UNITED STATES CURLING ASSOCIATION

FORM 990

RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX

FOR THE SHORT PERIOD ENDED JUNE 30, 2012

PUBLIC DISCLOSURE COPY

THIS COPY MAY BE USED TO SATISFY THE PUBLIC DISCLOSURE RULES OF CODE SECTION 6104(d)

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For th	e 2011 calendar year, or tax year beginning JUL 1, 2011 and endin	g J	<u>UN 30, 2012</u>	
В	Check it applicat	C Name of organization		D Employer identifi	cation number
	Addr chan	UNITED STATES CURLING ASSOCIATION			
	Nami chan	Doing Business As		36-6	066248
	initia returi	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite	E Telephone number	r
	Term			715-	344-1199
	Amer	City or town, state or country, and ZIP + 4		G Gross receipts \$	1,572,567.
	Appli	DIEATED LOTHI' MI DEEDS OGET		H(a) Is this a group r	
	pend	F Name and address of principal officer: SEAN SILVER		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	cluded? Yes No
1	Tax-ex	empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list. (see instructions)
J	Webs	te: ► WWW.USACURL.ORG		H(c) Group exemption	n number 🕨
K	Form o	forganization: X Corporation Trust Association Other L	Year o	f formation: 1958	M State of legal domicile: WI
Pa	art I	Summary		3	
ce	1	Briefly describe the organization's mission or most significant activities: TO PROMO	OTE	THE SPORT	OF CURLING
Activities & Governance	2	Check this box if the organization discontinued its operations or disposed of	more	than 25% of its net as	ssets.
Ver	3	Number of voting members of the governing body (Part VI, line 1a)			28
တ္	4	Number of independent voting members of the governing body (Part VI, line 1b)			28
లర ഗ	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)			8
itie	6	Total number of volunteers (estimate if necessary)			5983
cţi	1000	Total unrelated business revenue from Part VIII, column (C), line 12			12,421.
×	0 100 0000	Net unrelated business taxable income from Form 990-T, line 34		The state of the s	-4,626.
				Prior Year	Current Year
d)	8	Contributions and grants (Part VIII, line 1h)		991,642.	1,381,155.
nue	9	Program service revenue (Part VIII, line 2g)	0.410.000	140,990.	182,279.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	100000000000000000000000000000000000000	700.	754.
Œ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		37,383.	8,305.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,170,715.	1,572,493.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		33,700.	71,300.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0:•	0.
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		360,645.	425,981.
use	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25)	70 C. 124		
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		731,748.	1,027,155.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,126,093.	1,524,436.
- 40		Revenue less expenses. Subtract line 18 from line 12		44,622.	48,057.
Net Assets or Fund Balances			Beg	inning of Current Year	End of Year
sset	20	Total assets (Part X, line 16)		911,044.	880,357.
at As	21	Total liabilities (Part X, line 26)		605,134.	526,390.
		Net assets or fund balances. Subtract line 21 from line 20		305,910.	353,967.
	art II	Signature Block			
		Ilties of perjury, I declare that I have examined this return, including accompanying schedules and st			y knowledge and belief, it is
true,	, corre	t, and complete. Declaration of preparer (other than officer) is based on all information of which pre	parer h	ias any knowledge.	
		Signature of officer		Date	
Sign				Dute	
Her	е	SEAN SILVER, TREASURER Type or print name and title			roman sor out of the
		Print/Type preparer's name Preparer's signature	Da	1 1 1	PTIN
Paid	I	DAVID A. GROTKIN D-JH. H.	7	2/11/13 self-employe	
	arer	Firm's name REILLY, PENNER & BENTON, LLP		Firm's EIN ▶	39-0747409
Use	Only	Firm's address 1233 N. MAYFAIR RD., SUITE 302			
		MILWAUKEE, WI 53226		Phone no. 4	14-271-7800
Мау	the II	AS discuss this return with the preparer shown above? (see instructions)			X Yes No

Form 990 (2011)

Total program service expenses ► 1,294,373.

36-6066248 UNITED STATES CURLING ASSOCIATION Page 3 Form 990 (2011) Part IV Checklist of Required Schedules Yes No 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? X 1 If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X 3 public office? If "Yes," complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect X during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or X similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I X 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X 8 Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide X credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent 10 X 10 endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X 11 as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, X 11a Part VI b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII X 11c d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in X 11d Part X, line 16? If "Yes," complete Schedule D, Part IX e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete X 12a Schedule D, Parts XI, XII, and XIII b Was the organization included in consolidated, independent audited financial statements for the tax year? X If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional....... 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the United States? 14a b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 X or more? If "Yes," complete Schedule F, Parts I and IV 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization 15 X or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals X located outside the United States? If "Yes," complete Schedule F, Parts III and IV 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines

Form 990 (2011)

18

19

20a

20b

X

X

X

18

19

1c and 8a? If "Yes," complete Schedule G, Part II

complete Schedule G, Part III

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
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		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b		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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? 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):			
	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		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		-	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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		<u>X</u>
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			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			22
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity?			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u>X</u> _
	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		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			Total Control
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
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 (2011) UNITED STATES CURLING ASSOCIATION
Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			ᆜ
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		1 1 1 1	F-1
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	2013	37	Pastica.
	(gambling) winnings to prize winners?	1c	X	Tadlesia N
2a				
	illed for the calendar year ending with or within the year covered by the return.	01	v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-tile (see instructions)	•	Х	DEM S
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a 3b	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule 0	30	Λ	-
4a	At any time during the calendar year, did the organization have an interest in, or a signature of other authority over, a	4a		х
		40	#15.A	10.75.
b	If "Yes," enter the name of the foreign country:			
	See instructions for filling requirements for Form 1D F 90-22.1, Report of Foreign Bank and Financial Accounts.	5a		X
5a	Was the organization a party to a promibiled tax sheller transaction at any time during the tax years.	5b		X
b		5c		
С	If "Yes," to line 5a or 5b, did the organization file Point 6660-1?			
6a		6a		x
L	any contributions that were not tax deductible:			
D		6b		
7				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes." did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
Ŭ	to file Form 8282?	7c		X
d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	40.00	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	77.		1200
		8	24.530.45	100.00
9		4-14-15-1		
а	Did the organization make any taxable distributions under section 4966?	9a		
b	A TO SERVICE STATE OF THE PROPERTY OF THE PROP	9b	legral	garde ager
10	Section 501(c)(7) organizations. Enter:			
а				
b				100 (22)
11				
a	CITOGO INCOMO INCOMO CITO CITO CITO CITO CITO CITO CITO CIT			
b				
40		12a	71 10 100	100000
12a	Section 494/(a)(1) non-exempt charitable trusts, is the organization ming form 950 in field of form 1041.	12.0		4
	singly winnings to prize winners? or the calendar year ending with or within the year covered by this return ast one is reported on line 2a, did the organization file all required federal employment tax returns? If the sum of line 2a, did the organization file all required federal employment tax returns? If the sum of line 2a, did the organization file all required to e-file (see instructions) the organization have unrelated business gross income of \$1,000 or more during the year? s. *has it filed a Form 990-7 for this year? If *No.* provide an explanation in Schedule O yitme during the calendar year, did the organization have an interest in, or a signature or other authority over, a sial account in a foreign country (such as a bank account, securities account, or other financial account)? s. *enter the name of the foreign country. s. *to line Sa or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? you taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? you taxable party notify the organization that say or is a party to a prohibited tax shelter transaction? s, *to line Sa or 5b, did the organization file Form 8886-17 the organization include with every solicitation an express statement that such contributions or gifts not tax deductible? nizations that may receive deductible contributions under section 170(e). so reganization include with every solicitation an express statement that such contributions or gifts not tax deductible? nizations that may receive deductible contributions under section 170(e). so reganization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? s, *did the organization notify the donor of the value of the goods or s			
13		13a		
а		,54		
L.				1
a				
_	organization is inserted to reserve quantity	*		
	Effect the difficulty of received erritains	14a		X
		14b		
			000	100111

UNITED STATES CURLING ASSOCIATION

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.

	Check if Schedule O contains a response to any question in this Part VI					X
Sec	tion A. Governing Body and Management					
		r.	ř		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	2	8		
	If there are material differences in voting rights among members of the governing body, or if the governing			****		Decision
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					Let
b	Enter the number of voting members included in line 1a, above, who are independent	1b	2	8		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other	×	e grand	1114
	officer, director, trustee, or key employee?			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?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form S					Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass					Х
6	Did the organization have members or stockholders?				X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
7 64	more members of the governing body?			7a	X	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
D	persons other than the governing body?			7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year			1000		k final
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?				X	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			0.0		
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		X
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal R	- 10 C C C C C C C C C C C C C C C C C C		1 3	+	- 21
566	tion b. Folicies (This Section B requests information about policies not required by the internal Fi	everiu	e code.)		Yes	No
10-	Did the organization have local chapters, branches, or affiliates?			10a		X
	Did the organization have local chapters, branches, or affiliates?			104		21
b				10b		
	and branches to ensure their operations are consistent with the organization's exempt purposes?					X
2200	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y beic	ore ming the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			10	v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		-ti-t-O	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			40	v	
	in Schedule O how this was done			12c	-	
13	Did the organization have a written whistleblower policy?				X	
14	Did the organization have a written document retention and destruction policy?			14	X	20.59
15	Did the process for determining compensation of the following persons include a review and approva		ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				77	erom fata
	The organization's CEO, Executive Director, or top management official			15a		
b	Other officers or key employees of the organization			15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				150	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent v	vith a	1-14	1200	
	taxable entity during the year?			16a		_X_
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			150		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nizatio	n's	1000		
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ►WI					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T	(Sect	ion 501(c)(3)s only)	availal	ole	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	nflict	of interest policy, a	nd fina	ncial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books ar	nd rec	ords of the organiz	ation:		
	SANDY ROBINSON - 715-344-1199					
	5525 CLEM'S WAY, STEVENS POINT, WI 54482			resident ship	material manufactured in	

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization (A)	(B)	Orga		((C)		isat	(D)	(E)	(F)
Name and Title	Average hours per week	box	not c , unle cer an	Pos heck ss pe	itior more erson	than	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
200	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ALLISON POTTING										0
DIRECTOR	2.00	X			_			0.	0.	0.
(2) JAMES PLEASANTS	0.00								_	0
DIRECTOR	2.00	X					2.75	0.	0.	0.
(3) CHRIS SJUE	2 00	37		37				0.	0.	0
PRESIDENT	2.00	X		X	_			0.	0.	0.
(4) PAUL BADGERO	2 00	v						0.	0.	0.
DIRECTOR	2.00	X			-			0.	0.	0.
(5) KENT BEADLE	2.00	Х						0.	0.	0.
DIRECTOR	4.00	Λ						0.	0.	0.
(6) PEGGY HATCH	2.00	X			1			0.	0.	0.
DIRECTOR COLUMN	2.00	21						U s	· ·	
(7) GABRIELLE COLEMAN	2.00	X						0.	0.	0.
DIRECTOR (8) JAN LEGACIE	2,00									
DIRECTOR	2.00	X						0.	0.	0.
(9) RICHARD MASKEL										
DIRECTOR	2.00	X						0.	0.	0.
(10) BOB PELLETIER	1									
SECRETARY	2.00	X		X				0.	0.	0.
(11) LELAND RICH										
PAST-PRESIDENT	2.00	X						0.	0.	0.
(12) MARK SWANDBY								Control of the Contro		
DIRECTOR	2.00	X						0.	0.	0.
(13) BEAU WELLING										
DIRECTOR	2.00	X						0.	0.	0.
(14) SAM WILLIAMS										
DIRECTOR	2.00	X						0.	0.	0.
(15) JANET FARR								100a		121
DIRECTOR	2.00	X						0.	0.	0.
(16) GWEN KRAILO	0.00									
DIRECTOR	2.00	X						0.	0.	0.
(17) DAVID CARLSON	0.00	37						_		0
DIRECTOR	2.00	X						0.	0.	0.

Part VII Section A. Officers, Directors,	Trustees, Key E	mpl	oye	es, a	and	High	nest	Compensated Employ	ees (continued)			
(A)	(B)				C)			(D)	(E)		(F))
Name and title	Average	(de	o not o		sitio	N e than	one	Reportable	Reportable		Estima	ated
	hours per week	box	x, unle	ess pe	erson	is bo	th an	STREETS COME AND AND CONTROL OF THE	compensation		amour	
	(describe	-	1	T	T	1	1	- 110111	from related		othe	
	hours for	director						the organization	organizations (W-2/1099-MISC)	С	ompen	
	related	e or d	tee			sated		(W-2/1099-MISC)	(W-2/1099-WISC)		from organiz	
	organizations	truste	al trus		986	mpen		(٧٧-2/1055-141100)		1	and rel	
	in Schedule	idual	nstitutional trustee	=	Key employee	est co	er er				organiza	
	O)	Indiv	Instit	Office	Key e	Highest compensated employee	Гот					
(18) CYNDEE JOHNSON	2 00	77							0			_
DIRECTOR	2.00	Δ	-		-	2000	-	0.	0	•		0 .
(19) JEROME LARSON	2 00	37							0			0
DIRECTOR	2.00	A	-		-	-	_	0.	0	•		0.
(20) GORDAN MACLEAN	2.00	v						0.	0			0
DIRECTOR	2.00	Δ.				-		0.	0	•		0.
(21) RICH LEPPING	2 00	X						0.	0		**	0
DIRECTOR	2.00	Δ	-		-			0.	0	•		0.
(22) SEAN SILVER	2.00	X		Х				0.	0			0
TREASURER	2.00	Δ		Δ				0.	U	•		0.
(23) ANN SWISSHELM DIRECTOR	2.00	x						0.	0			0.
(24) CRAIG BROWN	2.00	21						0.	0	•		0.
DIRECTOR	2.00	x						0.	0			0.
(25) LYNITA DELANEY												
DIRECTOR	2.00	X						0.	0			0.
(26) MAUREEN CLARK												
DIRECTOR	2.00	X						0.	0			0.
1b Sub-total								0.	0			0.
c Total from continuation sheets to Part								77,096.	0			56.
d Total (add lines 1b and 1c)								77,096.	0	,		56.
2 Total number of individuals (including but		ose	liste	d ab	oove	e) wh	o re	eceived more than \$100,	000 of reportable			
compensation from the organization	-		-	***							14	0
3 Did the organization list any former offic	or director or tru	ictor	ko	v or	anla	V00	orb	nighost componented or	anlovos on		Yes	No
line 1a? If "Yes," complete Schedule J for			ALC: NAME OF STREET							0	Tid entrep	Х
4 For any individual listed on line 1a, is the										_3		Λ
and related organizations greater than \$												х
5 Did any person listed on line 1a receive of	or accrue comper	nsati	on fr	om	anv	unre	elate	ed organization or individ	lual for services	4		A
rendered to the organization? If "Yes," co										5		Х
Section B. Independent Contractors				<u> </u>		<u> </u>						21
1 Complete this table for your five highest	compensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compen	sation	n from	
the organization. Report compensation f	or the calendar ye	ear e	ndir	ıg w	ith c	or wi	thin	the organization's tax ye	ear.			
(A)								(B)			(C)	
Name and busine	ss address	NC	NE				-	Description of se	rvices	Comp	ensatio	on
											-	
			200034-05-001				+	• • • • • • • • • • • • • • • • • • • •				
							1					
		-					+					
2 Total number of independent contractors		ot lim	nited	to t	_		ted a	above) who received mo	re than			
\$100,000 of compensation from the orga					0						A	
SEE PART VII, SECTION	ON A CONT	'IN	UA	ΤI	ON	S	HE	ETS		Forn	990 ((2011)

Part VII Section A. Officers, Directors, (A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per	(cl	heck		ition that		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	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)	compensatior from the organization and related organizations
(27) DEAN GEMMELL DIRECTOR	2.00	х						0.	0.	0
(28) NANCY HAGGENMILLER	2.00	21						0.	0.	0
DIRECTOR	2.00	X						0.	0.	0
(29) JONATHAN HAVERCROFT										_
DIRECTOR	2.00	X			_			0.	0.	0
30) RICK PATZKE EXECUTIVE DIRECTOR	40.00			Х				77,096.	0.	56
		-								
										7-
otal to Part VII, Section A, line 1c							1	77,096.		56

15					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	Federated campaigns	1a					
ara Our	k	Membership dues	1b	425,860.			a to decide	
S, G	c	Fundraising events	1c					
Contributions, Gifts, Grants and Other Similar Amounts			1d					
s, C	e	Government grants (contribu						
ion	f	All other contributions, gifts, gran	10.000.00					
the		similar amounts not included abo		955,295.				
DE.	c	Noncash contributions included in line	A STATE OF THE PARTY OF THE PAR					
Con	h	Total. Add lines 1a-1f			1,381,155.			
				Business Code				Mila Olym, Fyrd
ø	2 a	ENTRY FEES		711300	81,520.	81,520.	(*, text.) (*, 1, 2, 2, 2, 3, 3, 3, 3, 3, 1, 1, 1, 1, 1, 1, 2, 2, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,	
Program Service Revenue	b	OF TIP TITOTIP I ITOT	PROGRAM	524298	37,916.	37,916.		
Sel	c	TITED OF DIAM		711300	26,430.	26,430.		
an eve	d	EDUCATIONAL PRO	OGRAMS	900099	14,977.	14,977.		
P.G	e	US CURLING NEWS		541800	9,821.	21/5//8	9,821.	
Pro	f	All other program service reve			11,615.	9,015.	2,600.	
	a a				182,279.		2,000.	
	3	Investment income (including			102,213	entre paragraphic (Management in the Control of Control	22 - Carlo Car	
	•	other similar amounts)			754.			754
	4	Income from investment of ta			754.			134
	5	Royalties	100	· · · · · ·	2,138.	2,138.		
	J	rioyanioo	(i) Real	(ii) Personal	47.130.	2,130.	Tradition of the second	
	6 a	Gross rents	(y rical	(ii) i cisoriai				
	1000	Less: rental expenses						Taken to Time In the
		Rental income or (loss)						
	d	Net rental income or (loss)	L					
		Gross amount from sales of	(i) Securities	(ii) Other			Ac Ation Assets Transfeld	
	, u	assets other than inventory	(i) occurries	(ii) Other				
- 1	h	Less: cost or other basis						
	D							
		Gain or (loss)						
		Net gain or (loss)						
		Gross income from fundraising			The second second second			
Jue	o a	including \$	of					
Ne.		contributions reported on line		12				
B.		Part IV, line 18						
Other Revenu	h	Less: direct expenses						
9		Net income or (loss) from fund						
		Gross income from gaming ac						
	Ja	Part IV, line 19						
	h	Less: direct expenses						
		Net income or (loss) from gam	27 -02 2000		The May be of the base of the	a sample of the		
		Gross sales of inventory, less i	5	>	Mary L. M. Harry Wilson			Cartesia (* 100 a. 101
	io a			212				
	T.	and allowances Less: cost of goods sold	a	213.				
		Net income or (loss) from sales		/4.	120	120	and the B	
	С			Duoine - C	139.	139.		
	44 -	Miscellaneous Revenue MISCELLANEOUS	,	Business Code	2 440			2 440
			D 7 M	900099	3,449.	0 550		3,449.
		STONE LOAN PROG	KAM.	900099	2,579.	2,579.		
	С	All ather ways and						
		All other revenue			6 000	2		
		Total Add lines 11a-11d			6,028.	174 714	10 401	4 000
132009	<u>12</u> 2	Total revenue. See instructions.			,572,493.	174,714.	12,421.	4,203. Form 990 (2011)

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

	Check if Schedule O contains a respon			(C)	(D)
	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 United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	71,300.	71,300.		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			Secretary Free Co. A. Marco A. M. P. 181. AND C. PROSTONIA CO.	
J	trustees, and key employees	77,152.	57,864.	19,288.	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	306,050.	277,062.	28,988.	
7	Other salaries and wages	300,030.	211,002.	40,900.	
8	section 401(k) and section 403(b) employer contributions)	#			Mar. 1
9	Other employee benefits	8,806.	8,187.	619.	0
10	Payroll taxes	33,973.	30,281.	3,692.	
11	Fees for services (non-employees):	33/3/3:	30/2010	3,032.	
a	Management				
b	Legal	2,573.		2,573.	
c	Accounting	12,342.		12,342.	
d	Lobbying				
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion	y			
13	Office expenses	21,387.		21,387.	
14	Information technology			L.	
15	Royalties				
16	Occupancy	43,977.		43,977.	
17	Travel	17,375.	16,544.	831.	AND
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	36,961.	13,910.	23,051.	
23	Insurance	39,888.	33,763.	6,125.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	ELITE PROGRAM	348,380.	348,380.	10 May 10	
b	COACHING AND COACH DEVE	88,758.	88,758.		
С	WORLD TEAM PREP AND WOR	86,359.	86,359.		
d	TRANSPORTATION	60,020.	60,020.		
е	All other expenses SEE SCH O	269,135.	201,945.	67,190.	
25	Total functional expenses. Add lines 1 through 24e	1,524,436.	1,294,373.	230,063.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined		-		
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2011)

(A) (B) Beginning of year End of year 38,951. Cash - non-interest-bearing 83,967. 1 1 323,225. 250,209. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 3 17,334 44,989. Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 220,739. 159,666. 7 Notes and loans receivable, net 7 Inventories for sale or use 69,823. 8 100,780. Prepaid expenses and deferred charges 27,321. 27,246. 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 273,191. 90.839. 133,756. 182,352. b Less: accumulated depreciation ______ 10b 10c Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 79,895. 31,148. Other assets. See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 880,357. 911,044. 16 16 Accounts payable and accrued expenses 80,669. 17 125,584. 18 Grants payable 18 144,851 130,398. 19 Deferred revenue 19 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 344,880. 236,320. 23 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 34,734. 34,088. 25 605,134. Total liabilities. Add lines 17 through 25 526,390. 26 Organizations that follow SFAS 117, check here X and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. Unrestricted net assets 295,851 346,290. 27 Temporarily restricted net assets 10,059. 7,677. 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 305,910. 33 Total net assets or fund balances 33 353,967. Total liabilities and net assets/fund balances 911.044. 880,357. 34

Form 990 (2011)

Forn	1 990 (2011) UNITED STATES CURLING ASSOCIATION	36-	6066248	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,57	2,4	93.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,52	4,4	36.
3	Revenue less expenses. Subtract line 2 from line 1	3	4	3,0	57.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	30.	5,9	10.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			0.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	35:	3,9	67.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		1114.1	ditt.	7.72
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued	on a			
	separate basis, consolidated basis, or both:			•	
	X Separate basis Consolidated basis Both consolidated and separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	lit		
	Act and OMB Circular A-133?		За		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		
			Form \$	90 (2011)

01-23-12

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Employer identification number

		UNITED	STATES CURL	ING AS	SOCIA	TION			36	-6066	248	
Part I	Reason		rity Status (All organi				t.) See ins	tructions.				
The organ	nization is not	a private foundation	because it is: (For lines	1 through	11, check	only one b	oox.)					
1			es, or association of chui).				
2	A school des	cribed in section 1	70(b)(1)(A)(ii). (Attach So	chedule E.))							
3	A hospital or	a cooperative hosp	ital service organization	described	in section	170(b)(1)	(A)(iii).					
4	A medical re	search organization	operated in conjunction	with a hos	spital desc	ribed in se	ection 170	(b)(1)(A)(i	ii). Enter th	e hospital	's nam	ıe,
	city, and stat	te:										
5	An organizat	ion operated for the	benefit of a college or u	niversity o	wned or o	perated by	y a govern	mental un	it described	d in		
	section 170	(b)(1)(A)(iv). (Comp	lete Part II.)									
6	A federal, sta	ate, or local governn	nent or governmental un	it describe	d in sectio	n 170(b)(1)(A)(v).					
7	An organizat	ion that normally re	ceives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	e general pu	ublic desc	ribed i	n
	section 170	(b)(1)(A)(vi). (Compl	ete Part II.)									
8	A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)					9 2		
9 X			ceives: (1) more than 33									
			ınctions - subject to certa									
			taxable income (less sec	tion 511 ta	ax) from bu	isinesses a	acquired b	y the orga	anization af	ter June 3	0, 197	5.
		509(a)(2). (Complet										
10			perated exclusively to te									
11 📖			perated exclusively for t									or
		(III. 1819) # #	ations described in sect				2). See se e	ction 509((a)(3). Chec	k the box	that	
			g organization and comp							~ III c	- · ·	
	a Type			с 🗀 Тур			V(CT)()			Type III - C		025
e			at the organization is not									
			than one or more publicl						9(a)(1) or se	euc nons	(a)(2).	
f			itten determination from									
			his box									ш
g			organization accepted a directly controls, either a							ľ	Yes	No
			supported organization?							11g(i)	165	INO
			n described in (i) above?									
	A 5		a person described in (i)							1 1		
h	8 8		a bout the supported or							[119(11)]		
h	Provide the r	ollowing information	about the supported of	garnzation	(3).							
/D. N.		(") FIN	(iii) Type of	(iv) Is the c	organization	(v) Did vo	u notify the	(vi) Is	s the	(vii) Am	ount o	
	of supported anization	(ii) EIN	organization	in col. (i) lis	sted in your	organizat	tion in col.	(vi) Is organizati (i) organiz	on in col.	supp		1
or g	arnzation		(described on lines 1-9 above or IRC section	governing	document?	(i) of you	r support?	U.S	5.?	очр	, , , ,	
			(see instructions))	Yes	No	Yes	No	Yes	No			
		1000					140					
				1	1	Carlotte Street		I.	E			

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

Schedule A (Form 990 or 990-EZ) 2011

ribad in Sections 170(h)(1)(A)(iy) and 170(h)(1)(A)(yi)

Support Schedule for (Complete only if you check fails to qualify under the tes	ed the box on line 5	5, 7, or 8 of Part I	or if the organization	on failed to qualify	under Part III. If the	organization
ection A. Public Support						
alendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
test test test test test test test test						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
1 Total. Add lines 1 through 3		1. 15 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1				
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		To the second second second			4	
amount shown on line 11,						
column (f)	Control of the State of the Sta				1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Public support. Subtract line 5 from line 4	and the second section of the second	A STATE OF THE STA	Property of the second	A William Manager and Control of the	a TIA's to see a Company of the Comp	
ection B. Total Support	(-) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
endar year (or fiscal year beginning in)		(b) 2008	(6) 2003	(u) 2010	(C/LOTT	111
Amounts from line 4	0	-	-			
Gross income from interest,						
dividends, payments received on						
securities loans, rents, royalties						
and income from similar sources						
Net income from unrelated business	S					
activities, whether or not the			.1			
business is regularly carried on						
Other income. Do not include gain		-				
or loss from the sale of capital			-	l u		
assets (Explain in Part IV.)						
Total support. Add lines 7 through 10		iona)		- A TRANSPORT RANGE LANGE CONTRACTOR	12	
Gross receipts from related activitie First five years. If the Form 990 is f						
organization, check this box and stection C. Computation of Pul	olic Support Pe	ercentage				8
Public support percentage for 2011			column (fl)		14	
Public support percentage from 20	10 Schedule A Part	t II line 14				
ia 33 1/3% support test - 2011. If the	organization did n	ot check the box	on line 13, and line	14 is 33 1/3% or r	nore, check this box	k and
stop here. The organization qualifie						
b 33 1/3% support test - 2010. If the	organization did n	ot check a box on	line 13 or 16a. an	d line 15 is 33 1/39	6 or more, check th	s box
and stop here. The organization qu	alifies as a publicly	supported organi	zation			▶ □
and stop nere. The organization quality at 10% -facts-and-circumstances to	set - 2011 If the or	nanization did not	check a box on lin	ne 13, 16a, or 16b.	and line 14 is 10% (or more,
and if the organization meets the "f	acte and circumstar	nces" test check	this box and ston	here. Explain in Pa	rt IV how the organi	zation
meets the "facts-and-circumstance						
b 10% -facts-and-circumstances to						
more, and if the organization meets						
organization meets the "facts-and-o	ircumstances" test	. The organization	qualifies as a pub	licly supported org	anization	

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

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

Se	ction A. Public Support	219				**************************************	
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1005590.	1351354.	1501485.	991,642.	1381154.	6231225.
2	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	107,144.	94 927	125 752	128,379.	169 997	626,199.
2	Gross receipts from activities that	10//12=0	J=, J21 6	125,152.	120,515.	100,001.	020,199
0	are not an unrelated trade or bus-						
	iness under section 513						
1	Tax revenues levied for the organ-						
7	ization's benefit and either paid to						Dr.
	or expended on its behalf	#					
_	The value of services or facilities						
5	furnished by a governmental unit to				a a		
	the organization without charge						
•	NEW 1000	1112724	1446281.	1607007	1120021	1551151	C057404
	Total. Add lines 1 through 5	1112734.	1440281.	1627237.	1120021.	1551151.	6857424.
12	Amounts included on lines 1, 2, and						
h	3 received from disqualified persons Amounts included on lines 2 and 3 received						0.
L	from other than disqualified persons that		=				
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0.
	Add lines 7a and 7b		Range and the Paris and the Control	and the second second	2020 - Colton 45-46-76-76		0.
	Public support (Subtract line 7c from line 6.)	The Mark of a Commission of Co	A way of the sale	Contract State Contract Contra		A	6857424.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Amounts from line 6	1112734.	1446281.	1627237.	1120021.	1551151.	6857424.
10a	Gross income from interest, dividends, payments received on	8					
	securities loans, rents, royalties	5 501				1,4	
	and income from similar sources	6,684.	4,807.	533.	700.	2,892.	15,616.
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses				- 100 Page 88-100-270		
	acquired after June 30, 1975				11,395.	-4,626.	6,769.
С	Add lines 10a and 10b	6,684.	4,807.	533.	12,095.	-1,734.	22,385.
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.)	10,062.	4,839.	12,880.	38,599.	6,028.	72,408.
	Total support (Add lines 9, 10c, 11, and 12.)	1129480.	1455927.	1640650.	1170715.	1555445.	6952217.
14	First five years. If the Form 990 is for	the organization's	first, second, third	l, fourth, or fifth ta	x year as a sectior	1 501(c)(3) organiza	ation,
	check this box and stop here						>
Sec	tion C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2011 (li	ne 8, column (f) div	vided by line 13, co	olumn (f))		15	98.64 %
	Public support percentage from 2010					16	98.06 %
Sec	tion D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	11 (line 10c, colum	n (f) divided by line	13, column (f))		17	.32 %
	Investment income percentage from 2					18	.45 %
	33 1/3% support tests - 2011, If the						
	more than 33 1/3%, check this box an						
	33 1/3% support tests - 2010. If the						
	line 18 is not more than 33 1/3%, chec						
	Private foundation. If the organization					2000	

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

2011

Employer identification number

36-6066248 UNITED STATES CURLING ASSOCIATION Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part II, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number

NITED S'Part III E	TATES CURLING ASSOCI Exclusively religious, charitable, etc., indiverse. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	ATION vidual contributions to section 501(c)(7), (ne following line entry. For organizations co c., contributions of \$1,000 or less for the y	36-6066248 (8), or (10) organizations that total more than \$1,000 for impleting Part III, enter ear. (Enter this information once) \$\Bigsir \text{\$\frac{3}{2}} \Bigsir \text{\$\frac{5}{2}} \Bigsir \Bigsir \text{\$\frac{5}{2}} \Bigsir \text{\$\frac{5}{2}}
(a) No. from Part I	Jse duplicate copies of Part III if addition	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
i) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

➤ Attach to Form 990. ➤ See separate instructions.

2011
Open to Public Inspection

Name of the organization

UNITED STATES CURLING ASSOCIATION

Employer identification number 36-6066248

Aggregate contributions to (during year) Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor 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 education) Preservation of an historically important Preservation of natural habitat Preservation of pen space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation eduy of the tax year. Total number of conservation easements Total acreage restricted by conservation easements Number of conservation easements not a certified historic structure included in (a) A Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization durin year Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easement is located Number of states where property subject to conservation easements included in (a) 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 Amount of expenses incurred in monitoring, inspecting, and enforcing conserv	Yes No
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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. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important Preservation of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation eday of the tax year. 4 Total number of conservation easements 5 Total acreage restricted by conservation easements 6 Number of conservation easements on a certified historic structure included in (a) 6 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization durin year 7 Number of states where property subject to conservation easement is located 8 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 9 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 9 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	land area ure
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Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation eday of the tax year. Held a Equation Held a H	
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation eaday of the tax year.	(gg) 9888 24 67
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a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization durin year Number of states where property subject to conservation easement is located 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? 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	asement on the last
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b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization durin year Number of states where property subject to conservation easement is located 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? 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 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	it the End of the Tax Year
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d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	
listed in the National Register	
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Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ Boes each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	Yes No
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i)	
	19
and section 170(h)(4)(B)(ii)?	Yes No
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and ba	iance sheet, and
include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's a	ccounting for
conservation easements.	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar As	sets.
Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	
1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sl	neet works of art,
historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service	e provide in Dart VIV
the text of the footnote to its financial statements that describes these items.	o, provide, in Fait AIV,
b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet	o, provide, in Fall AIV,
treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide	
relating to these items:	works of art, historical
(i) Revenues included in Form 990, Part VIII, line 1	works of art, historical
(ii) Assets included in Form 990, Part X	works of art, historical the following amounts
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	works of art, historical the following amounts
the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	works of art, historical the following amounts
a Revenues included in Form 990, Part VIII, line 1	works of art, historical the following amounts
b Assets included in Form 990, Part X	works of art, historical the following amounts

Sche	dule D (Form 990) 2011 UNITED	STATES CUR	LING	ASSOC	IATION	· · ·			66248		ge Z
Par	t III Organizations Maintaining C	ollections of A	rt, Histo	orical Tr	easures, o	r Othe	er Simila	r Asse	S (contin	ued)	
3	Using the organization's acquisition, accession	on, and other record	ls, check	any of the	following that	are a s	ignificant u	se of its	collection	items	3
	(check all that apply):										
а	Public exhibition	d			hange prograi						
b	Scholarly research	е		other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n how the	ey further t	he organizatio	n's exe	mpt purpos	se in Parl	XIV.		
5	During the year, did the organization solicit o	r receive donations	of art, his	torical trea	sures, or othe	r simila	assets	_	7		1
	to be sold to raise funds rather than to be ma	aintained as part of t	he organ	ization's co	ollection?				Yes		No
Par	t IV Escrow and Custodial Arran	gements. Comple	ete if the	organizatio	n answered "	Yes" to	Form 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par	t X, line 21.			The second second			version version			
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for c	ontribution	s or other ass	sets not	included		7		1
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing ta	able:							
	000 56 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								Amount	-34	
С	Beginning balance						1c				
d	Additions during the year						1d		14		
е	Distributions during the year						1e				
f	Ending balance						1f		7		1
2a	Did the organization include an amount on Fe	orm 990, Part X, line	21?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIV.						t.				
Par	t V Endowment Funds. Complete i	f the organization ar			rm 990, Part I	V, line 1	0.				
		(a) Current year	(b) Pr	ior year	(c) Two years	s back	(d) Three ye	ars back	(e) Four	years I	back_
1a	Beginning of year balance	14									sign
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs								aka er dir.		
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curr	rent year end baland	ce (line 1g	, column (a	a)) held as:						
а	Board designated or quasi-endowment	1	_%								
b	Permanent endowment	%									
С	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c shou	uld equal 100%.									
За	Are there endowment funds not in the posse	ession of the organiz	ation that	t are held a	and administer	red for t	he organiza	ation	Г		
	by:									Yes	No
	(i) unrelated organizations										
	(ii) related organizations								3a(ii)		
b	If "Yes" to 3a(ii), are the related organization:								3b		
4	Describe in Part XIV the intended uses of the	organization's end	owment f	unds.							
Pai	t VI Land, Buildings, and Equipm	nent. See Form 99	0, Part X,								
	Description of property	(a) Cost or o		• 10 m	t or other (other)		ccumulated preciation	d	(d) Book	value	
1a	Land						Attack Ball				
b	Buildings										
c	Leasehold improvements				4,099.		14,72				72.
d	Equipment	10.000		24	19,092.		76,11	.2.	172	2,98	80.
е	Other										
Tota	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, colum	nn (B), line	10(c).)				182	2,3!	52.

Schedule D (Form 990) 2011

(a) Description of security or category	(b) Book value		(c) Method of valu	
(including name of security)			ost of end-of-year ma	Thet value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A) (B)			700 HC 780 PM CT 100 V	
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related.	See Form 990, Part X, lin	ne 13.		
(a) Description of investment type	(b) Book value	Co	(c) Method of value ost or end-of-year ma	
(1)				
(2)			pr.	
(3)				
(4)	4.			
(5)				
(6)				
(7)				
(8)		****		
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)	4	Committee of the Commit		
Part IX Other Assets. See Form 990, Part X, lir	ne 15. a) Description			(b) Book value
	a) Description			(b) book value
(1)				
(2)				
(3)	1			
(4)		3		
(5)				
<u>(6)</u>				
(9)	10			
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) li	ne 15.)		•	
Part X Other Liabilities. See Form 990, Part)			,	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) FUNDS HELD FOR OTHERS		34,088.		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col (B) lin FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote	ne 25.)	34,088.	### ### ##############################	
2. FIN 48 (ASC 740).	to the organization's financial sta	tements that reports the organ	zation's liability for uncertain	n tax positions under
132053 01-23-12			Sch	edule D (Form 990) 2011

	rt XI Reconciliation of Change in Net Assets from Form 990 to	CIAT Audit	ION ed Finan	cial Sta	36- temer	-6066248 Page 4
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1011101	1,572,493.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2		
3	Excess or (deficit) for the year. Subtract line 2 from line 1					1,524,436.
4	Net unrealized gains (losses) on investments			3		48,057.
5	Donated equipee and use of facilities			4		
	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Prior period adjustments			7		
8	Other (Describe in Part XIV.)			8		
9	Total adjustments (net). Add lines 4 through 8			9		
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9		10		48,057.
	t XII Reconciliation of Revenue per Audited Financial Stateme	nts W	ith Keven	ue per	Retur	
1					1	1,681,805.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1				
а	Net unrealized gains on investments	2a				
b	Donated services and use of facilities	2b	109	9,312		
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIV.)	2d				
	Add lines 2a through 2d				2e	109,312.
3	Subtract line 2e from line 1				3	1,572,493.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			• • • • • • • • • • • • • • • • • • • •	1113	2/3/2/1930
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			14072	
	Other (Describe in Part XIV.)				Stage 1	
C	Add lines 4a and 4b	40			- transmit	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				4c	1 572 403
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	nte W	ith Eypor	sees no	5 Potu	1,572,493.
	Total expenses and losses per audited financial statements					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				1	1,633,748.
		1	100	240		
a	Donated services and use of facilities	2a	109	,312	***************************************	
b	Prior year adjustments				1200 PER 13	
C .	Other losses	2c			1000	
	Other (Describe in Part XIV.)	2d			H. History	
е.	Add lines 2a through 2d				2e	109,312.
3	Subtract line 2e from line 1				3	1,524,436.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
	Other (Describe in Part XIV.)	4b				
	Add lines 4a and 4b				4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	1,524,436.
Part	XIV Supplemental Information					
X, line	ete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comple Γ IV, LINE 2B: THE AMERICAN CURLING FOUNDA	ete this p	art to provid	de anv ad	ditional	information
ALL	OF ITS ASSETS AND LIABILITIES TO THE US C	URLI	NG ASS	OCIAT	ION.	THE
FUNI	OS, WHILE IN THE POSSESSION OF THE ASSOCIA	TION	, CAN	ONLY	BE S	SPENT BY
AND	FOR THE AMERICAN CURLING FOUNDATION AND M	USEUI	М.			
PART	X, LINE 2: THE ASSOCIATION IS GENERALLY 1	EXEMI	PT FROI	M INC	OME	TAXES
UNDE	ER INTERNAL REVENUE CODE SECTION 501(C)(3)	. INC	COME FI	ROM C	ERTA	IN
PUBI	LISHING AND ADVERTISING ACTIVITIES IS CONS	IDERI	ED UNRI			
132054					schedu	le D (Form 990) 2011

8 Employer identification number 36-6066248 Open to Public OMB No. 1545-0047 Inspection (h) Purpose of grant or assistance X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Attach to Form 990. (d) Amount of cash grant Enter total number of section 501(c)(3) and government organizations listed in the line 1 table UNITED STATES CURLING ASSOCIATION (c) IRC section if applicable Enter total number of other organizations listed in the line 1 table General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization or government Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1 (Form 990) PartI Part II

Schedule I (Form 990) (2011)

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

Page 2 (f) Description of non-cash assistance 36-6066248 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. FMV (d) Amount of non-cash assistance UNITED STATES CURLING ASSOCIATION 71,300. (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance STIPENDS & APPEARANCE FEES Schedule I (Form 990) (2011) 132102 01-27-12 Part III Part IV

Schedule I (Form 990) (2011)

28

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

Open to Public

Name of the organization

UNITED STATES CURLING ASSOCIATION

Employer identification number 36-6066248

Schedule M (Form 990) (2011)

Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of c noncash contrib	letermi	0.70	ts
1	Art - Works of art		Tomo communica				-	200
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
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				**			
1.5	trust interests							
12	Securities - Miscellaneous				11 SA			
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other		18					
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy			***				
22	Historical artifacts			(
23	Scientific specimens				(A)			
24	Archeological artifacts							
25	Other (UNIFORMS AND)	X	1		FAIR MARKE			
26	Other (SOFTWARE)	X	1		FAIR MARKE			
27	Other (WEB SERVER)	Х	1	8,000.	FAIR MARKE	r VA	LUE	
28	Other (
29	Number of Forms 8283 received by the organiz			1				
	for which the organization completed Form 828	33, Part IV, D	Oonee Acknowledg	ement 29				
						100 at 100	Yes	No
30a	During the year, did the organization receive by							
	at least three years from the date of the initial of				50 50 E		7,350	
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.					1. 1		
31	Does the organization have a gift acceptance p					31		_X_
32a	Does the organization hire or use third parties of			1.5				
	contributions?					32a	44, 154	_X_
	If "Yes," describe in Part II.				COURTS WATER TO			
33	If the organization did not report an amount in	column (c) fo	or a type of proper	ty for which column (a) is ch	ecked,			
	describe in Part II.					35 50	5 76 6	

LHA

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

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number UNITED STATES CURLING ASSOCIATION 36-6066248 FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: SUPPORTS TEAM SELECTION, TRAINING, AND TRAVEL FOR VARIOUS NATIONAL AND INTERNATIONAL CHAMPIONSHIPS. SUPPORTS HOST SITES FOR NATIONAL CHAMPIONSHIPS. EXPENSES \$ 26,546. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION A, LINE 6: THE MEMBERS OF THE US CURLING ASSOCIATION ARE THOSE REGIONAL CURLING ASSOCIATIONS IN THE UNITED STATES WHO ELECT MEMBERSHIP. FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS HAVE THE ABILITY TO ELECT ONE OR MORE MEMBERS OF THE BOARD OF DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7B: MEMBERS ARE PERMITTED UPON A 2/3 VOTE TO AMEND EITHER THE BY-LAWS OR ARTICLES THUS OVER RIDING A BOARD DECISION. THE BY-LAWS ALSO PERMIT THE MEMBERS TO VETO AN EXECUTIVE COMMITTE DECISION TO ELECT A NEW MEMBER TO THE USCA. FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS PRESENTED TO THE TREASURER OF THE BOARD FOR APPROVAL PRIOR TO FILING. FORM 990, PART VI, SECTION B, LINE 12C: ALL EMPLOYEES ARE REQUIRED TO COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT AND SIGN A FORM INDICATING THAT THEY HAVE RECEIVED AND UNDERSTAND THE USCA STATEMENT OF

PRINCIPLES ON ETHICAL BEHAVIOR AND CONFLICT OF INTEREST.

Name of the organization	Employer identification number
UNITED STATES CURLING ASSOCIATION	36-6066248
FORM 990, PART VI, SECTION B, LINE 15: FOR WAGES NOT FUND	DED WITH USOC
GRANTS (GRANT SETS PARAMETERS), THE USCA HAS A HUMAN RESC	OURCE COMMITTEE
RESPONSIBLE FOR DETERMING COMPENSATION OF OFFICERS AND KI	EY EMPLOYEES. ALL
WAGES ARE APPROVED BY THE CHIEF OPERATING OFFICER, TREAST	URER, OPERATING
COMMITTEE AND EXECUTIVE COMMITTEE FOR APPROVAL.	
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION M	MAKES ITS
GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO	THE PUBLIC UPON
REQUEST.	
· · · · · · · · · · · · · · · · · · ·	F
FORM 990, PART IX, LINE 24E, ALL OTHER FUNCTIONAL EXPENSE	ES:
MEDIA/PUBLIC RELATIONS :	
PROGRAM SERVICE EXPENSES	
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	52,572.
US CURLING NEWS :	
PROGRAM SERVICE EXPENSES	49,726.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	49,726.
FIELD OF PLAY :	
PROGRAM SERVICE EXPENSES	25,069.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	25,069.
132212 01-23-12 Sched	lule O (Form 990 or 990-EZ) (2011)

CHOD/ MEMDEROHITI DEVELOTMENT.	
PROGRAM SERVICE EXPENSES	6,476.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	6,476.

PRESIDENT'S EXPENSE :

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization UNITED STATES CURLING ASSOCIATION	Employer identification number 36-6066248
PROGRAM SERVICE EXPENSES	5,834.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	5,834.
ATHLETE ADVISORY COUNCIL :	
PROGRAM SERVICE EXPENSES	4,894.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	4,894.
OUTSIDE SERVICES :	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	3,280.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	3,280.
EDUCATION PROGRAM DEVELOPMENT :	
PROGRAM SERVICE EXPENSES	2,263.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,263.
EMPLOYEE RECRUITMENT :	
PROGRAM SERVICE EXPENSES	1,767.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,767.
01-23-12 3 4	Schedule O (Form 990 or 990-EZ) (2011)

132212 01-23-12

Schedule O (Form 990 or 990-EZ) (2011)

UNITED STATES CURLING ASSOCIATION	36-6066248
YOUTH CURLING :	
PROGRAM SERVICE EXPENSES	1,753.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,753.
WCF STONE LOAN PROGRAM :	
PROGRAM SERVICE EXPENSES	1,315.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,315.
BAD DEBT EXPENSE :	
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	1,004.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,004.
COLLEGE CURLING COMMITTEE :	
PROGRAM SERVICE EXPENSES	1,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,000.
DUES & SUBSCRIPTIONS :	
PROGRAM SERVICE EXPENSES	1 000
MANAGEMENT AND GENERAL EXPENSES	0
	Schedule O (Form 990 or 990-EZ) (2011)

Name of the organization UNITED STATES CURLING ASSOCIATION	Employer identification number 36-6066248
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	1,000.
MISCELLANEOUS :	
PROGRAM SERVICE EXPENSES	452.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	452.
PROPERTY TAXES :	2
PROGRAM SERVICE EXPENSES	0.
MANAGEMENT AND GENERAL EXPENSES	226.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	226.
	V
ACF&M COMMITTEE :	
PROGRAM SERVICE EXPENSES	42.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	42.
TOTAL OTHER EXPENSES ON FORM 990, PART IX, LINE 24E, COL	A 269,135.
FORM 990, PART VI, SECTION C - QUESTION 19	
ALL GOVERNING DOCUMENTS, CONFLICT OF INTEREST STATEMENTS	AND FINANCIAL
STATEMENTS ARE AVAILABLE FOR VIEWING BY ANY MEMBER OF THE	ASSOCIATION
AT THE USCA HEADQUARTERS UPON REQUEST.	

Asset No.	Description	Date Acquired Me	Method	Life	No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Currer	Current Year Deduction
	MACHINERY & EQUIPMENT				3.0								
	1TIME CLOCKS	VARIESSL		.000	9	17,675.			17,675.	11,716.			0
- 60 - 100	2VIDEO EQUIPMENT	VARIESSL		000	9		200						0
(M)	SAND SOFTWARE	VARIESSL		.000	؈	15,603.			15,603.	9,735.			0
nie S	4TELEPHONE SYSTEM	VARIESSL	•	000	9	4,742.			4,742.	1,693.			0
	SOFFICE EQUIPMENT	VARIESSL		.000	9	14,317.	10.000 (10.000) 10.000 (10.000) 10.000 (10.000) 10.000 (10.000)		14,317.	7,150.			0
100 K	GEQUIPMENT	VARIESSL		.000	9		1					1	0
	8BOULEVARD STONES	VARIESSI		.000	ဖ	5,440.			5,440.	952.			0
i.	9SENSOR HANDLES	VARIESSL	• 11	000	9	21,643.	11 12 12 13	72	21,643.	14,230.	1 3 4 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5 6 5		0
H	14SCOREBOARD	VARIESSL		.000	9	7,975.			7,975.	797.			0
	15WEBSITE * 090 DAGE 10 HOMAT	VARIESSL		.000	9	22,000.	(2) (1) (1) (1) (1)	1 de la constante de la consta	22,000.	2,139.		-	0
	MACHINERY & EQUIPM MANAGEMENT AND GENERAL					109,395.	125 . 728 145 . 136 . 7 145 . 145 . 7 145 . 145	0	109,395.	48,412.	0		0
H	LD MENTS	VARIESSL		.000	9	24,099.	Marian Carlo		24,099.	2,678.			0
	MANAGEMENT AND GEN					24,099.		• 0	24,099.	2,678.	o	100 100 100	0
						133,494.		0	133,494.	51,090.	• 0		ò
				The second secon			2000						2

128102 05-01-11

(D) - Asset disposed