ORG	H(c) Group exemp	tion number
			X Corporation	ear of formation. 1970	M State of legal domicile: NJ
P	art I	Summary	- · · · · · · · · · · · · · · · · · · ·		
Governance	1		pe the organization's mission or most significant activities THE ASSO	CIATION SUPP	ORTS AND
rna	2	Check this bo		ore than 25% of its net	assets
ove.	3	Number of vo	ting members of the governing body (Part VI, line 1a)		3 14
<u>ග</u> න	4		dependent voting members of the governing body (Part VI, line 1b)	<u> </u>	4 14
es	5		of employees (Part V, line 2a)		5 32
Ϋ́	6	Total number	of volunteers (estimate if necessary)		6 2200
Activities	7a	Total gross ur	nrelated business revenue from Part VIII, column (C), line 12	7	7a 11,113.
_	b	Net unrelated	business taxable income from Form 990-T, line 34	7	/b <30,516.>
				Prior Year	Current Year
ē	8		and grants (Part VIII, line 1h)	3,946,345	
Revenue	9		ice revenue (Part VIII, line 2g)	1,093,141	
, Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)	11,598	
_	1		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	241,779	
	1		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>5,292,863</u>	5,523,816.
	13		milar amounts paid (Part IX, column (A), lines 1-3)		
	14		to or for members (Part IX, column (A), line 4)	70	
Expenses			r compensation, employee benefits (Part IX, column (A) Thes 5 (0)	<u> </u>	1,692,635.
ë	1		rundraising fees (Part IX, column (A), line 11e) ung expenses (Part IX, column (D), line 25)	- legt 01	·
Ä	1		eng expenses (Part IX, column (D), line 25)) A C F 4 F C	2 161 560
			es (Part IX, column (A), lines 11a-11d, 11f-24f)	3,865,456	
			es Add lines 13-17 (must equal Part IX, column (A), The 5)	5,290,651	
ES-	19	nevenue less	expenses Subtract line 18 from line 12	2,212	•
Net Assets or I Fund Balances	20	Total assets (I	Part X, line 16)	Beginning of Current Yes	
ASS Bal	21	•	(Part X, line 16)	946,385 885,252	
<u>jē</u> s	22		fund balances Subtract line 21 from line 20	61,133	
Pa	art II	Signature		01,133	332,140.
°—		Under penantes o	perjury, I declare that I have examined this/return, including accompanying schedules and statemer claration of preparer (other than officer) is pased on all information of which preparer has any knowle	nts and to the best of my know	ledge and belief, it is true, correct
j		and complete	sciaration of preparer (other trips) officer) is based on all information of which preparer has any knowled	ige	
) ;Sig	n	\triangleright $(/ \bigcirc$	less / Laure	15/19	¥//O
Her	е	Ø ignature	e of officer	Date /	
<u>j</u>			N_KLAUSNER, CONTROLLER		
3015		Type of	Fint name and title		
∌ }}aio	l	Preparer's	Date		parer's identifying number
-	ı Darer's	signature V	1/3/16	employed ►	,
	Only	Firm's name (or yours if	MERCADIEN, P.C.	EIN ►	
-00	J,	self-employed), address, and	P.O. BOX 7648		
		ZIP + 4	PRINCETON, NJ 08543-7648	Phone no.	609-689-9700
May	the if	RS discuss this	s return with the preparer shown above? (see instructions)		X Yes No

932002 02-04-10

1 Is the organization described in section SOT(c)(3) or 4947(4)!) (other than a private foundation)? 1 If Yes, "complete Schedule organization engage in describing the organization and organization and organization and organizations. Did the organization and organizations. Did the organizations are the organizations are supported in Part X, in an 30 Sot(c)(6) arganizations. Did the organizations. Section SOT(c)(4), 301(c)(6), and 501(c)(6) arganizations. Section Sot(c)(4), 301(c)(6), and 501(c)(6) arganizations. Section Sot(c)(4), 301(c)(6), and 501(c)(6) arganizations are supported in part X, in an 30 society and society and society are supported advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization resement, including assements to preserve open space, the environment, historic laind areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization report an amount in Part X, ine 21, serve as a custodian for amounts not isled in Part X, or provide schedule D, Part II Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part II VI Did the organization report an amount for investments - order securities in Part X, line 10? If "Yes," complete Schedule D, Part II VI Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X VI Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X VI Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X VI Did the organization report an amount for investments - program related in Part X, line 10? If "Yes," complete Schedule D, Part X VI Did the organization report an amount for other schedule D				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors? 3 Did the organization engage in director indirect political campagin activities on behalf of or in opposition to candidates for public office? // 1ºes, complete Schedule C, Part // 1 4 Section 501(c)(3) organizations. Did the organization angage in lobbying activities on behalf of or in opposition to candidates for public office? // 1ºes, complete Schedule C, Part // 1 5 Section 501(c)(3) organizations. Did the organization sit is the organization subject to the section 6039(s) incide and reporting requirement and proxy tax. // 1ºes, complete Schedule C, Part // 1 5 Did the organization maintain any donor advoad 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 where donors have the right to provide advice on the distribution of investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution of investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the right to provide advice on the environment of the environment of the such as a propriet as schedule or provide advice on the right of the environment. In the distribution or investments or investments or program related in Part X, line 10? If I'ves, "complete Schedule D, Part X //// It Is the organization report an amount for investments - program related in Part X, line 10? If I'ves, "complete Schedule D, Part X //// It I bid the organization she landar	1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 De 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 II Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II Section 501(c)(4), 601(c)(5), and 501(c)(5), and 501(c)(5), and 501(c)(5), and 501(c)(6) organization is. Ib the organization subject to the section 603(g) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part II Section 501(c)(4), 601(c)(5), and 501(c)(5), and 501(c)(5), and 501(c)(5), and 501(c)(5), and 501(c)(6) organization is not provide advice on the distribution or investment of amounts in such funds or accounts where donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts where donors have the night to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II Did the organization maniam collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part IV 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 Did the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Part IV Is is the organization's answer to any of the following questions. "Yes"? If so, complete Schedule D, Part X, line 10? If "Yes," complete Schedule D, Part X Is Did the organization report an amount for Investments - other sacetiments of the tax year include a footnote that addresses the organization is ability for uncertain tax positions under IF In ARI If "Yes," complete Schedule D, Part X Did the organization report an amount for investments - program related in Part X, line 15? If "Yes," complete Schedule D, P		If "Yes," complete Schedule A	_1_	X	
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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 14 Did the organization maintain an office, employees, or agents outside of the United States? 15 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 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 16 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 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 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 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
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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 Did the organization operate one or more hospitals? If "Yes," complete Schedule H ZO X	18			-	
complete Schedule G, Part III 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X			18	X	
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H 20 X	19		40		v
	~	· ·			
	<u> 2U</u>	Did the organization operate one or more nospitals. II 163, complete schedule ii		990 /	

24	Did the experience was at ways that OC 200 of a second all the second at		Yes	No
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	0.4		х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	21		
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			-
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	
	Schedule K If "No", go to line 25	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	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		X
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	l		,,
26	Schedule L, Part I	25b		X
20	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	00		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	26	-	^
~-	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	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 direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
22	Schedule N, Part II	32		Х
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	00		v
34	Was the organization related to any tax-exempt or taxable entity?	33		X
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	x	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	-34		
	If "Yes," complete Schedule R, Part V, line 2	35		x
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		x
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 c	2009)

Form 990 (2009) UNITED STATES ROWING ASSOCIATION

Part V Statements Regarding Other IRS Filings and Tax Compliance

			ı		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			_		
	U.S Information Returns. Enter -0- if not applicable	<u>1a</u>	4	6		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	<u> </u>	<u>0</u>		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	reporta	ble gaming			
	(gambling) winnings to prize winners?		I	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	_2a	3	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see				۱.,	
	Did the organization have unrelated business gross income of \$1,000 or more during the year cover	ed by t	his return?	3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	X	<u> </u>
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other		•			•
L	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	nt)''	<u>4a</u>		X
D	If "Yes," enter the name of the foreign country	Dank				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank	and			
5 ~	Financial Accounts Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			Ea	1	y
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter trans	action')	5a_		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg			_5b	-	- 21
C	Tax Shelter Transaction?	arung	Frombited	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he oro	anization solicit	30		
00	any contributions that were not tax deductible?	ine org	arnzation concit	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contribu	itions o	or aifts	<u> </u>	<u> </u>	
_	were not tax deductible?		, giito	6b	İ	
7	Organizations that may receive deductible contributions under section 170(c).					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	aoods	and services			
	provided to the payor?	J	_	7a	x	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		•	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v	vas rec	uıred			
	to file Form 8282?		-	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a	persor	nal			
	benefit contract?			7 <u>e</u>		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit con-	tract?		7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required	?		7g	ļ	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-	C as re	equired?	7h	ļ	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting o	rganiz	ations. Did the			
	supporting organization, or a donor advised fund maintained by a sponsoring organization, have ex-	cess bi	usiness holdings		ļ	
	at any time during the year?			8		<u> </u>
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a	ļ	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		<u> </u>
10	Section 501(c)(7) organizations. Enter	1	ŧ			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
b				- 1		ŀ
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	l	┪	i	
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter	1	 			
11 a	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	10b				
	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	11a				
a b	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)	11a				
a b 12a	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	11a	?	12a		

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

sec	tion A. Governing Body and Management						
12	Enter the number of voting members of the governing body			1 4		Yes	No
b		1a	-	14 14			
2	Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a hyproces relationship.	1 <u>b</u>	ony other	14			
-	Did any officer, director, trustee, or key employee have a family relationship or a business relationship officer, director, trustee, or key employee?	ib with	any other		,	į	v
3		o diro	ot auganyaian	<u> </u>	2		X
3	Did the organization delegate control over management duties customarily performed by or under the of officers, directors or trustees, or key employees to a management company or other person?	ie aire	ct supervision		۱ ۵		v
4	Did the organization make any significant changes to its organizational documents since the prior Fo	orm oo	U was tilodo	-	3 4	х	X
5	Did the organization become aware during the year of a material diversion of the organization's asse		was illeur		5		x
6	Does the organization have members or stockholders?	13.			6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more me	ember	s of the	-	* 	-41	
	governing body?		- 01 ti 10	١,	7a	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other per	rsons')	-	7b	X	-
8	Did the organization contemporaneously document the meetings held or written actions undertaken			-	-		
	by the following		, , -				
а	The governing body?			1	3a	x	
	Each committee with authority to act on behalf of the governing body?				3b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	ached	at the	F)	\dashv		
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			1	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Fi	Revenu	e Code)		1		
						Yes	No
10a	Does the organization have local chapters, branches, or affiliates?			1	0a		Х
b	If "Yes," does the organization have written policies and procedures governing the activities of such	chapt	ers, affiliates,				
	and branches to ensure their operations are consistent with those of the organization?			1	0ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?						
11A	A Describe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	2a Does the organization have a written conflict of interest policy? If "No," go to line 13						
b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise						
	to conflicts?			1	2b	X	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If	"Yes,"	describe				
	ın Schedule O how this is done			, <u> </u> 1	2c	X	
13	Does the organization have a written whistleblower policy?			Ŀ	13	Х	
14	Does the organization have a written document retention and destruction policy?			Ŀ	14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	_	ndependent			i	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•					
а	The organization's CEO, Executive Director, or top management official				5a	Х	
b	Other officers or key employees of the organization			1	5b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	with a				
	taxable entity during the year?			_	6a		<u> X</u>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva			1			
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	anızat	ion's		_		
	exempt status with respect to such arrangements?			1	6b		
	tion C. Disclosure	·m +	T MA 1.73	D.3 .	773	3737	
17 40	List the states with which a copy of this Form 990 is required to be filed IN, NJ, CA, OR, C					, NY	
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	1 (301)	(၁)(၁)s only) ava	inable to	T		
	public inspection indicate how you make these available. Check all that apply						
40	X Own website Another's website X Upon request	ondi			e		
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or statements available to the public	COULIE	or interest pol	icy, and	tınar	ncial	
20	statements available to the public	nd	ordo of the c				
20	State the name, physical address, and telephone number of the person who possesses the books a BRIAN KLAUSNER $-609-751-0702$	iiu rec	oras or the org	anizatioi	u. 🕨		
	2 WALL STREET, PRINCETON, NJ 08540						
	2 WALL DINEEL, FAINCEION, NO VOJEV				orm (990 (20001
				۲	OHIII 3	JJU (20U3)

932006 02-04-10

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 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."

Check this box if the organization did not compensate any current officer, director, or trustee

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) Average	(2)	bool	Pos			.1	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
DON LANGFORD										
PRESIDENT	10.00	X	ļ	X				0.	0.	0.
CHRISTINE COLLINS WOMENS VICE PRESIDENT	10.00	x		х				0.	0.	0.
KRISTOPHER GRUDT	Ì									
MEN'S VICE PRESIDENT	10.00	X	<u> </u>	X				0.	0.	0.
TOM FULLER							ŀ			_
DIRECTOR	10.00	X	<u> </u>	<u> </u>	_	ــ	<u> </u>	0.	0.	0.
TYLER WINKLEVOSS	1000		ŀ							•
DIRECTOR	10.00	X	 			-	<u> </u>	0.	0.	0.
PETER CIPOLLONE	10.00						i			•
TREASURER	10.00	X	├-	X				0.	0.	0.
MARY WHIPPLE	10.00									0
DIRECTOR	10.00	_ <u></u>	 	├	-	+-		0.	0.	0.
CHRIS LIWSKI	10.00	v						0.	0.	0.
DIRECTOR LAURA KUNKEMUELLER	10.00	^	├			╁╌		0.		
SECRETARY	10.00	x		X				0.	0.	0.
CARYN DAVIES	10.00	^	╁					0.		
DIRECTOR	10.00	x						0.	0.	0.
ROBERT F. KIDD	10.00	-	\vdash	-	<u> </u>	1				
DIRECTOR	10.00	x					ļ	0.	0.	0.
TOM FEASTER		<u> </u>	T	t	ļ	† –				
DIRECTOR	10.00	\mathbf{x}						0.	0.	0.
FRANK BILLER		1								
DIRECTOR	10.00	X						0.	0.	0.
GLENN MERRY										
CHIEF EXECUTIVE OFFICER	40.00		X	X		X		145,039.	0.	14,478.
BRIAN KLAUSNER		Π								
CONTROLLER	40.00		X	X				92,108.	0.	12,199.
THOMAS TERHAAR										
COACH	40.00		L		X	<u> </u>	<u> </u>	150,010.	0.	27,753.
TIMOTHY MCCLAREN										
COACH	40.00		L		X			150,023.	0.	0.
932007 02-04-10										Form 990 (2009)

` (A) Name and title	(B) Average		(C) Position					(D) Reportable	(E) Reportable		(F) Estimate		
	hours per			all t			ly)	compensation from	compensation from related		amo		of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	2)	fro organ and organ	m th nızat relat	ie tion ted
KRZYSZTOF KORZENIOWSKI													
COACH	40.00					Х		109,075.		0.	24	<u>,7</u> -	99.
	<u></u>	 											
										 			
										+			
 Total Total number of individuals (including but recompensation from the organization 	not limited to th	ose	liste	ed ab	ove	e) wh	io r	646,255. eceived more than \$100		0.	79	<u>, 2</u>	<u>29.</u> 3
3 Did the organization list any former officer,			, key	y emj	ploy	yee,	or I	nighest compensated en	nployee on			'es	No
 line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the si and related organizations greater than \$15 	um of reportab	le co	•					•	he organization	ŀ	4	x	X
Did any person listed on line 1a receive or a the organization? If "Yes," complete Sched Section B. Independent Contractors				rom a	any	unre	elat	ed organization for servi	ces rendered to		5		х
Complete this table for your five highest country the organization	ompensated inc	depe	ende	nt cc	ontr	acto	rs t	that received more than	\$100,000 of comp	ensa	tion fro	m	
(A) Name and business MAIN EVENT	address							(B) Description of s	ervices	Cc	(C) empens	atio	n
	NAPOLIS,	<u>,]</u>	<u>N</u>	46	25	50		WAREHOUSE/SH	IPPING		142	<u>, 3</u>	47.
2 Total number of independent contractors (i		ot lır	nited	d to t	hos	se lis	tec	l above) who received m	ore than				
\$100,000 in compensation from the organization	zation >				1	<u> </u>				F	orm 9 9	90 (2	2009)

1 a Federated campaigns 1a			(2009) UNIT	ED STATES	S ROWING	<u>ASSOCIATIO</u>	N	23-6275	472 Page 9
2 a MEMBERSHIP Business Code 7.13390 16183999 1618499 16,849	_Par	t VII	Statement of Reve	nue		, ,	Related or exempt function	Unrelated business	excluded from tax under sections 512.
2 a MEMBERSHIP Summers Code 713390 16189999 16189999 16189999 16189999 16189999 16189999 1618999 161899999 161899999 161899999 161899999 161899999999999999999999999999999999999	ibutions, gifts, grants ther similar amounts	b c d e	Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grants)	1b 1c 1d 1d tions) 1e nts, and	2691227.				
Susiness Code	Contr and o	g h				2691227			
Total. Add lines 242/2		2 a	MEMBERSHIP		_713390	1618999.			
Total. Add lines 242/2	Serv						916,849.		
Total. Add lines 2a2	ever	_	TROGRAM SERVICE	rees	713990	19,114.	19,114.	- ··	
Total. Add lines 242/21	<u>6</u>	e							
3 Investment income (including dividends, interest, and other similar amounts)	٦	f	All other program service rev	enue					
Securities Sec	_				> _	<u> 2615560.</u>			
(i) Real (ii) Personal			other similar amounts)		•	8,461.			8,461.
6 a Gross Rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including \$		5	Royalties						
b Less rental expenses c Rental income or (loss) d Net gain or (loss) d Netgain				(ı) Real	(II) Personal				
c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		6 a					Ì		
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less, cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a 61,875. b Less direct expenses b 32,701. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a 183100. b Less: cost of goods sold b 242363. c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a RENTAL INCOME 532000 24,899. b ADVERTISING 541800 11,113. 11,113. c MISCELLANEOUS 4 d All other revenue e Total. Add lines 11a-11d 5523816. 2788116. 11,113, 33,360			•	<u> </u>	 				
7 a Gross amount from sales of assets other than inventory b Less. cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including \$			` '	L					
assets other than inventory		-	• • •	(ı) Socurities	(u) Other				
b Less cost or other basis and sales expenses c Gain or (loss) 8 a Gross income from fundraising events (not including \$, ,		(i) Gecurities	(ii) Other				
d Net gan or (loss) 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		b	Less. cost or other basis						
8 a Gross income from fundraising events (not including \$ _ of contributions reported on line 1c) See Part IV, line 18		C	Gain or (loss)						
Including \$	İ				<u> </u>				
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. ▶ 29,174. 29,174. 29,174. 29,174. 140,737.	evenue	8 a	including \$	of					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. ▶ 29,174. 29,174. 29,174.	er F		Part IV, line 18	а					
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. ▶ 29,174. 29,174. 29,174. 29,174. 140,737.				_	32,701.				
Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a RENTAL INCOME 532000 b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. Author of the properties of the properti			' '	•		29,174.	29,174.		
b Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. b 383100. 242363. 140,737. 140,737. 140,737. 140,737. 140,737. 1410,737. 14		9 a					i		
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. ■ 383100. 140,737. 140,737. 140,7									
10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. 383100. 140,737. 140,737. 140,737. 140,737. 141,133. 24,899 24,899 532000 11,113. 11,113. 38,657. ■ 38,657. 5523816. 2788116. 11,113. 33,360				-	'				
and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions. a 383100. 242363. 140,737. 140,737. 140,737.	.			_					
b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue 11 a RENTAL INCOME b ADVERTISING c MISCELLANEOUS d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions. b 242363. 140,737. 140,737. 140,737. 140,7			·		383100				
c Net income or (loss) from sales of inventory ▶ 140,737. 140,737. Miscellaneous Revenue Business Code 11 a RENTAL INCOME 532000 24,899. 24,899 b ADVERTISING 541800 11,113. 11,113. c MISCELLANEOUS 900099 2,645. 2,645. d All other revenue 38,657. 12 Total revenue. See instructions. 5523816. 2788116. 11,113. 33,360	1	b							
11 a RENTAL INCOME 532000 24,899 24,899 b ADVERTISING 541800 11,113 11,113 c MISCELLANEOUS 900099 2,645 2,645 d All other revenue 38,657 12 Total revenue. See instructions. 5523816 2788116 11,113 33,360			-	s of inventory		140,737.	140,737.		
b ADVERTISING 541800 11,113. 11,113.			Miscellaneous Revenu	ie	Business Code				
b ADVERTISING 541800 11,113. 11,113.	[-	11 a	RENTAL INCOME						24,899.
d All other revenue e Total. Add lines 11a-11d ▶ 38,657. 12 Total revenue. See instructions. ▶ 5523816. 2788116. 11,113. 33,360								11,113.	
e Total. Add lines 11a-11d 12 Total revenue. See instructions. > 38,657. > 5523816. 2788116. 11,113. 33,360		С	MISCELLANEOUS		900099	2,645.	2,645.		
12 Total revenue. See instructions. 5523816. 2788116. 11,113. 33,360									
12 Total revenue. See instructions. ► 5523816. 2788116. 11,113. 33,360					>				
932009	932009 02-04-1		Total revenue. See instructions.		<u></u>	5523816.	2788116.	11,113.	33,360. Form 990 (2009)

Part IX | Statement of Functional Expenses

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

	All other organizations must comp	lete column (A) but are	not required to comple	te columns (B), (C), and (
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the 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	263,825.	215,078.	34,145.	14,602.
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	1,135,950.	1,130,579.	2,063.	3,308.
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	38,809.	35,052.	3,648.	109.
9	Other employee benefits	142,245.	138,926.	2,755.	564.
10	Payroll taxes	111,806.	104,627.	6,295.	884.
11	Fees for services (non-employees)				
а	Management				
b	Legal	30,163.	28,634.	1,092.	437.
С	Accounting	18,856.	17,901.	682.	273.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	25,628.	25,013.	439.	176.
12	Advertising and promotion	56,887.	56,887.		
13	Office expenses	202,247.	200,712.	1,044.	491.
14	Information technology				
15	Royalties				
16	Occupancy	227,035.	145,488.	81,547.	
17	Travel .	1,111,992.	1,110,154.	1,313.	525.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	135,873.	135,873.		
20	Interest				<u> </u>
21	Payments to affiliates				· ——
22	Depreciation, depletion, and amortization	73,896.	72,096.	1,286.	514.
23	Insurance	606,474.	606,218.	183.	73.
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.)				
а	MASTERS AND JUNIORS EXP	199,088.	199,088.		
b	EQUIPMENT & MAINTENANCE	192,140.	191,344.	569.	227.
С	EVENT EXPENSES	120,776.	120,776.		
d	SUPPLIES	92,199.	89,696.	343.	2,160.
е	STIPENDS	68,176.	68,176.		
f	All other expenses	132.	132.		
25	Total functional expenses Add lines 1 through 24f	4,854,197.	4,692,450.	137,404.	24,343.
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				
					F 000 (2000)

932010 02-04-10

Form **990** (2009)

	rt X	Balance Sheet	ROWING AS	SOCIATIO.	<u></u>	<u> 23-6</u>	2/54/2 Page 11
					(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing				1	
	2	Savings and temporary cash investments		L.	406,401.	2	898,878.
	3	Pledges and grants receivable, net		L.		3	
	4	Accounts receivable, net			59,556.	4	31,804.
	5	Receivables from current and former officers, di	rectors, trustees,	key			
		employees, and highest compensated employe	es Complete Part	:11			
		of Schedule L				5	
	6	Receivables from other disqualified persons (as	defined under sed	ction			
		4958(f)(1)) and persons described in section 495	58(c)(3)(B) Comple	ete			
		Part II of Schedule L				6	
ţ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			106,347.	8	29,715.
⋖	9	Prepaid expenses and deferred charges			49,811.	9	70,628.
	10a	Land, buildings, and equipment cost or other					
		basis Complete Part VI of Schedule D	10a 3	330,727.			
	b	Less accumulated depreciation	10b]	184,127.	181,921.	10c	146,600.
	11	Investments - publicly traded securities			142,349.	11	189,275.
	12	Investments - other securities See Part IV, line	11			12	
	13	Investments - program-related See Part IV, line	11			13	
	14	Intangible assets	L		14		
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)		946,385.	16	1,366,900.
	17	Accounts payable and accrued expenses			351,077.	17	209,098.
	18	Grants payable			18		
	19	Deferred revenue		_	492,265.	19	753,456.
	20	Tax-exempt bond liabilities		_		20	
S	21	Escrow or custodial account liability Complete	Part IV of Schedul	e D		21	
Liabilities	22	Payables to current and former officers, director	rs, trustees, key er	mployees,			
ap		highest compensated employees, and disqualifi	ed persons Comp	olete Part II			
		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ated third parties		41,910.	23	12,198.
	24	Unsecured notes and loans payable to unrelated	d third parties			24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25	<u> </u>		<u>885,252.</u>	26	974,752.
		Organizations that follow SFAS 117, check he	ere 🕨 🗓 and	d complete			
es		lines 27 through 29, and lines 33 and 34.					
S E	27	Unrestricted net assets			<196,647.	>27	87,087.
3ak	28	Temporarily restricted net assets			13,169.	28	60,450.
Þ	29	Permanently restricted net assets	_		244,611.	29	244,611.
Ξ		Organizations that do not follow SFAS 117, cl	heck here 🕨	and			
ō		complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	<u></u>
Ass	31	Paid-in or capital surplus, or land, building, or eq	juipment fund	_		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in	come, or other fur	nds		32	<u> </u>
Z	33	Total net assets or fund balances			61,133.	33	392,148.
	34	Total liabilities and net assets/fund balances			946,385.	34	1,366,900.

946,385.34 1,366,900. Form **990** (2009)

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

Form 990 (2009)

За

3b

X

Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Open to Publi

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number UNITED STATES ROWING ASSOCIATION 23-6275472 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 2 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) 8 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2), (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type ii c ____ Type III - Functionally integrated __ Type III · Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below. Yes No the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s) (iii) Type of (iv) Is the organization (v) Did you notify the (vi) Is the (i) Name of supported (ii) EIN (vii) Amount of organization organizátion in col. in col. (i) listed in your organization in col. organization (i) organized in the U.S.? support (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes No Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support (a) 2005 (e) 2009 Calendar year (or fiscal year beginning in) (b) 2006 (c) 2007 (d) 2008 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2,525,836 2,614,351 14,551,518. 3,157,291 3.946.345. 2,307,695. 2 Tax revenues levied for the 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 Total. Add lines 1 through 3 2,525,836 2,614,351 3,157,291 3,946,345 2,307,695 14,551,518. 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) 2,716,244. Public support. Subtract line 5 from line 4 11,835,274. **Section B. Total Support** Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008(e) 2009 (f) Total 7 Amounts from line 4 2,525,836 2,614,351 3,157,291 3,946,345 2,307,695 14 551 518. 8 Gross income from interest. dividends, payments received on securities loans, rents, royalties 8,728. 41,213. 11,598. 29,143. 8,461, 99,143. and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carned on 10 Other income Do not include gain or loss from the sale of capital 14,648. 241.779. 208.569. 464,996. assets (Explain in Part IV) 15,115,657. 11 Total support. Add lines 7 through 10 7,030,819. 12 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 78.30 14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 % 99.28 15 15 Public support percentage from 2008 Schedule A, Part II, line 14 % 16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and $\triangleright [X]$ stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2009

more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and	1-7		(0) = 0.0	1,47555	107	(1)
membership fees received (Do not						
include any "unusual grants ")						
Gross receipts from admissions, merchandise sold or services per-	·		_			
formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
4 Tax revenues levied for the organ-						
ization'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		 -	-	 	 	
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons					-	
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b				 		
8 Public support (Subtract line 7c from line 6)						-
Section B. Total Support						
Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses	*					
acquired after June 30, 1975						
c Add lines 10a and 10b				-		
11 Net income from unrelated business activities not included in line 10b, whether or not the business is	-					
regularly carried on 12 Other income Do not include gain or loss from the sale of capital						
assets (Explain in Part IV.) 13 Total support (Add lines 9, 10c, 11, and 12)		1			-	
		a first second thu	d formation and fifth to			
14 First five years. If the Form 990 is for the	ne organization	s iirst, second, triir	a, iourtii, or iiitii ta	ax year as a section	on 501(c)(3) organiz	ation,
check this box and stop here	Cummant Da					▶∟_
Section C. Computation of Public					Г Г	
15 Public support percentage for 2009 (lin	• • • • • • • • • • • • • • • • • • • •	•	column (f))		15	(
16 Public support percentage from 2008 S		•			16	(
Section D. Computation of Invest	ment Incom	e Percentage				
17 Investment income percentage for 2009	(line 10c, colui	mn (f) divided by lir	ne 13, column (f))		17	
18 Investment income percentage from 20	08 Schedule A,	Part III, line 17			18	
19a 33 1/3% support tests - 2009. If the o	rganization did r	not check the box	on line 14, and line	e 15 is more than :	33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box and	-				•	D
b 33 1/3% support tests - 2008. If the o	•	-	•			and
line 18 is not more than 33 1/3%, check	•				•	▶ □
20 Private foundation. If the organization		•	· ·	, , , , , ,	•	
- 1 vate roundation. It the organization	GIO TIOL OTTOON A	20/ OF HID 17, 13	a, or roo, uneck u	HO DOX BING SEC III	oti detionio	

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990. ► See separate instructions.

2009
Open to Public Inspection

Name of the organization Employer identification number UNITED STATES ROWING ASSOCIATION 23-6275472 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year > \$ 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2009

	edule D (Form 990) 2009 UNITED	STATES ROW	ING A	<u>ASSOCI</u>	ATION			23-62	75472	Page 2			
Pa	chedule D (Form 990) 2009 UNITED STATES ROWING ASSOCIATION 23-6275472 Page 2 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items												
3	Using the organization's acquisition, accessi	on, and other record	ls, check	any of the	following tha	at are a si	ignificant i	use of its	collection	items			
	(check all that apply)												
а	Public exhibition	d	ı 🖳 i	Loan or exc	hange progr	ams							
b	Scholarly research	е	, 🗀	Other									
С	Preservation for future generations												
4	Provide a description of the organization's co							se in Par	t XIV				
5	During the year, did the organization solicit o	r receive donations	of art, his	storical trea	sures, or oth	er sımılar	assets		_				
	to be sold to raise funds rather than to be ma								Yes	No			
Pa	rt IV Escrow and Custodial Arran		ete if org	anızatıon ar	nswered "Ye	s" to Fori	m 990, Pa	rt IV, line	9, or				
	reported an amount on Form 990, Par												
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for d	contribution	s or other as	ssets not	ıncluded		_				
	on Form 990, Part X?								Yes	L No			
b	b If "Yes," explain the arrangement in Part XIV and complete the following table												
									Amount				
С	Beginning balance						1c						
đ	Additions during the year						1d						
е	Distributions during the year						1e						
f	Ending balance						1f						
	Did the organization include an amount on Fo	orm 990, Part X, line	217						」Yes	U No			
	If "Yes," explain the arrangement in Part XIV					_							
Pai	rt V Endowment Funds. Complete												
		(a) Current year		rior year	(c) Two yea	rs back	(d) Three y	ears back	(e) Four y	ears back			
1a	Beginning of year balance	<u>257,780.</u>	37	<u>2,309.</u>									
b	Contributions	45 004		1									
С	Net investment earnings, gains, and losses	47,281.	<11	<u>4,529.</u>	>								
d	Grants or scholarships								<u> </u>				
е	Other expenditures for facilities					Ì							
	and programs		_		_								
f	Administrative expenses	225 254											
9	End of year balance	305,061.		<u>7,780.</u>									
2	Provide the estimated percentage of the year	r end balance held a	as:										
а	Board designated or quasi-endowment		_%										
b	Permanent endowment ► 80.00	%											
С		%											
За	Are there endowment funds not in the posse	ssion of the organiza	ation tha	it are held a	nd administe	ered for th	ne organiz	ation	<u>-</u> -				
	by									es No			
	(i) unrelated organizations								3a(i)	X			
	(ii) related organizations		.							<u>X</u>			
	If "Yes" to 3a(ii), are the related organizations								_3b	<u>X</u>			
4 Do	Describe in Part XIV the intended uses of the tVI Investments - Land, Building				5								
Fai													
	Description of investment	(a) Cost or o basis (investin		(b) Cost basis (or other (other)		ccumulate preciation	ed	(d) Book	value			
1a	Land												
b	Buildings												
С	Leasehold improvements												
đ	Equipment			33	0,727.	1	184,1	27.	146	,600.			
е	Other												
Total	. Add lines 1a through 1e (Column (d) must et	qual Form 990, Part	X, colum	nn (B), line 1	0(c))			>	146	,600.			

Schedule D (Form 990) 2009

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)

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

02-01-10

	dule D (Form 990) 2009 UNITED STATES ROWING ASSOCI	ITA	ON		<u> 23-</u>	<u>6275472</u>	Page 4
Par	t XI Reconciliation of Change in Net Assets from Form 990 to	<u>Audit</u>	ed Financia	I State	men	ts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1			5,523	816.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2			4,854	197.
3	Excess or (deficit) for the year Subtract line 2 from line 1		3			669	619.
4	Net unrealized gains (losses) on investments		4				927.
5	Donated services and use of facilities		5				
6	Investment expenses		6		-		
7	Prior period adjustments		7				
8	Other (Describe in Part XIV)		8			-383	531.
9	Total adjustments (net) Add lines 4 through 8		9				604.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	1 0	10	-			015.
	t XII Reconciliation of Revenue per Audited Financial Statemen	nts W			eturr		015.
1	Total revenue, gains, and other support per audited financial statements	-			1	5,868	093.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.					3,000	, 0 3 3 .
а	Net unrealized gains on investments	2a	44	927.			
b	Donated services and use of facilities	2b		286.	1 1		
c	Recoveries of prior year grants	2c		<u> </u>	1 1		
d	Other (Describe in Part XIV.)	2d	275,	064	1 1		
e	Add lines 2a through 2d	_ zu	213,	004.	_	311	277
3	Subtract line 2e from line 1				2e 3	344 5,523	016
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				3	2,223	, 010.
a	investment expenses not included on Form 990, Part VIII, line 7b	1 4- 1					
b	Other (Describe in Part XIV.)	4a			1 1		
-	Add lines 4a and 4b	4b			١. ١		^
_	· · · · · · · · · · · · · · · · · · ·				4c 5	5,523	0.
5 Par	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XIII Reconciliation of Expenses per Audited Financial Stateme	nts V	Vith Eynense	e ner			010.
1	Total expenses and losses per audited financial statements	iilo v	vitii Expense	sa per			070
	Amounts included on line 1 but not on Form 990, Part IX, line 25.		•		1	5,537	0/0.
2	·	ا م ا	2.4	201			
a	Donated services and use of facilities	2a		284.	- 1		
D	Prior year adjustments	2b			-		
C	Other losses	2c	650		-		
d	Other (Describe in Part XIV)	2d	658,	<u>597.</u>	-		
е	Add lines 2a through 2d		•		2e	682	881.
3	Subtract line 2e from line 1				3	4,854	197.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1					
	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_			
b	Other (Describe in Part XIV)	4b					
	Add lines 4a and 4b				4c		<u> </u>
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)				5	4,854	<u> 197.</u>
ь	t XIV Supplemental Information						
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III,						4, Part
	2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also compl			-		Information	
PAR	T V, LINE 4: IN 1992, THE ASSOCIATION RECE	IVE:	D A BEQU	EST	OF		
~~ 4	A C11 MO ECHARITANIA MONEYPENDARIA ENDOCACE			- "-			
<u> </u>	4,611 TO ESTABLISH A NONEXPENDABLE ENDOWME	INT .	FUND (TH	F: "F	NDO	WMENT	
מזוים	D"). EARNINGS, SUCH AS INTEREST AND DIVID	רואים	C EDOM D	पर च	NIDO	MENT AT) TO
FUN	D"). EARNINGS, SUCH AS INTEREST AND DIVID	PND	S FROM T	ne e	NDO	MMENT AL	(E
EXP	ENDABLE BUT RESTRICTED TO USE IN THE US WO	MEN	'S OPEN	WETC	HΨ	מוא ב	
	BRUIDED BOT REDIRECTED TO COR IN THE OF WO	/11111	D OI DIV	METG	111 .	HIVD	
LIG	HTWEIGHT PROGRAMS. THE LAST DOCUMENT WHIC	H G	OVERNS T	HE R	EST:	RICTION	IS
THE	DONOR'S LAST WILL AND TESTAMENT WHICH REF	ERS	TO USE	OF I	NCO	ME FOR	
SPE	CIFIC PURPOSES, BUT "INCOME" IS NOT SPECIF	'ICA	LLY DEFI	NED	BY '	THE DONG	OR.
			<u> </u>				
THE	ASSOCIATION HAS INTERPRETED THE RESTRICTI	ON '	TO APPLY			EREST AN	
932054					Sched	lule D (Form 9	90) 2009

DIVIDENDS AS WELL AS REALIZED AND UNREALIZED GAINS TO ACCUMULATE ON A

TEMPORARY BASIS. THIS MEANS THAT ALL INVESTMENT RETURNS OF THE INVESTED

FUNDS ARE CHARGED TO TEMPORARILY RESTRICTED FOR USE IN THE DESIGNATED

PROGRAMS.

NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED

BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS. DURING

2008, THE BOARD OF DIRECTORS OF THE ASSOCIATION HAD INTERPRETED THE

UNIFORM MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("UMIFA") TO REQUIRE

STANDARD CARE THAT IS REASONABLE AND PRUDENT OVER ITS ENDOWMENT FUND. THE

ASSOCIATION CLASSIFIED PERMANENTLY RESTRICTED NET ASSETS AS THE ORIGINAL

VALUE OF THE GIFT DONATED TO THE ENDOWMENT FUND. THE REMAINING PORTION OF

THE ENDOWMENT EARNINGS WERE CLASSIFIED AS TEMPORARILY RESTRICTED NET

ASSETS IF DONOR-RESTRICTED IN PURPOSE OR UNRESTRICTED NET ASSETS IF NO

SPECIFIC PURPOSE HAD BEEN DESIGNATED.

IN JUNE 2009, THE STATE OF NEW JERSEY ENACTED A VERSION OF THE UNIFORM

PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT ("UPMIFA") WHICH REPLACED

THE PRIOR UMIFA. DURING 2009, THE BOARD OF DIRECTORS INTERPRETED THE NEW

ACT AS ALLOWING THE ASSOCIATION THE POWERS TO MANAGE AND INVEST THE FUNDS

IN GOOD FAITH AND WITH THE CARE AN ORDINARILY PRUDENT PERSON, IN A LIKE

POSITION, WOULD EXERCISE UNDER SIMILAR CIRCUMSTANCES. THE BOARD OF

DIRECTORS ALSO INTERPRETED UPMIFA AS REQUIRING THE ASSETS IN AN ENDOWMENT

FUND TO BE DONOR-RESTRICTED ASSETS UNTIL APPROPRIATED FOR EXPENDITURE BY

THE BOARD OF DIRECTORS, UNLESS STATED OTHERWISE IN THE GIFT INSTRUMENT.

AS A RESULT OF THIS INTERPRETATION, THE ASSOCIATION HAS NOT CHANGED THE

WAY PERMANENTLY RESTRICTED NET ASSETS ARE CLASSIFIED. THE ORIGINAL VALUE

OF ALL GIFTS DONATED TO THE ENDOWMENT FUND WILL BE CLASSIFIED AS

Schedule D (Form 990) 2009

PERMANENTLY RESTRICTED NET ASSETS WITH ENDOWMENT EARNINGS CLASSIFIED AS

TEMPORARILY RESTRICTED NET ASSETS UNTIL THOSE AMOUNTS ARE APPROPRIATED FOR

EXPENDITURE. THE ASSOCIATION HAS ELECTED NOT TO SPEND FUNDS FROM THE

ENDOWMENT PURSUANT TO THE 10-YEAR INVESTMENT HORIZON AND \$750,000 GOAL

ESTABLISHED BY THE BOARD OF DIRECTORS IN THE STATEMENT OF INVESTMENT

POLICY.

FOR THE YEARS ENDED DECEMBER 31, 2009 AND 2008, THERE WERE NO AMOUNTS APPROPRIATED OR SPENT ON THE WOMEN'S PROGRAMS FROM THE WOMEN'S ENDOWMENT THE ASSOCIATION ADOPTED A FORMAL WRITTEN INVESTMENT STATEMENT IN 2009 DETAILING ITS INVESTMENT STRATEGY FOR THE ENDOWMENT FUND. THE FUNDS OF THE ENDOWMENT WERE INVESTED IN LARGE VALUE AND LARGE BLEND MUTUAL FUNDS DURING THE YEAR ENDED DECEMBER 31, 2009. INVESTMENTS ARE RESTRICTED TO CERTAIN TYPES OF INVESTMENT VEHICLES INCLUDING ANY COMBINATION OF COMMON STOCKS, SECURITIES CONVERTIBLE TO COMMON STOCK, PREFERRED STOCKS, FIXED INCOME SECURITIES, MUTUAL FUNDS AND CASH RESERVES. TO SATISFY ITS LONG-TERM OBJECTIVES, THE ASSOCIATION RELIES ON A TOTAL RETURN STRATEGY IN WHICH INVESTMENT RETURNS ARE ACHIEVED THROUGH BOTH CAPITAL APPRECIATION (REALIZED AND UNREALIZED) AND CURRENT YIELD (INTEREST AND DIVIDENDS). THE ASSOCIATION TARGETS DIVERSIFIED MUTUAL FUNDS TO ACHIEVE ITS LONG-TERM RETURN OBJECTIVES WITHIN PRUDENT RISK CONSTRAINTS. UNDER THE PROVISIONS OF THE UPMIFA ACCOUNTING GUIDANCE, LOSSES IN THE MARKET VALUE OF DONOR-RESTRICTED ENDOWMENT FUNDS ARE REQUIRED TO BE OFFSET BY REDUCTIONS IN TEMPORARILY RESTRICTED NET ASSETS OR UNRESTRICTED NET ASSETS, OR BOTH. THE ASSOCIATION CLASSIFIED PERMANENTLY RESTRICTED NET ASSETS AS THE ORIGINAL VALUE OF GIFT DONATED TO THE ENDOWMENT FUND. AN ENDOWMENT FUND THAT HAS BECOME "UNDERWATER" WILL THEREFORE RESULT IN DECREASES IN TEMPORARILY RESTRICTED OR UNRESTRICTED NET ASSETS, DESPITE THE ABSENCE OF Schedule D (Form 990) 2009 932055 02-01-10

PART XIV. SUPPLEMENTAL INFORMATION, UNCERTAIN TAX POSITIONS UNDER FIN 48.

THE ASSOCIATION IS REQUIRED TO EVALUATE AND MEASURE THE COST/BENEFIT OF

UNCERTAIN TAX POSITIONS RELATED TO ITS EXEMPT STATUS UNDER NEW ACCOUNTING

GUIDANCE. THE ASSOCIATION HAS EVALUATED ITS TAX POSITION UNDER THE

TWO-STEP APPROACH FOR RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX

Schedule D (Form 990) 2009

Schedule D	(Form 9	990) 200	9	UN.	<u>[TEI</u>	O STATES :	ROWING A	<u>ASSC</u>	CIA:	rion	<u>23-62754</u>	<u> 72</u>	Page 5
Part XIV	/ Supp	lemer	9 ntal Inform	matic	on (cc	intinued)							
•											<u> </u>		
POSITI	ONS	AND	THERE	IS	NO	MATERIAL	IMPACT	ON	ITS	FINANCIAL	POSITION	OR	
		-											
RESULT	rs or	OPE	ERATION	NS.									
													
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

OMB No 1545-0047

Open To Public Inspection

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

Name of the organization Employer identification number UNITED STATES ROWING ASSOCIATION 23-6275472 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply а Solicitation of non-government grants Internet and email solicitations Solicitation of government grants b Special fundraising events Phone solicitations С In-person solicitations d 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or □No key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization (v) Amount paid (iii) Did fundraiser have custody or control of (vi) Amount paid (i) Name of individual (iv) Gross receipts tò (or retained by) (ii) Activity to (or retained by) or entity (fundraiser) fundraiser from activity organization listed in col (i) contributions? Yes No Total 3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

932081 02-03-10

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

Schedule G (Form 990 or 990-EZ) 2009

		on Form 990-EZ, line 6a List events with	gross receipts greater th	an \$5,000.				
			(a) Event #1	(b) Event #2	(c) Other events	(d) T	otal even	ite
			GOLF OUTING		NONE		ol (a) thro	
			AND SILENT A			1 '	col (c))	Jugii
e e			(event type)	(event type)	(total number)			
Revenue		0	61 075				<i>c</i> 1 0	75
쮼	1	Gross receipts	61,875.				61,8	/3.
	2	Less Charitable contributions				 		
	3	Gross income (line 1 minus line 2)	61,875.			<u> </u>	61,8	75.
	4	Cash prizes				ļ		
ses	5	Noncash prizes	2,759.				2,7	<u>59.</u>
Direct Expenses	6	Rent/facility costs	25,608.			-	25,6	08.
Direct	7	Food and beverages				_		_
	8	Entertainment						
	9	Other direct expenses	4,334.				4.3	34.
	10	Direct expense summary Add lines 4 through		<u> </u>		1	32,7	
	11	Net income summary Combine line 3, colum	, ,		_		29,1	
Pa	irt l	II Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	_		
		\$15,000 on Form 990-EZ, line 6a		, 				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming		al gaming hrough c	
æ	1	Gross revenue						
S	2	Cash prizes						
use								
Expe	3	Noncash prizes				 		_
Direct Expenses	4	Rent/facility costs		i		-		
	5	Other direct expenses						
			Yes %	Yes %	Yes%			
	6	Volunteer labor	No	No	No	ļ <u>.</u>		
	7	Direct expense summary Add lines 2 through	h 5 ın column (d)		>	()
	8	Net gaming income summary Combine line	1, column (d), and line 7		>			
				<u> </u>			Yes	No
9	Ent	ter the state(s) in which the organization opera	ites gaming activities					
		he organization licensed to operate gaming ac	ctivities in each of these s	states?		_9	a	 - -
b	lf "	No," explain						
	_							
t0a	We	ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax v	/ear?	1	0a	
		Yes," explain	,,			<u> </u>		
	_					1		
	_							
		es the organization operate gaming activities was the organization a grantor, beneficiary or trusters		of a partnership or other	r entity formed to	-1	1	
		minister charitable gaming?	o or a dost or a member	or a parmership or other	Sinty formed to		12	

Schedule G (Form 990 or 990-EZ) 2009 UNITED STATES ROWING ASSOCIATION 2	3-627547	2 Pa	age 3
		Yes	
13 Indicate the percentage of gaming activity operated in:			
a The organization's facility	%		ĺ
b An outside facility	%		l
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records			
Name			
Address >			
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a		
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount	t		
of gaming revenue retained by the third party > \$			1
c If "Yes," enter name and address of the third party			
Name			
Address >			
16 Gaming manager information			
Name			
Gaming manager compensation ▶ \$			Ė
Description of services provided	Į.		
Director/officer Employee Independent contractor			
17 Mandatory distributions			
a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
retain the state gaming license?	17a	ļ	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in t	the		

Schedule G (Form 990 or 990-EZ) 2009

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

UNITED STATES ROWING ASSOCIATION
Part | Questions Regarding Compensation

23-6275472

Employer identification number

	att Questions negaring compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items	İ		
	First-class or charter travel Housing allowance or residence for personal use			ı
	Travel for companions Payments for business use of personal residence			ı
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			ı
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			Į
	CEO/Executive Director. Check all that apply			l
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
	Approval by the board of compensation committee	Ì		l
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
7	organization or a related organization.			l
а		40		¥
_	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4a 4b		X
	Participate in, or receive payment from, an equity-based compensation arrangement?			X
C		4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			į
•	contingent on the revenues of			
а	The organization?	5a		X
	Any related organization?	5b		X
_	If "Yes" to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
Ŭ	contingent on the net earnings of.			
а	The organization?	6a		X
	Any related organization?	6b		X
-	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			į
•	not described in lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	_		
3	unitial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
0	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			_41
9		_		
	Regulations section 53 4958-6(c)?	9		

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

Schedule J (Form 990) 2009

Page 2

UNITED STATES ROWING ASSOCIATION

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed.

Schedule J (Form 990) 2009

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

					-			
		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C)	(D)	(E)	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(I)-(D)	Compensation reported in prior Form 990 or Form 990-EZ
	(E)	150,010.			7,500.	20,253.	177,763.	
THOMAS TERHAAR	(ii)					•		
	(i)	150,023.					150,023.	
TIMOTHY MCCLAREN	⊞							
	Ξ							
	(ii)							
	(i)							
	Ξ		-					
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				7			Schedule	Schedule J (Form 990) 2009

932112 02-02-10

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization

UNITED STATES ROWING ASSOCIATION

Employer identification number 23-6275472

Par	t I Types of Property							<u> </u>		
		(a) Check if applicable	(b) Number of contributions	(c) Revenues repo Form 990, Part V		М	ethod of	d) determ nues	nınıng	
1	Art · Works of art									
2	Art - Historical treasures								_	
3	Art - Fractional interests		- I						_	
4	Books and publications								-	
5	Clothing and household goods	Х		231,	135.	FMV O	F ITE	MS	IF I	BOUG
6	Cars and other vehicles			•						
7	Boats and planes							-		
8	Intellectual property									
9	Securities - Publicly traded						_			
10	Securities - Closely held stock									
11	Securities - Partnership, LLC, or									
	trust interests									
12	Securities - Miscellaneous									
13	Qualified conservation contribution -									
	Historic structures									
14	Qualified conservation contribution - Other									
15	Real estate - Residential									
16	Real estate · Commercial								_	
17	Real estate - Other						_			
18	Collectibles									
19	Food inventory									
20	Drugs and medical supplies									
21	Taxidermy									
22	Historical artifacts									
23	Scientific specimens									
24	Archeological artifacts									
25	Other (BOAT LEASING)	X	1	124,	575.	DISCO	UNT C	IVE	N O	N BO
26	Other ► (AIRLINE TICKE)	X	1	27,	823.	FMV O	F TIC	KET	SI	F PU
27	Other									
28	Other ► (_			
29	Number of Forms 8283 received by the organiz	zation during	the tax year for o	contributions						
	for which the organization completed Form 828	83, Part IV, [Donee Acknowled	gment	29					
									Yes	No
30a	During the year, did the organization receive by	y contributio	n any property re	ported in Part I, lin	es 1-28 th	at it must h	old for			
	at least three years from the date of the initial of	contribution,	and which is not	required to be use	ed for exen	npt purpos	es for			
	the entire holding period?							30	a	X
b	If "Yes," describe the arrangement in Part II									
31	Does the organization have a gift acceptance p	policy that re	quires the review	of any non-standa	ard contrib	utions?		31		X
32a	Does the organization hire or use third parties	or related or	ganizations to sol	ıcıt, process, or se	il noncash					
	contributions?							32	a	X
b	If "Yes," describe in Part II.							_		
33	If the organization did not report revenues in co	olumn (c) for	a type of propert	y for which columi	n (a) is che	cked,				
	describe in Part II	·							<u> </u>	
LHA	For Privacy Act and Paperwork Reduction	Act Notice	, see the instruct	ions for Form 990) .		Schedule	M (Fo	rm 99	0) 2009

932141 03-12-10

14450513 756598 19212.0

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

UNITED STATES ROWING ASSOCIATION

Employer identification number 23-6275472

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

HEALTHY TRAINING METHODS, AND EFFECTIVE ROWING TECHNIQUES, PROVIDE

STANDARDS FOR ALL ROWERS OF SAFE, FAIR RACING, AND CONTINUALLY IMPROVE

PERFORMANCE AT THE OLYMPIC GAMES.

FORM 990, PART VI, SECTION A, LINE 4: THE BYLAWS WERE CHANGED IN 2009 TO

UPDATE THE GOVERNANCE STRUCTURE. THIS WAS DONE TO INCREASE THE

COMMUNICATION BETWEEN THE BOARD, COMMITTEES AND THE CHIEF EXECUTIVE

OFFICER, AS WELL AS INCREASE THE CONTROL AND ACCOUNTABILITY OF THE CHIEF

EXECUTIVE OFFICER. THERE WAS AN ADDITION OF A NEW MEMBERSHIP TYPE,

"ATHLETE" MEMBERS, WHO WILL HAVE 20% OF THE VOTING POWER FOR AMENDMENTS TO

THE BY-LAWS. THE BYLAWS NOW LISTS THE RECOGNIZED COMMITTEES AND REQUIRES A

20% "ATHLETE" MEMBERSHIP. THE QUORUM REQUIREMENT WAS CHANGED TO 10% OF

ELIGIBLE MEMBERS TO VOTE AND THE MISSION STATEMENT HAS BEEN REVISED.

FORM 990, PART VI, SECTION A, LINE 6: US ROWING IS A MEMBER ORGANIZATION,

IT HAS 5 CATEGORIES OF MEMBERSHIP: 1) INDIVIDUAL MEMBERS 2)ORGANIZATIONAL

MEMBERS 3)NATIONAL ASSOCIATION MEMBERS (THERE ARE NO MEMBERS IN THIS

CATEGORY) 4) ATHLETE MEMBERS AND 5)ATHLETE ADVISORY COUNCIL MEMBERS. IT

HAS NO STOCKHOLDERS NOR DO ITS MEMBERS RECEIVE A SHARE OF THE

ORGANIZATION'S PROFITS OR EXCESS DUES OR A SHARE OF THE ORGANIZATION'S NET

ASSETS UPON THE ORGANIZATION'S DISSOLUTION.

FORM 990, PART VI, SECTION A, LINE 7A: US ROWING MEMBERS ELECT 12 OF THE 14 BOARD MEMBERS; THE BOARDS OF DIRECTORS ELECT THE REMAINING 2 DIRECTORS.

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

Schedule O (Form 990) 2009

SCHEDULE O

(Form 990)

Supplemental Information to 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.

2009
Open to Public Inspection

Name of the organization

UNITED STATES ROWING ASSOCIATION

Employer identification number 23-6275472

PART VI. SECTION A, LINE 7B: US ROWING MEMBERS ELECT 12 OF THE 14 BOARD MEMBERS; THE BOARDS OF DIRECTORS ELECT THE REMAINING 2 DIRECTORS. IT'S BOARD OF DIRECTORS ARE ELECTED AS FOLLOWS: THE 6 REGIONAL DIRECTOR BOARD MEMBERS ARE ELECTED BY THE ORGANIZATIONAL MEMBERS OF US ROWING: MALE VICE CHAIR AND THE FEMALE VICE CHAIR BOARD MEMBERS ARE ELECTED BY THE INDIVIDUAL MEMBERS OF US ROWING; THE MALE ATHLETE BOARD MEMBER AND FEMALE ATHLETE BOARD MEMBER ARE ELECTED BY THE ATHLETE MEMBERS OF US ROWING: THE MALE ATHLETE ADVISORY COUNCIL ATHLETE BOARD MEMBER AND THE FEMALE ATHLETE ADVISORY COUNCIL ATHLETE BOARD MEMBER ARE ELECTED BY ATHLETE ADVISORY COUNCIL ATHLETE MEMBERS OF US ROWING; AND THE 2 AT-LARGE BOARD MEMBERS ARE ELECTED BY THE US ROWING BOARD OF DIRECTORS. REPLACEMENT BOARD MEMBERS FOR 10 OF THE 14 BOARD MEMBERS ARE NOMINATED BY THE BOARD'S NOMINATING COMMITTEE AND ELECTED TO FILL THE UNFILLED TERM OF THE REPLACED DIRECTOR OTHER THAN THE 2 BOARD MEMBERS ELECTED BY THE ATHLETE MEMBERS AND THE 2 BOARD MEMBERS WHO WERE ELECTED BY THE ATHLETE ADVISORY COUNCIL ATHLETE MEMBERS; THE ATHLETE MEMBERS WILL RECRUIT AND REPLACE ANY OF THE 2 BOARD MEMBERS ELECTED BY THEM AND THE ACC ATHLETE MEMBERS WILL RECRUIT AND ELECT ANY BOARD MEMBERS ELECTED BY THEM.

FORM 990, PART VI, SECTION A, LINE 8B: THE BOARD OF DIRECTOR'S MEETINGS

ARE DOCUMENTED AND AVAILABLE ONLINE FOR PUBLIC REVIEW. THE EXECUTIVE

COMMITTEE'S MEETINGS ARE NOT DOCUMENTED.

FORM 990, PART VI, SECTION B, LINE 11: THE PREPARED 990 IS REVIEWED BY THE

ASSOCIATION'S CONTROLLER, CHIEF EXECUTIVE OFFICER AND THE FINANCE AND AUDIT

COMMITTEE, AND THEN PRESENTED TO THE BOARD OF DIRECTORS PROIR TO FILING.

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

Schedule O (Form 990) 2009

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02-03-10

SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization

UNITED STATES ROWING ASSOCIATION

Employer identification number 23-6275472

FORM 990, PART VI, SECTION B, LINE 12C: STAFF AND BOARD MEMBERS COMPLETE A
CONFLICT OF INTEREST POLICY EACH YEAR.
FORM 990, PART VI, SECTION B, LINE 15: THE CHIEF EXECUTIVE OFFICER'S
SALARY IS REVIEWED AND DETERMINED BY THE BOARD OF DIRECTORS. KEY
EMPLOYEES' SALARIES ARE INCLUDED IN THE ASSOCIATION'S ANNUAL BUDGET WHICH
IS APPROVED BY THE BOARD OF DIRECTORS.
FORM 990, PART VI, SECTION C, LINE 19: THE ASSOCIATION MAKES GOVERNING
DOCUMENTS, POLICIES, AND FINANCIAL INFORMATION AVAILABLE TO THE PUBLIC
THROUGH ITS WEBSITE.
FORM 990 PART XI LINE 2C
EXPLANATION OF FINANCE AND AUDIT COMMITTEE OVERSIGHT
THE FINANCE AND AUDIT COMMITTEE SELECTS AN ACCOUNTING FIRM TO PERFORM
THE AUDIT OF THE FINANCIAL STATEMENTS, THEIR SELECTION IS THEN APPROVED
BY THE BOARD OF DIRECTORS. THE AUDIT IS OVERSEEN BY THE CHIEF
EXECUTIVE OFFICER AND CONTROLLER AND THE ENDING FINANCIAL STATEMENTS
ARE REVIEWED BY THE FINANCE AND AUDIT COMMITTEE BEFORE BEING PRESENTED
TO THE BOARD OF DIRECTORS.

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Part

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.

Open to Public Inspection

OMB No 1545-0047

2009

Employer identification number

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33) STATES ROWING ASSOCIATION UNITED

23-6275472

Direct controlling entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year) End-of-year assets <u>e</u> Total income ਉ Legal domicile (state or foreign country) Primary activity Name, address, and EIN of disregarded entity Part 11

(a)	(q)	(၁)	(Đ	(e)	£
Name, address, and EiN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public charity status (if section 501(c)(3))	Direct controlling entity
CASITAS FUND INC - 31-1148247 2 WALL STREET PRINCETON, NJ 08540	TO ACT FOR THE EXCLUSIVE BENEFIT OF THE US ROWING ASSOCIATION	INDIANA	501(C)(3)	509(A)(3)	

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

932161 02-04-10

Schedule R (Form 990) 2009

23-6275472

Page 2

Schedule R (Form 990) 2009 UNITED STATES ROWING ASSOCIATION

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year) Part III

General or managing partner? Yes No Percentage ownership Schedule R (Form 990) 2009 9 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year) Ξ Code V-UBI amount in box 20 of Schedule K-1 (Form 1065) Share of end-of-year assets <u>6</u> ate allocations? Yes No Disproportion-Ξ Share of total income Ξ Share of end-of-year assets Type of entity (C corp, S corp, or trust) চ Share of total income (d)
(d)
(l Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) <u>e</u> Legal domicile (state or foreign country) <u>ပ</u> 37 Direct controlling entity Primary activity ਉ <u>e</u> Legal domicite (state or foreign country) <u>©</u> Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> <u>a</u> 932162 02-04-10 Part IV

Page 3

Part V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36)

Note Complete ine 1 if any entity is instead in Dorte II III or IV of this school is		_
To burning the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		Les NO
a Receipt of (t) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		Ta X
b Gift, grant, or capital contribution to other organization(s)		1b X
c Gift, grant, or capital contribution from other organization(s)		1c X
d Loans or loan guarantees to or for other organization(s)		1d X
e Loans or loan guarantees by other organization(s)		1e X
f Sale of assets to other organization(s)		1f X
g Purchase of assets from other organization(s)		Tg X
h Exchange of assets		1h X
i Lease of facilities, equipment, or other assets to other organization(s)		i=
i lease of facilities equinment or other assets from other organization(s)		7
k Performance of services or membership or fundraising solicitations for other organization(s)		
m Sharing of facilities, equipment, mailing lists, or other assets		Th X
n Sharing of paid employees		1n X
 Keimbursement paid to other organization for expenses 		+
p Reimbursement paid by other organization for expenses		T dt
q Uther transfer of cash or property to other organization(s)		
		1r X
2 If the 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	d transaction thresholds	
(a) Name of other organization(s)	(b) Transaction type (a-r)	(c) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(9)		
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Page 4

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to 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

(2)	4	(0)	3	10	٤	(5)	(4)
(a)	(a)		3	(c)	E	(6)	(in)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section 501(c)(3)	Share of end-of- year assets	Dispropor- tionate	Code V-UBI amount in box 20	General or managing
			Yes No		Yes No	of Schedule K-1 (Form 1065)	Yes No
			1				
							-
					<u></u>		
							•
							-
			_				
						Schedule R (Form 990) 2009	990) 2009