

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047 2008 Open to Public

Intern	al Revenue Se	rvice	The organi			opy of this return to			requireme	ents		<u>nspecti</u>	ion
A F	or the 2008 c	alendar yea	r, or tax year beginnl	<sub>ng</sub> 9/	<u>/01/08</u>	, and ending	8/31/	09					
3_ C	heck if applicable,	Please	C Name of organization						D	) Emplo	oyer identi	ification nu	umber
A	ddress change	use IRS label or		MIDLAN	D CITY	EDUCATIO	N ASSC	CIATI	ON				
N	ame change	print or	Doing Business As							38-	-6081	046	
ı Ir	itial return	type	Number and street (or F		t delivered to stre	et address)		Room/su	ite E	Teleph	one numbe	er	
i		See Specific	509 Vanc	<u>e Road</u>									
1	ermination	Instruc-	City or town, state o	r country, and Z	IP + 4	10.61	•		<u>_</u>	Gross rece	eipts \$	580	0,418
A	mended return	tions.	Midland			MI 4864	0						
] <sub>A</sub>	pplication pending	F Name	and address of principa	al officer					H	i(a) is this	a group retur	$\overline{}$	
									_   <sub>H</sub>	affiliate I(b) Are all		Yes	X No
										include		Yes	∐ No
										If "No,	" attach a list	(see instructi	uons)
	ax-exempt stat		501(c) ( <b>5</b> )	(insert no )	4947(a	)(1) or 52	7					_	
	Vebsite: 🕨		<del></del>		1 .				•	(c) Group	exemption n		
_	ype of organizatio		oration Trust	Association	Other -			Year of form	nation		M State of	f legal domicile	<u>e                                    </u>
2		Summary			<del></del>						_		
-	•		e organization's mis:		_	ivities:							
,	Edu	cation	al advanceme	ent of Ch	nildren								
1			_										
ł	2 Check t		_		-	ations or disposed	of more than	25% of its	assets				
	3 Number	r of voting r	members of the gove	erning body (F	Part VI, line 1	a)				3			
	4 Number	r of indeper	ndent voting membe	rs of the gove	rning body (F	Part VI, line 1b)				4			
l	5 Total nu	umber of en	nployees (Part V, Iin	ıe 2a)						5	0		
l	6 Total nu	umber of vo	olunteers (estimate i	f necessary)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	_			6			
l	7a Total gr	oss unrelat	ted business revenu	e from Part VI	II, line 12; cq	WITH CET TYPET				7a			
1	<b>b</b> Net unr	elated busi	ness taxable income	e from Form 9	90-T <mark>∥, line.34</mark>	COCIVE	ان. ر			7b			0
				41.5			S	-	Prior Year		C	urrent Year	
ĺ			grants (Part VIII, line		337	JAN 1 2 201	0 8		570	554		562,	705
	-		evenue (Part VIII, lin		X 1		S		570	143			, 703 113
ĺ	10 Investm	ent income	e (Part VIII, column (	A), lines 3, 4,	and (d)	CDEN II	,		10	, 329		10	,412
			irt VIII, column (A), li										
۲			ld lines 8 through 11			mn (A), line 12)				,026			<u>,230</u>
			amounts paid (Part							, 600			<u>, 600</u>
		-	for members (Part I		•	. (4) 1 5 . 40)			125	,904		138,	7/0
			npensation, employe			1 (A), lines 5–10)			133	, 904		130	, /40
١			aising fees (Part IX,										
•		_	xpenses (Part IX, co			•			442	,272		121	, 359
l		-	Part IX, column (A), I			l' 05)				,776			, <u>339</u> , 707
		•	dd lines 13-17 (musi	-		iiiie 25)				-750			<u>, 707</u> 523
2	19 Revenu	ie iess expe	enses Subtract line	18 from line 1	<u>Z.,,,,,</u>			Be	ginning of Y		E	nd of Year	
5	20 Total as	sets (Part	X. line 16)						122			122,	
Fund Balances	21 Total lia	•	•										-
Ę		•	balances. Subtract	line 21 from lir	ne 20				122	,445		122,	,968
_		Signature					-						
Ť			es of penury, I declare t	hat I have exam	ned this return	, including accompan	vina schedules	and stateme	ents, and to	the best o	f my knowl	edge	
			true, correct, and com							er has any	y knowledg	е	
gı	, h	· × X	arisel x	1. Ki	a Czm	erek)				1/-	4-20	)/0	
r		Signature	of officer				_			Date			
		JL	aure S. F	aczma	arek	MCEA	Tneasu	rer					
		Type or p	onnt name and title		<del></del>	•							
			1///	1		•	Date		Check if	-		r's identifying	number
ii	1 1	reparer's ignature	1 11 81	<i>F</i>			1	22/09	self- employed	▶ X	(see insi	tructions) 11184'	78
e	parer's <del>□</del>		r roy gro	d Spike	r, CPA	<del> </del>	12/	, 03	employed			3-2674	
е	~,,,,	ım's name (	or yours 272	5 N. Ea						EIN	F 30		
	, it	self-employe ddress, and 2	,,	o N. Ea land, M						Phone	989_	832-0	0095
_				<del></del>						no 🕨	J 0 3		No
ıy_	uie iko aiscu	iss uns retu	irn with the preparer	SHOWII ADOVE	: (see insuu	CuUIIS)						Yes	O (2008)

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

Form **990** (2008)

<u> Pa</u>	art IV Checklist of Required Schedules			
	_		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	cemplete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	{	X
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	J	j	
	Schedule C, Part II	4		
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		X
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	j		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete		-	
	Schedule D, Part I	6		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			••
	complete Schedule D, Part III	8		X
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,"			
	complete Schedule D, Part IV	9		X
10	, , , , , , , , , , , , , , , , , , ,	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,		<b>.</b> ,	
		11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			7.7
		12		X
13	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	13		X
14a		4a		X
þ				v
		4b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			v
		15	<del></del> +	<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			v
		16		X
17		17		X
18		18		X
19		19 20		$\frac{\mathbf{x}}{\mathbf{x}}$
20		<del></del>		X
21		21	┯╁	$\frac{\mathbf{x}}{\mathbf{x}}$
22		22		
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete	,,		x
14-	- ** · · · · · ·	23	<del></del> +	
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		ł	
		42	ĺ	X
<b>L</b>		4a 4b		
þ		•••		
С		4c		
ч	· · · ·	4d		
d 25a		<del>-u</del>		
LJA		5a		
h		Ja	$\dashv$	
b		5b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1	-+	
		26	ļ	x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	<del>-~</del>	<del>-  </del>	
-•		27	- 1	X
	The second of th	1		

_ <u>P</u>	art 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.			l
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			l
	employee), or an indirect business relationship through ownership of more than 35% in another entity			ĺ
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,		<del></del>	ļ
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		Х
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		l
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			l
	VI	37		X

Form **990** (2008)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				,	
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of			1		
	U.S. Information Returns Enter -0- if not applicable	1a	3	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	able		ļ		
	gaming (gambling) winnings to prize winners?			1c	X	<u> </u>
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0			ļ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b		<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by	y		ļ	ļ	
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other auth	ority				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ıal				l
	account)?			4a		X
þ	If "Yes," enter the name of the foreign country:					~~~
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Ban	ık		ì		
	and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u>		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	1?		_5b		X
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity			1_		
	Regarding Prohibited Tax Shelter Transaction?			5c	-	3.5
6a	Did the organization solicit any contributions that were not tax deductible?			<u>6a</u>	_	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions of	or				
	gifts were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more that	n				37
	\$75?			7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			1_		v
_	required to file Form 8282?	1		7c	$\vdash$	X
	If "Yes," indicate the number of Forms 8282 filed during the year	7d		┥		l
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a person	onai		7.	i	X
	benefit contract?	1		7e 7f	-	X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?					X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7 <u>g</u>		<del></del>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			7h		x
	required?  Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section.	on		<del>///</del>		<del></del>
8	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponso					1
	organization, have excess business holdings at any time during the year?	ıııg		8		
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			<u> </u>		
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		7		1
11	Section 501(c)(12) organizations. Enter:		<del></del>	7		1
	Gross income from members or shareholders	11a				1
b	Gross income from other sources (Do not net amounts due or paid to other sources against			7		1
-	amounts due or received from them )	11b				1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10	•		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

Form 990 (2008) MIDLAND CITY EDUCATION ASSOCIATION 38-6081046 Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions. 1a Enter the number of voting members of the governing body Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 4 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 ĸ Does the organization have members or stockholders? 7a Does the organization have members, stockholders, or other persons who may elect one or more members 7a of the governing body? 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during 8 the year by the following: X 8a a The governing body? X **b** Each committee with authority to act on behalf of the governing body? 8b X 9a Does the organization have local chapters, branches, or affiliates? b If "Yes." does the organization have written policies and procedures governing the activities of such chapters, 9ь affiliates, and branches to ensure their operations are consistent with those of the organization? Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 X 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 X 11 the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies Yes No 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 Does the organization have a written whistleblower policy? 13 X 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision: X 15a The organization's CEO, Executive Director, or top management official?  $\overline{\mathbf{x}}$ 15b Other officers or key employees of the organization? Describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? b 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 16b the organization's exempt status with respect to such arrangements? Section C. Disclosure None List the states with which a copy of this Form 990 is required to be filed 17 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 Another's website Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the 20

4044 E Baker Road

MI 48642

Midland

organization: Laure Kaczmarek

Form 990 (2008) MIDLAND CITY EDUCATION ASSOCIATION 38-6

t 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
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List 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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers, key employees, highest compensated employees; and former such persons

Check this box if the or	ganization did not compe	ensate	any (	office	er, di	recto	r, tru	istee, or key employee	· · · · · · · · · · · · · · · · · · ·			
(A)	(B)	(B) (C) Average Position (check all that apply					nh:\	(D) Reportable	(E) Reportable	(F) Estimated		
Name and Title	hours per week		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
Viola G. Col	lins											
President	40			X				126,168	0	4,815		
Various Rep.	1							6,130	0	0		
Brian Brown		+-	-					0,130				
Treasurer	3			x				1,090	ol	0		
Mark Pobocik				-		H						
Vice Preside	3			x				545	o	0		
Dawn Moulthr	op											
Secretary	3			X				0	0	0		
•												
•		-				$\vdash$						

Pā	ポリー Section A	Officers, Directors, Trus	tees	. Ke	y En	ַסוֹמֵּי	yees	, and	d Highest Compensated E	mployees (continued)			
	(A)	(B)	_			<b>)</b>			(D)	(E)		(F)	
	Name and title	Average hours per week			Officer		at ap		Reportable compensation from	Reportable compensation from related		Estimated amount of other	
	•	, week	Individual trustee or director	Institutional trustee	ğ	Key employee	est co loyee	ner	the organization	organizations (W-2/1099-MISC)		mpensatio	on
			truste	al trus		yee	mpen		(W-2/1099-MISC)	(11-2 1033-111100)	OI	rganization and related	
			ľ	řě			Highest compensated employee				1	ganization	
					-								<u> </u>
									-		_		
	<del></del> -												
	<u>-</u>			-									
						_					_		
			-										
	· ···										-		
<del></del>	<del> </del>												
													_
	Total							<b>•</b>	133,933				,81
1b 2	Total Total number of indiv	viduals (including those in 1	a) wł	no re	ceiv	ed m	ore t		\$100,000 in reportable com				,
	organization ▶ 1	· · · · · · · · · · · · · · · · · · ·											1
3	Did the organization	list any former officer, direc	tor c	or tru	stee.	kev	emp	love	e, or highest compensated			Ye	
	employee on line 1at	? If "Yes," complete Schedu	ile J (	for s	uch i	ndivi	dual		and other compensation from	m	-	3	X
4									complete Schedule J for su		_		
5	individual Did any person listed	d on line 1a receive or accru	је со	mpe	nsati	ion fi	om a	any u	unrelated organization for		-	4	X
	services rendered to	the organization? If "Yes,"	comp	olete	Sch	edul	e J fo	or su	ch person			5	X
Sec 1		for your five highest comper	 isate	d inc	lepe	nder	t cor	ntrac	tors that received more that	n \$100,000 of			
	compensation from t	(A) Name and business address							Descrip	(B) bon of services		(C Comper	) nsation
		Name and Salances and											
		<del> </del>							-				
							_				-		
								_				<u>,</u>	_
								-					
2		ependent contractors (includ	ing t	hose	in 1	) wh	о гес	eive	d more than \$100,000 in	<u> </u>			
	compensation from t	the organization 🕨					-		····	<del></del>		0 Form <b>99</b>	10 (200)

Form 990 (2008) MIDLAND CITY EDUCATION ASSOCIATION Statement of Revenue Part VIII (A) Total revenue (B) Related or (D) Revenue Unrelated exempt excluded from tax business under sections 512, 513, or 514 function revenue revenue 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c 1d d Related organizations Contributions, and other simi 1e e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f Program Service Revenue Busn. Code 562,705 562,705 2a Dues b c f All other program service revenue 562,705 g Total. Add lines 2a-2f Investment income (including dividends, interest, and 113 113 other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (ı) Real (II) Personal 17,600 6a Gross Rents 7,188 b Less rental exps 10,412 c Rental inc or (loss) 10,412 10,412 • Net rental income or (loss) Gross amount from (ii) Other (i) Securities sales of assets other than inventor b Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ Other Revenue of contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 b Less: direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b All other revenue Total, Add lines 11a-11d Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 562,705 0 10,525 573,230 9c, 10c, and 11e

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).

		• • • • • • • • • • • • • • • • • • • •	•	· · · · ·	
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b.	, 8b, 9b, and 10b of Part VIII.		expenses	general expenses	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	2,600	2,600		
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		_		
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	138,748	138,748		
8	Pension plan contributions (include section 401(k)		· · · · · · · · · · · · · · · · · · ·		
•	and section 403(b) employer contributions)				
9	Other employee benefits		_		
10	Payroll taxes	1			
11	Fees for services (non-employees):				
a	Management				
b	Legal			·	
,	Accounting	600	600	······································	
q	Lobbying			· · · · · · · · · · · · · · · · · · ·	
e	Professional fundraising services See Part IV, line 17	***			† · · · · · · · · · · · · · · · · · · ·
f	Investment management fees				
g g	Other				
12	Advertising and promotion				-,***
13	Office expenses	2,789	2,789		
14	Information technology				
15	Royalties		·		
16	Occupancy	<u> </u>	<del></del>		
17	Travel	1,174	1,174		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				1
19	Conferences, conventions, and meetings	5,398	5,398		
20	Interest				
21	Payments to affiliates	415,449	415,449		
22	Depreciation, depletion, and amortization		•		
23	Insurance				
-				•	
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	Public Relations	2,451	2,451		
b	Contracted Services	1,673	1,673		
С	MPS - MCEA Sub Pay	1,217	1,217		
d	Awards, Honors & Gifts	825	825		
е	Miscellaneous	-91	-91		
f	All other expenses	-126	-126		
25_	Total functional expenses. Add lines 1 through 24f	572,707	572,707		
26	Joint Costs. Check here ▶ 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				

	art )	Relance Sheet		<del></del>						
				(A) Beginning of year		(B) End of year				
	1	Cash—non-interest bearing		41,940	1	44,895				
	2	Savings and temporary cash investments	Ī	1,252	2	1,885				
	3	Pledges and grants receivable, net	Ť		3					
	<b>1</b>	Accounts receivable, net	Ī		4	<del></del>				
	5	Receivables from current and former officers, directors, tru	ıstees, kev	· · - · · - · - · - · · · · · · · · · ·						
		employees, or other related parties. Complete Part II of So	•		5					
	6									
	ľ	Receivables from other disqualified persons (as defined ui 4958(f)(1)) and persons described in section 4958(c)(3)(B								
		Part II of Schedule L	, complete		6					
w	7	Notes and loans receivable, net	The state of the s	3,750	7	3,122				
ë	8	Inventories for sale or use	<b>†</b>	<u> </u>	8					
Assets	9	Prepaid expenses and deferred charges	į.	· · · · · ·	9					
•	10a		10a 112,539		-					
		Less. accumulated depreciation Complete	100							
		Part VI of Schedule D	10b 39,473	75,503	10c	73,066				
	11	Investments—publicly traded securities	1007		11					
	12	Investments—other securities. See Part IV, line 11	<u> </u>		12	<del></del>				
	13	Investments—program-related. See Part IV, line 11	<u> </u>	·	13					
	14	Intangible assets		<del></del>	14	<del></del>				
	15	Other assets. See Part IV, line 11	F	·····	15	<del> </del>				
	16	Total assets. Add lines 1 through 15 (must equal line 34)	Ì	122,445	16	122,968				
	17	Accounts payable and accrued expenses			17					
	18	Grants payable			18					
	19 Deferred revenue									
	20 Tax-exempt bond liabilities 20									
es										
<u>:</u>	22	Payables to current and former officers, directors, trustees	kev							
Liabilities		employees, highest compensated employees, and disqual	•							
Ľ		persons. Complete Part II of Schedule L			22					
	23	Secured mortgages and notes payable to unrelated third p	arties		23					
	24 Unsecured notes and loans payable 24									
	25	Other liabilities. Complete Part X of Schedule D	Ī		25					
	26	Total liabilities. Add lines 17 through 25	Ī		26	_				
S		Organizations that follow SFAS 117, check here ▶	and							
၁		complete lines 27 through 29, and lines 33 and 34.	<b>-</b>							
lan	27	Unrestricted net assets			27					
Ва	28	Temporarily restricted net assets			28					
ק	29	Permanently restricted net assets			29					
ַהַ		Organizations that do not follow SFAS 117, check here	∍ <b>▶</b> ⊠ Γ							
Net Assets or Fund Balances		and complete lines 30 through 34.	_							
S	30	Capital stock or trust principal, or current funds			30					
set	31	Paid-in or capital surplus, or land, building, or equipment fu	und		31					
AS	32	Retained earnings, endowment, accumulated income, or o	ther funds	122,445	32	122,968				
et /	33	Total net assets or fund balances		122,445	33	122,968				
Ž	34	Total liabilities and net assets/fund balances		122,445	34	122,968				
Pi	art >	(I Financial Statements and Reporting				·				
		_	_			Yes No				
1	Ac	counting method used to prepare the Form 990. 🏻 🗓 C	ash 🗌 Accrual 📗 Oth	ner						
<b>2</b> a	We	ere the organization's financial statements compiled or review	wed by an independent accountant	?		2a X				
b	We	ere the organization's financial statements audited by an inde	ependent accountant?			2b X				
c	If "	Yes" to lines 2a or 2b, does the organization have a commit	tee that assumes responsibility for o	oversight of						
		e audit, review, or compilation of its financial statements and	·			2c				
3a		a result of a federal award, was the organization required to	o undergo an audit or audits as set f	forth in						
		Single Audit Act and OMB Circular A-133?				3a				
b	lf "	Yes," did the organization undergo the required audit or aud	its?			3b   (2008)				
						C UUII (0000)				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### 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. OMB No 1545-0047

Inspection

Name of the organization Employer identification number 38-6081046 MIDLAND CITY EDUCATION ASSOCIATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 2 Aggregate grants from (during year) 4 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other Yes impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990. Part IV. line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year 2a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_ \_ \_ Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section l I No Yes 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

		O " EDUCATION			imile: 00000	(continu	Page 2
Pa	art III Organizations Maintaining					(continu	jea)
3	Using the organization's accession and other items (check all that apply).	records, check any of the fo	ollowing that are a sig	inificant use of its col	lection		
а	Public exhibition	d Loan o	or exchange program	s			
b	Scholarly research	e 🔲 Other					
c	Preservation for future generations						
4	Provide a description of the organization's coll Part XIV.	ections and explain how the	ey further the organiz	ation's exempt purpo	ose in		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to	receive donations of art, his be maintained as part of the	storical treasures, or e e organization's colle	other similar ction?		Yes	☐ No
Pa	irt IV Trust, Escrow and Custod	ial Arrangements. Co	mplete if organi	zation answere	d "Yes" to For	m 990,	
	Part IV, line 9, or reported						
1a	Is the organization an agent, trustee, custodia	n or other intermediary for o	contributions or other	assets not		П.,	П.,
	included on Form 990, Part X?					∐ Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV a	and complete the following t	able:				
						Amour	<u> </u>
С	Beginning balance				1c		
d	Additions during the year				1d		
е	Distributions during the year				1e		
f	Ending balance				1f	_	
2a	Did the organization include an amount on Fo	rm 990, Part X, line 21?				Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV.			<u>-</u>	,·-		
Pa	art V Endowment Funds. Compl	ete if organization an	swered "Yes" to	Form 990, Part	IV, line 10.		
		(a) Current year	(b) Pnor year	(c) Two years back	(d) Three years b	ack (e) Fou	r years back
1a	Beginning of year balance						
b	Contributions						
С	Investment earnings or losses						
	Grants or scholarships						
	Other expenditures for facilities						
•	and programs						
f	Administrative expenses						
2	Provide the estimated percentage of the year	end halance held as			•		
	Board designated or quasi-endowment	%					
	Permanent endowment  %	"					
	Term endowment > %						
	Are there endowment funds not in the possess	sion of the organization that	are held and admini	stered for the			
Ja	organization by:	s.s., or the organization than					Yes No
	(i) unrelated organizations					3a(i)	
	(ii) related organizations					3a(ii)	
<b>L</b>	If "Yes" to 3a(ii), are the related organizations	listed as required on School	lule R2			3b	
	Describe in Part XIV the intended uses of the					<u> </u>	<del></del>
<u>4</u>	art VI Investments—Land, Buildi			Part X line 10			
Г	Description of investment	(a) Cost or other basis	(b) Cost or oth		preciation	(d) Bool	value
	besorption of attestment	(investment)	basis (other)			,_,	
4.	Lond	(		,000	+		16,000
	Land			, , , , , , , , , , , , , , , , , , , ,	- +		,
	Buildings				<del>-</del>		
	Leasehold improvements				<del></del>		
	Equipment		96	,539	39,473		57,066
	Other  I. Add lines 1a-1e. (Column (d) should equal Fo	orm 990. Part Y. column (B)		, , , , , , , , , , , , , , , , , , , ,	55,215		73,066
ı vıa	ii nou illes Tante, (Column (u) should equal re	Jim 330, Fait A, Withill (D)	10(0).)				

Schedule D (Form 990) 2008 MIDLAND CITY EDUCATIO		38-6081046	Page
Part VII Investments—Other Securities. See Form 990			
(a) Description of security or category	(b) Book value	(c) Method o	
(including name of security)		Cost or end-of-ye	ar market value
Financial derivatives and other financial products			
Closely-held equity interests			
Other			
		_	
			<del></del>
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 99	0, Part X, line 13.		
(a) Description of investment type	(b) Book value	(c) Method o Cost or end-of-ye	
		<del></del>	
			<u></u>
•			
	-		
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 13.)	· · · · · · · · · · · · · · · · · · ·	<del></del>	
Part IX Other Assets. See Form 990, Part X, line 15.	.l		
(a) Description			(b) Book value
(a) cossipilor	·		(b) book value
<del>.</del>			
<del> </del>			
<del></del>			
	<del></del>	<del></del>	<del></del> _
		<del></del>	<del></del>
	<del></del>		_
	<del></del>		
		<del></del>	
Total. (Column (b) should equal Form 990, Part X, col. (B) line 15.)	-	<u> </u>	
Part X Other Liabilities. See Form 990, Part X, line 25			
(a) Description of liability	(b) Amount		
Federal income taxes			
N.1 **			
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)			
n Part XIV, provide the text of the footnote to the organization's financial state	ments that reports the organiz	ration's liability for	
uncertain tax positions under FIN 48.			

Sche	dule D (Form 990) 2008 MIDLAND CITY EDUCATION ASSOCIA	TIO	N 38-608104	16	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to F	inan	cial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4-8			9	
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statement	ts W	ith Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts 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	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2е	
3	Subtract line 2e from line 1		,	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		]	
b	Other (Describe in Part XIV)	4b	···		
C	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)			5	
Pa	rt XIII <sup>1</sup> Reconciliation of Expenses per Audited Financial Statemer	nts V	Vith Expenses per F	<u>Returr</u>	1
1	Total expenses and losses per audited financial statements			1	<u>-</u> -
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1			
а	Donated services and use of facilities	2a		- 1	
þ	Prior year adjustments	2b			
С	Losses reported on Form 990, Part IX, line 25	2c		1 1	
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2е	
3	Subtract line 2e from line 1	ſ		3	
4	Amounts 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)	4b		<del> </del>	
С	Add lines 4a and 4b			4c	
<u>5</u>	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	
	rt XIV Supplemental Information				
	elete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1		4; Part IV, lines 1b		
and 2	b; Part V, line 4; Part X; Part XI, line 8; Part XII, lines 2d and 4b, and Part XIII, lines 2d and	4D			
_				<b>-</b> -	<del>-</del>
_					
_					
_					
_				- <b>-</b> ·	<del></del> -
_			<b></b>		
_	<del></del>				

Schedule D (Fo	orm 990) 2008	MIDLAND	CITY	EDUCATION	ASSOCIATION	38-6081046	Page 5
Part XIV	Suppleme	ntal Informatio	on (continue	ed)			
	<b>-</b>						
						<del></del> -	
	<b>-</b> -					. – – – – –	
<del>_</del> -	<b></b> -		<del>-</del>				
			<del>-</del>				
						. – – – – – –	
			- <i>-</i> -		<del>-</del>		
			<b></b> ·			. – – – – –	
		<b></b> _					
_ <b></b> .		_ <b></b> _					
<b>_</b> .							
	<b></b>		<del>_</del> .			<del>_</del>	
	<b></b>						
			- <b></b> .				
			<del>-</del>				
			<b>-</b>			<b></b>	
		<del>_</del> -		<del>-</del>			
		<del>-</del> -		<b>-</b> -		- <b></b>	
	- <b></b> -	<b>-</b>		<del>-</del> -			
	<b>-</b> -		<b>-</b>	<del>-</del>			<u></u>

**SCHEDULE O** 

(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.

2008
Open to Public Inspection

Name of the organization

MIDLAND CITY EDUCATION ASSOCIATION

Employer Identification number 38-6081046

Form 990, Part III, Line 4d - All Other Achievements Continuing work in the area of education advancement, welfare of school children, and the improvement of instructional opportunities for all.

•		
Forms 990	/ 990-PF	

## Other Notes and Loans Receivable

9/01/08 and ending

<u>8/31</u>/09

3,122

3,750

2008

<u>(10)</u>

Totals

Name	Calendar year 2000, Or	tax year beginning	3,01,00		ployer Identification Number
, ,					
MIDLAND CITY EDU	CATION ASSOC	CIATION		38	-6081046
	7400 7 7				
Form 990, Part X	, Line / - F	Additional	Information	<u> </u>	<u></u>
Name	of borrower			Relationship to disqualifie	ed person
(1) Loan Receivable	e				
(2)					
	<del>-</del>				<del></del>
(5)	<del></del> -		<del>-</del> -	· · · · · · · · · · · · · · · · · · ·	
(6)		<del>-</del>			<del></del>
(7) (8)	•				<del></del> -
(9)					
(10)	13.7.				
Original amount	5(1	Maturity			Interest
borrowed (1)	Date of loan	date		epayment terms	rate
(2)				<del></del>	<del></del>
(3)					
(4)					
(5)					
(6)		····			
(7)					
(8)					
(9)		=1=: ···			
(10)			<u> </u>		. I
					· ····································
Security pro	ovided by borrower			Purpose of loan	
(1)					
(2)					<del></del>
(3)				·	<del></del>
(4)	. :	<del> </del>			
	<del></del>	·		· <del></del>	<del></del> _
(6)					·
(7) (8)	· ·-··	<del></del>			<del></del>
(9)					<del>_</del>
(10)					
			<u>-</u>		
Consideration fur	nished by lender	E	Balance due at beginning of year	Balance due at end of year	Fair market value (990-PF only)
(1)			3,750	3,122	
(2)					
(3)					
(4)					
(5)					
(6)					<del>                                     </del>
(7)					<del> </del>
(8) (9)					
\~/		1			

4562

Department of the Treasury Internal Revenue Service

## **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

Attachment

Identifying number Name(s) shown on return 38-6081046 MIDLAND CITY EDUCATION ASSOCIATION Business or activity to which this form relates Building Rental 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) 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 4 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property (b) Cost (business use only) (c) Elected cost 6 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 Я 9 Tentative deduction. Enter the smaller of line 5 or line 8 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 12 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.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 2,437 17 17 MACRS deductions for assets placed in service in tax years beginning before 2008 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B-Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation year placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property period service only-see instructions) 19a 3-year property 5-year property C 7-year property 10-year property 15-year property 20-year property S/L 25 vrs. 25-year property S/L Residential rental 27.5 yrs. ММ property 27.5 yrs. MM S/L MM Nonresidential real 39 yrs S/L property MM S/L Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs. S/L ММ S/L 40-year 40 yrs. Summary (See instructions.) Part IV 21 Listed property. Enter amount from line 28 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. 2,437 Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr. 22 For assets shown above and placed in service during the current year, 23

enter the portion of the basis attributable to section 263A costs

. 99355 MIDLAND CITY EDUCATION ASSOCIATION
38-6081046 Federal Asset Report

FYE: 8/31/2009

**Building Rental** 

12/22/2009 8:54 AM

Asset	Description	Date I <u>n Service</u>	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:  2 Building 3 Carpeting 4 Additions	<b>7</b>	9/01/93 2/22/95 12/31/97	64,000 1,493 31,046 96,539		64,000 1,493 31,046 96,539	10 HY S/L 39 MM S/L	26,256 1,493 9,287 37,036	1,641 0 796 2,437
Other Deprecia 1 Land	tion: Total Other Depreciation	9/01/93 <u> </u>	16,000 16,000	-	16,000 16,000		0	0 0
	Total ACRS and Other Depre	eciation =	16,000	=	16,000		0	0
	Grand Totals Less: Dispositions Less: Start-up/Org Expense Net Grand Totals	_ =	112,539 0 0 112,539	-	112,539 0 0 112,539		37,036 0 0 37,036	2,437 0 0 2,437

99355 MIDLAND CITY EDUCATION ASSOCIATION38-6081046AMT Asset Report

FYE: 8/31/2009

**Building Rental** 

12/22/2009 8:54 AM

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS:  2 Building 3 Carpeting 4 Additions		9/01/93 2/22/95 12/31/97 _	64,000 1,493 31,046 96,539		64,000 1,493 31,046 96,539	10 HY S/L 40 MM S/L	23,933 1,493 8,311 33,737	1,600 0 776 2,376
Other Deprecia I Land	tion: Total Other Depreciation	9/01/93 _	16,000 16,000		16,000 16,000		0	0
	Total ACRS and Other Depre	eciation _	16,000		16,000		0	0
	Grand Totals Less: Dispositions Net Grand Totals	_ =	112,539 0 112,539		112,539 0 112,539		33,737 0 33,737	2,376 0 2,376

. 99355 MIDLAND CITY EDUCATION ASSOCIATION

38-6081046

FYE: 8/31/2009

Depreciation Adjustment Report

12/22/2009 8:54 AM

**All Business Activities** 

AMT Adjustments/ Preferences AMT Tax Form Unit Asset Description **MACRS Adjustments:** 2 3 4 Building Carpeting Rental 1,641 1,600 41 776 0 Rental 796 20 Rental Additions 2,437 2,376 61

99355 MIDLAND CITY EDUCATION ASSOCIATION
38-6081046 Future Depreciation Report

FYE: 8/31/2009

**Building Rental** 

12/22/2009 8:54 AM

FYE: 8/31/10

<u>Asset</u>		Description	Date In Service	Cost	Tax	AMT
<u>Prior M</u>	IACRS:					
2 3 4	Buildi Carpei Additi	ting	9/01/93 2/22/95 12/31/97	64,000 1,493 31,046 96,539	1,641 0 796 2,437	1,600 0 777 2,377
Other D	<u>Deprecia</u>	tion:				
1	Land		9/01/93	16,000	0	0
		Total Other Depreciation		16,000	0	0
		Total ACRS and Other Depreciation		16,000	0	0
		Grand Totals		112,539	2,437	2,377

99355 MIDLAND CITY EDUCATION ASSOCIATION

**Federal Statements** 

12/22/2009 8:54 AM

FYE: 8/31/2009

38-6081046

**Taxable Interest on Investments** 

DescriptionAmountUnrelated Business CodeExclusion CodePostal CodeInterest Income\$ 11314MITotal\$ 113