

Form **990**
 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)
 The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047
2011
Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012

- B** Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization
 MARINES' MEMORIAL ASSOCIATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) Room/suite
 609 SUTTER ST SUITE 2M

City or town, state or country, and ZIP + 4
 SAN FRANCISCO, CA 94102

D Employer identification number
 94-1055967

E Telephone number
 (415) 673-6672

G Gross receipts \$ 13,588,087

F Name and address of principal officer
 MAJGEN J MICHAEL MYATT
 609 SUTTER ST SUITE 2M
 SAN FRANCISCO, CA 94102

H(a) Is this a group return for affiliates? Yes No

H(b) Are all affiliates included? Yes No
 If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) (19) ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW.MARINECLUB.COM

K Form of organization Corporation Trust Association Other ▶ **L** Year of formation 1946 **M** State of legal domicile CA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO MAINTAIN A LIVING MEMORIAL HONORING VETERANS OF THE U S ARMED FORCES, TO EDUCATE AND PERPETUATE THE ACHIEVEMENTS AND THE SACRIFICES OF THESE VETERANS, AND TO AID AND ASSIST THESE VETERANS AND THE CURRENTLY SERVING MEN AND WOMEN IN THE U S ARMED FORCES		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	17
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	17
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	154
	6 Total number of volunteers (estimate if necessary)	6	7
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	4,846,765
b Net unrelated business taxable income from Form 990-T, line 34	7b	-1,065,509	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	2,563,261	2,479,669
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,620,223	6,184,597
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	54,584	48,252
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,967,677	3,027,237
	12	11,205,745	11,739,755
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	62,500	67,500
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	6,581,306	6,978,265
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ ⁰		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,888,301	5,201,170
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	11,532,107	12,246,935
19 Revenue less expenses Subtract line 18 from line 12	-326,362	-507,180	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	13,098,519	12,870,870
	22 Net assets or fund balances Subtract line 21 from line 20	1,558,808	1,818,140
	22	11,539,711	11,052,730

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which the preparer has any knowledge.

Sign Here

Signature of officer: *****
 MAJGEN J MICHAEL MYATT USMC CEO
 Type or print name and title

Paid Preparer's Use Only

Preparer's signature: ROSEMARIE BROWN Date: _____
 Firm's name (or yours if self-employed), address, and ZIP + 4: MCGLADREY LLP
 515 S FLOWER ST 41ST FLOOR
 LOS ANGELES, CA 90071

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission
THE TAXPAYER IS AN EXEMPT ORGANIZATION UNDER IRC SECTION 501(C)(19) WHOSE PROGRAM SERVICE ACTIVITIES ARE ORGANIZED AND OPERATED FOR THE BENEFIT OF THE VETERANS AND ACTIVE DUTY MILITARY PERSONNEL OF ALL U S ARMED FORCES ALL PROGRAMS OF THE TAXPAYER ARE RELATED TO ITS EXEMPT PURPOSE AS A VETERANS' ORGANIZATION THAT INCLUDES A CONDUCTING COMMEMORATIVE PROGRAMS TO PERPETUATE THE MEMORY OF OUR VETERANS OF THE U S ARMED FORCES B PROVIDING A FACILITY TO HOLD SOCIAL AND RECREATIONAL ACTIVITIES FOR OUR MEMBERS THAT CONSIST OF VETERANS AND ACTIVE DUTY MILITARY PERSONNEL OF THE U S ARMED FORCES C PROVIDING ASSISTANCE, ENTERTAINMENT, AND CARE TO OUR OLDER VETERANS OF THE U S ARMED FORCES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ including grants of \$) (Revenue \$)
THE MARINES' MEMORIAL ASSOCIATION IS CHARTERED AS A NON-PROFIT 501(C)(19) VETERANS' ORGANIZATION THAT OPERATES THE MARINES' MEMORIAL CLUB AS A LIVING MEMORIAL (1) TO COMMEMORATE THE SERVICE AND SACRIFICES OF VETERANS OF THE U S MILITARY SERVICES, (2) TO EDUCATE THE PUBLIC ABOUT THESE SACRIFICES, AND (3) TO PROVIDE SERVICES TO THE CURRENTLY SERVING MEN AND WOMEN IN THE U S MILITARY IN THAT REGARD, FOR FISCAL YEAR 2011-2012, THE MARINES' MEMORIAL ASSOCIATION FULFILLED ITS MISSION IN A MULTITUDE OF WAYS ONE WAY WAS TO HOLD SPECIAL EVENTS THE ASSOCIATION CONDUCTS A VARIETY OF PROGRAMS INCLUDING MONTHLY LECTURES ON MILITARY OPERATIONS AND SPEAKING EVENTS BY AUTHORS THIS PAST YEAR, THE ASSOCIATION HELD 47 SEPARATE EVENTS AS FOLLOWS EIGHT (8) EVENTS WERE TO COMMEMORATE 1 18 AUGUST 69TH ANNIVERSARY OF THE BATTLE FOR GUADALCANAL MAJ GEN MIKE MYATT, USMC (RETIRED) EVENT SPEAKER2 27 SEPTEMBER COMMEMORATION OF THE 61ST ANNIVERSARY OF THE KOREAN WAR LUNCHEON WITH GUESTS OF HONOR FORMER U S CONGRESSMAN PETE MCCLOSKEY AND KOREAN CONSUL GENERAL, LEE JEONG GWAN3 11 NOVEMBER LEATHERNECK LUNCHEON WITH MAJ GEN DON LYNCH USMC (RET) AS PRESIDENT OF THE MESS4 12 NOVEMBER 236TH MARINE CORPS BIRTHDAY BALL GUEST OF HONOR GENERAL JAMES T CONWAY, USMC (RET), 34TH COMMANDANT OF THE MARINE CORPS5 23 FEBRUARY IWO JIMA COMMEMORATION LUNCHEON MEMORIAL LUNCHEON HONORING IWO JIMA VETERANS FOR THE 67TH ANNIVERSARY OF THE BATTLE FOR IWO JIMA, GUEST SPEAKER LT GEN LARRY SNOWDEN USMC (RET), SENIOR SURVIVING IWO JIMA VETERAN6 08 MARCH SALUTE TO VIETNAM VETERANS GRAND RECEPTION, DINNER, MUSICAL ENTERTAINMENT BY LIAM TIERNAN AND THE ANNA KRISTINA QUARTET, WITH GUEST SPEAKERS GEN TONY ZINNI USMC (RET) AND JOE GALLOWAY, AUTHOR OF "WE WERE SOLDIERS ONCE AND YOUNG "7 12 APRIL COMMEMORATION SALUTE TO IRAQ AND AFGHANISTAN VETERANS GUEST SPEAKER, GEN JOSEPH F DUNFORD JR , USMC, CURRENT ASSISTANT COMMANDANT OF THE MARINE CORPS8 10 MAY NAMING CEREMONY FOR SAN FRANCISCO VETERANS MEMORIAL MMA PRESIDENT AND CEO SERVES AS CHAIRMAN OF THE SAN FRANCISCO VETERANS MEMORIAL PROJECT ON THIS DATE, THE HORSESHOE DRIVE AROUND THE MEMORIAL SITE WAS NAMED AFTER CHARLOTTE AND GEORGE SHULTZ THE MEMORIAL WILL BE BUILT AND DEDICATED ON VETERANS DAY 2013 THIRTY (30) EVENTS WERE TO EDUCATE 1 18 JULY "US-PAKISTAN RELATIONS AT A TURNING POINT" WITH ANJA MANUEL AND KIREN AZIZ CHAUDHRY2 21 JULY "ASSESSING THE ARAB SPRING A CAIRO PERSPECTIVE" WITH LISA ANDERSON3 10 AUGUST MEET THE AUTHOR PROGRAM JEREMY BEN-AMI, "A NEW VOICE FOR ISRAEL" 4 18 AUGUST "INSIDE LIBYA" WITH THE HONORABLE GENE CRETZ, AT THE TIME THE US AMBASSADOR TO LIBYA5 24 AUGUST "RETHINKING AMERICAN POLICY IN AFGHANISTAN" WITH PETER TOMSEN, FORMER SPECIAL ENVOY ON AFGHANISTAN6 25 AUGUST GEORGE P SHULTZ LECTURE SERIES WITH GENERAL JAMES N MATTIS, COMMANDER, U S CENTRAL COMMAND (CENTCOM)7 14 SEPTEMBER "SECURITY OPPORTUNITIES AND CHALLENGES IN THE ASIA-PACIFIC" WITH ADMIRAL WILLARD, COMMANDER, PACOM8 19 SEPTEMBER "HOT TOPIC- THE STATE OF HEALTH CARE IN THE 21ST CENTURY" WITH BERNARD TYSON, PRESIDENT & COO OF KAISER PERMANENTE9 20 SEPTEMBER MEET THE AUTHOR PROGRAM ERIC SCHMITT, TERRORISM CORRESPONDENT, THE NEW YORK TIMES, "INSIDE THE WAR ON TERROR"10 27 SEPTEMBER MEET THE AUTHOR PROGRAM KARL MARLANTES, "WHAT IT IS LIKE TO GO TO WAR"11 6-11 OCT SAN FRANCISCO FLEET WEEK LED BY THE MARINES' MEMORIAL LEADERSHIP, THE FLEET WEEK ASSOCIATION ORCHESTRATED A SERIES OF FLEET WEEK EVENTS TO EDUCATE THE PUBLIC ABOUT THE MILITARY'S ROLE IN HUMANITARIAN ASSISTANCE AND DISASTER RELIEF WHILE PROVIDING HOSPITALITY TO VISITING SAILORS, MARINES AND MEMBERS OF THE COAST GUARD 12 17 OCTOBER "DEFENSE IN AN AGE OF AUSTERITY" WITH FRENCH AIR FORCE GENERAL STEPHANE ABRIAL, NATO SUPREME ALLIED COMMANDER FOR TRANSFORMATION13 8 NOVEMBER GEORGE P SHULTZ LECTURE SERIES GENERAL CARTER F HAM, COMMANDER OF U S AFRICA COMMAND14 17 NOVEMBER LUNCH WITH ROBERT MUELLER, FBI DIRECTOR15 8 DECEMBER SPEAKER EVENT "THE PERSISTENT CYBER THREAT IN TODAY'S WORLD" WITH MICHAEL CHERTOFF16 14 DECEMBER MEET THE AUTHOR PROGRAM "RECONSTRUCTING AFGHANISTAN" WITH DANIEL GREEN, SOREF FELLOW, WASHINGTON INSTITUTE FOR NEAR EAST POLICY17 12 JANUARY MARINE DAY LUNCHEON GUEST SPEAKER FOR THIS EVENT WAS MAJOR GENERAL RONALD L BAILEY, COMMANDING GENERAL, 1ST MARINE DIVISION 18 24 JANUARY GUEST SPEAKER GENERAL DOUGLAS FRASER USAF19 16 FEBRUARY MEET THE AUTHOR PROGRAM SERGEANT MIKE DOWLING, "SERGEANT REX THE UNBREAKABLE BOND BETWEEN A MARINE AND HIS MILITARY WORKING DOG"20 27 FEBRUARY SPEAKER SERIES EVENT "SECURING AMERICA" WITH DAVID UNGER, FOREIGN AFFAIRS EDITORIAL WRITER FOR THE NEW YORK TIMES21 12 MARCH MEET THE AUTHOR PROGRAM "LET THERE BE LIGHT" WITH RACHEL KLEINFELD, PRESIDENT AND CEO, TRUMAN NATIONAL SECURITY PROJECT AND DREW SLOAN WITH THE CLIENT SOLUTIONS DEPARTMENT OF OPOWER22 10 APRIL EURO PACIFIC CAPITAL- PETER SCHIFF SF SEMINAR WITH PETER SCHIFF, ECONOMIST, AUTHOR, AND INVESTOR23 16 APRIL SPEAKER EVENT THE RT HON LORD PATTEN OF BARNES CH24 01 MAY MEET THE AUTHOR PROGRAM COMMANDER KIRK S LIPOLD, USN (RET), "FRONT BURNER - AL QAEDA'S ATTACK ON THE USS COLE" 25 07 MAY MEET THE AUTHOR PROGRAM DR JAMES WRIGHT, "THOSE WHO HAVE BORNE THE BATTLE "26 14 JUNE MEET THE AUTHOR PROGRAM PULITZER PRIZE WINNER DAVID SANGER, "CONFRONT AND CONCEAL OBAMA'S SECRET WARS AND SURPRISING USE OF AMERICAN POWER"27 19 JUNE MEET THE AUTHOR PROGRAM CRAIG SMITH, "COUNTING THE DAYS POWS, INTERNEES, AND STRAGGLERS OF WORLD WAR II IN THE PACIFICSIX"28 20 JUNE FEATURED SPEAKER FOR BRAIN AT WAR CONFERENCE GENERAL PETER W CHIARELLI, USA (RET), FORMER VICE CHIEF OF STAFF OF THE ARMY, CURRENTLY SERVING AS THE CHIEF EXECUTIVE OFFICER AT ONE MIND FOR RESEARCH29 \$67,500 AWARDED IN SCHOLARSHIPS30 THROUGHOUT THE YEAR, MMA PRESIDENT & CEO GAVE LECTURES AT MONTEREY NAVAL POST GRADUATE SCHOOL, STANFORD UNIVERSITY AND SINGULARITY UNIVERSITY AS WELL AS MULTIPLE ENGAGEMENTS WITH COMMUNITY AND CIVIC ORGANIZATIONS THROUGHOUT THE STATE NINE (9) EVENTS WERE TO HONOR THE MEN AND WOMEN CURRENTLY SERVING 1 8 SEPTEMBER VIN D'ELEGANCE 2011 FLEET WEEK FUNDRAISER2 13 SEPTEMBER "HEART OF A SOLDIER" OPERA3 4 OCTOBER "SUPPORTING VETERANS AND TAKING NATIONAL PRIORITIES LOCAL" WITH GUEST SPEAKERS MAJOR GENERAL MICHAEL MYATT, PAUL RIECKHOFF, AND ANA THOMPSON, AND GUEST MODERATOR JANE WHITFIELD4 11 FEBRUARY SWEETHEARTS FOR GOLD STARS CONCERT & DINNER-DANCES 16-18 FEBRUARY GOLD STAR PARENTS EVENTS- GUEST OF HONOR, GOLD STAR PARENTS, LT GEN JOHN AND MRS KELLY, USMC6 14 MARCH THE COMMANDERS JAZZ ENSEMBLE7 30 APRIL THE BEST OF THE BEST CABARET SPECIAL8 26 MAY ANNUAL MMA MEMORIAL SERVICE AND LUNCHEON GUEST SPEAKER, COL HARRY PETERSON, USMC (RET) MMA DIRECTOR EMERITUS9 MMA FINANCIAL COMMITMENT LIVING MEMORIAL PROJECT \$86,812SERVICES PROVIDED TO THE MEN AND WOMEN CURRENTLY SERVING INCLUDE PROVIDING HOTEL ACCOMMODATIONS AND MEALS AT A GREATLY REDUCED RATE, COMPLIMENTARY MEMBERSHIP IN THE ASSOCIATION AND THE MAILING OF CARE PACKAGES TO THE DEPLOYED MARINES AND SOLDIERS IN IRAQ AND AFGHANISTAN THE ASSOCIATION AWARDS SCHOLARSHIPS TO THE CHILDREN AND GRANDCHILDREN OF ITS MEMBERS AND TWICE ANNUALLY, THE ASSOCIATION BRINGS MILITARY MUSIC TO THE BAY AREA FOR CONCERTS OPEN TO THE PUBLIC

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)
THE MARINES' MEMORIAL ASSOCIATION SPONSORS AN ANNUAL GOLD STAR PARENTS EVENT FOR THE 7TH STRAIGHT YEAR, THE ASSOCIATION HAS HOSTED MORE THAN 300 PARENTS FOR TWO DAYS TO COMMEMORATE THE LOSS OF THEIR LOVED ONES IN OUR NATION'S WARS IN IRAQ AND AFGHANISTAN ATTENDEES SHARE PICTURES AND STORIES OF THEIR LOVED ONES, ATTEND A MEMORIAL SERVICE AND DEVELOP NETWORKS TO MAINTAIN CONTACT WITH EACH OTHER

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)
IN ADDITION TO EVENTS, THE FLAGSHIP OF THE ASSOCIATION, THE MARINES' MEMORIAL CLUB PROVIDED DRAMATICALLY REDUCED RATE HOTEL ROOMS TO CURRENTLY SERVING MEMBERS OF THE U S MILITARY FOR 9,036 ROOM NIGHTS, WHICH INCLUDED COMPLIMENTARY BREAKFAST, FITNESS CENTER ACCESS AND FREE INTERNET ACCESS IN OUR BUSINESS CENTER, A SUBSIDY OF \$580,282 IN ADDITION, WE PERMITTED CURRENTLY SERVING MILITARY TO BECOME MEMBERS WITHOUT MAKING TAX-DEDUCTIBLE DONATIONS TO THE ASSOCIATION

(Code) (Expenses \$ including grants of \$) (Revenue \$)
A THE ASSOCIATION PROVIDED SIXTEEN SCHOLARSHIPS TO MEMBERS OR DEPENDENTS OF MEMBERS TO ATTEND ACCREDITED COLLEGES AND UNIVERSITIES AS UNDERGRADUATES FIVE SCHOLARSHIPS OF \$5,000 WERE PROVIDED TO STUDENTS ENROLLED IN ENGINEERING OR SCIENCE DISCIPLINES TWO OF THE SCHOLARSHIPS OF \$10,000 AND NINE OF \$2,500 WERE PROVIDED FOR VARIOUS OTHER MAJORS IN ADDITION TO THESE SCHOLARSHIPS ADMINISTERED BY THE ASSOCIATION, THE MARINE CORPS SCHOLARSHIP ASSOCIATION ALSO AWARDS FOUR "COLONEL JACK BARNES SCHOLARSHIPS" BASED ON A GRANT COLONEL BARNES MADE TO THE ASSOCIATION THE ASSOCIATION TRANSFERRED THIS GRANT TO THE MARINE CORPS SCHOLARSHIP FOUNDATION IN 2002 THESE SCHOLARSHIPS ARE AWARDED TO MARINE MEMBERS OR DESERVING SONS AND DAUGHTERS OF MMA MEMBERS WHO ARE US MARINES, AND TO DESERVING SONS AND DAUGHTERS OF MEMBERS WHO HAVE SERVED AS US NAVY CORPSMEN WITH THE US MARINE CORPS THE SCHOLARSHIPS RANGE FROM \$1000 TO \$2500, DEPENDING ON THE NEED OF THE APPLICANT B THE ASSOCIATION PROVIDED A SUPPORT STRUCTURE FOR THE CALIFORNIA GOVERNOR'S TROOPS TO COLLEGE PROGRAM THE PROGRAM WAS INITIATED IN 2006 BY A FORMER MARINES' MEMORIAL BOARD CHAIRMAN TO ASSIST OUR VETERANS IN GAINING ADMISSION TO AND SUCCEEDING IN HIGHER EDUCATION IN CALIFORNIA'S COLLEGES AND UNIVERSITIES C THE ASSOCIATION ACTIVELY SUPPORTED YOUNG IRAQ AND AFGHANISTAN WAR VETERANS AS THEY TRANSITIONED BACK TO CIVILIAN STATUS BY ARRANGING FOR SKILLED LABOR TRAINING AND ADVOCATING FOR CHANGES TO THE DEPARTMENT OF LABOR TRANSITION ASSISTANCE PROGRAM (TAP) SO AS TO ASSIST THE VETERANS TO FIND MEANINGFUL JOBS LEADING TO SUCCESSFUL CAREERS D THE ASSOCIATION PUBLISHES A QUARTERLY ASSOCIATION MAGAZINE TITLED "CROSSROADS OF THE CORPS" TO PROVIDE SUMMARIES OF THE COMMEMORATIVE AND EDUCATIONAL PROGRAMS HELD AT THE CLUB TWENTY-SEVEN THOUSAND COPIES OF EACH QUARTERLY ISSUE ARE PROVIDED TO THE MEMBERS AND LOCAL COMMUNITY E THE ASSOCIATION ASSUMED RESPONSIBILITY FOR SAN FRANCISCO'S ANNUAL FLEET WEEK ACTIVITIES AT THE REQUEST OF THE MAYOR OF SAN FRANCISCO, SENATOR FEINSTEIN AND FORMER SECRETARY OF STATE GEORGE P SHULTZ A COMMITTEE OF VOLUNTEERS WAS RECRUITED TO MEET WEEKLY AT THE MARINES' MEMORIAL TO ORGANIZE ONE OF SAN FRANCISCO'S SIGNATURE MILITARY EVENTS

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/>	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> <input checked="" type="checkbox"/>		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i> <input checked="" type="checkbox"/>		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/>	Yes	
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> <input checked="" type="checkbox"/>		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/>		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> <input checked="" type="checkbox"/>	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> <input checked="" type="checkbox"/>		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> <input checked="" type="checkbox"/>		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> <input checked="" type="checkbox"/>		No
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/>	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/>	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> <input checked="" type="checkbox"/>		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Part I</i>		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? <i>If "Yes," complete Schedule F, Part II and IV</i>		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? <i>If "Yes," complete Schedule F, Part III and IV</i>		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		No
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements		

Part IV Checklist of Required Schedules *(continued)*

<p>21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i></p>	<p>21</p>	<p></p>	<p>No</p>
<p>22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i></p>	<p>22</p>	<p>Yes</p>	<p></p>
<p>23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i></p>	<p>23</p>	<p>Yes</p>	<p></p>
<p>24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i></p>	<p>24a</p>	<p></p>	<p>No</p>
<p>b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</p>	<p>24b</p>	<p></p>	<p></p>
<p>c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</p>	<p>24c</p>	<p></p>	<p></p>
<p>d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</p>	<p>24d</p>	<p></p>	<p></p>
<p>25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i></p>	<p>25a</p>	<p></p>	<p></p>
<p>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? <i>If "Yes," complete Schedule L, Part I</i></p>	<p>25b</p>	<p></p>	<p></p>
<p>26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i></p>	<p>26</p>	<p></p>	<p>No</p>
<p>27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i></p>	<p>27</p>	<p></p>	<p>No</p>
<p>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)</p>			
<p>a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i></p>	<p>28a</p>	<p></p>	<p>No</p>
<p>b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i></p>	<p>28b</p>	<p></p>	<p>No</p>
<p>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 owner? <i>If "Yes," complete Schedule L, Part IV</i></p>	<p>28c</p>	<p></p>	<p>No</p>
<p>29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i></p>	<p>29</p>	<p></p>	<p>No</p>
<p>30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i></p>	<p>30</p>	<p></p>	<p>No</p>
<p>31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i></p>	<p>31</p>	<p></p>	<p>No</p>
<p>32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i></p>	<p>32</p>	<p></p>	<p>No</p>
<p>33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i></p>	<p>33</p>	<p></p>	<p>No</p>
<p>34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i></p>	<p>34</p>	<p></p>	<p>No</p>
<p>35a Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?</p>	<p>35a</p>	<p></p>	<p>No</p>
<p>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)? <i>If "Yes," complete Schedule R, Part V, line 2</i></p>	<p>35b</p>	<p></p>	<p>No</p>
<p>36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i></p>	<p>36</p>	<p></p>	<p></p>
<p>37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i></p>	<p>37</p>	<p></p>	<p>No</p>
<p>38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?</p>	<p>38</p>	<p>Yes</p>	<p></p>
<p>Note. All Form 990 filers are required to complete Schedule O</p>			

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No response. Rows include questions 1a through 14b regarding Form 1096, W-2G forms, employee reporting, foreign accounts, and charitable trusts.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
10b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?		No
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	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 arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the States with which a copy of this Form 990 is required to be filed CA
- 18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 RUBY WU
 609 SUTTER ST
 SAN FRANCISCO, CA 94102
 (415) 673-6672

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

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

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

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

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) EDWARD LEBARON DIRECTOR	2.00	X						0	0	0
(2) SGT MAJ FRANK PULLEY USMC (RET) DIRECTOR	2.00	X						0	0	0
(3) LT GEN ROBERT JOHNSTON USMC (RET) DIRECTOR	2.00	X						0	0	0
(4) ERIC SCHROEDER DIRECTOR	2.00	X						0	0	0
(5) BG FRANK PARTLOW JR USA (RET) DIRECTOR	2.00	X						0	0	0
(6) GUNNAR COUNSELMAN DIRECTOR	2.00	X						0	0	0
(7) CAPT L IRV WILLIAMS USN (RET) DIRECTOR	2.00	X						0	0	0
(8) EATON DUNKELBERGER DIRECTOR	2.00	X						0	0	0
(9) J BARRIE GRAHAM DIRECTOR	2.00	X						0	0	0
(10) JON PAULSON DIRECTOR	2.00	X						0	0	0
(11) COL WILLIAM PEACOCK USMCR (RET) DIRECTOR	2.00	X						0	0	0
(12) LEONARD E TORRES DIRECTOR	2.00	X						0	0	0
(13) COL KENNETH JORDAN USMC (RET) DIRECTOR EMERITUS	2.00	X						0	0	0
(14) COL BUCKY PETERSON USMC (RET) DIRECTOR EMERITUS	2.00	X						0	0	0
(15) STEVE SNYDER CHAIRMAN	2.00			X				0	0	0
(16) GEN JOE HOAR USMC RET VICE CHAIRMAN	2.00			X				0	0	0
(17) IAN THOMSON SECRETARY	2.00			X				0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MAJ GEN J MICHAEL MYATT USMC (RET) PRESIDENT & CEO	40 00			X				316,826	0	14,895
(19) MICHAEL ALLEN GENERAL MANAGER	40 00			X				181,398	0	12,680
(20) RUBY WU CFO	40 00			X				120,160	0	11,443
(21) PAUL LOZITO EXECUTIVE CHEF	40 00					X		111,648	0	17,512
(22) MARYANN HATLAN DIRECTOR OF FOOD & BEVERAGE	40 00					X		111,618	0	10,518
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								841,650	0	67,048

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns 1a					
	b	Membership dues 1b	2,432,136				
	c	Fundraising events 1c					
	d	Related organizations 1d					
	e	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	47,533				
	g	Noncash contributions included in lines 1a-1f \$ _____					
	h	Total. Add lines 1a-1f ▶		2,479,669			
Program Service Revenue			Business Code				
	2a	ROOMS _____	721110	4,978,796	2,687,015	2,291,781	
	b	THEATRE _____	512131	677,425	365,600	311,825	
	c	PARKING _____	721110	528,376	285,160	243,216	
	d	_____					
	e	_____					
	f	All other program service revenue					
g	Total. Add lines 2a-2f ▶		6,184,597				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) ▶		48,252		48,252	
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties ▶					
	6a	(i) Real		(ii) Personal			
			221,758				
		b	Less rental expenses	86,490			
		c	Rental income or (loss)	135,268			
	d	Net rental income or (loss) ▶		135,268		135,268	
	7a	(i) Securities		(ii) Other			
		b	Less cost or other basis and sales expenses				
		c	Gain or (loss)				
	d	Net gain or (loss) ▶					
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18					
		a	164,979				
b		Less direct expenses b	409,427				
c	Net income or (loss) from fundraising events . . ▶		-244,448		-244,448		
9a	Gross income from gaming activities See Part IV, line 19						
	a						
	b	Less direct expenses b					
c	Net income or (loss) from gaming activities . . ▶						
10a	Gross sales of inventory, less returns and allowances						
	a	4,299,260					
	b	Less cost of goods sold b	1,352,415				
c	Net income or (loss) from sales of inventory . . ▶		2,946,845	1,079,944	1,866,901		
Miscellaneous Revenue		Business Code					
11a	BANQUET REVENUE _____	531120	187,102	55,196	131,906		
b	MISCELLANEOUS _____	721110	2,470	1,334	1,136		
c	_____						
d	All other revenue						
e	Total. Add lines 11a-11d ▶		189,572				
12	Total revenue. See Instructions ▶		11,739,755	4,474,249	4,846,765	-60,928	

Part IX Statement of Functional Expenses

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 response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 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	67,500			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	657,401			
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	4,544,576			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	1,142,895			
10	Payroll taxes	633,393			
11	Fees for services (non-employees)				
a	Management				
b	Legal				
c	Accounting	68,498			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	94,218			
12	Advertising and promotion	465,195			
13	Office expenses	12,279			
14	Information technology	290,998			
15	Royalties				
16	Occupancy	642,313			
17	Travel	4,549			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	19,861			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,102,042			
23	Insurance	172,950			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	PARKING EXPENSE	448,921			
b	BANK & CREDIT CARD FEES	371,326			
c	MISCELLANEOUS	267,834			
d	REPAIR & MAINTENANCE	208,855			
e					
f	All other expenses	1,031,331			
25	Total functional expenses. Add lines 1 through 24f	12,246,935			
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash—non-interest-bearing	1,376,270	1	1,672,564
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	309,215	4	274,930
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use	179,446	8	199,629
	9 Prepaid expenses and deferred charges	145,470	9	167,027
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	23,342,216		
	b Less accumulated depreciation	15,142,299	10c	8,199,917
	11 Investments—publicly traded securities	1,804,361	11	1,885,882
	12 Investments—other securities See Part IV, line 11	461,062	12	429,125
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	39,919	15	41,796
16 Total assets. Add lines 1 through 15 (must equal line 34)	13,098,519	16	12,870,870	
Liabilities	17 Accounts payable and accrued expenses	1,176,565	17	1,315,227
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		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	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	382,243	25	502,913
	26 Total liabilities. Add lines 17 through 25	1,558,808	26	1,818,140
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	11,003,920	27	10,451,347
	28 Temporarily restricted net assets	535,791	28	601,383
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	11,539,711	33	11,052,730	
34 Total liabilities and net assets/fund balances	13,098,519	34	12,870,870	

Part 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	11,739,755
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,246,935
3	Revenue less expenses Subtract line 2 from line 1	3	-507,180
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	11,539,711
5	Other changes in net assets or fund balances (explain in Schedule O)	5	20,199
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	11,052,730

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

Additional Data

Software ID:

Software Version:

EIN: 94-1055967

Name: MARINES' MEMORIAL ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code) (Expenses \$ including grants of \$) (Revenue \$)

A THE ASSOCIATION PROVIDED SIXTEEN SCHOLARSHIPS TO MEMBERS OR DEPENDENTS OF MEMBERS TO ATTEND ACCREDITED COLLEGES AND UNIVERSITIES AS UNDERGRADUATES FIVE SCHOLARSHIPS OF \$5,000 WERE PROVIDED TO STUDENTS ENROLLED IN ENGINEERING OR SCIENCE DISCIPLINES TWO OF THE SCHOLARSHIPS OF \$10,000 AND NINE OF \$2,500 WERE PROVIDED FOR VARIOUS OTHER MAJORS IN ADDITION TO THESE SCHOLARSHIPS ADMINISTERED BY THE ASSOCIATION, THE MARINE CORPS SCHOLARSHIP ASSOCIATION ALSO AWARDS FOUR "COLONEL JACK BARNES SCHOLARSHIPS" BASED ON A GRANT COLONEL BARNES MADE TO THE ASSOCIATION THE ASSOCIATION TRANSFERRED THIS GRANT TO THE MARINE CORPS SCHOLARSHIP FOUNDATION IN 2002 THESE SCHOLARSHIPS ARE AWARDED TO MARINE MEMBERS OR DESERVING SONS AND DAUGHTERS OF MMA MEMBERS WHO ARE US MARINES, AND TO DESERVING SONS AND DAUGHTERS OF MEMBERS WHO HAVE SERVED AS US NAVY CORPSMEN WITH THE US MARINE CORPS THE SCHOLARSHIPS RANGE FROM \$1000 TO \$2500, DEPENDING ON THE NEED OF THE APPLICANT B THE ASSOCIATION PROVIDED A SUPPORT STRUCTURE FOR THE CALIFORNIA GOVERNOR'S TROOPS TO COLLEGE PROGRAM THE PROGRAM WAS INITIATED IN 2006 BY A FORMER MARINES' MEMORIAL BOARD CHAIRMAN TO ASSIST OUR VETERANS IN GAINING ADMISSION TO AND SUCCEEDING IN HIGHER EDUCATION IN CALIFORNIA'S COLLEGES AND UNIVERSITIES C THE ASSOCIATION ACTIVELY SUPPORTED YOUNG IRAQ AND AFGHANISTAN WAR VETERANS AS THEY TRANSITIONED BACK TO CIVILIAN STATUS BY ARRANGING FOR SKILLED LABOR TRAINING AND ADVOCATING FOR CHANGES TO THE DEPARTMENT OF LABOR TRANSITION ASSISTANCE PROGRAM (TAP) SO AS TO ASSIST THE VETERANS TO FIND MEANINGFUL JOBS LEADING TO SUCCESSFUL CAREERS D THE ASSOCIATION PUBLISHES A QUARTERLY ASSOCIATION MAGAZINE TITLED "CROSSROADS OF THE CORPS" TO PROVIDE SUMMARIES OF THE COMMEMORATIVE AND EDUCATIONAL PROGRAMS HELD AT THE CLUB TWENTY-SEVEN THOUSAND COPIES OF EACH QUARTERLY ISSUE ARE PROVIDED TO THE MEMBERS AND LOCAL COMMUNITY E THE ASSOCIATION ASSUMED RESPONSIBILITY FOR SAN FRANCISCO'S ANNUAL FLEET WEEK ACTIVITIES AT THE REQUEST OF THE MAYOR OF SAN FRANCISCO, SENATOR FEINSTEIN AND FORMER SECRETARY OF STATE GEORGE P SHULTZ A COMMITTEE OF VOLUNTEERS WAS RECRUITED TO MEET WEEKLY AT THE MARINES' MEMORIAL TO ORGANIZE ONE OF SAN FRANCISCO'S SIGNATURE MILITARY EVENTS

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization MARINES' MEMORIAL ASSOCIATION

Employer identification number 94-1055967

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.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 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?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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.

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically important land area, Preservation of a certified historic structure.

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 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
2 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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c Beginning balance	
1d Additions during the year	
1e Distributions during the year	
1f Ending balance	

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance					
b Contributions					
c Investment earnings or losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	
(ii) related organizations	3a(ii)	
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	120,000			120,000
b Buildings	18,488,807		11,945,068	6,543,739
c Leasehold improvements				
d Equipment	4,733,409		3,197,231	1,536,178
e Other				
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				8,199,917

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
DEPOSITS	425,775
ACCRUED SEVERANCE PAY	77,138
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	502,913

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	11,739,755
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	12,246,935
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-507,180
4	Net unrealized gains (losses) on investments	4	20,199
5	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 - 8	9	20,199
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-486,981

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	13,207,115
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	20,199
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	127,205
e	Add lines 2a through 2d	2e	147,404
3	Subtract line 2e from line 1	3	13,059,711
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-1,319,956
c	Add lines 4a and 4b	4c	-1,319,956
5	Total Revenue Add lines 3 and 4c . (This should equal Form 990, Part I, line 12)	5	11,739,755

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	13,694,096
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	1,848,332
e	Add lines 2a through 2d	2e	1,848,332
3	Subtract line 2e from line 1	3	11,845,764
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	401,171
c	Add lines 4a and 4b	4c	401,171
5	Total expenses Add lines 3 and 4c . (This should equal Form 990, Part I, line 18)	5	12,246,935

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
	PART III, LINE 4	IN PRIOR YEARS, THE ORGANIZATION HAS RECEIVED VARIOUS PAINTINGS AND ARTIFACTS WHICH ARE DISPLAYED THROUGHOUT THE BUILDING AND ARE USED AS A PART OF THE RESTAURANT'S DECOR
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ORGANIZATION ADOPTED ASC 740 (FIN 48) FOR THE YEAR ENDED JUNE 30, 2010. THE TAX POSITIONS OF THE ORGANIZATION WERE EVALUATED FOR UNCERTAINTY AND MANAGEMENT DETERMINED THERE WERE NO UNCERTAIN TAX BENEFITS
PART XII, LINE 2D - OTHER ADJUSTMENTS		PARKING INCOME - NET 127,205
PART XII, LINE 4B - OTHER ADJUSTMENTS		PARKING REVENUES - GROSS 528,376 RENT EXPENSE - 86,490 FUNDRAISING EXPENSE -409,427 COST OF GOODS SOLD -1,352,415
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENT EXPENSE 86,490 FUNDRAISING EXPENSE 409,427 COST OF GOODS SOLD 1,352,415
PART XIII, LINE 4B - OTHER ADJUSTMENTS		PARKING EXPENSE 401,171

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

2011

Open to Public Inspection

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.

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

Department of the Treasury Internal Revenue Service

Name of the organization MARINES' MEMORIAL ASSOCIATION

Employer identification number

94-1055967

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
b Internet and e-mail solicitations
c Phone solicitations
d In-person solicitations
e Solicitation of non-government grants
f Solicitation of government grants
g Special fundraising events

2a Did the organization have a written or oral agreement with any individual... Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements...

Table with 6 columns: (i) Name and address of individual or entity (fundraiser), (ii) Activity, (iii) Did fundraiser have custody or control of contributions?, (iv) Gross receipts from activity, (v) Amount paid to (or retained by) fundraiser listed in col (i), (vi) Amount paid to (or retained by) organization.

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other Events	(d) Total Events
		VARIOUS SOCIAL (event type)	(event type)	(total number)	(Add col (a) through col (c))
Revenue	1 Gross receipts	164,979			164,979
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	164,979			164,979
Direct Expenses	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	409,427			409,427
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(409,427)
11 Net income summary Combine lines 3 and 10 in column (d) ▶				-244,448	

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming
					(Add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7 Direct expense summary Add lines 2 through 5 in column (d) ▶				()	
8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶					

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? Yes No

b If "No," Explain _____

.....

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," Explain _____

.....

- 11** Does the organization operate gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	
b An outside facility	13b	

14 Provide 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? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____

c If "Yes," enter name and address

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- 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? Yes No
- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
------------	-----------------	-------------

Schedule I (Form 990)

OMB No 1545-0047

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

2011

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization: MARINES' MEMORIAL ASSOCIATION

Employer identification number: 94-1055967

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II 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.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC Code section if applicable, (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of non-cash assistance, (h) Purpose of grant or assistance.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.
3 Enter total number of other organizations listed in the line 1 table.

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
(1) COLLEGE SCHOLARSHIPS	16	67,500		FMV	

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 ONLY MEMBERS AND THE CHILDREN OF MEMBERS AND/OR GRANDCHILDREN OF MEMBERS ARE ELIGIBLE TO APPLY FOR THE COLLEGE SCHOLARSHIP THE SCHOLARSHIP WINNERS ARE SELECTED BY THE BOARD OF DIRECTORS FROM THE LIST OF APPLICANTS THE SCHOLARSHIP CHECKS ARE PAID DIRECTLY TO THE SCHOOLS THAT THE APPLICANTS ARE ATTENDING THE SCHOLARSHIP WINNERS ARE EVALUATED BASED ON THEIR PAST ACHIEVEMENTS SO NO PROGRESS REPORT OR OTHER MONITORING OF THE STUDENTS ARE REQUIRED

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization
MARINES' MEMORIAL ASSOCIATION

Employer identification number

94-1055967

Part I Questions Regarding Compensation

- 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
- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e g , maid, chauffeur, chef) |

b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

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?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.

5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of

a The organization?

b Any related organization?

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 contingent on the net earnings of

a The organization?

b Any related organization?

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 not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

	Yes	No
1b		
2		
4a		No
4b		No
4c		No
5a		
5b		
6a		
6b		
7		
8		
9		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MAJ GEN J MICHAEL MYATT USMC	(i)	261,826	55,000	0	9,390	5,505	331,721	0
	(ii)	0	0	0	0	0	0	0
(2) MICHAEL ALLEN	(i)	154,648	26,750	0	4,205	8,475	194,078	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
------------	------------------	-------------

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 to provide any additional information.**
▶ **Attach to Form 990 or 990-EZ.**

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization
MARINES' MEMORIAL ASSOCIATION

Employer identification number

94-1055967

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE TAX RETURN IS REVIEWED BY THE CHIEF FINANCIAL OFFICER BEFORE BEING SUBMITTED TO THE CHIEF EXECUTIVE OFFICER FOR SIGNATURE. BOTH THE CFO AND CEO ARE ASSOCIATED WITH THE BOARD OF DIRECTORS
	FORM 990, PART VI, SECTION B, LINE 12C	MANAGEMENT MONITORS EMPLOYEE COMPLIANCE. THE BOARD OF DIRECTORS IS REQUIRED TO READ AND SIGN A CERTIFICATION OF UNDERSTANDING ANNUALLY
	FORM 990, PART VI, SECTION B, LINE 15	THE HUMAN RESOURCES DIRECTOR IS RESPONSIBLE FOR MAKING RECOMMENDATIONS FOR EVALUATING ALL EMPLOYEES. THE COMPENSATION OF OFFICERS, DIRECTORS, AND KEY EMPLOYEES IS COMPARED WITH EXECUTIVE COMPENSATION OF SIMILAR ORGANIZATIONS
	FORM 990, PART VI, SECTION C, LINE 19	THE PUBLIC CAN REQUEST AND RECEIVE COPIES OF THE ARTICLES OF INCORPORATION, THE BY-LAWS, THE CONFLICT OF INTEREST POLICY, AND THE AUDITED FINANCIAL STATEMENTS
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 20,199
	FORM 990, PART XII, LINE 2C AUDIT OVERSIGHT AND SELECTION PROCESS	THE ORGANIZATION DID NOT CHANGE ITS AUDIT OVERSIGHT OR SELECTION PROCESSES