

Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2009**Open to Public Inspection****A** For the 2009 calendar year, or tax year beginning , 2009, and ending , 20**B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization**Television, Internet & Video Association of DC, Inc., AKA TIVA-DC**

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite

906 D Street, NE

City or town, state or country, and ZIP + 4

Washington, DC 20002-6128**D** Employer identification number**11-3814899****E** Telephone number**410-675-0591****F** Group Exemption

Number ►

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method: ☒ Cash ☐ Accrual
Other (specify) ►**I** Website: ► www.tivadc.org**J** Tax-exempt status (check only one) — ☒ 501(c) (**3**) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**K** Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.**L** Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$**Part I** **Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	1,440
	2	Program service revenue including government fees and contracts	2	43,096
	3	Membership dues and assessments	3	25,582
	4	Investment income	4	0
	5a	Gross amount from sale of assets other than inventory	5a	0
	b	Less: cost or other basis and sales expenses	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a	Gross revenue (not including \$ 1,440 of contributions reported on line 1)	6a	1,675
	b	Less: direct expenses other than fundraising expenses	6b	5,119
c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	-3,444	
7a	Gross sales of inventory, less returns and allowances	7a	0	
b	Less: cost of goods sold	7b	0	
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8	Other revenue (describe ► Newsletter advertising & miscellaneous income)	8	7,085	
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	73,760	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	0
	11	Benefits paid to or for members	11	17,246
	12	Salaries, other compensation, and employee benefits	12	0
	13	Professional fees and other payments to independent contractors	13	13,748
	14	Occupancy, rent, utilities, and maintenance	14	0
	15	Printing, publications, postage, and shipping	15	5,473
	16	Other expenses (describe ► program service expense, credit card costs, insurance, taxes, etc)	16	44,116
	17	Total expenses. Add lines 10 through 16	17	80,582
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-6,822
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	26,270
	20	Other changes in net assets or fund balances (attach explanation)	20	0
	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	19,447

Part II **Balance Sheets.** If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	25,201	18,491
23 Land and buildings	0	0
24 Other assets (describe ► Accounts receivable)	1,069	1,069
25 Total assets	26,270	19,560
26 Total liabilities (describe ► Sales tax payable)	0	112
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	26,270	19,447

Part III Statement of Program Service Accomplishments (See the instructions for Part III.)What is the organization's primary exempt purpose? **Educational**

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts; optional for others.)

28	Educational programs & events: these are designed for working professionals & those interested in entering the field. TIVA-DC held 16 such events in 2009. Each was attended by 30-60 people. Most events are video-taped and are available on the web site afterward. Costs are primarily refreshments.		
(Grants \$	0) If this amount includes foreign grants, check here	<input type="checkbox"/>	
28a			3,230
29	Annual Peer Awards & Peer Promise Competition: these are designed to recognize quality media productions & those who contribute to them, as well as to encourage students & pro bono work. TIVA-DC held 1 competition in 2009 with ~200 entries, including 4 Peer Promise, 6 pro bono, and 8 student entries.		
(Grants \$	0) If this amount includes foreign grants, check here	<input type="checkbox"/>	
29a			32,605
30	Membership services are designed to educate, encourage networking & sharing opportunities, & provide a forum for seeking help & advice. They include a monthly newsletter, informational web site, & iForum list serve. At the end of 2009, TIVA had ~396 members.		
(Grants \$	0) If this amount includes foreign grants, check here	<input type="checkbox"/>	
30a			17,246
31	Other program services (attach schedule)		
(Grants \$	0) If this amount includes foreign grants, check here	<input type="checkbox"/>	
31a			0
32	Total program service expenses (add lines 28a through 31a)	32	44,116

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-.)	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
Tim Flaherty P.O. Box 284, Solomons, MD 20688	President; 5-15	-0-	n/a	n/a
Carl Neubecker 12803 Kettering Drive Oak Hill, VA 20171	Vice President; 3-5	-0-	n/a	n/a
Zohar Rom 2807-E South Woodrow St. Arlington, VA 22206	Secretary; 3-5	-0-	n/a	n/a
Jacqueline Greff 1607 Lancaster Street Baltimore, MD 21231	Treasurer; 3-5	-0-	n/a	n/a
Stephen Ames uncertain	Membership Chair; 3-5	-0-	n/a	n/a
Leo Bauman 12725 Robindale Dr. Rockville MD 20853	Board Member; 3-5	-0-	n/a	n/a
David Geller 3505 Country Hill Lane Fairfax, VA 22030	Board Member; 3-5	-0-	n/a	n/a
Kraig Greff 1607 Lancaster Street Baltimore, MD 21231	Board Member; 3-5	-0-	n/a	n/a
J.D. Mack 7801 Norfolk Avenue, T-2 Bethesda, MD 20814	Board Member; 3-5	-0-	n/a	n/a
Gale Nemec 3812 Elbert Ave. Alexandria VA 22305	Publications Chair; 3-5	-0-	n/a	n/a
Jim Pennington 3020 Mt. Carmel Cemetery Rd. Brookeville, MD 20833	Programming Chair; 3-5	-0-	n/a	n/a
Anne Schwab 906 D Street N.E. Washington, DC 20002	Volunteer Chair; 3-10	-0-	n/a	n/a
Valerie Yoscak Video Labs Corp. 15237 Display Ct Rockville, MD 2085-	Development Chair; 3-5	-0-	n/a	n/a
Patty Zubeck 2606 S. Hayes St. Arlington, VA 22202	Educator/Outreach; 3-5	-0-	n/a	n/a
David Sibila 701 Clarkson Dr. Springfield VA 22150	Peer Awards Chair; 3-10	-0-	n/a	n/a

Part V Other Information (Note the statement requirements in the instructions for Part V.)

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33	✓
34 Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	34	✓
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a	✓
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a 0		
b Did the organization file Form 1120-POL for this year?	37b	✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?	38a	✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0		
b Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it 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	40b	✓
c Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0		
d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ 0		
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.	40e	✓
41 List the states with which a copy of this return is filed. ▶ District of Columbia		
42a The organization's books are in care of ▶ Terry L. Jones, CPA, LLC Telephone no. ▶ 703-601-7050 Located at ▶ 5977 Jan Mar. Dr., Falls Church, VA ZIP + 4 ▶ 22041-2414		
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	✓
If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c	✓
If "Yes," enter the name of the foreign country: ▶		
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		
44 Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44	✓
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	✓

Part VI **Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

	Yes	No
46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	✓
47 Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	47	✓
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b If "Yes," was the related organization a section 527 organization?	49b	✓

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				


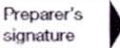
f Total number of other employees paid over \$100,000 ▶

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ▶

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 officer) is based on all information of which preparer has any knowledge.

Sign Here	 Signature of officer		4/30/10 Date
	Jacqueline Greff, Treasurer Type or print name and title		
Paid Preparer's Use Only	Preparer's signature 	Date 	Check if self-employed <input type="checkbox"/>
	Firm's name (or yours if self-employed), address, and ZIP + 4 	EIN 	Preparer's identifying number (See instructions) Phone no.

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No