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Return of Organization Exempt From Income Tax

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Open to Public

<u>A r</u>	or the	e 2009	caler	idar year, or tax year beginning 06/01, 2009, and ending		5/31,20	
B c	heck if ap			C Name of organization NAT'L ASSOC. OF POSTAL SUPERVISORS	D Employer identi	fication numb	oer
	Addres		use IRS label or	Doing Business As	53-01880	62	
	7 -		print or	Number and street (or P O box if mail is not delivered to street address) Room/suit	e E Telephone numb	er	
	Initial	- 1	type. See	1727 KING STREET, SUITE #400	(703) 836-	9660	
\vdash	┨	ls	Specific	City or town, state or country, and ZIP + 4	17037 030		
\vdash	Ameno	11	Instruc-				225 254
<u> </u>	return	L	tions	ALEXANDRIA, VA 22314	G Gross receipts		325 , 054.
L	Applic pendir	ng		me and address of principal officer TED KEATING	H(a) Is this a group re affiliates?	turn for	Yes X No
		[]	L727	KING STREET, SUITE 400 ALEXANDRIA, VA 22314	H(b) Are all affiliates i	ncluded?	Yes No
ı	Tax-exe	empt stat	tus	X 501(c) (5) ◀ (insert no) 4947(a)(1) or 527	If "No," attach a	list (see instruct	ions)
J	Websit	te: 🕨 V	. WW	NAPS.ORG	H(c) Group exemption	number 🕨	
ĸ	Form o	of organiz	ration	Corporation Trust X Association Other ▶ L Year of form	nation 1908 M Sta		nicile KY
Pa			mary		indion ==== in old	to or regardon	mone
			<u>-</u>				
	1	Briefly	descri	be the organization's mission or most significant activities			
8				MARY PURPOSE IS TO PROVIDE SOCIAL AND ECONOMIC ADV			
Governance		POST	AL 5	UPERVISORS AND IMPROVEMENT OF THE POSTAL SERVICE	<u>.</u>		
e.							
ò	2	Check	this bo	if the organization discontinued its operations or disposed of more than 25	5% of its net assets		
ن مع				ting members of the governing body (Part VI, line 1a)		i	24
98	4	Numbe	r of in	dependent voting members of the governing body (Part VI, line 1b)	4	1	21
Ę						1	9
Activities &	_				I .		0
⋖				of volunteers (estimate if necessary)	<u>6</u>		
	7 a	l otal g	ross u	nrelated business revenue from Part VIII, column (C), line 12	<u> </u> 7a	<u> </u>	0.
	b	Net uni	related	business taxable income from Form 990-T, line 34	<u></u> 7 b	<u> </u>	0.
					Prior Year	Curre	ent Year
0	8	Contrib	utions	and grants (Part VIII, line 1h)			0.
ב	9	Program	m serv	ice revenue (Part VIII, line 2g)	3,491,116	. 3,	045,025.
Revenue	10	Investr	nent in	come (Part VIII, column (A), Imes 3, 4, and 7d)	241,432		149,495.
	11	Other r	evenu	e (Part VIII squar) [A], Vines 5, 6d, 8c, 9c, 10c, and 11e)	31,578		356,267.
2010	42	Takel as	evenu	e (1,22+viii) Sully iii) [7], tiles 5, 00, 00, 90, 100, and 11e)	3,764,126		
20	12	Total re	evenue	e - and lines 8 through 11 (must equal part VIII, column (A), line 12)			550 , 787.
9	13	Grants	and si	milar amounts paid (Part IX column (A) lines 1-3)	0.		0.
	14	Benefit	s paid	to or members (Part IX, column (A) of he 4)	0		0.
NNE Cexpenses 2	15	Salarie	s, othe	er compensation, employee benefits (Part X, column (A), lines 5-10)	707,743	·	750 , 016.
, u	16a	Profess	sional :	fundralsing fees (Patr) (column (ct) line 11e)	0		0.
⊂ĝ	b	Total fu	ındrais	sing expenses; Part-IX, column (D), line 25) ▶			
Ä				es (Part IX, column (A), lines 11a-11d, 11f-24f)	3,172,837	. 2,	436,170.
Ξ.	18	Total e	ynense	es Add lines 13-17 (must equal Part IX, column (A), line 25)	3,880,580		186,186.
Z				expenses Subtract line 18 from line 12	-116,454		364,601.
₹ <u>8</u>	13	Revent	16 1622	expenses Subtract line to from line 12		<u> </u>	
Net Assetsof				<u> </u>	Beginning of Year		of Year
Cg e		Total as	ssets (Part X, line 16)	10,194,307		660,939.
Z B	21	Total lia	abilitie	s (Part X, line 26)	1,211,916	. 1,	309 , 850.
윤	22	Net ass	ets or	fund balances Subtract line 21 from line 20	8,982,391	. 10,	351,089.
Pa	rt II	Sig	nature	Block			
		Under	penaltie	es of perjury, I declare that I have examined this return, including accompanying schedules a	and statements and to	the best of	my knowledge
		and be	lief,	is true, correct, and complete Declaration of preparer (other than officer) is based on all in	nformation of which pr	eparer has a	ny knowledge
S	ign		HT) h	m. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1 10/4	110	
	ere		nnatur	e of officer	Date	170	
• • •	616	اً ا	20.		Date		
		l ▶ <i>!</i>	<u> </u>	AN JWAGNER Senetary-TREASURER			
		T	ype or	print name and title			
		Prepar	er's	Date Check if		r's identifying	number
Paid -		signati		Self- employe		tructions)	
•	arer's	Firm's	name (d	or yours WATKINS MEEGAN LLC	EIN	52-1297	695
Use	Only	ıf self-e address	mploye	d),	Phone no	301-654	
May	the IS	L		is return with the preparer shown above? (see instructions)	7.110110110	To T	
<u> </u>					· · · · · · · · · · · · · · · · · · ·	- 1 1.0	
ror	rrivac	cy Act a	ınd Pa	perwork Reduction Act Notice, see the separate instructions.*		Form	1 990 (2009)

	Statement of Program Service Accomplishments	
	Briefly describe the organization's mission:	
-	THE PRIMARY PURPOSE IS TO PROVIDE SOCIAL AND ECONOMIC ADVANCEMENT OF	
-	POSTAL SUPERVISORS AND IMPROVEMENT OF THE POSTAL SERVICE.	<u></u>
-		-
2 [Did the organization undertake any significant program services during the year which were not listed on	
t	the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
;	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	
	Describe the exempt purpose achievements for each of the organization's three largest program services by expens	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of g	rants and
i	allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$. ,
	THE DISCIPLINARY DEFENSE FUND WAS ESTABLISHED TO PROVIDE	
-	ASSISTANCE TO MEMBERS INVOLVED WITH POSTAL SUPERVISORY	
]	RELATED DISPUTES.	
-		
-	· · · · · · · · · · · · · · · · · · ·	
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-		
4.		
	(Code:) (Expenses \$including grants of \$) (Revenue \$ THE NATIONAL CONVENTION IS HELD EVERY TWO YEARS. IT	,
	PROVIDES AN OPPORTUNITY FOR THE ASSOCIATION TO ELECT	
	 	
	NATIONAL OFFICERS.	
•		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	THE EDUCATION AND TRAINING FUND WAS ESTABLISHED TO PROVIDE	·
-	TRAINING IN THE FIELD FOR MEMBERS. TRAINING INCLUDES SEMINARS AND	
-	VIDEO CONFERENCES.	
-	TIDE CONTENTION.	
-		
-		
-		
-		
-		
_		
_		
	Other program services (Describe in Schedule O.)	
((Expenses \$ including grants of \$) (Revenue \$)	
4 e	Total program service expenses ▶	
		Form 990 (2009

Form 9	90 (2009) 53-0188062	•	۱ .	Page 3
Part				
			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		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
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		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		
5	Sections 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	Х	
6	Did the organization maintain any donor advised funds or any similar funds or 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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
_	complete Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If" Yes," complete Schedule D, Part V	10	İ	Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	Х	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	Did the organization report an amount for investments—other-securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12	Х	
12A	Was the organization included in consolidated, independent audited financial statement for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Х
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		Х
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? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			T^{-}
	If "Yes," complete Schedule G, Part III	19		x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Х
			. 000	(2009)

Part	Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24 a	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 lines			
	24b through 24d and complete Schedule K. If "No," go to question 25	24a		X
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		
25 a	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	ļ	ļ
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			١.,
	If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			x
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	006		х
	Schedule L, Part V	28b		
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	20-		x
	Part V	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		<u> </u>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		x
24	conservation contributions? If "Yes," complete Schedule M	30		
31	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	3.	<u> </u>	<u> </u>
JZ	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
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	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete	<u> </u>		
•	Schedule R, Part V, line 2	35		х
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	<u> </u>		ļ
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37	-	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and		\Box	
	19? Note. All Form 990 filers are required to complete Schedule O	38	Х	
	The second secon		990	(2009)

Par	t 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			[
	U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
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 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	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			
	this return?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			,
	account)?	4a		X
D	If "Yes," enter the name of the foreign country: ►			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			
- -	and Financial Accounts.	5.0		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		X
	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	30		
·	Prohibited Tax Shelter Transaction?	5c		,
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	"		
- u	organization solicit any contributions that were not tax deductible?	6a		Х
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or	T		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7 e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g		7 g		ļ
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as			
_	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		ł	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
•	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	9a		
a h	Did the organization make any taxable distributions under section 4966?	9 b		
ь 10	Section 501(c)(7) organizations. Enter:	30		
а	Initiation fees and capital contributions included on Part VIII, line 12		' I	li .:
b				
11	Section 501(c)(12) organizations. Enter:			4
	Gross income from members or shareholders			į.
	Gross income from other sources (Do not net amounts due or paid to other sources against			i
-	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
		_		

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

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
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		Х
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Х
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
_	of the governing body?	7a	Х	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
-	the year by the following:			
а	The governing body?	8a	Х	1
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
_	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal			
	enue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	Х	
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?	10ь	Х	İ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
	form?	11		Х
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	Х	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13		Х
14	Does the organization have a written document retention and destruction policy?	14	Х	
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	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
	with a taxable entity during the year?	16a		Х
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		_	l
	the organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)			
-	available for public inspection. Indicate how you make these available. Check all that apply	-	•	
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inter-	rest		
-	policy, and financial statements available to the public.			
20	· ·	ne		
	State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► JAY KILLACKEY III, 1727 KING STREET, ALEXANDRIA, VA, 22314-275	3		
	703-836-9660			

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. Report compensation for the calendar year ending with or within the organization's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 organization did not co	mpensate ar	ny cur	rent	offı	cer,	direc	tor,	or trustee		
(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average hours per week	ত Individual trustee P or director	nstitutional trustee	e Officer	k Key employee	Highest compensated at employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
TED KEATING										
PRESIDENT	60.00	X		Х				158,212.	0.	0
LOUIS ATKINS										
EXEC VICE PRESIDENT	60.00	Х		Х				152,066.	0,	0
JAMES F. KILLACKEY, III										
SECRETARY/TREASURER	60.00	Х		Х				149,866.	0:	0
JOHN R. GETER II										
VICE PRESIDENT	12.00	Х		Х				0.	0	0
TIM FORD										
VICE PRESIDENT	12.00	Х		Х	L			0.	0.	0
THOMAS ROMA										
VICE PRESIDENT	12.00	Х		Х				0.	_0.	0
BRIAN WAGNER										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0
CHARLES MULIDORE										-
VICE PRESIDENT	12.00	Х		Х				0.	0.	0
NEIL E. BAKER										
VICE PRESIDENT	12.00	Х		Х	L.			0.	_0,	0
LARRY D. EWING										
VICE PRESIDENT	12.00	X		Х			ļ	0.	0.	0
JERRY SEBASTIAN										
VICE PRESIDENT	12.00	X		Х	<u>L</u> .			0.	0.	0
ROY BEAUDOIN										_
VICE PRESIDENT	12.00	Х		Х				0.	0.	0
SHRI L. GREEN										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0
BEN J. CLAPP										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0
MARILYN WALTON										
VICE PRESIDENT	12.00	Х		Х	L		L	0.	0.	0
NANCY L. WESLEY										
VICE PRESIDENT	12.00	X		Х				0.	0.	0

Form 990 (2009)

9E1041 3 000

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y Em	plo	yee	es,	and I	ligl	nest Compensat	ed Employees (c	ontinued)
(A)	(B)			(((D)	(E)	(F)
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	chec Officer	k Key employee	a Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
HANS P. AGLIDIAN							\vdash			
VICE PRESIDENT	12.00	Х		x				0.	0.	0.
REUBEN K. GAY										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0.
IVAN BUTTS										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0.
ANDREW J. SOZZI		T				İ				
VICE PRESIDENT	12.00	х		Х				0.	0.	0.
CYRIL P. DUMAS										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0.
JAIME A. ELIZONDO, JR.										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0.
STEVAN E. GERBER										
VICE PRESIDENT	12.00	Х		Х				0.	0.	0.
HAYES CHERRY										
VICE PRESIDENT	12.00	X	_	Х				0.	0.	0.
					\vdash		-			
					$oxed{oxed}$					
1b Total			<u> </u>	٠.,			<u> </u>	460,144	0.	0.

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 3

3	Did the	organization	list an	y former	officer,	director	ог	trustee,	key	employee,	or	highest	compe	nsated
	employe	e on line 1a? II	f "Yes," c	omplete S	chedule .	J for such	ınd	vidual						

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

	inaiv	riauai	·													• • •
5	Dıd	any	person	listed	on	line	1a	receive	or	accrue	compensation	from	any	unrelated	organization	fo
	serv	ices r	endered	to the	orga	nızatıd	on?	f "Yes," c	omp	olete Sch	edule J for such	persor	ı	<u></u>		

	Yes	No
3		X
4	Х	
5		X

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

	(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 2			

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

Form 990 (2009)

Par	t VII	Statement of Revenue			53-0188062		
	•			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Program Service Revenue and other similar amounts	1a b c d e f	Federated campaigns					
Co	9	Noncash contributions included in lines 1a-1f \$ _ Total. Add lines 1a-1f		0.			
	h	Total. Add lines 1a-11	Business Code	0.			
/en	2-	LEGISLATIVE CONF.	900099	111,262.	111,262.		<u> </u>
Re	2a	SUBSCRIPTIONS	900099	144.	144.		
lce	b	OTHER INCOME	900099	26,158.	26,158.		
Že.	d	MEMBER DUES	900099	2,907,461	2,907,461.	<u>. </u>	
E	u				2,,22,,222,	•	
gra	•	All other program service revenue					
Pro	g	Total. Add lines 2a-2f		3,045,025.			
	3	Investment income (including dividends, interestment similar amounts)	erest, and	225,983. 0			225,983.
	5			26,110.			26,110.
	6a b	Gross Rents	(II) Personal				
	d	Net rental income or (loss) (i) Securities	(ii) Other	0		 	- 1
	7a b	Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses).				
	c	Gain or (loss)	3.				
	d	Net gain or (loss)		-76,488.			-76,488.
Other Revenue	8a b	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	1 .				
Zth	C	Net income or (loss) from fundraising events		0.			1
)	9a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less direct expenses				····-	
	С	Net income or (loss) from gaming activities.	· · · · · · · •	0.			
	10a	Gross sales of inventory, less returns and allowances	1				
	b	Less cost of goods sold					
	С	Net income or (loss) from sales of inventory. Miscellaneous Revenue	Business Code	0.			
		OTHER INCOME	900099	330,157.	330,157.	 	
	11a	OTHER THOUSE	200033	330,137.	330,137.		
	ь						-
	C	All other revenue					
	d	All other revenue	_	330,157.		· · · · · -	
	е 12	Total Revenue. See instructions		3,550,787.	3,375,182.	0.	175,605.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must complet	te column (A) but are			C), and (D).
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	0.			
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0.			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16	0.			
4	Benefits paid to or for members	0.			
5	Compensation of current officers, directors,				
	trustees, and key employees	473,169.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	183,505.			
8	Pension plan contributions (include section 401(k)				
-	and section 403(b) employer contributions)	5,614.			
9	Other employee benefits	47,211.			
10	Payroll taxes	40,517.			
11	Fees for services (non-employees)	, , , , ,		1	
	Management	0.			
	Legal	126,150.			
	Accounting	83,848.			
	Lobbying	0.1			
	-	0.			
	Professional fundraising services See Part IV, line 17	0.			
	Investment management fees	80,222.			
g 42		0.			
12	Advertising and promotion	157,027.			-
13	Office expenses	13,856.			
14	Information technology	0.			
15	Royalties	226,194.			
16	Occupancy	10,386.		-	
17	Travel	10,300.			
18	Payments of travel or entertainment expenses	0.			
	for any federal, state, or local public officials	162,079.			<u> </u>
19	Conferences, conventions, and meetings	0.			
20	Interest				
21	Payments to affiliates	0.			
22	Depreciation, depletion, and amortization	39,946.			
23	Insurance	10,265.			
24	Other expenses Itemize expenses not				1
	covered above (Expenses grouped together			1	
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				<u> </u>
_	EXECUTIVE BOARD	473,362.			ļ
	OTHER PROGRAM EXPENSE	62,365.			
_	"THE POSTAL SUPERVISOR"	348,021.			<u> </u>
	EDUCATION AND TRAINING	309,875.			
9	DISCIPLINARY DEFENSE FUND	272,597.			
f	All other expenses	59,977.			
25	Total functional expenses. Add lines 1 through 24f	3,186,186.			
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				
JSA			_	•	5 000 (000)

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	1,448,221.	1	1,486,497.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	439,379.	4	463,389.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete			
		Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
٩	9	Prepaid expenses and deferred charges	66,544.	9	136,945.
	10a	Land, buildings, and equipment cost or 10a 859,310.			
		other basis Complete Part VI of Schedule D			
	ь	Less accumulated depreciation	207,108.	10c	219,704.
	11	Investments - publicly traded securities	7,633,212.	11	9,334,404.
	12	Investments - other securities See Part IV, line 11	20,000.	12	20,000.
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	379,843.	15	0.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	10,194,307.	16	11,660,939.
	17	Accounts payable and accrued expenses	1,211,916.	17	1,178,519.
	18	Grants payable		18	
	19	Deferred revenue ATCH 4	0.	19	131,331.
	20	Tax-exempt bond liabilities		20	
s	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key			
Ιg		employees, highest compensated employees, and disqualified			
Ë		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	-
	26	Total liabilities. Add lines 17 through 25	1,211,916.	26	1,309,850.
<u> </u>		Organizations that follow SFAS 117, check here ▶ X and	· · · · · · · · · · · · · · · · · · ·		
8		complete lines 27 through 29, and lines 33 and 34.	0 000 201		10 251 000
ā	27	Unrestricted net assets	8,982,391.		10,351,089.
ä	28	Temporarily restricted net assets		28	
Ę	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ą	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ž	33	Total net assets or fund balances	8,982,391.	33	10,351,089.
	34	Total liabilities and net assets/fund balances	10,194,307.	34	11,660,939.
					Form 990 (2009)

Form **990** (2009)

Page	1	2
rauc	•	_

Form **990** (2009)

Form 990 (2009)

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

SCHEDULE C

(Form 990 or 990-EZ)

Internal Revenue Service

JSA 9E1264 2 000

Department of the Treasury

Political Campaign and Lobbying Activities

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

Complete if the organization is described below.

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

OMB No 1545-0047

2009

Open to Public Inspection

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

- 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 990-EZ, Part VI, line 47 (Lobbying Activities), then

- 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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

	Section 501(c)(4), (5), or (6) o	organizations Complete Part III				
	me of organization					fication number
	'L ASSOC. OF POSTA				53-01	
Par		organization is exempt under				nization.
1		ne organization's direct and indirect				
2						
3	Volunteer hours				• •	
Par	t I-B Complete if the	organization is exempt under	section 501(c)(3).			· · · · · · · · · · · · · · · · · · ·
1	Enter the amount of any e	excise tax incurred by the organizati	on under section 49	955	▶ \$	<u> </u>
2	Enter the amount of any e	excise tax incurred by organization r	managers under sed	ction 4955	▶ \$	
3	If the organization incurred	d a section 4955 tax, did it file Forn	n 4720 for this year'	?		Yes No
4a b	Was a correction made? If "Yes," describe in Part IV					Yes No
Par	t I-C Complete if the	organization is exempt under	section 501(c), e	except secti	on 501(c)(3).
1	Enter the amount directly	expended by the filing organization	n for section 527 e	xempt function	on	
	activities				.▶\$	
2		ing organization's funds contributed				
_		rities				
3		penditures. Add lines 1 and 2 En				
		(la m				
4		file Form 1120-POL for this year?				Yes No
5		es and employer identification numb anization listed, enter the amount				
	_	erved that were promptly and direct				
		cal action committee (PAC). If addit				
	(a) Name	(b) Address	(c) EIN	(d) Amoun	t paid from	(e) Amount of political
					anization's	contributions received and promptly and directly
				funds If no	ne, enter -u-	delivered to a separate
						political organization If none, enter -0-
	.=					none, enter -o-
		 -				
				<u> </u>	Cabadul	e C (Form 990 or 990-EZ) 2009
FUT P	i ivacy Actailu Paperwork Keduc	tion Act Notice, see the Instructions for For	III 330 QF 330 -E∠ .		Schean	♥ ♥ (COIII 220 OF 220 EL) 2003

Sche	edule C (Form 990 or 990-EZ) 2009	53-01	188062	Page 2
Pa	rt II-A Complete if the organization under section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	tion
		belongs to an affiliated group. checked box A and "limited control" provisi	ons apply.	
		ying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
la b c d e f	Total lobbying expenditures to influence Total lobbying expenditures to influence Total lobbying expenditures (add lines 1a Other exempt purpose expenditures Total exempt purpose expenditures (add Lobbying nontaxable amount Enter the columns			
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000 Over \$17,000,000	The lobbying nontaxable amount is: 20% of the amount on line 1e \$100,000 plus 15% of the excess over \$500,000 \$175,000 plus 10% of the excess over \$1,000,000 \$225,000 plus 5% of the excess over \$1,500,000 \$1,000,000		
_	Grassroots nontaxable amount (enter 25 Subtract line 1g from line 1a. If zero or le Subtract line 1f from line 1c. If zero or le If these is an amount other than zero on section 4911 tax for this year?	ss, enter -0-		Yes No

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2 a Lobbying non-taxable amount	•								
b Lobbying ceiling amount (150% of line 2a, column (e))									
c Total lobbying expenditures									
d Grassroots nontaxable amount									
e Grassroots ceiling amount (150% of line 2d, column (e))									
f Grassroots lobbying expenditures									

Schedule C (Form 990 or 990-EZ) 2009

Par	·Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	l For	m 57	38		
	(olocitori unuoi ocottori oci (inj).	(a)		(b))	
		Yes	No		Amoi	unt	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:						·
a b	Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?						
c d	Media advertisements? Mailings to members, legislators, or the public?	-					
e	Publications, or published or broadcast statements?						
f g h	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 similar means?						
i	Other activities? If "Yes," describe in Part IV						
j 2 a b c	Total. Add lines 1c through 1i 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	-					-
d Par	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	ors	ectio	<u> </u>		
rai	501(c)(6).	C)(3)	, UI S				
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			· · · ·	1 2 3	Yes X X	No X
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, "Yes."	c)(5)	, or s	ectio	n		
1	Dues, assessments and similar amounts from members			1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of p expenses for which the section 527(f) tax was paid).	Olitic	aı				
а	Current year			2a			
b	Carryover from last year			2b 2c			
3	Total	s		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible lo	of th					
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)		• • •	5			
	t IV Supplemental Information						
	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, complete this part for any additional information.	line	5; an	d Part	II-B, III	ne 1ı	- -

Schedule C (Fo	orm 990 or 990-EZ) 2009	53-0188062	Page 4
Part IV	Supplemental Information (continued)		
	- appreniental information (continues)		
			
-			
			

SCHEDULE D (Form 990)⁻

Supplemental Financial Statements

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

Employer identification number

NAT	'L ASSOC. OF POSTAL SUPERVISORS	53-0188062
Par	Organizations Maintaining Donor Advised Funds or Other Similar Funds or	r 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	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in d	onor advised
	funds are the organization's property, subject to the organization's exclusive legal control? .	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fun	
	used only for charitable purposes and not for the benefit of the donor or donor advisor, or fo	or any other
	purpose conferring impermissible private benefit?	Yes No
Pai		form 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply)	
	Preservation of land for public use (e.g., recreation or pleasure) Preservation of land for public use (e.g., recreation or pleasure)	of an historically important land area
	Protection of natural habitat	of a certified historic structure
	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in	n the form of a conservation
	easement on the last day of the tax year	
		Held at the End of the Year
а	Total number of conservation easements	
b	Total acreage restricted by conservation easements	
С	Number of conservation easements on a certified historic structure included in (a)	1
d	Number of conservation easements included in (c) acquired after 8/17/06	
3	Number of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified, transferred, released, extinguished, or terminate of conservation easements modified extinguished, exti	nated by the organization during
	the tax year ▶	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, have	
	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation ear	sements during the year
_		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easeme	ents during the year
	> \$	4!
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of se	
9	170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)?	
3	balance sheet, and include, if applicable, the text of the footnote to the organization's finance	•
	the organization's accounting for conservation easements	cial statements that describes
Pai	t III Organizations Maintaining Collections of Art, Historical Treasures, or Other	er 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 s	statement and halance sheet works of
	art, historical treasures, or other similar assets held for public exhibition, education, or res	search in furtherance of public service,
	provide, in Part XIV, the text of the footnote to its financial statements that describes these it	
b	If the organization elected, as permitted under SFAS 116, to report in its revenue state	
	historical treasures, or other similar assets held for public exhibition, education, or reservoide the following amounts relating to these items:	earch in furtherance of public service,
	(i) Revenues included in Form 990, Part VIII, line 1	» \$
	(ii) Assets included in Form 990, Part X	
2	If the organization received or held works of art, historical treasures, or other similar	
-	following amounts required to be reported under SFAS 116 relating to these items:	according to the state of the
а	Revenues included in Form 990, Part VIII, line 1	▶\$
b	Assets included in Form 990, Part X	
-		· ————

Sched	ule D (Form 990) 2009				5	3-01	88062		•	Page 2
Par	Organizations Maintaining Colle	ections of	Art, Histor	rical T	reasures	, or C	Other Similar A	ssets (continued	1)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and otl	her records,	_	-		_	significar	nt use of its	;
a	Public exhibition		d	→		chang	e programs			
b	Scholarly research		e] 0	ther					
С	Preservation for future generations									
4	Provide a description of the organization's or Part XIV.	ollections a	ind explain l	how the	ey further	the o	rganization's exe	empt pur	pose in	
5	During the year, did the organization solicit	or receive i	donations of	of art. hi	storical tr	easur	es, or other simil	ar		
	assets to be sold to raise funds rather than t							_	Yes	No
Par										10
- ai	IV, line 9, or reported an amoun					alisv				
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?			-					Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and comp	lete the folio	owing t	able.					
							Α	mount		
С	Beginning balance					1c				
	Additions during the year				1					
	Distributions during the year									
	Ending balance									
	Did the organization include an amount on				,			···	Yes	No
	If "Yes," explain the arrangement in Part XIV			_ · •						
Par			tion answe	red "Y	es" to Fo	rm 9	90 Part IV line	10		
		rent Year	(b) Prior yea		(c) Two ye				(e) Four ye	ears back
1a	Beginning of year balance		(, ,		\-/ - / - / -		(1)		,-,-	
	Contributions									
	Net investment earnings, gains,				-					
_	and losses									
d	Grants or scholarships	-								
	Other expenditures for facilities .					-				
·	and programs									
f	Administrative expenses									
	End of year balance						===			
	Provide the estimated percentage of the year			<u> </u>					<u> </u>	
2		ai end baia		•						
	Board designated or quasi-endowment ▶_		_%							
	Permanent endowment ▶ %									
	Term endowment ▶ %		h	. 4 41	. 4			41		
Ja	Are there endowment funds not in the poss	ession of the	ne organiza	ition tha	at are nei	a and	administered for	tne	<u> </u>	
	organization by									es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations	•							3a(ii)	-
	If "Yes" to 3a(ii), are the related organization		-				• • • • • • • •		3b	
4	Describe in Part XIV the intended uses of the									
Par	t VI Investments - Land, Buildings, a	and Equip	ment. See	Form	990, Pa	<u>rt X, I</u>	ine 10.			
	Description of investment		r other basis stment)		Cost or other sis (other)		(c) Accumulated depreciation	(d) Book value	e
1a	Land									
b	Buildings				129,1	79.	31,494		97	7,685.
С	Leasehold improvements							-		
	Equipment				730,1	31	608,112	•	122	2,019.
	Other									
	I. Add lines 1a through 1e. (Column (d) mus	t equal Forr	n 990, Part	X, colur	nn (B). lin	e 10(c	:).)		219	704.

Part VII	Investments - Other Securities. See F	orm 990, Part X, lin	e 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial d	erivatives		
Closely-hel	ld equity interests		
Other			
			
			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII			ne 13
u art viii	(a) Description of investment type	(b) Book value	(c) Method of valuation
	(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		 	
		1	 -
			-
		 	
	n (b) must equal Form 990, Part X, col (B) line 13)		
Part IX	Other Assets. See Form 990, Part X,		
	(a) Description	(b) Book value
	<u>.</u>		
	- "		
			
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 15)		
Part X	Other Liabilities. See Form 990, Part		
1.	(a) Description of liability	(b) Amount	
Federal inc			1
	10/10/		
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		ļ. <u>.</u>	
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)		

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

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009

53-0188062 Page 5

Schedule D (Form 990) 2009

Part XIV Supplemental Information (continued)

OTHER BOOK REVENUE

PART XII, LINE 2D

REVENUE OF RELATED ORGANIZATIONS THAT ARE CONSOLIDATED WITH NAPS FOR

FINANCIAL STATEMENT REPORTING PURPOSES \$100,248

BANK FEES GROUPED WITH EXPENSES ON 990 -47,921

52,327

OTHER BOOK EXPENSE

PART XIII, LINE 2D

EXPENSES OF RELATED ORGANIZATIONS THAT ARE CONSOLIDATED WITH NAPS FOR FINANCIAL STATEMENT REPORTING PURPOSES \$35,871

OTHER DIFFERENCES FROM BOOK NET INCOME

PART XI, LINE 8

NET INCOME OF RELATED ORGANIZATIONS THAT ARE CONSOLIDATED WITH NAPS FOR FINANCIAL STATEMENT REPORTING PURPOSES

OTHER 990 EXPENSE

PART XIII, LINE 4B

BANK FEES GROUPED WITH REVENUE ON FINANCIAL STATEMENTS

Part XIV Supplemental Information (continued)

FIN 48 FOOTNOTE

PART X, LINE 2

TAX YEARS PRIOR TO 2006 ARE NO LONGER SUBJECT TO EXAMINATION BY THE IRS

AND THE TAX JURISDICTION OF THE COMMONWEALTH OF VIRGINIA.

(Form 990)

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

NAT'L ASSOC. OF POSTAL SUPERVISORS

Questions Regarding Compensation

Employer identification number 53-0188062

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form			
	990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a is checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1ь		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the organization uses to establish the compensation of the			
	organization's CEO/Executive Director Check all that apply			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
_	compensation contingent on the revenues of:	_		
a	The organization?	5a	-	
b	Any related organization?	5b		
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
•	compensation contingent on the net earnings of.			
а	The organization?	6a		
-	Any related organization?	6b		
	If "Yes" to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was			
	subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2009

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

, in the second	\vdash	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC compensation	Compensation	bac tacamented (2)	oldexeter(0)	(E) Total of comme	(E) Companyon
(A) Name	<u>.</u>	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NAT'L ASSOC. OF POSTAL SUPERVISORS

Employer identification number

53-0188062

ATTACHMENT 1

BOARD REVIEW OF THE 990

PART VI, QUESTION 11

A DRAFT OF THE 990 IS PROVIDED TO THE PRESIDENT, EXECUTIVE

VICE-PRESIDENT, AND SECRETARY/TREASURER WHO EACH INDIVIDUALLY REVIEW THE

RETURN BEFORE IT IS FILED.

MONITORING AND ENFORCEMENT OF COMPLIANCE WITH CONFLICT OF INTEREST POLICY PART VI, QUESTION 12C

THE ETHICS COMMITTEE MEETS AT THE BOARD MEETINGS TO DISCUSS CONFLICT OF INTEREST AND OTHER ETHICAL CONDUCT MATTERS.

PROCESS BY WHICH COMPENSATION OF OFFICERS IS DETERMINED PART VI, QUESTIONS 15A & B

THE COMPENSATION OF THE PRESIDENT, EXECUTIVE VICE-PRESIDENT AND SECRETARY/TREASURER ARE DETERMINED BY THE MEMBERSHIP OF THE ORGANIZATION EVERY TWO YEARS AT THE NATIONAL CONVENTION.

WHETHER THE ORGANIZATION MAKES SPECIFIC DOCUMENTS AVAILABLE TO THE PUBLIC

PART VI, QUESTION 19

NAPS DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

CLASSES AND VOTING RIGHTS OF NAPS MEMBERS

PART VI, QUESTIONS 6, 7A & B

NAPS HAS THREE VOTING CLASSES. THESE CLASSES ARE (1) ACTIVE MEMBERS,

Name of the organization

NAT'L ASSOC. OF POSTAL SUPERVISORS

Employer identification number 53-0188062

ATTACHMENT 1 (CONT'D)

WHICH INCLUDES CURRENT SUPERVISORY/MANAGERIAL AND POSTMASTER PERSONNEL,
WHO PAY FULL DUES, KNOWN AS "PER CAPITA TAX;" AND (2) ASSOCIATE MEMBERS
WHO RETIRED IN GOOD STANDING AND PAY ONE-HALF OF PER CAPITA TAX. EACH
STATE AND LOCAL BRANCH IS ALLOWED ONE VOTE FOR EACH TEN MEMBERS WHO PAID
FULL PER CAPITA TAX DURING THE PRECEDING FISCAL YEAR. (3) EACH EXECUTIVE
BOARD MEMBER HAS ONE VOTE.

MEMBERS SELECT THE EXECUTIVE BOARD THROUGH A BALLOT PROCESS. PROPOSED AMENDMENTS TO THE CONSTITUTION OR BYLAWS ARE PUT INTO OPERATION BY MAJORITY VOTE, WITH EACH INDIVIDUAL MEMBER RECEIVING ONE VOTE. THE SALARIES OF THE PRESIDENT, EXECUTIVE VICE PRESIDENT AND SECRETARY/TREASURER, BEYOND BIANNUAL INCREASES, ARE DEBATED AND VOTED UPON BY THE MEMBERSHIP.

POLICIES REGARDING STATE AND LOCAL BRANCHES

PART VI, QUESTION 10B

THE CONSTITUTION PROVIDES FOR THE ESTABLISHMENT OF LOCAL BRANCHES THROUGH APPLICATION. THE SECRETARY/TREASURER OF NAPS IS KEPT INFORMED OF ALL CHANGES IN MEMBERSHIP AND ISSUES CHARTERS. THE LOCAL BRANCHES ARE GOVERNED BY 16 AREA VICE PRESIDENTS AND 5 REGIONAL VICE PRESIDENTS.

BRANCHES SET THEIR OWN DUES, FEES AND ASSESSMENTS AT OR ABOVE A MINIMUM AND MAY ENACT A CONSTITUTION AND BYLAWS THAT DOES NOT CONFLICT WITH THOSE OF NAPS.

ATTACHMENT 2

Name of the organization Employer identification number NAT'L ASSOC. OF POSTAL SUPERVISORS 53-0188062 ATTACHMENT 2 (CONT'D) 990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS NAME AND ADDRESS DESCRIPTION OF SERVICES COMPENSATION PATTON BOGGS LLP 208,563. LEGAL SUITE 800, 2550 M STREET, NW WASHINGTON, DC 20037-1350 208,563. TOTAL COMPENSATION ATTACHMENT 3 FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES BEGINNING ENDING DESCRIPTION BOOK VALUE BOOK VALUE COMMON STOCKS-MUTUAL FUNDS 7,633,212. 9,334,404. 7,633,212. 9,334,404. TOTALS ATTACHMENT 4 FORM 990, PART X - DEFERRED REVENUE BEGINNING **ENDING** DESCRIPTION BOOK VALUE BOOK VALUE DEFERRED CONVENTION REVENUE 0. 131,331. TOTALS 0. 131,331.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Servce

Name of the organization

NAT'L ASSOC. OF POSTAL SUPERVISORS

► Complete If the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36 or 37. ► Attach to Form 990.

Related Organizations and Unrelated Partnerships

► See separate instructions.

OMB No. 1545-0047	
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Open to Public

Employer identification number Inspection 53-0188062

Part I	Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)	ו answered "Yes" סו	n Form 990, Part	IV, line 33.)	;	
	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
						,
Part II	Identification of Related Tax-Exempt Organizations (Complete if the had one or more related tax-exempt organizations during the tax year.)	ions (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it shouring the tax year.)	swered "Yes" on	orm 990, Part l	/, line 34 becaus	e it
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public chanty status (if section 501(c)(3))	(f) Direct controlling entity
NAPS PI	NAPS PROPERTY, INC. 54-1683946	TATINGO DOTO	777	501 (0) (3)	4/N	4/N

	,				97
(e)	<u>.</u>	(2)		(e)	E.
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Exempt Code section	Public chanty status (if section 501(c)(3))	Direct controlling entity
NAPS PROPERTY, INC. 54-1683946					
1727 KING STREET, SUITE 400 ALEXANDRIA, VA 22314	BLDG RENTAL	VA	501(C)(2)	N/A	N/A
SUPERVISORS POLITICAL ACTION COMMITTEE 52-1115597					
1727 KING STREET, SUITE 400 ALEXANDRIA, VA 22314	POL. ACTIVITY VA	VA	527	N/A	N/A
ŀ		ī			
		,			
For Privacy Act and Paperwork Reduction Act Notice, see the instructions for Form 990.				Sched	Schedule R (Form 990) 2009

PAGE 29

Schedule R (Form 990) 2009						53-0188062	2			Page 2
Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization because it had one or more related organizations treated as a partnership during the tax year.)	elated Organizati	ons Taxa organizat	able as a Partner	ship (Complete partnership dur	if the organiza	ation answere	d "Yes" on Fo	rm 990	Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 led as a partnership during the tax year.)	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predomnant Income (related, unrelated, excluded from tax under	Share of total income	оше	(g) Share of end-of-year assets	(h) Disproportonate allocatore?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(f) General or managing partner?
		country)		512-514)				Yes No	0	Yes No
Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answer IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	elated Organizati e it had one or mo	ions Taxa		Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part rations treated as a corporation or trust during the tax year.)	Complete if the poration or trust	organization during the ta	answered "Ye x year.)	on s	Form 990, Part	
(a) Name, address, and EIN of related organization	of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	соте	(g) Share of end-of-year assets	(h) Percentage ownership
								_		
									Schedule R (Form 990) 2009	990) 2009

Page 3

53-0188062	d Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)
	(Complete if the organization ansv
90) 2009	ransactions With Related Organizations
Schedule R (Form 9)	Part V

Note Complete line 1 if any entity is listed in Barts II III or IV of this schoolule	!	Yes No	ξ
	ons listed in Parts II–IV?	* * * * * * * * * * * * * * * * * * *	14
Docaint of (ii) represent (iii) sequenties (iii) revellues or (iv) rept from		7.	×
A Neception (if) interest (iii) anniques (iii) royantes or (iv) tent normal controlled entry		1 _p	×
		100	×
		-	~
d Loans or loan guarantees to or for other organization(s)		3 ,	٦'
e Loans or loan guarantees by other organization(s)		10	^
		· · · · · · · · · · · · · · · · · · ·	. 4
f Sale of assets to other organization(s)		14	~
a Purchase of assets from other organization(s)		19	~
		1h	~
		;-	×
Lease of facilities, equipment, of other assets to other digamization(s)		· ·	113
1 Lance of facilities continuant or other accept from other areastration(s)		1. X	
Lease of recuires, equipment, of other assets from other organization(s)		*	~
		=	~
		E.	×
_			×
n sharing of paid employees			-
			1×
		:	Ί×
p Reimbursement paid by other organization for expenses		a	
		,**	1
q Other transfer of cash or property to other organization(s)		4	×
L		1r	
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	g covered relationships and transa	action thresholds	
(a)	(b) Transaction	(c) Amount involved	
	type (a-r)		
(2)			
(3)			
(4)			
(9)			
		Schedule R (Form 990) 200	200

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.) Part VI

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and Eliv of entity	(c) (d) Legal domicile Are all pa	(d) Are all partners	(e) Share of	(f) Disproportionate	1	(h) General or
		section 501(c)(3) omanizations?	end-of-year assets	allocations?	of Schedule K-1	
		Yes No		Yes No	(Form 1065)	Yes No
				_		
					•	
					Schedule R (Form 990) 2009	n 990) 2009