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Amended Return

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning **JULY 01**, 2007, and ending **JUNE 30**, 2008

- B** Check if applicable:
- ☐ Address change
 - ☐ Name change
 - ☐ Initial return
 - ☐ Termination
 - ☒ Amended return
 - ☐ Application pending

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

C Name of organization
SCHOOL SCIENCE & MATHEMATICS ASSOC.

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

COLLEGE OF ED, OSU, WILLARD STE 245

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

STILLWATER OK 74078

D Employer identification number
36-6084546

E Telephone number
(405) 744-7396

F Acctg method. ☐ Cash ☒ Accrual
☐ Other (specify) _____

G Website: **WWW.SSMA.ORG**

J Organization type (check only one) ☒ 501(c)(3) (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

H & I are not applicable to sec. 527 organizations

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

H(b) If Yes, enter number of affiliates **2**

H(c) Are all affiliates included? (If No, attach a list. See instructions.) ☐ Yes ☒ No

H(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Group Exemption Number _____

M Check ☒ if organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12 **170,604**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

1 Contributions, gifts, grants, and similar amounts received:				
a Contributions to donor advised funds	1a			
b Direct public support (not included on line 1a)	1b			
c Indirect public support (not included on line 1a)	1c			
d Government contributions (grants) (not included on line 1a)	1d			
e Total (add lines 1a through 1d) (cash \$ 0 Noncash \$ 0)	1e			0
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2			
3 Membership dues and assessments	3			10,276
4 Interest on savings and temporary cash investments	4			7,341
5 Dividends and interest from securities	5			3,308
6a Gross rents	6a			
b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a	6c			
7 Other investment income (describe SEE ATTACHMENT #1)	7			1,437
8a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other		
b Less: cost or other basis & sales expenses	8a	8b		
c Gain or (loss) (attach schedule)	8c			
d Net gain or (loss). Combine line 8c, columns (A) and (B)	8d			
9 Special events and activities (attach schedule). If any amount is from gaming, check here ☐				
a Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a			
b Less: direct expenses other than fundraising expenses	9b			
c Net income or (loss) from special events. Subtract line 9b from line 9a	9c			
10a Gross sales of inventory, less returns and allowances	10a			
b Less: cost of goods sold	10b			
c Gross profit or (loss) from sales of inventory (attach schedule) Subtract line 10b from line 10a	10c			
11 Other revenue (from Part VII, line 103)	11			148,242
12 Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12			170,604
13 Program services (from line 44, column (B))	13			108,169
14 Management and general (from line 44, column (C))	14			57,419
15 Fundraising (from line 44, column (D))	15			
16 Payments to affiliates (attach schedule)	16			
17 Total expenses. Add lines 16 and 44, column (A)	17			165,588
18 Excess or (deficit) for the year. Subtract line 17 from line 12	18			5,016
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19			319,524
20 Other changes in net assets or fund balances (attach explanation) #2	20			52,893
21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21			377,433

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2007)



Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising	
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, ck. here ☐	22a				
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, ck. here ☐	22b				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule) . .	24				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A.	25a				
b	Compensation of former officers, directors, key employees, etc. listed in Part V-B.	25b				
c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	25c				
26	Salaries and wages of employees not included on lines 25a, b, and c	26				
27	Pension plan contributions not included on lines 25a, b, and c	27				
28	Employee benefits not included on lines 25a - 27. . .	28				
29	Payroll taxes	29				
30	Professional fundraising fees	30				
31	Accounting fees	31	4,950	2,475	2,475	
32	Legal fees	32				
33	Supplies	33				
34	Telephone	34				
35	Postage and shipping	35	2,147	1,073	1,074	
36	Occupancy	36				
37	Equipment rental and maintenance	37				
38	Printing and publications	38	1,455	1,455		
39	Travel	39	20,431	20,431		
40	Conferences, conventions, and meetings	40	21,190	21,190		
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule) . . .	42	260	130	130	
43	Other expenses not covered above (itemize):					
a	SEE ATTACHMENT #3	43a	115,155	61,415	53,740	
b		43b				
c		43c				
d		43d				
e		43e				
f		43f				
g		43g				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	44	165,588	108,169	57,419	0

Joint Costs. Check ☐ if you are following SOP 98-2.Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? . . ☐ Yes ☒ No

If "Yes," enter (i) aggregate amount of these joint costs \$ _____; (ii) amount allocated to Program services \$ _____;

(iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE ATTACHMENT #4		Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)		
a	SEE ATTACHMENT #5	
	(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	108,169
b		
	(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
c		
	(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
d		
	(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
e	Other program services (attach schedule)	
	(Grants and allocations \$) If this amount includes foreign grants, check here ► ☐	
f	Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	108,169

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year
A S S E T S	45 Cash -- non-interest-bearing	273,075	45	25,886
	46 Savings and temporary cash investments	46,581	46	231,168
	47a Accounts receivable	47a		
	b Less: allowance for doubtful accounts	47b	47c	
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges		53	
	54a Investments -- publicly-traded securities	☐ Cost ☐ FMV	54a	
	b Investments -- other securities (attach schedule)	☐ Cost ☐ FMV	54b	
	55a Investments -- land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
	56 Investments -- other (attach schedule)	#6	56	119,338
	57a Land, buildings, and equipment basis: #7	57a 1,301		
	b Less: accumulated depreciation (attach schedule)	57b 260	57c	1,041
58 Other assets, including program-related investments (describe ►		58		
59 Total assets (must equal line 74). Add lines 45 through 58	319,656	59	377,433	
L I A B I L I T I E S	60 Accounts payable and accrued expenses	132	60	
	61 Grants payable		61	
	62 Deferred revenue		62	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ►		65	
	66 Total liabilities. Add lines 60 through 65	132	66	0
N E T A S S E T S	Organizations that follow SFAS 117, check here ☐ and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	319,524	67	377,433
	68 Temporarily restricted		68	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	319,524	73	377,433
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73	319,656	74	377,433

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements	a	170,604
b	Amounts included on line a but not on Part I, line 12:		
1	Net unrealized gains on investments	b1	
2	Donated services and use of facilities	b2	
3	Recoveries of prior year grants	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	170,604
d	Amounts included on Part I, line 12, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total revenue (Part I, line 12). Add lines c and d	e	170,604

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements	a	165,588
b	Amounts included on line a but not on Part I, line 17:		
1	Donated services and use of facilities	b1	
2	Prior year adjustments reported on Part I, line 20	b2	
3	Losses reported on Part I, line 20	b3	
4	Other (specify):	b4	
	Add lines b1 through b4	b	
c	Subtract line b from line a	c	165,588
d	Amounts included on Part I, line 17, but not on line a:		
1	Investment expenses not included on Part I, line 6b	d1	
2	Other (specify):	d2	
	Add lines d1 and d2	d	
e	Total expenses (Part I, line 17). Add lines c and d	e	165,588

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(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 plans	(E) Expense account and other allowances
SEE ATTACHMENT #8				

Part VI Other Information (continued)		Yes	No
82a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b	If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b N/A		
83a	Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b	Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a	Did the organization solicit any contributions or gifts that were not tax deductible?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		X
85a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?		X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		X
c	Dues, assessments, and similar amounts from members 85c N/A		
d	Section 162(e) lobbying and political expenditures 85d N/A		
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A		
f	Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A		
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		X
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		X
86	501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A		
b	Gross receipts, included on line 12, for public use of club facilities 86b N/A		
87	501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a N/A		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A		
88a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX.		X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI.		X
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ N/A		
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶ N/A		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?		X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?		X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
90a	List the states with which a copy of this return is filed ▶ OK		
b	Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 90b N/A		
91a	The books are in care of ▶ SEE ATTACHMENT #9 Telephone no ▶ Located at ▶ ZIP + 4 ▶		
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)?	Yes	No
	If "Yes," enter the name of the foreign country ▶	91b	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)		Yes	No
c At any time during the calendar year, did the organization maintain an office outside of the United States?		91c	X
If "Yes," enter the name of the foreign country ▶			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 -- Check here		☐	
and enter the amount of tax-exempt interest received or accrued during the tax year		92	

Part VII Analysis of Income-Producing Activities (See the instructions)					
	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Excl code	(D) Amount	
93 Program service revenue:					
a					
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees & contracts from government agencies					
94 Membership dues and assessments					10,276
95 Interest on savings and temporary cash investments					7,341
96 Dividends and interest from securities					3,308
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property ..					
99 Other investment income					1,437
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events ...					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b SEE ATTACHMENT #10					148,242
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E)) ...		0		0	170,604
105 Total (add line 104, columns (B), (D), and (E))					170,604

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions)	
Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
1	SEE ATTACHMENT #11

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)				
(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership int	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)	
(a) Did organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	Yes ☐ No ☒
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	Yes ☐ No ☒

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No
N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes No
N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
	Totals			

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes No
N/A

Please Sign Here 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.

Signature of officer: Julie Thomas Date: 11/26/2010

Type or print name and title: Julie Thomas

Paid Preparer's Use Only

Preparer's signature: Megan Stone Date: 1-11-10 Check if self-employed: ☐

Firm's name (or yours if self-employed), address, and ZIP + 4: DUGGER & CO. CPAS PC
PO BOX 1713
STILLWATER OK 74076

Preparer's SSN or PTIN (See Gen. Inst. X): 73-1346562
EIN: 73-1346562
Phone no.: 405-372-3909

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information — (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2007

Name of the organization

SCHOOL SCIENCE & MATHEMATICS ASSOC.

Employer identification number

36-6084546

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees

(See the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to empl benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				

Total number of other employees paid over \$50,000 ▶

0

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶

0

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of other contractors receiving over \$50,000 for other services ▶

0

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

Schedule A (Form 990 or 990-EZ) 2007

Part III Statements About Activities (See the instructions.)

Yes No

1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities . . . ▶ \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.				
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)			
a	Sale, exchange, or leasing of property?	2a		X
b	Lending of money or other extension of credit?	2b		X
c	Furnishing of goods, services, or facilities?	2c		X
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d		X
e	Transfer of any part of its income or assets?	2e		X
3a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)	3a		X
b	Did the organization have a section 403(b) annuity plan for its employees?	3b		X
c	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		X
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		X
4a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g.	4a		X
b	Did the organization make any taxable distributions under section 4966?	4b		
c	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		
d	Enter the total number of donor advised funds owned at the end of the tax year ▶ _____			
e	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ▶ _____			
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ▶ _____			0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ▶ _____			0

Part IV Reason for Non-Private Foundation Status (See instructions.)

I certify that the organization is not a private foundation because it is (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A.)
- 11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 ☒ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions -- subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
☐ Type I ☐ Type II ☐ Type III -- Functionally Integrated ☐ Type III -- Other

Provide the following information about the supported organizations (See instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total 					

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28)		797	571	260	1,628
16 Membership fees received	41,352	18,596	23,491	15,076	98,515
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose		131,389	123,576	131,194	386,159
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	5,942	12,122	11,160	7,431	36,655
19 Net income from unrelated business activities not included in line 18.		200		365	565
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf.					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule Do not include gain or (loss) from sale of capital assets. . . #12	8,242				8,242
23 Total of lines 15 through 22 . . .	55,536	163,104	158,798	154,326	531,764
24 Line 23 minus line 17.	55,536	31,715	35,222	23,132	145,605
25 Enter 1% of line 23.	555	1,631	1,588	1,543	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 ▶					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts ▶					26b N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e) ▶					26c N/A
d Add: Amounts from column (e) for lines. 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d N/A
e Public support (line 26c minus line 26d total) ▶					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f N/A %
27 Organizations described on line 12. a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year: (2006) _____ (2005) _____ (2004) _____ (2003) _____					
c Add: Amounts from column (e) for lines. 15 _____ 1,628 16 _____ 98,515 17 _____ 386,159 20 _____ 21 _____ ▶					27c 486,302
d Add: Line 27a total _____ and line 27b total ▶					27d
e Public support (line 27c total minus line 27d total) ▶					27e 486,302
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e) . . ▶	27f 531,764				
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g 91.45 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) . . . ▶					27h 6.89 %
28 Unusual Grants. For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

Part V Private School Questionnaire (See the instructions.)

(To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain. (If you need more space, attach a separate statement.)	31	
32 Does the organization maintain the following:		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)		
33 Does the organization discriminate by race in any way with respect to:		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See the instructions.)
(To be completed **ONLY** by an eligible organization that filed Form 5768)

N/A

Check ☐ a if the organization belongs to an affiliated group. Check ☐ b if you checked "a" and limited control provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred.)

	(a) Affiliated group totals	(b) To be completed for all electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38 Total lobbying expenditures (add lines 36 and 37)	38	
39 Other exempt purpose expenditures	39	
40 Total exempt purpose expenditures (add lines 38 and 39)	40	
41 Lobbying nontaxable amount. Enter the amount from the following table --		
If the amount on line 40 is -- The lobbying nontaxable amount is --		
Not over \$500,000 20% of the amount on line 40		
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		
Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000	41	
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000		
Over \$17,000,000 \$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42	
43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720.

4-Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50.)

Calendar year (or fiscal year beginning in) ►	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See the instructions.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h)

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of:

- (i) Cash
 (ii) Other assets

b Other transactions

- (i) Sales or exchanges of assets with a noncharitable exempt organization
 (ii) Purchases of assets from a noncharitable exempt organization
 (iii) Rental of facilities, equipment, or other assets
 (iv) Reimbursement arrangements
 (v) Loans or loan guarantees
 (vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
N/A			

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ► ☐ Yes ☒ No

b If "Yes," complete the following schedule:

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Application for Extension of Time To File an
Exempt Organization Return**

OMB No. 1545-1709

▶ File a separate application for each return

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ☒
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)A corporation required to file Form 990-T and requesting an automatic 6-month extension -- check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file) Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.	Employer identification number 36-6084546
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions COLLEGE OF ED, OSU, WILLARD STE 245	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions STILLWATER OK 74078	

Check type of return to be filed (file a separate application for each return).

- | | | |
|--|---|------------------------------------|
| ☒ Form 990 | ☐ Form 990-T (corporation) | ☐ Form 4720 |
| ☐ Form 990-BL | ☐ Form 990-T (sec. 401(a) or 408(a) trust) | ☐ Form 5227 |
| ☐ Form 990-EZ | ☐ Form 990-T (trust other than above) | ☐ Form 6069 |
| ☐ Form 990-PF | ☐ Form 1041-A | ☐ Form 8870 |

- The books are in the care of ▶ SEE ATTACHMENT #2

Telephone No. ▶ _____ FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 20 09, to file the exempt organization return for the organization named above. The extension is for the organization's return for

- ▶ ☐ calendar year 20 ____ or
- ▶ ☒ tax year beginning JULY 01, 20 07, and ending JUNE 30, 20 08

2 If this tax year is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0

Caution If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

For Privacy Act and Paperwork Reduction Act Notice, see Instructions

Form **8868** (Rev. 4-2008)

JVA 07 88681 TWF 24550 Copyright Forms (Software Only) - 2007 TW

CERTIFIED MAIL # 7005 C390 CEE5 9390 1494

SCHEDULE OF OTHER INVESTMENT INCOME

ATTACHMENT 1: PAGE 1 - 990 PAGE 1, PART I, LINE 7

OPEN TO PUBLIC INSPECTION	For calendar year 2007, or tax period beginning	07-01-2007, and ending	06-30-2008.
Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.			Employer Identification Number 36-6084546

Description	Amount
LONG AND SHORT TERM CAPITAL GAINS ON MUTUAL FUNDS	1,437
Total	1,437

SCHEDULE OF OTHER CHANGES IN NET ASSETS OR FUND BALANCES

ATTACHMENT 2: PAGE 1 - 990 PAGE 1, PART I, LINE 20

OPEN TO PUBLIC INSPECTION	For calendar year 2007, or tax period beginning 07-01 -2007 , and ending 06-30-2008
Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.	Employer Identification Number 36-6084546

Description of Changes	Total Amount
CASH ACCOUNT THAT WAS MISTAKENLY LEFT OFF THE BALANCE SHEET PREVIOUSLY PREPARING THIS AMENDED RETURN IN ORDER TO FIX	52,893
Total	52,893

SCHEDULE OF OTHER EXPENSES

ATTACHMENT 3: PAGE 1 - 990 PAGE 2, PART II, LINE 43

OPEN TO PUBLIC
INSPECTION

For calendar year 2007 or tax period beginning 07-01 -2007 , and ending 06-30-2008

Name of Organization

SCHOOL SCIENCE & MATHEMATICS ASSOC.

Employer Identification Number

36-6084546

Other Expenses	(A) Total	(B) Program Services	(C) Management and General	(D) Fundraising
PUBLICATIONS	23,537	23,537		
OFFICE SUPPLIES	14,761	7,380	7,381	
ADVERTISING	224	112	112	
BANK CHARGES	60	30	30	
COMMITTEE EXPENSES	586	586		
CONTRACT LABOR	71,846	28,000	43,846	
FEES	180	90	90	
MEALS AND ENTERTAINMENT	603		603	
MISCELLANEOUS	2,367	1,184	1,183	
STORAGE	240	120	120	
WEB SERVICE	751	376	375	
Total	115,155	61,415	53,740	

PRIMARY EXEMPT PURPOSE

ATTACHMENT 4: PAGE 1 - 990 PAGE 3, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2007 or tax period beginning 07-01, and ending 06-30-2008.
Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.	Employer Identification Number 36-6084546

Primary Purpose

TO FACILITATE THE DISSEMINATION OF KNOWLEDGE IN MATHEMATICS AND SCIENCE

PROGRAM SERVICE ACCOMPLISHMENT

ATTACHMENT 5: PAGE 1 - 990 PAGE 3, PART III

OPEN TO PUBLIC INSPECTION	For calendar year 2007, or tax period beginning 07-01-2007, and ending 06-30-2008
------------------------------	---

Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.	Employer Identification Number 36-6084546
---	--

Part III - Statement of Program Service Accomplishments

Grants and allocations	Amount includes foreign grants	Program service expenses	108,169
Exempt Purpose Achievements			

PUBLICATION OF JOURNAL "SCHOOL SCIENCE AND MATHEMATICS" AND ANNUAL CONVENTION -SESSIONS SEMINARS AND WORKSHOPS FOCUSED ON THE IMPROVEMENT OF TEACHING AND LEARNING OF SCIENCE AND MATHEMATICS.

SCHEDULE OF OTHER INVESTMENTS

ATTACHMENT 6: PAGE 1 - 990 PAGE 4, PART IV, LINE 56

OPEN TO PUBLIC INSPECTION	For calendar year 2007, or tax period beginning	07-01 -2007 , and ending	06-30-2008 .
------------------------------	---	--------------------------	--------------

Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.	Employer Identification Number 36-6084546
---	--

Description of Investment - Other	Cost or FMV	EOY Book Value
WACHOVIA SECURITIES	COS	119,338
Total		119,338

SCHEDULE OF LAND, BUILDINGS & EQUIPMENT

ATTACHMENT 7: PAGE 1 - 990 PAGE 4, PART IV, LINE 57

OPEN TO PUBLIC

INSPECTION

For Calendar year 2007, or tax year period beginning 07-01-2007

and ending 06-30-2008.

Name of Organization

SCHOOL SCIENCE & MATHEMATICS ASSOC.

Employer Identification Number

36-6084546

Category or Description of Property

LAPTOP COMPUTER

Accumulated
Depreciation

260

Cost or Other
Basis

1,301

End of Year
Book Value

1,041

Ending FML
(990-PF Only)

Total

1,041

260

1,301

07_EOGR16L

JVA

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L0705F

CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 8: PAGE 1 - 990 PAGE 5, PART V-A

OPEN TO PUBLIC				
INSPECTION	For calendar year 2007, or tax period beginning 07-01 -2007 , and ending 06-30-2008			
Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.			Employer Identification Number 36-6084546	
(A) Name and Address	(B) Title and Average Hrs. per Week	(C) Compensation (If not paid, enter 0)	(D) Cont to Employee Ben. Plans & Def Comp	(E) Expense Account & Other Allowances
ALAN ZOLLMAN NORTHERN ILLINOIS UNIVERSITY DEKALB, IL 60115	PRESIDENT	0	0	0
ALFINIO FLORES UNIVERSITY OF DELAWARE NEWARK, DE 19716	DIRECTORS-AT-	0	0	0
CORNELIS DE GROOT UNIVERSITY OF RHODE ISLAND KINGSTON, RI 02881	DIRECTOR-AT-L	0	0	0
DIANE L. SCHMIDT FLORIDA GULF COAST UNIVERSITY FORT MYERS, FL 33965	DIRECTOR-AT-L	0	0	0
CATHERINE KELLY UNIVERSITY OF COLORADO COLORADO SPRINGS, CO 80933	DIRECTOR-AT-L	0	0	0
GILBERT NAIZER TEXAS A&M UNIVERSITY-COMMERCE COMMERCE, TX 75429	DIRECTOR-AT-L	0	0	0
JOHN PARK NORTH CAROLINA STATE UNIVERSITY RALEIGH, NC 27695	DIRECTOR-AT-L	0	0	0
SANDRA COOPER BAYLOR UNIVERSITY CRAWFORD, TX 76638	CO-EXECUTIVE DIRECTO	14,000	0	0
JULIE THOMAS OKLAHOMA STATE UNVIERSTY STILLWATER, OK 74078	CO-EXECUTIVE DIRECTO	14,000	0	0

BOOKS ARE IN CARE OF

ATTACHMENT 9 - 990 PAGE 7, PART VI, LINE 91A

For calendar year 2007 or tax period beginning 07-01 , and ending 06-30-2008.

Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC. Employer Identification Number 36-6084546

Part VI - Line 91a

Individual Name JULIE THOMAS

or

Business Name:

Street Address OKLAHOMA STATE UNIV., WILLARD #245

U S Address

Zip code 74078 City STILLWATER State OK

or

Foreign Address

City

Province or State

Country

Postal code

Phone Number (405) 744-7346

Fax Number

ATTACHMENT 10: PAGE 1 - 990 PAGE 8, PART VII, LINE 103

For calendar year 2007 or tax period beginning 07-01-2007 , and ending 06-30-2008.

SCHOOL SCIENCE & MATHEMATICS ASSOC.

36-6084546

07_EOGR87

ATTACHMENT 11: PAGE 1 990 PAGE 8, PART VIII

OPEN TO PUBLIC INSPECTION	For calendar year 2007 or tax period beginning	07-01 -2007 , and ending	06-30-2008
Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOC.			Employer Identification Number 36-6084546

Line Number	Briefly describe how the activity reported in column (E) of Part VII specifically contributed to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
94	MEMBERSHIP DUES TO JOIN THE ORGANIZATION
95	INTEREST INCOME FROM CHECKING AND SAVINGS ACCOUNTS
96	DIVIDEND INCOME FROM INVESTMENT ACCOUNTS
100	CAPITAL GAINS FROM INVESTMENT ACCOUNTS
103	JOURNAL SUBSCRIPTIONS PRODUCED FOR EDUCATIONAL INSTITUTIONS
103	CONVENTION PROVIDES PROFESSIONAL DEVELOPMENT FOR TEACHERS

SCHEDULE OF OTHER INCOME

ATTACHMENT 12: PAGE 1 SCH A PAGE 3, PART IV-A, LINE 22, OTHER INCOME

OPEN TO PUBLIC
INSPECTION

For Calendar year 2007, or tax year period beginning 07-01-2007

and ending 06-30-2008

Name of Organization

SCHOOL SCIENCE & MATHEMATICS ASSOC.

Employer Identification Number

36-6084546

Other Income Description**(e) Total****(d) 2003****(c) 2004****(b) 2005****(a) 2006**CONVENTION
SUBSCRIPTIONS390
7,852390
7,852**Total**

8,242

8,242

Depreciation and Amortization (Including Information on Listed Property)

OMB No 1545-0172

2007

Attachment
Sequence No. 67Department of the Treasury
Internal Revenue Service

▶ See separate instructions

▶ Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

SCHOOL SCIENCE & MATHEMATICS A FOR FORM 990

36-6084546

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses	1	108,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	430,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	108,000
6	(a) Description of property	(b) Cost (busn. use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2006 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	108,000
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2008. Add lines 9 and 10, less line 12	13	

Note. Do not use Part II or Part III below for listed property. Instead, use Part V

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)

14	Special allowance for qualified New York Liberty or Gulf Opportunity Zone property (other than listed property) and cellulosic biomass ethanol plant property placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2007	17	
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		☐

Section B -- Assets Placed in Service During 2007 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only -- see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property		1,301	05	HY	200 DB	260
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27 5 yrs	MM	S/L	
			39 yrs.	MM	S/L	

Section C -- Assets Placed in Service During 2007 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations -- see instructions	22	260
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form 4562 (2007)

2007 Federal Depreciation Schedule

SCHOOL SCIENCE & MATHEMATICS ASSOC.
36-6084546

02-02-2009

Description	Date	Method	Year	Cost	Land/ Other	Prior \$179	Current \$179	Pr Spec Allow	Cur Spec Allow	Basis	Prior	Current	Accum Depr	Adj Basis
0														
LAPTOP COMPUTER	07-23-07	200DBHY	5	1,301		0	0	0	0	1,301	0	260	260	1,041
1 Asset														
Totals				1,301	0	0	0	0	0	1,301	0	260	260	1,041
1 Asset														
Grand Totals				1,301	0	0	0	0	0	1,301	0	260	260	1,041

* Asset disposed this year
~C Carryover basis in like-kind exchange transaction
~B Excess basis in like-kind exchange transaction