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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 2008

Open to Public Inspection

A Fo	r the	2008 ca	lendar yea	r, or tax year beginni	ng 07-01-2008	and ending 06-30-200	09	D Francisconii	dentification number
		pplicable	Please	C Name of organization National Middle School	Association				dentification number
_	Iress ch	_	use IRS label or	Doing Business As				31-08657 <b>E Telephone</b>	
	ne cha	_	print or type. See					(614) 895	-4730
	ıal retu		Specific Instruc-	Number and street (or 4151 Executive Parkwa		not delivered to street addr	ess) Room/s	uite	<b>pts</b> \$ 6,878,314
	minatio		tions.		•				
	ended	return n pending		City or town, state or Westerville, OH 4308		4			
j App	nication	n penaing i			1.0.55		1		
			F Nar MAnn	ne and address of Pri Eichel	ncıpal Officer			this a group retu filiates?	rn for ┌ Yes
				Executive Parkway No ville, OH 43081	300				
	x-exem	npt status		) ( 3 ) <b>◄</b> (insert no )	4947(a)(1) or <b></b>	527	1 ' '	e all affiliates inclu	·
 J W	eb sit	e: ► www	w nmsa org	. , , , , , , , , ,				r "No," attach a iis Troup Exemption N	st See instructions ) lumber 🟲
К Тур	e of org	ganization	<b>I</b> ✓ Corporat	tion  trust  associatio	n  other 🟲		<b>L</b> Year o	f Formation 1973	M State of legal domicile OH
Pa	rt I	Sumi	mary						
	1			e organization's miss	ıon or most sıgr	nificant activities			
ቋ		MIDDLI	ESCHOOL	PROGRAM DEVELO	PMENT				
) E									
Governance	١,	Chack t	·hic hov —	if the organization du	scontinued its o	norations or disposed	of more the	n 25% of its asse	at c
<u> </u>	3		,			perations or disposed VI, line 1a)			18
	4					vI, line Ia) lg body (Part VI, line 1			18
Activities &	5			nployees (Part V, line		b)		42	
<u> </u>	6			olunteers (estimate if		6	250		
Ā	7a			ted business revenue		7a	204,913		
	ь	Net unr	elated busi	iness taxable income	from Form 990	-T, line 34		7b	0
_						Prior Year	Current Year		
	8	Contri	butions and	d grants (Part VIII, lı			209,154	95,212	
anue	9	Progra	ım service	revenue (Part VIII, I	ıne 2g) <b></b>			5,884,944	4,792,263
Rayen	10							111,942	-392,666
	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e  Total revenue—add lines 8 through 11 (must equal Part VIII, column (A))							65,729	401,621
	12	10tair 12)	revenue—a	aa iines 8 through 11	(must equal Pa	rt VIII, column (A), iir	ne	6,271,769	4,896,430
	13	Grants	and simila	ar amounts paid (Part	IX, column (A)	, lınes 1–3)			0
	14	Benefi	ts paid to c	or for members (Part 1	(X, column (A),	line 4)			0
92	15		es, other co	ompensation, employ	ee benefits (Par	t IX, column (A), lines	5 –	2,243,871	2,140,788
Expenses	16a	10) Profes	sional fund	Iraising fees (Part IX,	column (A.), line	e 11e)		2,243,071	2,140,700
<b>⊕</b>	ь			penses, Part IX, column (1		\			
Ω	17		-	(Part IX, column (A),		11f-24f)		4,054,557	3,342,305
	18				•	(, line 25, column (A ))		6,298,428	5,483,093
	19	Reven	ue less exp	penses Subtract line	18 from line 12			-26,659	-586,663
\$ 6 g							Beg	inning of Year	End of Year
Net Assets or Fund Balances	20	Total	assets (Pai	rt X, line 16)				3,575,832	2,835,957
t As d B	21	Totall	ıabılıtıes (F	Part X, line 26)				2,077,496	1,981,849
<u> </u>	22	Net as	sets or fun	nd balances Subtract	line 21 from lin	e 20		1,498,336	854,108
Pai	t II	Sign	ature Bl	ock			•		
						curn, including accompanying er (other than officer) is bas			the best of my knowledge
Plea	se	****		sames, and complete De	salation of prepare	(outer than officer) is pas	1	:010-05-14	a.s. nas any knowledge
Sign			ature of office	er				Date	
Here	2			rım treasurer					
		Туре	or print nam	ne and title					
		Preparer				Date	Check If self-	Preparer's PTII	N (See Gen Inst )
Paid		signature	<b>• •</b>				empolyed •		
•	arer's		ame (or your	s GBQ Partners LLC	EIN Þ				
Use (	nly	1	and ZIP + 4	230 West Street Suit	e 700			_	
				Columbus, OH 4321	.52663			Phone no 🕨	(614) 221-1120
May t	he IR	S discus	s this retu	rn with the preparer s		ee instructions)			✓ Yes  No

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

1	Briefly describe the organization's mission				
See A	ddıtıonal Data Table				
2	Did the organization undertake any sign the prior Form 990 or 990-EZ?		ervices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these new services	on Schedule O			
3	Did the organization cease conducting services?	g or make significan	t changes in how it con	ducts any program	┌ Yes ┌ No
	If "Yes," describe these changes on S	chedule O			
4	Describe the exempt purpose achieve Section 501(c)(3) and (4) organizatio others, the total expenses, and reven	ns and 4947(a)(1) t	trusts are required to re	eport the amount of grants a	
4a	(Code ) (Expenses \$ MEMBERSHIP/SUBSCRIPTIONS - OFFER ANN AND NEWSLETTERS TO MEMBERS AND SUBSO	UAL MEMBERSHIPS TO E		) (Revenue \$ ECTIVE MEMBERS IN MIDDLE LEVE	1,503,304 ) ELEDUCATION OFFER JOURNALS
4b	(Code ) (Expenses \$	1,319,289	including grants of \$	) (Revenue \$	1,726,509 )
	ANNUAL CONFERENCE - HOLDS ANNUAL COM	FERENCE FOR EDUCATO	ORS INVOLVED IN MIDDLE LI	EVEL EDUCATION	
4c	(Code ) (Expenses \$	1,369,875	ıncludıng grants of \$	) (Revenue \$	1,102,480 )
	PROFESSIONAL DEVELOPMENT - PROVIDES WEDUCATION		ASSES, SCHOOLS ASSESSME		ES REGARDING MIDDLE LEVEL
	(Code ) (Expenses \$	1,229,972	ıncludıng grants of \$	) (Revenue \$	1,034,096 )
4d	Other program services (Describe ii (Expenses \$	n Schedule O ) including grants of	f \$	) (Revenue \$	)
4e	Total program service expenses \$	4,730,98	5 Must equal Part IX,	Line 25, column (B).	

Part IV	Chec	klist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🔁	2	Yes	
3	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	3		No
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.	6		N o
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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? If "Yes,"			No
	complete Schedule D, Part IV	9		
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part $I$	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If</i> "Yes," complete Schedule F, Part III	16		Νο
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		N o
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νο
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule  J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

### Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part			
	IV	28a	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b	Yes	
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νo
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
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>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		Νo
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νo
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		Νo
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο

Pa	rt V	Statements Regarding Other IRS Filings and Tax Complianc	e				
						Yes	No
1a	Enter	the number reported in Box 3 of Form 1096, Annual Summary and Transmittal					
		5. Information Returns. Enter -0- if not applicable					
			1a	76			
b	Enter	the number of Forms W-2G included in line 1a Enter -0- if not applicable	14	0			
	Б		1b	0			
С		ne organization comply with backup withholding rules for reportable payments to ng (gambling) winnings to prize winners?	oveno	dors and reportable	1c	Yes	
2a	_	the number of employees reported on Form W-3, Transmittal of Wage and Tax					
		ments filed for the calendar year ending with or within the year covered by this	2-	43			
	returr		2a	42			
D		east one is reported in 2a, did the organization file all required federal employm If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this			2b	Yes	
3a		ne organization have unrelated business gross income of \$1,000 or more during					
		17			3a	Yes	
b		es," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Sch</i>			3b	Yes	
4a		y time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc					
		a financial account in a foreign country (such as a bank account, securities acc unt)?		, or other illiancial	4a		Νo
b		es," enter the name of the foreign country					
		he instructions for exceptions and filing requirements for <b>Form TD F 90-22.1,</b> <i>Re</i>	port o	f Foreign Bank and			
	Financ	cial Accounts.					
5a	Was t	the organization a party to a prohibited tax shelter transaction at any time durin	ng the	tax year?	5a		No
b	Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited t	tax sh	nelter transaction?	5b		Νo
c		s," to 5a or 5b, did the organization file Form 8886-T, <i>Disclo</i> s <i>ure by Tax-Exemp</i> o	t Entit	y Regarding Prohibited	_		
_		helter Transaction?	•		5c		
6a		ne organization solicit any contributions that were not tax deductible?			6a		No
Ь		es," did the organization include with every solicitation an express statement th not tax deductible?	atsu	ch contributions or gifts	6b		
7		nizations that may receive deductible contributions under section 170(c).	. •				
	_	ne organization provide goods or services in exchange for any quid pro quo conf	trıbutı	on of \$75 or	7a		Νo
	more '	?			<u> </u>	<u> </u>	<u> </u>
		es," did the organization notify the donor of the value of the goods or services pr			7b		
С		he organization sell, exchange, or otherwise dispose of tangible personal proper		-	7c		No
A		orm 8282?	7d		,,		140
u	1, 16		, u	l			
е		ne organization, during the year, receive any funds, directly or indirectly, to pay			_		
_		fit contract?			7e		No
f		he organization, during the year, pay premiums, directly or indirectly, on a perso			7f		No No
g		ll contributions of qualified intellectual property, did the organization file Form 8		·	7g		N o
h		ontributions of cars, boats, airplanes, and other vehicles, did the organization fi red?	neaF	orm 1098-C as	7h		Νo
8		on 501(c)(3) and other sponsoring organizations maintaining donor advised funds a	nd se	ction 509(a)(3)			
	suppo	orting organizations. Did the supporting organization, or a fund maintained by a s					
		ss business holdings at any time during the			8		
9		on $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds.					
а		ne organization make any taxable distributions under section 4966?			9a		
Ь		ne organization make a distribution to a donor, donor advisor, or related person			9b		
10	Sectio	on 501(c)(7) organizations. Enter					
а	Initia	tion fees and capital contributions included on Part VIII, line 12	10a				
b		s receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	facılıt	ties					
11	Secti	on 501(c)(12) organizations Enter					
		s income from members or shareholders					
			11a				
b		s income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them )	11b				
	ayain	scamounts due of received norm them j	110	<u> </u>			
12a	Sectio	on $4947(a)(1)$ non-exempt charitable trusts. Is the organization filing Form 990 in	lieu d	of Form 1041?	12a		
b		es," enter the amount of tax-exempt interest received or accrued during the	12b				
	year		_	i	i	1	

# Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Gov	erning Body ar	d Manag	gement	

					Yes	No	
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below processes, or changes in Schedule O. See instructions.	, desc	ribe the circumstances,				
1a	Enter the number of voting members of the governing body	1a	18				
Ь	Enter the number of voting members that are independent	1b	18				
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		·	2		Νο	
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co	•		3		No	
4	Did the organization make any significant changes to its organizational documents sfiled? $$ .	ince t	he prior Form 990 was	4		No	
5	Did the organization become aware during the year of a material diversion of the organization	anızat	ion's assets?	5		Νo	
6	Does the organization have members or stockholders?			6	Yes		
7a	Does the organization have members, stockholders, or other persons who may elect governing body?	7a	Yes				
Ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νo	
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the				
а	the governing body?			8a	Yes		
Ь	each committee with authority to act on behalf of the governing body?			8b	Yes		
9a	Does the organization have local chapters, branches, or affiliates?			9a		Νo	
b	<b>b</b> If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?						
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the		_	10	Yes		
11	cannot be reached at e O	11	Yes				

#### Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 $\cdot$ .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νo
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
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?	16a	Yes	
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		Νο

#### Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed OH
- 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 make these available. Check all that apply own website. 

  upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes 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 mann eichel

4151 Executive Parkway suite 300 Westerville, OH 43081 (614) 895-4730

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

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

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

The check this box in the organization and i	(B) Average hours per week	Posit	(C	) chec	:k al				(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F)
(A) Name and Title		Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)		Estimated amount of other compensation from the organization and related organizations
							_			

Part VII	Continue	a
rait vii	Continue	u

			Pos				all				(E)		<b>(F)</b> Estimated		
	<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustæ or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	Repor comper from organiza 2/1099	table nsation the tion (W-	Reportable compensation from related organizations (W- 2/1099- MISC)	'   	amount of other compensation from the organization and related organizations		
_															
1b	Total					<u> </u>		<b> </b>		514,78	<u> </u> 7	0		74,165	
2	Total number of individuals (includin compensation from the organization)		a) who	recei	ved	mo	re tha	n \$1	00,000 ır	ı reportab	le	•			
													Yes	No	
3	Did the organization list any <b>former</b> on line 1a? <i>If</i> "Yes," complete Schedu										sated employee	3	Yes		
4	For any individual listed online 1a, is organization and related organization individual											4	Yes		
5	Did any person listed on line 1a rece rendered to the organization? <i>If</i> " <i>Yes</i>	ive or accru ," complete :	ie comp Schedule	ensa e <i>J foi</i>	ntion r <i>su</i> d	fro	m any erson	unr	elated org	anızatıon • •	for services	5		No	
_													1		
1	ection B. Independent Contract  Complete this table for your five high		nsated i	nden	end	ent	contra	ctor	rs that rec	eived moi	re than				
	\$100,000 of compensation from the	organizatio													
	Name ar	(A) nd business ad	dress							Des	(B) cription of services		Compe		

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation

0

Part VIII

Statement of Revenue

					(A) Total Revenue	(B) Related or Exempt Function	<b>(C)</b> Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
	1a	Federated can	npaigns 1a			Revenue		512, 513, or 514
数数	ь		ues					
흔			1b					
s,g ∰	С	Fundraising ev	/ents <b>1c</b>					
無無	d	Related organ	ızatıons1d					
Contributions, gifts, grants and other similar amounts	e	Government gran	nts (contributions) <b>1e</b>	80,606				
	f	All other contributions, gifts, grants, and		14,606	i	i		
ê ₽		sımılar amounts not ıncluded above – <b>1f</b>						
늍	g	_						
င် ကြောင်	, .	h Total (Add lines 1a-1f)			95,212			
	<u> </u>	- Total (Add III		· · · · ·				
<u>a</u>	2-	ANNUAL CONEED	ENCE	Business Code	4 722 042	4 722 042		
æn	2a b	ANNUAL CONFER  Membership	ENCE	541,900	· · ·	1,723,943		
Program Serwce Revenue			EVELORME	541,900	, ,	1,372,451		
16.6	C	PROFESSIONAL D	EVELOPME	541,900	, ,		204.042	
<u> </u>	d	subscriptions	-1	541,800		130,853	204,913	
E .	e f	program sponsors	<u> </u>	541,900	257,623	257,623		
SIIS	f	All other progi	ram service revenue					
<u>*</u>	g	<b>&gt;</b> \$ 4,792,263						
	3		come (including divi	· ·	42,925			42,925
			imounts)	▶	42,925			+2,925
	4	Income from inve	estment of tax-exempt be	ond proceeds				
	5	Royalties .			8,248			8,248
			(ı) Real	(II) Personal				
	6a	Gross Rents						
	Ь	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental inc	ome or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount	1,095,736					
		from sales of assets other						
	ь	than inventory Less cost or	1,531,327					
		other basis and sales expenses						
	С	Gaın or (loss)	-435,591					
	d	Net gain or (lo		. ▶	-435,591			-435,591
	8a		from fundraising					
		events (not in	cluding 2,566					
не		<b>4</b>	ns reported on line					
듄		1c) See Part	IV, line 18 e G if total exceeds					
Other Revenue			· · · · · a					
<u>-</u>	ь		xpensesb	137				
¥	с	Net income or	loss) from fundraisi	ing events	2,429			2,429
•	9a	Gross income	from gaming	<u>-</u>				
		activities See	part IV , line 19					
		Complete Schedexceeds \$15,00						
			а					
	b	Less directe	xpensesb					
	С	Net income or	(loss) from gaming a	activities <b>F</b>				
	10a							
	.		a	829,183				
	Ь		goods sold <b>b</b> (loss) from sales of		378,763	378,763		
	С	Miscellaneou	-	Business Code	3,3,703	3,0,703		
	11a	MISCELLANE		900,099	12,181			12,181
	ь							
	С							
		Δ II other rever	nue					
	d e		nue   es 11a-11d					
				\$ 12,181				
	12	Total Revenue	Add lines 1h, 2g, 3	, 4, 5, 6d, 7d,	4,896,430	4,966,113	204,913	-369,808
			l1e	. ▶				

# 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).									
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21								
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors, trustees, and key employees	588,952	503,032	85,920					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$								
7	Other salaries and wages	1,125,821	958,283						
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	59,495	50,092	9,403					
9	Other employee benefits	238,609	208,649	29,960					
10	Payroll taxes	127,911	109,155	18,756					
11	Fees for services (non-employees)								
а	Management	139,700	135,775	3,925					
b	Legal	47,074		47,074					
c	Accounting	18,876		18,876					
d	Lobbying								
е	Professional fundraising See Part IV, line 17								
f	Investment management fees	3,071		3,071					
g	Other	83,679	61,288	22,391					
12	Advertising and promotion	29,087	28,230	857					
13	Office expenses	1,007,300	897,992	109,308					
14	Information technology	10,042	3,495	6,547					
15	Royalties	17,646	17,646						
16	Occupancy	309,612	238,111	71,501					
17	Travel	238,563	192,431	46,132					
18	Payments of travel or entertainment expenses for any Federal, state or local public officials								
19	Conferences, conventions and meetings	824,254	819,475	4,779					
20	Interest	1,196		1,196					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	84,333	27,514	56,819					
23	Insurance	24,738	11,875	12,863					
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)								
а	PROGRAM/CONFERENCE Meal	240,751	232,221	8,530					
b	Editorial Fees & Expens	160,114	160,114						
c	Dues and Subscriptions	45,826	40,517	5,309					
d	Other Miscellaneous	42,239	20,886	21,353					
e	Local Committee Expense	14,204	14,204						
f	All other expenses								
25	Total functional expenses. Add lines 1 through 24f	5,483,093	4,730,985	752,108	0				
26	Joint Costs. Check  if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation								

Part X	Balance	Sheet

					(A)		(B	
	1	Cach, non interest hearing			Beginning of year 266,374	1	End of	179,465
		Cash—non-interest-bearing			282,788			1,290,442
	2	Savings and temporary cash investments			202,700	3		1,290,442
	3	Pledges and grants receivable, net			286,502	-		355,100
	4	Accounts receivable, net			206,502	4		355, 100
	5	Receivables from current and former officers, directors, trustees, other related parties <i>Complete Part II of Schedule L</i>				5		
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use			451,466	8		233,688
$\underline{\varphi}$	9	Prepaid expenses and deferred charges			304,452	9		216,143
ssets	10a							
AS		Land, buildings, and equipment cost basis	10a	1,278,723				
-	Ь	Less accumulated depreciation Complete Part VI of Schedule D	10b	785,142	377,386	10c		493,581
	11	Investments—publicly traded securities		<u>·</u>	1,531,327	11		<u> </u>
	12	Investments—other securities See Part IV, line 11 Complete Part Schedule D	t VII of			12		
	13	Investments—program-related See Part IV, line 11 Complete Pa		13				
	14	of Schedule D .  Intangible assets		14				
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule	75,537			67,538		
	4.5	D			2 575 922	15		2 935 057
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)			3,575,832			2,835,957
	17	Accounts payable and accrued expenses	495,315			485,734		
	18	Grants payable	4 500 404	18				
	19	Deferred revenue	1,582,181	19		1,496,115		
۰	20	Tax-exempt bond liabilities			20			
ţj	21	Escrow account liability Complete Part IV of Schedule D			21			
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
Ï		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				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			2,077,496	26		1,981,849
ş		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and complethrough 29, and lines 33 and 34.	ete line:	s 27				
anc	27	Unrestricted net assets			1,498,336	27		854,108
Balance	28	Temporarily restricted net assets				28		
<u> </u>	29	Permanently restricted net assets				29		
Fund		Organizations that do not follow SFAS 117, check here ► □ and lines 30 through 34.	l comple	ete				
ō	30	Capital stock or trust principal, or current funds				30		
ets	31	Paid-in or capital surplus, or land, building or equipment fund.			31			
Assets	32	Retained earnings, endowment, accumulated income, or other fur	• •		32			
	33	Total net assets or fund balances		1,498,336			854,108	
Net	34	Total liabilities and net assets/fund balances			3,575,832			2,835,957
	34	rotal habilities and het assets/fully baldices			3,373,832	54	•	2,000,007
Pa	rt XI	Financial Statements and Reporting						
							Yes	No
1	Acco	unting method used to prepare the Form 990	ccrual	other				

- 1 1/1	Einen eine Grand aus eine eine Bande Binne
varir di	Financial Statements and Reporting

	_			
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νο
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
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?	3a		N o
b	If "Yes," did the organization undergo the required audit or audits?	3b		

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As Filed Data -

DLN: 93493137031000

**Employer identification number** 

OMB No 1545-0047

# **SCHEDULE A**

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

To be completed by all section 501(c)(3) organizations and section 4947(a)(1)nonexempt charitable trusts. Attach to Form 990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

		lle School Assoc	ciation						.p.o, ca.c		abei		
									-086570			_	
	rt I			harity Status (to be co					Instruct	ions)		_	
The	rganı:			ation because it is (Please									
1	<u> </u>	•		nurches, or association of ch			n Section :	170(b)(1)	(A)(i).				
2		A school described in <b>Section 170(b)(1)(A)(ii).</b> (Attach Schedule E)											
3		A hospital or a cooperative hospital service organization described in <b>Section 170(b)(1)(A)(iii).</b> (Attach Schedule H)											
4	Г	A medical research organization operated in conjunction with a hospital described in <b>Section 170(b)(1)(A)(iii).</b> Enter the											
		hospital's name, city, and state											
5	Г	An organiza	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in										
		Section 170	0(b)(1)(A)(iv).	(Complete Part II )									
6	Γ	A federal, s	state, or local g	overnment or governmental	unıt desci	rıbed ın <b>S</b> e	ection 170	(b)(1)(A)	(v).				
7	Γ	An organiza	ation that norm	ally receives a substantial p	art of its	support fro	om a gove	rnmental u	ınıt or fron	n the gene	eral public		
		described i	n Section 170(b	<b>))(1)(A)(vi)</b> (Complete Par	tII)								
8	Γ	A communi	ıty trust describ	ed in <b>Section 170(b)(1)(A)</b>	(vi) (Com	nplete Par	tII)						
9	<u>~</u>	An organiza	ation that norm	ally receives (1) more than	331/3% 0	of its supp	ort from c	ontributior	ns, membe	rship fees	s, and gross		
		receipts fro	om activities re	ated to its exempt functions	s—subject	to certaii	n exceptio	ns, and (2	) no more	than 331,	/3% of		
		ıts support	from gross inve	estment income and unrelate	ed busines	ss taxable	ıncome (l	ess section	on 511 ta:	x) from bu	sınesses		
		acquired by	y the organizati	on after June 30, 1975 See	Section 5	609(a)(2).	(Complet	e Part III	)				
10	Γ	An organiza	atıon organızed	and operated exclusively to	test for p	ublic safe	ty See <b>Se</b>	ct ion 509	<b>(a)(4).</b> (S	ee instruc	tions )		
11	Γ									f, or to carry out the purposes of			
				<del>-</del>		ection 509(a)(1) or section 509(a)(2) See <b>Section 509(a)(3).</b> Check							
				type of supporting organiza  Type II c			nally Intec		d d	Гтуре	III - Other		
e	Г		• •	rtify that the organization is				•					
	•	-		agers and other than one or									
		section 50											
f		If the orgar check this		d a written determination fro	m the IRS	5 that it is	a Type I,	Type II o	r Type III	supporti	ng organization, —	-	
g				as the organization accepte	d anv gift	or contrib	ution from	anv of the	<u> </u>		,		
3		following pe			, 5			,					
		(i) a perso	n who directly o	r indirectly controls, either a	alone or to	ogether wi	th persons	describe	d ın (ıı)		Yes No	_	
		and (III) bel	low, the governi	ng body of the the supported	d organıza	tion?				11g	(i)	_	
		(ii) a famıly	y member of a p	erson described in (i) above	?					11g(	(ii)	_	
		(iii) a 35%	controlled enti	ty of a person described in (	(i) or (ii) a	bove?				11g(	iii)	_	
h		Provide the	following infori	nation about the organizatio	ns the org	ganızatıon	supports						
			T						Τ		_	_	
		ame of	(ii) EIN	(iii) Type of organization		is the	1	ou notify		sthe	(vii) A mount	οf	
		oorted nization		(described on lines 1-9 above or IRC section		ation in listed in		inization i) of your		ation in	support?		
Organization above or IRC section col (i) listed in in col (i) of your col (i) organized your governing support? in the U.S.?													
	document?												
	Yes No Yes No												
												_	
												_	

Total

Part II	Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
	(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Pι	ıblic Support		, ,	,				
Cale	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received (Do not							
	include any "unusual grants ")							
2	Tax revenues levied for the organization's							
	benefit and either paid to or expended on							
_	its behalf The value of services or facilities					<del> </del>		
3	furnished by a governmental unit to the							
	organization without charge							
4	Total. Add line 1-3					1		
5	The portion of total contribution by each							
5	person (other than a government unit or							
	publicly supported organization) included							
	on line 1 that exceed 2% of the amount							
	shown on line 11, column							
	· (f)							
6	Public Support subtract line 5 from line							
	4							
	otal Support		1		T			
	endar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e) :	2008	(f) Total
7	A mounts from line 4							
8	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties and income from similar							
_	sources							
9	Net income from unrelated business							
	activities, whether or not the business is regularly carried on							
10	Other income Do not include gain or loss							
10	from the sale of capital assets (Explain in							
	Part IV )							
11	Total Support (Add lines 7 through 10)							
12	Gross receipts from related activities, etc	(See instructio	ns )		•	12		
13	First Five Years. If the Form 990 is for the	organization's f	irst second thu	d fourth or fifth	ntay vearas a F		3)	
	organization, check this box and <b>stop here</b>		mat, second, tim	u, rouren, or mer	rtax year as a s	/O1(C)(C	• •	<b>▶</b> □
								•
Co	omputation of Public Support Perc	entage						
14	Public Support Percentage for 2008 (line 6	5 column (f) dıvı	ded by line 11 c	olumn (f))		14		
15	Public Support Percentage for 2007 School	dule A , Part IV -	A, line 26f			15		
16a	33 1/3% Test - 2008. If the organization di	d not check the	box on line 13.	and line 14 is 3	3 1/3% or more.		this box	
	and stop here. The organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box  and stop here. The organization qualifies as a publicly supported organization  ▶ □							
b	33 1/3% Test - 2007. If the organization d				15 is 33 1/3% d	r more,	check th	
	box and stop here. The organization qualifi	es as a publicly	supported orga	nızatıon				<b>▶</b> □
17a	10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or							
	more, and if the organization meets the "fa		•					· —
	organization meets the "facts and circums							<b>►</b> □
Ь	10% Facts and Circumstances Test - 2007.							
	more, and if the organization meets the "fa		•					_
4.0	the organization meets the "facts and circu							n ▶
18	<b>Private Foundation.</b> If the organization did	not check the b	oux on line 13, 1	oa, 160, 1/a or	1/D, check this	oox an	u see	<b>▶</b> □
	ınstructions							F-1

#### Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you check	ted the box on	illie 9 01 Part	1.)				
	ction A. Public Support	( ) 2004	(1) 2005	( ) 2006	(1) 2007		2000	/6\ T + 1
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007	(e)	2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not	1,365,145	1,417,557	1,423,280	1,837,038		1,856,139	7,899,159
_	include any "unusual grants ")							
2	Gross receipts from admissions, merchandise sold or services performed,							
	or facilities furnished in any activity that	3,346,371	4,052,560	4,839,604	4,257,060		3,031,336	19,526,931
	is related to the organization's tax-	-,,	.,,	,,,,,,,,	.,,		-,,	,,
	exempt purpose							
3	Gross receipts from activities that are							
	not an unrelated trade or business under section 513							
4	Tax revenues levied for the							
	organization's benefit and either paid to							
	or expended on its behalf							
5	The value of services or facilities							
	furnished by a governmental unit to the organization without charge							
6	Total Add lines 1-5	4,711,516	5,470,117	6,262,884	6,094,098		4,887,475	27,426,090
	Amounts included on lines 1, 2, and 3	.,,	2, 2, 22	-,,,,,,	2,22.,222		.,,	
<i>7</i> a	received from disqualified persons							
ь	A mounts included on lines 2 and 3							
	received from other than disqualified							
	persons that exceed the greater of 1% of							
	the total of lines 9, 10c, 11, and 12 for							
	the year or \$5,000							
С	Total of lines 7a and 7b							
8	Public Support (Substract line 7c from							27,426,090
	line 6)							
	tal Support	( ) 2004	(1) 2005	( ) 2006	(1) 2007		2000	(C) T
	ndar year (or fiscal year beginning in)	(a) 2004	<b>(b)</b> 2005	(c) 2006	(d) 2007		2008	(f) Total
9	A mounts from line 6	4,711,516	5,470,117	6,262,884	6,094,098		4,887,475	27,426,090
10a	Gross income from interest, dividends, payments received on securities loans,							
	rents, royalties and income from similar	60,554	72,509	90,599	111,942		53,293	388,897
	sources							
b	Unrelated business taxable income (less							_
	section 511 taxes) from businesses							
	acquired after 30 June, 1975							
c	Add lines 10a and 10b	60,554	72,509	90,599	111,942		53,293	388,897
11	Net income from unrelated business							
	activities not included in line 10b,							
	whether or not the business is regularly							
4.5	Carried on							
12	Other income Do not include gain or loss from the sale of capital assets	69,173	87,719	65,516	64,487		10,061	296,956
	(Explain in Part IV )	33,213	0.,.25	55,525	5.,.5.		10,001	250,500
13	Total Support (Add lines 9, 10c, 11 and							20.111.042
	12)							28,111,943
14	First Five Years If the Form 990 is for the o	rganızatıon's firs	st, second, third	, fourth, or fifth t	ax year as a 50	)1(c)(3	3) organıza	ation,
	check this box and <b>stop here</b>							<b>►</b> □
	mputation of Public Support Perce		- d b., l., - 42	l (6)				
15	Public Support Percentage for 2008 (line 8			rumn (T))		15		97 560 %
16	Public Support Percentage for 2007 Sched	ule A , Part IV -A	, lıne 27g			16		98 060 %
Co	mputation of Investment Income	Percentage						
17	Investment Income Percentage for <b>2008</b> (III		f) divided by line	= 13 column (f))		17		1 380 %
18	Investment Income Percentage from 2007							
	33 1/3% Tests - 2008. If the organization di	•	·		oro than 22 1/2	18 % 2 2 2 2	dlina	1 300 %
T 2 d	וווי ווופענו אין אין ביל ביל זו ווופ אין	u not check tile	DOX OIL HILL 14,	ana mis TD 12 M	OIE (11011 33 1/3	∕υ, dil(	a iiiie	

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% Tests - 2007. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

▶▽

Part IV	<b>Supplemental Information.</b> Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide and any other additional information. (see instructions)
	Facts and Circumstances Test

Schedule A (Form 990 or 990-EZ) 2008

**SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

To be completed by organizations described below. Attach to Form 990 or Form 990-EZ

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities)

- ◆ Section 501(c)(3) organizations complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990EZ, Part VI, line 47 (Lobbying Activities)

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	e organization answered "Ye ection 501(c)(4), (5), or (6) organi	s," to Form 990, Part IV, Line 5 (F	Proxy Tax)				
Na	time of the organization tional Middle School Association	·		Employer ider 31-0865702	tification number		
Par		oy all organizations exempted the instructions for Schedule			527		
1	Provide a description of the or	ganızatıon's dırect and ındırect polı	tıcal campaıgn act	civities in Part IV			
2	Political expenditures				\$		
3	V olunteer hours						
Par	<b>t I-B To be completed b</b> for Schedule C for d	oy all organizations exemptetails.)	t under section	<b>n 501(c)(3).</b> (See the	instructions		
1	Enter the amount of any excise	e tax incurred by the organization u	nder section 4955	j	\$		
2	Enter the amount of any excise	e tax incurred by organization mana	igers under section	n 4955	\$		
3	If the organization incurred in	a section 4955 tax, did it file Form	4720 for this year	·?	┌ Yes		
4a	Was a correction made?				☐ Yes ☐ No		
ь	If "Yes," describe in Part IV						
Par		y all organizations exempt for Schedule C for details.)	t under section	n 501(c), except sect	tion 501(c)(3).		
1	Enter the amount directly expe	ended by the filing organization for s	section 527 exemp	ot function activities	\$		
2	Enter the amount of the filing of 527 exempt funtion activities	organization's internal funds contrib	uted to other orga	nizations for section	\$		
3	Total of direct and indirect exe 1120-POL, line 17b	empt function expenditures Add lin	es 1 and 2 and ent	er here and on Form	\$		
4	Did the filing organization file <b>I</b>	Form 1120-POL for this year?			┌ Yes		
5	were made Enter the amount p political contributions received	nd Employer Identification Number paid and indicate if the amount was d and promptly and directly delivere action committee (PAC) If addition	paid from the filinged to a separate po	g organization's own interna olitical organization, such a	l funds or were s a separate		
	(a) Name	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-					
<u></u>	Damamusula Daduskian Ask Naki-	soo the instructions for Form 900	Cat No E	00046 <b>Sahadala 6</b> 4	Form 000 or 000 E7\ 2008		

**d** Grassroots non-taxable amount

**f** Grassroots lobbying expenditures

e Grassroots ceiling amount (150% of line d, column (e))

P	art II-A To be completed by (election under sec						768
	Check If the filing organization	belongs to an affili	ated group				
<u>B</u>	Check If the filing organization  Limits on Lo  (The term "expenditure	bbying Expend	litures—		oly	(a) Filing Organization's Totals	( <b>b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influe	nce public opinion	(grass roots lob	bying)			
ь	Total lobbying expenditures to influe	nce a legislative b	ody (direct lobby	yıng)			
c	Total lobbying expenditures (add line						
d	Other exempt purpose expenditures						
e	Total exempt purpose expenditures	(add lines 1c and 1	Ld)				
f	Lobbying nontaxable amount Enters columns—  If the amount on line 1e, column (a) or (b) is:  Not over \$500,000		taxable amount				
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% o	of the excess over \$	500,000			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% o	of the excess over \$	51,000,000			
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of	f the excess over \$1	1,500,000			
	Over \$17,000,000	\$1,000,000					
	Grassroots nontaxable amount (ente	er 25% of line 1f)					
h	Subtract line 1g from line 1a Enter	0- ıflıne g ıs more	than line a				
i	Subtract line 1f from line 1c Enter-	0- ıflıne fıs more t	than line c				
j	If there is an amount other than zero section 4911 tax for this year?	on either line 1h c	or line 11, did the	organization file	Form 4720 rep	orting	┌ Yes ┌ No
	(Some organizations tha columns below.		on 501(h) el	ection do not	: have to cor		he five
	Lobb	ying Expendit	ures During	4-Year Avera	ging Period		
	Calendar year (or fisca beginning in)	l year	(a) 2005	<b>(b)</b> 2006	(c) 2007	( <b>d)</b> 2008	(e) Total
_2a	Lobbying non-taxable amount						
	Lobbying ceiling amount (150% of line 2a, column(e))						
	c Total lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2008

Part II-B	To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form
	<b>5768 (election under section 501(h)).</b> (See the instructions for Schedule C for details.)

j Total lines 1c through 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912			(a	1)	(b)
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of  Volunteers? No  Paid staff or management (include compensation in expenses reported on lines c through i)?  Media advertisements? No  Mailings to members, legislators, or the public? Publications, or published or broadcast statements? No  Grants to other organizations for lobbying purposes? No  Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? No  Other activities If "Yes," describe in Part IV Yes 61,11: 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? No  If "Yes" enter the amount of any tax incurred under section 4912			Yes	No	A mount
b Paid staff or management (include compensation in expenses reported on lines c through i)?  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 Other activities If "Yes," describe in Part IV  yes 61,117  j Total lines 1c through 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	1	legislation, including any attempt to influence public opinion on a legislative matter or			
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?  Direct contact with legislators, their staffs, government officials, or a legislative body?  Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?  No  i Other activities If "Yes," describe in Part IV  yes 61,11:  1 Total lines 1c through  1 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	а	Volunteers?		Νo	
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 Other activities If "Yes," describe in Part IV  f Total lines 1c through  li  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	b	Paid staff or management (include compensation in expenses reported on lines c through i)?	Yes		
Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  Direct contact with legislators, their staffs, government officials, or a legislative body?  Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?  No  Other activities If "Yes," describe in Part IV  Yes  61,11:  10  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes" enter the amount of any tax incurred under section 4912  If "Yes" enter the amount of any tax incurred by organization managers under section 4912	c	Media advertisements?		Νo	
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 Other activities If "Yes," describe in Part IV  yes 61,11:  1 Total lines 1c through  1 I  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	d	Mailings to members, legislators, or the public?	Yes		
p Direct contact with legislators, their staffs, government officials, or a legislative body?  Pallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?  No  Other activities If "Yes," describe in Part IV  Total lines 1c through  1	е	Publications, or published or broadcast statements?		Νo	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?  i Other activities If "Yes," describe in Part IV  yes 61,117  1 Total lines 1c through 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	f	Grants to other organizations for lobbying purposes?		Νo	
i Other activities If "Yes," describe in Part IV  j Total lines 1c through 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		
j Total lines 1c through 11  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  b If "Yes" enter the amount of any tax incurred under section 4912  c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?		Νo	
1   2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	i	Other activities If "Yes," describe in Part IV	Yes		61,117
b If "Yes" enter the amount of any tax incurred under section 4912 c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	j				61,117
c If "Yes" enter the amount of any tax incurred by organization managers under section 4912	2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	
	b	If "Yes" enter the amount of any tax incurred under section 4912			
	c	If "Yes" enter the amount of any tax incurred by organization managers under section 4912		Ī	
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

# Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). (See the instructions for Schedule C for details.)

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

# Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." (See the instructions for Schedule C for details.)

2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current Year	2a \$	
ь	Carryover from last year	2b \$	
c	Total	2c \$	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3 \$	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political		
	expenditure next year?	4 \$	
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)	5 \$	

#### Part IV Supplemental Information

Dues, assessments and similar amounts from members

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Ident if ier	Return Reference	Explanation
Part II-B, Line 11	Activities	consulting, travel, printing and postage fees to influence national, state or local legislation the organization hires a contractor to represent its interests in Washington, DC

1 \$

Part IV Supplemental I	Part IV Supplemental Information					
Ident if ier	Return Reference	Explanation				

Schedule C (Form 990 or 990EZ) 2008

OMB No 1545-0047

Open to Public Inspection

# **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Supplemental Financial Statements**

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

**Employer identification number** National Middle School Association

			31-0865702
	ganizations Maintaining Donor Adv anızatıon answered "Yes" to Form 990		inds or Accounts. Complete if th
010	dinzadon answered 165 to form 990	(a) Donor advised funds	(b) Funds and other accounts
Total numb	per at end of year		
Aggregate	Contributions to (during year)		
Aggregate	Grants from (during year)		
Aggregate	value at end of year		
	ganization inform all donors and donor adviso the organization's property, subject to the oi		or advised <b>Yes No</b>
used only	ganization inform all grantees, donors, and d for charitable purposes and not for the bene ible private benefit?	<del>-</del> <del>-</del>	may be
rt III Co	<b>nservation Easements.</b> Complete ıf	the organization answered "Yes" to	Form 990, Part IV, line 7.
Prese	) of conservation easements held by the org rvation of land for public use (e g , recreatio ction of natural habitat	n or pleasure) Preservation of an	historically importantly land area tified historic structure
Prese	rvation of open space		
	lines 2a–2d if the organization held a qualifi day of the tax year	ed conservation contribution in the form	
<b>.</b>			Held at the End of the Ye
	nber of conservation easements		2a
	eage restricted by conservation easements		2b
	f conservation easements on a certified his	` ,	2c
Number o	f conservation easements included in (c) ac	quired after 8/17/06	2d
Number of	conservation easements modified, transfer	red, released, extinguished, or terminated	d by the organization during
the taxabl	e year ►		
Number of	states where property subject to conservat	ion easement is located ►	
	organization have a written policy regarding on nt of the conservation easements it holds?	the periodic monitoring, inspection, viola	tions, and Yes No
Staff or vo	lunteer hours devoted to monitoring, inspec	ting and enforcing easements during the	year <b>►</b>
A mount of	expenses incurred in monitoring, inspecting	g, and enforcing easements during the ye	ar <b>►</b> \$
	conservation easement reported on line 2( (B)(ı) and 170(h)(4)(B)(ıı)?	d) above satisfy the requirements of sect	tion Yes No
balance sh	V , describe how the organization reports cor neet, and include, if applicable, the text of th zation's accounting for conservation easeme	e footnote to the organization's financial	
	ganizations Maintaining Collection mplete if the organization answered "Y		or Other Similar Assets.
art, histori	nization elected, as permitted under SFAS 1 cal treasures, or other similar assets held fo Part XIV, the text of the footnote to its fina	or public exhibition, education or researc	h ın furtherance of public service,
historical	nization elected, as permitted under SFAS 1 treasures, or other similar assets held for pu e following amounts relating to these items	,	•
(i) Revenu	ies included in Form 990, Part VIII, line 1		<b>►</b> \$
(ii) <sub>Assets</sub>	included in Form 990, Part X		<b>►</b> \$
If the orga	nization received or held works of art, histor mounts required to be reported under SFAS	· · · · · · · · · · · · · · · · · · ·	,
Revenues	included in Form 990, Part VIII, line 1		<b>►</b> \$
			<b>b-</b> ¢
	included in Form 990, Part VIII, line 1		<b>▶</b> \$ <b>▶</b> \$

2	TIII Organizations Maintaining Collections of A	t, mis		cai iicasai	00, 01 0 1110	Dillillai A330		
3	Using the organization's accession and other records, check a items (check all that apply)	ny of th	he fol	lowing that are	a sıgnıfıcant u	se of its collection	ı	
а	Public exhibition	d	Γ	Loan or exch	ange programs			
b	Scholarly research	e	$\Gamma$	Other				
c	Preservation for future generations							
4	Provide a description of the organization's collections and exp Part XIV	laın ho	w the	y further the o	ganızatıon's ex	empt purpose ın		
5	During the year, did the organization solicit or receive donation assets to be sold to raise funds rather than to be maintained a						Yes	Г No
Par	Trust, Escrow and Custodial Arrangements Part IV, line 9, or reported an amount on Form 9				nization answ	ered "Yes" to Fo	rm 9	90,
1a	Is the organization an agent, trustee, custodian or other internincluded on Form 990, Part X?	nediary	forc	ontributions o	r other assets r		Yes	┌ No
b	If "Yes," explain why in Part XIV and complete the following ta	ble						
					<u> </u>	A mou	nt	
с	Beginning balance				1c			
d	Additions during the year				1d			
e	Distributions during the year				1e			
f	Ending balance				1f			
2a	Did the organization include an amount on Form 990, Part X, li	ne 21?	•			Г	Yes	☐ No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if the organization	_					· - ·	
4 -	(a)Current Year	(D	)Prior	rear   (c) i wo	Years Back (d)	Three Years Back (e	)Four Y	ears Back
1a L	Beginning of year balance	-						
b	Contributions	_						
с	Investment earnings or losses	-						
d	Grants or scholarships	_						
е	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	– I as						
а	Board designated or quasi-endowment							
ь								
9	Permanent endowment 🕨							
c								
	Permanent endowment ►  Term endowment ►  Are there endowment funds not in the possession of the organi	zation	that a	are held and ac	Iministered for	the		
c	Term endowment ►	zation	thata	are held and ac	Iministered for	the	Yes	No
c	Term endowment ► Are there endowment funds not in the possession of the organi	zation • .	that a	are held and ac	Iministered for	3a(i)	Yes	No
с За	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations				Iministered for	3a(i)	Yes	No
c 3a b	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	• • • • • • • • • • • • • • • • • • •	Sched	 ule R?	Iministered for	3a(i)	Yes	No
c 3a b 4	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Sched	 ule R?		3a(i)	Yes	No
c 3a b 4	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Sched ent fu See F	ule R? nds orm 990, Pa	rt X, line 10.	3a(i)	Yes	No
c 3a b 4	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Schedent fu	 ule R?		3a(i)		No Dok value
c 3a b 4 Par	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Schedent fu	ule R? Inds Orm 990, Pa	rt X, line 10.	3a(i) 3a(ii) 3b		
c 3a b 4 Par	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Schedent fu	ule R? Inds Orm 990, Pa	rt X, line 10.  (b)Cost or other basis (other)	3a(i) 3a(ii) 3b		pok value
c 3a b 4 Par	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Schedent fu	ule R? Inds Orm 990, Pa	rt X, line 10. (b)Cost or other basis (other)	3a(i) 3a(ii) 3b		pok value
c 3a b 4 Par	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Schedent fu	ule R? Inds Orm 990, Pa	rt X, line 10.  (b)Cost or other basis (other)	3a(i) 3a(ii) 3b		
c 3a  b 4  Par  1a  b c d  e e	Term endowment   Are there endowment funds not in the possession of the organic organization by  (i) unrelated organizations	ed on S	Schedent fu	ule R?	rt X, line 10. (b)Cost or other basis (other)	(c) Depreciation		pok value

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12 ) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
			]	
			]	
			]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25 ) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	4,896,430
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,483,093
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-586,663
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
_	Prior period adjustments	7	-57,565
	Other (Describe in Part XIV)	8	
_	Total adjustments (net) Add lines 4 - 8	9	-57,565
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-644,228
Part			
1	Total revenue, gains, and other support per audited financial statements	1	5,346,987
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines <b>2a</b> through <b>2d</b>	2e	450,557
3	Subtract line <b>2e</b> from line <b>1</b>	3	4,896,430
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines <b>3</b> and <b>4c.</b> (This should equal Form 990, Part I, line 12)	5	4,896,430
Part :	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	urn
1	Total expenses and losses per audited financial statements	1	5,933,650
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV) 2d 450,557		
e	Add lines <b>2a</b> through <b>2d</b>	2e	450,557
3	Subtract line <b>2e</b> from line <b>1</b>	3	5,483,093
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	5,483,093
	XIV Supplemental Information		

Ident if ier	Return Reference	Explanation
Part XII, Line 2d - Other Adjustments		COGS 450420 Event expense 137
Part XIII, Line 2d - Other Adjustments		COGS 450420 Event Expense 137

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493137031000

OMB No 1545-0047

2008

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

**Compensation Information** For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Open to Public Inspection

Name of the organization National Middle School Association **Employer identification number** 

31-0865702

Pa	rt I Questions Regarding Compensatio	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III		,			
	First class or charter travel	$\vdash$	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If line 1a is checked, did the organization follow a w provision of all the expenses described above? If "N			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organizatiorganization's CEO/Executive Director Check all the		·			
	Compensation committee	굣	Written employment contract			
	Independent compensation consultant	고	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990,	Part VI	I, Section A, line 1a			
а	Receive a severance payment or change of control	payment	t?	4a		Νo
b	Participate in, or receive payment from, a suppleme	ntal non	qualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	501(c)(3) and 501(c)(4) organizations only must co	mplete	lines 5-8.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization?			6a		Νo
b	Any related organization?			6b		Νο
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," o			7		No
8	Were any amounts reported in Form 990, Part VII, subject to the initial contract exception described in Part III			8		No

Cat No 50053T

#### 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	<b>(F)</b> Compensation reported in prior Form
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	990 or Form 990-EZ
elizabeth edwards	(I) (II)	171,273				10,177	181,450	153,455
sue swaim	(E) (E)			51,612		16,926	68,538	
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### 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

Ident if ier	Return Reference	Explanation
-		
	·	

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Open to Public Inspection

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered

**Transactions with Interested Persons** 

"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38b or 40b.

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under	ame of the organization ational Middle School Association
Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).  To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b  (a) Name of disqualified person  (b) Description of transaction  Yes No	tional made sensor, assertion.
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b  (a) Name of disqualified person  (b) Description of transaction  Yes No	rt I Excess Benefit Tr
1 (a) Name of disqualified person (b) Description of transaction Yes No	
Yes No	(a) Name of dis
2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under	<u> </u>
2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under	
2 Enter the amount of tay imposed on the organization managers or disqualified persons during the year under	
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2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under	
2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under	
2 Eliter the amount of tax imposes on the organization managers of alsquamica persons saring the jet. and s.	<b>2</b> Enter the amount of tax Imp
section 4958	
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	3 Enter the amount of tax, If a
Part II Loans to and/or From Interested Persons	·
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a	To be completed by
(b) Loan to or	
(a) Name of interested person and from the (c)O riginal principal (d)Balance due default? by hoard or lagreement	(a) Name of interested persor
purpose organization? amount (d)Balance due deladit. By Board of agreement	purpose
To From Yes No Yes No Yes No	
otal	
Part III Grants or Assistance Benefitting Interested Persons	
To be completed by organizations that answered "Yes" on Form 990, Part IV, line 27.	To be completed b
(a) Name of interested person  (b) Relationship between interested person and the organization  (c) A mount of grant or type of assistance	(a) Name of interested pe
and the organization	

#### Part IV Business Transactions Involving Interested Persons

To be completed by organizations that answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
Patti Kinney	Former Trustee	2,194	On-site speaking engagement		Νο
Mark Springer	former Trustee	768	On-site speaking engagement		Νο
sue swaim	former executive director/secretary	2,714	on-site speaking engagement		Νο
john swaim	spouse of former exec director/secretary	192	on-site speaking engagement		Νο

## OMB No 1545-0047

Inspection

# **SCHEDULE 0**

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization National Middle School Association **Employer identification number** 

31-0865702

ldentifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	PUBLICATIONS - OFFER NUMEROUS PUBLICATIONS RELATING TO MIDDLE LEVEL EDUCATION Expenses \$ 1229972 including grants of \$ 0 Revenue \$ 1034096

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		the organization has paid members made up of middle school professionals

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		the members of the organization vote on the voting board of directors

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The Form 990 is prepared by the organization's outside accounting firm. Before the return is filed with the IRS, the president and director of Finance review, the return in its entirety and any applicable corrections are made before it is filed. The Form 990 is made available to the board when it has been prepared and throughout the year.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Annual form completed, policy referenced at board meetings

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		during the past fiscal year, the board approved a 3% across-the-board salary increase for all employees, officers and key employees at the mid-point of the year, the organization cut salaries for all employees (5%) and officers and key employees (7.5%) due to the downturn in the organization's financial position

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Governing documents, conflict of interest policy and financial statements are kept on site and made available upon request

ldentifier	Return Reference	Explanation
Form 990, Part VII	Contact Addresses for Officers, Directors, Etc	elizabeth edwards - 29488 Perdido Beach Blvd Orange Beach, AL 36561 Jeffrey Ward (-01/23/09) - 13 Laurelwood Dr Mount Vernon, OH 43050 jack berckemeyer - 9648 Perry St Westminster, CO 80031 sue swaim - PO Box 81 Aurora, ME 04408

ldentifier	Return Reference	Explanation						
form 990, part vii	Former executive director/secretary	Sue sw aim, the former executive director/secretary of the organization, received the payout of her deferred sick pay, pension and insurance during the current fiscal year						

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OMB No 1545-0172

Department of the Treasury

# **Depreciation and Amortization** (Including Information on Listed Property)

Internal Revenue Service Attachment See separate instructions. ► Attach to your tax return. Sequence No 67 Identifying number Business or activity to which this form relates Name(s) shown on return National Middle School Association Form 990 Page 10 31-0865702 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. 250,000 **1** Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 800,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -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 (b) Cost (business use (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 **8** Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 **10** Carryover of disallowed deduction from line 13 of your 2007 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the 14 tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 52,714 17 MACRS deductions for assets placed in service in tax years beginning before 2008 18 If you are electing to group any assets placed in service during the tax year into one or more Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation year placed in (business/investment (e) Convention (f) Method property period deduction service use only—see instructions) 19a 3-year property 15,199 5.0 ΗY 200 DB 3,040 **b** 5-year property 5,665 7 0 ΗY 200 DB 810 **c** 7 - year property d 10-year property e 15-year property 150 200 DB 255 f 20-year property 25 yrs S/L g 25-year property h Residential rental 27 5 yrs ММ S/L property 27 5 yrs ΜМ S/L i Nonresidential real 39 yrs ММ S/L property ΜМ S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year S/L S/L **c** 40-year **Summary** (See instructions) Part IV 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 22 56,819 and on the appropriate lines of your return Partnerships and S corporations—see instr 23 For assets shown above and placed in service during the current year, enter the

23

Form 4562 (2008) Page 2 Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and Part V property used for entertainment, recreation, or amusement.) **Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable. Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.) 24a Do you have evidence to support the business/investment use claimed? Yes No 24b If "Yes," is the evidence written? Yes No (c) (i) (e) (b) Business/ (d) (h) (a) (g) Basis for depreciation Flected Type of property (list Date placed in investment Cost or other Recovery Method/ Depreciation/ section 179 (business/investment deduction vehicles first) basis Convention service use period cost use only) percentage 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use (see instructions) 25 26 Property used more than 50% in a qualified business use % % 27 Property used 50% or less in a qualified business use S/L -% S/L -28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles (a) (b) (c) (d) (e) (f) 30 Total business/investment miles driven during the Vehicle 2 Vehicle 4 Vehicle 1 Vehicle 3 Vehicle 5 Vehicle 6 year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal(noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32 34 Was the vehicle available for personal use No No Yes No No No Yes Yes Yes Yes Yes No during off-duty hours? . . . 35 Was the vehicle used primarily by a more than 5% owner or related person? . . . . . **36** Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No **38** Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners . . . 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? . . . . . . . . 41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions) . . . Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles Part VI **Amortization** (b) (e) (d) (f) (c) (a) Date A mortization A mortizable Code A mortization for Description of costs amortization period or amount section this year

#### begins percentage 42 A mortization of costs that begins during your 2008 tax year (see instructions) 43 A mortization of costs that began before your 2008 tax year 43 27,514 44 Total. Add amounts in column (f) See the instructions for where to report 44

#### Software ID: Software Version:

**EIN:** 31-0865702

Name: National Middle School Association

#### Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	<del>-</del>	I								
		(C) Position (check all that apply)							<b>(E)</b>	(F)
<b>(A)</b> Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
theresa hinkle , Past president	2 00	Х						0	0	0
Janet Vernon , President	2 00	Х		Х				0	0	0
Cathie Thibodeau , president-Elect	2 00	Х		Х				0	0	0
Sharon Riley Ordu , trustee	2 00	Х						0	0	0
Nancy Poliseno , trustee	2 00	Х						0	0	0
Kathleen McCaffrey , trustee	2 00	Х						0	0	0
carol deets , trustee	2 00	Х						0	0	0
joan jarrett , trustee	2 00	Х						0	0	0
Mike Muir , trustee	2 00	Х						0	0	0
lynn scearcy , trustee	2 00	Х						0	0	0
jeff La Roux , trustee	2 00	Х						0	0	0
ed vittardi , trustee	2 00	Х						0	0	0
jan burgess , trustee	2 00	Х						0	0	0
carole carlson , Trustee	2 00	Х						0	0	0
debra melle , Trustee	2 00	Х						0	0	0
Dave Puckett , trustee	2 00	Х						0	0	0
vicki denmark , trustee	2 00	Х						0	0	0
ashley smith , trustee	2 00	Х						0	0	0
elizabeth edwards , executive director/secre	40 00			х				171,273	0	10,177
Jeffrey Ward -012309 , Deputy Director/Treasure	40 00			х				113,609	0	24,400
Ann Eichel 012409 - , Director/Treasurer	40 00			х				86,745	0	8,674
jack berckemeyer , director	40 00					Х		91,548	0	13,988
sue swaım , former exec dırector/sec	0 00						Х	51,612	0	16,926

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a ANNUAL CONFERENCE	541,900	1,723,943	1,723,943		
<b>b</b> Membership	541,900	1,372,451	1,372,451		
c PROFESSIONAL DEVELOPME	541,900	1,102,480	1,102,480		
<b>d</b> subscriptions	541,800	335,766	130,853	204,913	
e program sponsorships	541,900	257,623	257,623		

#### Form 990, Part III, Line 1 - Briefly describe the organization's mission:

Since its inception in 1973, National Middle School Association (NMSA) has been a voice for those committed to the educational and developmental needs of young adolescents. NMSA is the only national education association dedicated exclusively to those in the middle level grades. With over 25,000 members representing principals, teachers, central office personnel, professors, college students, parents, community leaders, and educational consultants across the United States, Canada, and 46 other countries, NMSA welcomes and provides support to anyone interested in the health and education of young adolescents.