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Department of the Treasury

Return of Organization Exempt From Income Tax .

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

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

OMB No 1545-0047 2009 Open to Public

me	nai Revenue	Service	The diganization may have to use a copy of this return to satisfy state	<u> </u>	ill ettiettis	Hispection
<u>A</u>	For the 2009	cal <u>endar y</u> e	ar, or tax year beginning $07/01/09$, and ending $06/30/16$	0		
В	Check if applicab		C Name of organization NATIONAL ASSOCIATION FOR COMMUNITY		D Employ	yer identification number
\square	Address change	use IRS	COLLEGE ENTREPRENEURSHIP, INC			
Ħ.	Nome shares	label or print or	Doing Business As		7 26-	0704711
님	Name change	type	Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telepho	one number
\Box	Initial return	See	ONE FEDERAL STREET BLDG 101-R			-306-3131
\Box	Termination	Specific	City or town, state or country, and ZIP + 4		G Gross receip	
\equiv		Instruc- tions.	SPRINGFIELD MA 01105		G Gloss level	DES 000//01
\equiv	Amended return	E North			H/a) le this e	arous roturn for
	Application pend	ing F Name	and address of principal officer			group return for Yes X No
					affiliates H(b) Are all a	affiliates
					included	
					If "No,"	attach a list. (see instructions)
1_	Tax-exempt s		501(c) (3) ◀ (insert no) 4947(a)(1) or 527		_	
<u>J</u>	Website: 🕨		ACCE.COM		H(c) Group e	exemption number
K	Type of organiza	ation X Cor	poration Trust Association Other ▶ L \	ear of formation	!	M State of legal domicile
P	art I	Summai	у			
	1 Brieft	y describe th	ne organization's mission or most significant activities			
•	TC	FOSTER	R ECONOMIC VITALITY FOR LOCAL COMMUNITIES AND THE	HE NATION	N THROUGH	H
ž	TH	E ESTA	BLISHMENT AND COORDINATION OF ENTREPRENEURSHIP 1	EDUCATION	NAL PROGE	RAMS
Ē	I'A	COMMUN	HITY COLLEGES.			ſ
ĕ	1	k this box		of its net asse	ate	
Activities & Governance			members of the governing body (Part VI, line 1a)	or no net abou	3	11
త	li .	_			4	11
Ęį		•	endent voting members of the governing body (Part VI, line 1b)			4
ξ			employees (Part V, line 2a)		5	25
Ac	6 Total	numberofv	olunteers (estimate fitnecessary)		6	
		31 H	ated business revenue from Part VIII, column (C), line 12		7a	2,124
	b Net u	nrelated bus	siness taxable income from Form 990-T, line 34		7b	
		ကို	JAN 2 0 2011 3	Prior \		Current Year
9			grants (Part VIII, line 1h)		95,355	194,967
e I			revenue (Part VIII, Tine 2g)		31,287	369,258
Revenue	10 Inves	tment incon	ne (Part VIII Column (A), lines 3, 4, and 7d)		4,480	2,559
Œ	11 Other	r revenue (P	art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12 Total	revenue – a	dd lines 8 through 11 (must equal Part VIII, column (A), line 12)	4.	31,122	566,784
	13 Grant	ts and simila	r amounts paid (Part IX, column (A), lines 1-3)			
	14 Bene	fits paid to c	r for members (Part IX, column (A), line 4)			
w	15 Salar	nes, other co	impensation, employee benefits (Part IX, column (A), lines 5–10)	1	96,927	178,928
nses	16a Profe	ssional fund	raising fees (Part IX, column (A), line 11e)			
per			expenses (Part IX, column (D), line 25) ▶ 8,812			
Expe	17 Other	•	Part IX, column (A), lines 11a-11d, 11f-24f)	3.	38,803	309,179
		•	Add lines 13–17 (must equal Part IX, column (A), line 25)		35,730	488,107
		•	penses Subtract line 18 from line 12		04,608	78,677
- S	13 17646	uc icas ex	Sources Construct to normalic 12	Beginning of C		End of Year
Net Assets or Fund Balances	20 Total	assets (Par	t X. line 16)		30,675	287,231
Ass	21 Total	•	art X, line 26)		43,301	147,197
Z S	22 Not 2	•	d balances Subtract line 21 from line 20		87,374	140,034
	art II	Signatu			0.,0.4	110/034
<u></u>	M11 11			4-4-4	11 11 1 1 1	
~			ues of perjury, I declare that I have examined this return, including accompanying schedules ar is true, correct, and complete Declaration of preparer (other than officer) is based on all inform			
₩.			laste be live	·		1
Sig	-	14	MATUL WAL XXCE		0	15/11
∰е ⊥	re	Signatu	re of officer	, .	Date	
<u> </u>			Heather Van Sickle, Exe	<u>cutive</u>	Directi	٥٢
		Type or	print name and title			T
ير پي		Preparer's	Date	Che		Preparer's identifying number (see instructions)
Pa		signature	RICHARD ABBOTT 12/1	0/10 self-	loyed > X	P00493113
- C-	eparer's		RICHARD ABBOTT CPA		EIN ▶	26-3598559
علْإِ	e Only	Firm's name if self-emplor	162 MODELLA COMPANDE COMPANDE		Phone	
Y))		address, and	•			413-529-9697
Mar	uthe IPS die		turn with the preparer shown above? (see instructions)		no 🕨	
			rwork Reduction Act Notice, see the separate instructions.			X Yes No Form 990 (2009)
1-01	THE THE THE	r and Laha	mon noduction not trouce, see the separate manuchons.			roim 330 (2009)

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

Form **990** (2009)

Form 990 (2009) NATIONAL ASSOCIATION FOR COMMUNITY 26-0704711	Page 2
Part III ' Statement of Program Service Accomplishments	
1 'Briefly describe the organization's mission TO FOSTER ECONOMIC VITALITY FOR LOCAL COMMUNITIES AND THE NATION THE ESTABLISHMENT AND COORDINATION OF ENTREPRENEURSHIP EDUCATIONAL AT COMMUNITY COLLEGES.	
2 Did the organization undertake any significant program services during the year which were not listed on	
the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O 3 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	
4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (Code) (Expenses \$ 115,364 including grants of \$) (Revenue \$ MEMBER SERVICES - PUBLICATIONS, WEBINARS, AND OTHER SERVICES DESIGNED TO BENEFIT MEMBERS IN ENTREPRENEURSHIP EDUCATION AND ENTREPRENEURIAL LEADERSHIP AT THE COMMUNITY COLLEGE LEVEL.)
4b (Code) (Expenses \$ 3,363 including grants of \$) (Revenue \$ SYMPOSIUM - AN ANNUAL EVENT FOR FACULTY AT COMMUNITY COLLEGES DESIGNED TO HIGHLIGHT INNOVATIVE WAYS IN WHICH TO TEACH ENTREPRENEURSHIP IN BOTH THE CREDIT AND CREDIT FREE ARENAS. THE SYMPOSIUM PROVIDES A FORUM TO NETWORK WITH ENTREPRENEURSHIP FACULTY AND AN OPPORTUNITY FOR EDUCATORS TO WALK AWAY WITH TOOLS TO EDUCATE AND INSPIRE THE NEXT GENERATION OF ENTREPRENEURS.)
4c (Code)(Expenses \$ 210,458 including grants of \$) (Revenue \$ CONFERENCE THE ANNUAL CONFERENCE IS A PLACE WHERE ENTREPRENEURIALLY MINDED COMMUNITY COLLEGE PROFESSIONALS GATHER TOGETHER TO IDENTIFY OPPORTUNITIES AND CREATE POSITIVE ORGANIZATIONAL	<u> </u>
AND COMMUNITY CHANGE. THROUGH ENTREPRENEURIAL LEADERSHIP, ENTREPRENEURSHIP EDUCATION, AND STUDENT BUSINESS INCUBATION PROGRAMS YOU WILL LEARN HOW YOUR COMMUNITY COLLEGE WILL MAKE AN IMPACT IN YOUR COMMUNITY'S ECONOMIC FUTURE.	
4d Other program services (Describe in Schedule O)	· · · · · · · · · · · · · · · · · · ·
(Expenses \$ including grants of \$) (Revenue \$	
4e Total program service expenses ▶ 329,185	

Did the organization operate one or more hospitals? If "Yes," complete Schedule H

_	1 990 (2009) NATIONAL ASSOCIATION FOR COMMUNITY 26-0704711		F	age
P	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,"			
	complete Schedule A	1_	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
	Schedule C, Part II	4		X
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		ļ
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	<u> </u>	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	<u> </u>	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			Ì
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			х
	complete Schedule D, Part IV	9		^
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		x
14		10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,	11	x	
_	VII, VIII, IX, or X as applicable 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 related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 169 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	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	١		-
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	<u> </u>	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			v
	on Part IX, column (A), lines 6 and 11e ⁹ If "Yes," complete Schedule G, Part I	17	⊢–	X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	4.		v
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		х
	ii res, complete contecute o, r art iii	<u> </u>	— —	

Form 990 (2009) NATIONAL ASSOCIATION FOR COMMUNITY 26-0704711 Page 4 Part IV 'Checklist of Required Schedules (continued) Yes Nο 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations X in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the X United States on Part IX, column (A), line 27 If "Yes," complete Schedule I, Parts I and III 22 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 X employees? If "Yes," complete Schedule J 23 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 lines X 24b through 24d and complete Schedule K. If "No," go to line 25 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 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? 24đ 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction X with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 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 25b X 990-EZ? If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 X disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 substantial contributor, or a grant selection committee member, or to a person related to such an individual? X If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 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 A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X 28b Schedule L. Part IV c 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, X 28c Part IV X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified X 30 conservation contributions? If "Yes," complete Schedule M 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X 31 Part I 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, X III, IV, and V, line 1 34 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete 35 X 35 Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36 X 36 organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

19? Note. All Form 990 filers are required to complete Schedule O

X Form 990 (2009)

37

38

X

38

Pa	T V Statements Regarding Other IRS Filings and Tax Compliance			
, '	Edward Decorption and		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			
_	···	-		
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
С	gaming (gambling) winnings to prize winners?	1c	•	х
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	"		
La	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	Ī
_	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	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	X	
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		1	
	account)?	4a	ļ	X
b	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			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding			İ
_	Prohibited Tax Shelter Transaction?	5c	 	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		x
h	organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	100		
a	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		х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? N/A	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_		
0	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			!
	benefit contract?	7e	_	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? For all contributions of qualified intellectual property, did the organization file Form 8899 as required? N/A	7f	-	X
g	Totali contributions of qualified interioristic property, and the organization me form of the organization	7g	-	├─
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required? N/A	7h		
		/n		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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	1	Ţ
9	Sponsoring organizations maintaining donor advised funds.	-		
а	Did the organization make any taxable distributions under section 4966?	9a	1	İ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			lacksquare
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		‡
f1	Section 501(c)(12) organizations. Enter			I
а	Gross income from members or shareholders 11a	4		
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	┦		1
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	Ess	, aar	<u>‡ </u>
		ror		, (ZUU9)

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.

	Schedule O. See instructions.			
Sec	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 1b 11	-		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		1	
	any other officer, director, trustee, or key employee?	2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct	i l		
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1	
	the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	_8b	X	
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	9		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Internal			
Rev	renue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		<u>X</u>
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	4.5.		
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		v	
	form?	11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40	X	
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	4.5.	v	
	rise to conflicts?	12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		v	
	describe in Schedule O how this is done	12c	x	
13	Does the organization have a written whistleblower policy?	13	_	x
14	Does the organization have a written document retention and destruction policy?	14		4
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?	45-		4
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a		40-		x
	with a taxable entity during the year?	16a		_
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	40.		
	the organization's exempt status with respect to such arrangements?	16b		
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed MA			
18	Section 6104 requires an organization to make its Forms 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			
4.5	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 interest			
	policy, and financial statements available to the public			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
c.	organization ► HEATHER VAN SICKLE ONE FEDERAL ST., BLDG. 101-R PRINGFIELD MA 01105 4:	13-30	6-3	131

Form 990 (2009)

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."

DAA

- 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

(A) Name and Title	(C) osition (check all that apply)					(D) Reportable	(E) Reportable	(F) Estimated		
	Average hours per week	Individual trustee or director		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
KEVIN DRUMM										
PRESIDENT/CH	1.00	X	ļ	X		\sqcup		0	0	0
SHEILA ORTEGO	1 00	.		x				o	0	0
VICE CHAIR	1.00	X		^	_	\vdash		<u>_</u>	<u> </u>	
DONALD SCHOENING SECRETARY	1.00	x		x				o	0	0
RONALD THOMAS	1.00	1		-	_	1-1		·		
TREASURER	1.00	x		x				ol	0	0
J NOAH BROWN										
DIRECTOR	1.00	x						0	0	0
GAIL CARBERRY										
DIRECTOR	1.00	X						0	0	0
CEM ERDEM										
DIRECTOR	1.00	X						0	0	0
THOMAS GOODROW		1							_	
DIRECTOR	1.00	X		_	ļ	<u> </u>		0	0	0
MELODY KAMERER										•
DIRECTOR	1.00	X	<u> </u>		_	\vdash		0	0	0
MONTE PADEN	1 00			١	ĺ				^	•
DIRECTOR KAREN STOUT	1.00	X		-	 	 		0	0	0
DIRECTOR	1.00	x						o	0	o
DIRECTOR	1.00	-								
										200

Part VI	(A) Name and Title	(B) Average hours per	Pos	ition ((chec	C) k all t	hat ap	pply)	d Highest Compensated E (D) Reportable compensation	(E) Reportable compensation		(F) Estimated	
		week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	co	ion on ed	
											·		
													
							ļ						
												· · · · · · · · · · · · · · · · · · ·	
	_,												
					ose	liste	d abo	ve)	who received more than \$1	[00,000 in		_	
3 Did t	the organization list any foi loyee on line 1a? If "Yes," (rmer officer, direc	ctor o	or tru for s	uch i	ndıv	ıdual		ee, or highest compensated	m		3 Y	es No
the outlindiv 5 Did a	organization and related organization and related organization and related organization from the first of the organizes rendered to the organizes.	ganizations great	er th	an \$ mpe	150, ensat	0007 ion f	rom a	es," any i	complete Schedule J for su unrelated organization for	 ch		5	x
Section I	B. Independent Contracto	ors							ctors that received more tha	n \$100,000 of			1. 7.
	pensation from the organiz									(B) stion of services		Comp	C) ensation
	·												··.
													·-
-								-					
	il number of independent c e than \$100,000 in comper						to th	ose	listed above) who received			0	90 (200

Pa	rt V	Statement of Reve	nue						
	•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u>""</u>	4 -		4-				Tevenue		012, 010, 01 014
첉뙯	1a	Federated campaigns	1a			1			
<u> </u>	b	Membership dues	1b			Į.			
a E	С	Fundraising events	1c						
<u>gʻë</u>	d	Related organizations	1d				1		
S.E	0	Government grants (contributions)	1e						
er F	f	All other contributions, gifts, grants,			1				
들원		and similar amounts not included above	1f		194,967	İ			
풀힐	g	Noncash contributions included in lines 1a-	1f	\$	į	1			
Contributions, gifts, grants and other similar amounts	h	Total. Add lines 1a-1f				194,967			
ē					Busn. Code				
le l	2a	REGISTRATION INCOME				140,162	140,162		
- Re	b	MEMBERSHIP DUES			Î	129,701	129,701		· · · · · · · · · · · · · · · · · · ·
9	c	SPONSOR & PARTNERSH	TP FE	ES		68,250	68,250		
S	d					27,945	27,945		
J S	e					3,200	3,200	-	
Ja	_				-	3/200	5,255		
Program Service Revenue		All other program service reven	iue		—	369,258			
\dashv		Total. Add lines 2a-2f				309,230			<u></u>
	3	Investment income (including d	iviaend	is, interes		2,559		2,124	435
		other similar amounts)				2,339		2,124	433
- 1	4	Income from investment of tax-	exemp	t bond pro	ceeds 🕨				
	5	Royalties			>				
		(ı) Real		(II) F	Personal	ł			
	6a	Gross Rents				1			
	b	Less rental exps							
	C	Rental inc or (loss)				•			
	_d	Net rental income or (loss)			•				
	7a Gross amount from sales of assets (i) Securities (ii) 0			Other	1				
		other than inventory				İ			
	ь	Less cost or other				1			
		basis & sales exps				1			
	c	Gain or (loss)				1			
		Net gain or (loss)			•	Ť	Ì		
		Gross income from fundraising ever	nts						
ne	- 00	(not including \$				1			
/eu		of contributions reported on line 1c)				1			
Re		See Part IV, line 18				1			
Other Reven			a b			Ī			
=		Less direct expenses	_			†		:	
		Net income or (loss) from fundi	_	events	•	-			
	9a	Gross income from gaming activities			ļ	1			
	_	See Part IV, line 19	a			1			
		Less direct expenses	þ				1		
		Net income or (loss) from game	ing act	vities	<u> </u>	-			
	10a	Gross sales of inventory, less				1			
		returns and allowances	а			1			
	b	Less cost of goods sold	b			1			
	c	Net income or (loss) from sales	s of inv	entory	•		enarna -ari i a radio d		······································
		Miscellaneous Revenue	•		Busn. Code				
	11a								
	b								
	C								
	d	All other revenue							•
		Total. Add lines 11a-11d			•				
	12	Total Revenue. See instruction	ns		▶ [566,784	369,258	2,124	435

Part IX Statement of Functional Expenses

Form 990 (2009)

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).

	All other organizations must o	(A) (A) but a	(B)	(C)	(D)
	not include amounts reported on lines 6b,	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	8b, 9b, and 10b of Part VIII. Grants and other assistance to governments and		expenses	general expenses	expenses
•	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			1	
3	Grants and other assistance to governments,				
·	organizations, and individuals outside the			1	
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,		1		
·	trustees, and key employees				
6	Compensation not included above, to disqualified			* * * * * * * * * * * * * * * * * * * *	.
•	persons (as defined under section 4958(f)(1)) and		1		
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	148,277	63,789	76,541	7,947
8	Pension plan contributions (include section 401(k)				, - <u></u>
-	and section 403(b) employer contributions)	2,884	1,538	1,346	
9	Other employee benefits	11,263	6,007	4,929	327
10	Payroll taxes	16,504	8,601	7,365	538
11	Fees for services (non-employees)		-,		
	Management				
b	Legal	2,345		2,345	
c	Accounting	5,280		5,280	· · · · · · · · · · · · · · · · · · ·
d	Lobbying	-,		- /	
9	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	131,042	121,172	9,870	
12	Advertising and promotion			·	
13	Office expenses	13,653	8,090	5,563	
14	Information technology				· · · · · · · · · · · · · · · · · · ·
15	Royalties				
16	Occupancy	437		437	
17	Travel	17,507	7,184	10,323	
18	Payments of travel or entertainment expenses		,	•	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	5,814		5,814	
23	Insurance	1,884		1,884	
24	Other expenses Itemize expenses not	#		!	
	covered above (Expenses grouped together			#	
	and labeled miscellaneous may not exceed	1		1	
	5% of total expenses shown on line 25 below)				
а	HOTEL & FOOD	34,461	34,461		
b	MARKETING	29,067	24,870	4,197	
С	PRINTING & COPYING	16,814	16,814		
d	OTHER EXPENSE	13,631	7,928	5,703	
0	PUBLIC RELATIONS	10,895	10,895		
f	All other expenses	26,349	17,836	8,513	
25	Total functional expenses. Add lines 1 through 24f	488,107	329,185	150,110	8,812
26					
	SOP 98-2 Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation				
DAA			· —		Form 990 (2009)

art	X Balance Sheet							
•				(A)		(B)		
Т.				Beginning of year		End of year		
1	Cash—non-interest bearing			33,103	1	11,193		
2	Savings and temporary cash investments		-	17,670	2	50,913		
3	Pledges and grants receivable, net		-	118,826		194,000		
4	Accounts receivable, net		ļ.	13,218	4	15,093		
5	Receivables from current and former officers, directors, tr	•						
	employees, and highest compensated employees Compl			Ī				
	Schedule L		ļ.	···-	_5			
6	Receivables from other disqualified persons (as defined u							
	4958(f)(1)) and persons described in section 4958(c)(3)(E	B) Complete			1			
	Part II of Schedule L		<u> </u>	·, ·-, ·-, ·-	6			
7 8	Notes and loans receivable, net		1		7			
8	Inventories for sale or use		L		8			
9	Prepaid expenses and deferred charges	1 6		26,013	9			
10	a Land, buildings, and equipment cost or				1			
	other basis Complete Part VI of Schedule D		1,789		1			
1	Less accumulated depreciation	10b	.0,381	15,765	10c	11,408		
11	Investments—publicly traded securities		L		11			
12	Investments—other securities See Part IV, line 11		L		12			
13	Investments—program-related See Part IV, line 11		L		13			
14	Intangible assets		6,080	14	4,624			
15	Other assets See Part IV, line 11			15				
16	Total assets. Add lines 1 through 15 (must equal line 34)) _		230,675	16	287,231		
17	Accounts payable and accrued expenses			27,943	17	25,852		
18	Grants payable			18				
19	Deferred revenue			115,358	19	121,345		
20	Tax-exempt bond liabilities				20			
21	Escrow or custodial account liability Complete Part IV of	Schedule D			21			
21 22			Γ					
1	employees, highest compensated employees, and disqua	lified			1			
	persons Complete Part II of Schedule L				22			
23		parties			23			
24	Unsecured notes and loans payable to unrelated third par	•	Γ		24			
25	Other liabilities Complete Part X of Schedule D				25	············		
26	•		Γ	143,301	26	147,197		
	Organizations that follow SFAS 117, check here ▶ 3	and		•		•		
1	complete lines 27 through 29, and lines 33 and 34.	J						
27	Unrestricted net assets		Ţ	-10,320	27	-7,966		
28				97,694	28	148,000		
29					29	1		
	Organizations that do not follow SFAS 117, check her	re ▶ 📋						
	and complete lines 30 through 34.							
30		f		30				
31	•							
27 28 29 30 31 32 33				· · · · · · · · · · · · · · · · · · ·	31 32			
33				87,374	33	140,034		
34				230,675	34	287,231		

287,231 Form 990 (2009)

Page 11

b 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

Form 990 (2009)

3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NATIONAL ASSOCIATION FOR COMMUNITY COLLEGE ENTREPRENEURSHIP, INC.

26-0704711

Employer identification number

D.	irt f	Page	on for Public Charity	Statue (All organizations	must of	molete	thio n	04 \ C	oo inc	tructio	200		
				Status (All organizations			uns p	art.) S	ee ms	ucuc	JIIS		
_	orgai		•	it is (For lines 1 through 11, che	•	•							
1	H			ciation of churches described in	section 1	70(b)(1)(<i>i</i>	A)(i).						
2			cribed in section 170(b)(1)(A	.,									
3	Ц	A hospital or	a cooperative hospital service	e organization described in secti	on 170(b)	(1)(A)(iii).	•						
4		A medical res	earch organization operated	in conjunction with a hospital des	scnbed in	section 1	70(b)(1)	(A)(iii).	Enter th	e hospi	tal's name,		
		city, and state	•										
5		An organization	on operated for the benefit of	a college or university owned or	operated	by a gove	rnmenta	ıl unıt de	scribed	ın			
		section 170(b)(1)(A)(iv). (Complete Part I	l)									
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	An organization that normally receives a substantial part of its support from a governmental unit or from the general public												
	described in section 170(b)(1)(A)(vi). (Complete Part II)												
8	A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)												
9	X	•		more than 33 1/3 % of its suppo		ntributions	s memb	ership fe	es and	1 aross			
·		_	•	ot functions—subject to certain ex				· ·		-			
		•	•	d unrelated business taxable inco									
			<u>-</u>	, 1975 See section 509(a)(2).	•		i i (ux) ii	om busi	103303				
10	\Box		· ·	clusively to test for public safety	•	•	a)(A)						
11	H	•	•	clusively for the benefit of, to pe				carn, ou	t tha				
• •	Ш	•	•	d organizations described in sect				•		tion			
		•								tion			
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III–Functionally integrated d Type III–Other												
_	\Box	a Type	··	··			d			iei			
е	Ш			nization is not controlled directly									
		•	•	ind other than one or more public	ay suppor	ted organi	izations	describe	a in sec	non			
			ection 509(a)(2)					_					
f		•		mination from the IRS that it is a	Type I, Ty	pe II, or T	ype III s	upportin	9				
		-	check this box										
g		Since August	17, 2006, has the organization	on accepted any gift or contribution	on from ar	ny of the							
		following per	sons?										
		(i) A persor	who directly or indirectly cor	itrols, either alone or together wil	th persons	describe	d ın (ıı)					Yes	No
		and (III) b	pelow, the governing body of	the supported organization?							11g(i)		
		(ii) A famıly	member of a person describe	ed in (i) above?							11g(ii)	!	<u></u>
		(iii) A 35% c	ontrolled entity of a person de	escribed in (i) or (ii) above?							11g(iii	<u> </u>	<u> </u>
h		Provide the f	ollowing information about th	e supported organization(s)	,								
(1)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization		ou notify		ls the	(vii) Am	ount of	
	org	anization		(described on lines 1–9		sted in your		nization in of your	organizat	ion in col zed in the	sup	oort	
				above or IRC section (see instructions))	governing	document?		ort?		S ?			
					Yes	No	Yes	No	Yes	No			
											_		
					į								
					Ì						· · · ·		
									<u> </u>				
						-			 				
											W-1		
Tota													

Schedule A (Form 990 or 990-EZ) 2009 NATIONAL ASSOCIATION FOR COMMUNITY Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Amounts from line 4 Gross income from interest, dividends, payments received on securities loans. rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include gain or 10 loss from the sale of capital assets (Explain in Part IV) Total support. Add lines 7 through 10 12 12 Gross receipts from related activities, etc. (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization

and stop nere. The organization qualifies as a publicly supported organization
 33 1/3 % support test—2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

Schedule A (Form 990 or 990-EZ) 2009

18

(e) 2009

194,967

369,258

Page 3

902,944

772,224

(f) Total

(d) 2008

216,497

209,991

(b) 2006

(c) 2007

491,480

192,975

Calendar year (or fiscal year beginning in)

Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the

Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on

Section A. Public Support

any "unusual grants")

its behalf

Gifts, grants, contributions, and membership fees received (Do not include

organization's tax-exempt purpose

The value of services or facilities furnished by a governmental unit to the

organization without charge

Support Schedule for Organizations Described in Section 509(a)(2)

(a) 2005

(Complete only if you checked the box on line 9 of Part I.)

6	Total. Add lines 1 through 5			684,455	426,488	564,225	1,675,168
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received			l i			
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year			438,450	86,955	178,647	704,052
С	Add lines 7a and 7b			438,450	86,955	178,647	704,052
8	Public support (Subtract line 7c from line 6)						071 116
500	tion B. Total Support	<u> </u>	<u>‡</u>			<u> </u>	971,116
_	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
		(a) 2005	(b) 2006	1			
9	Amounts from line 6	·		684,455	426,488	564,225	1,675,168
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			2,755	1,610	435	4,800
b	Unrelated business taxable income (less section 511 taxes) from businesses						·
	acquired after June 30, 1975						
С	Add lines 10a and 10b			2,755	1,610	435	4,800
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12)			687,210	428,098	564,660	1,679,968
14	First five years. If the Form 990 is for the	organization's first,	second, third, four	th, or fifth tax year as	a section 501(c)(3)	
	organization, check this box and stop here						•
Sec	tion C. Computation of Public Su	pport Percent	tage				
15	Public support percentage for 2009 (line 8,	column (f) divided	by line 13, column	(f))		15	57.81%
<u>16</u>	Public support percentage from 2008 Sche	dule A, Part III, line	: 15			16	64.54%
Sec	tion D. Computation of Investme	nt Income Per	centage				
17	Investment income percentage for 2009 (lin	ne 10c, column (f) o	divided by line 13,	column (f))		17	%
18	Investment income percentage from 2008	Schedule A, Part III	l, line 17			18	%
19a	33 1/3 % support tests—2009. If the orga	nization did not che	ck the box on line	14, and line 15 is mo	re than 33 1/3 %, a	ind line	
	17 is not more than 33 1/3 %, check this bo	ox and stop here .]	The organization q	ualifies as a publicly s	supported organiza	tion	► X
b	33 1/3 % support tests—2008. If the orga	nization did not che	ck a box on line 14	4 or line 19a, and line	16 is more than 33	3 1/3 %, and	_
	line 18 is not more than 33 1/3 %, check th	is box and stop he	re. The organization	on qualifies as a publi	cly supported orga	nization	▶ [
20	Private foundation. If the organization did	not check a box or	n line 14, 19a, or 1	9b, check this box an	d see instructions		.
DAA					Sche	edule A (Form 990	or 990-EZ) 2009

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► 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.

OMB No 1545-0047 2009

Open to Public

Name of the organization **Employer Identification number** NATIONAL ASSOCIATION FOR COMMUNITY 26-0704711 COLLEGE ENTREPRENEURSHIP, INC 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 Total number at end of year Aggregate contributions to (during year) 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 can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring 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 land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 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 Tax Year 2a Total number of conservation easements 2b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2c 2d 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, handling of Yes violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section Yes No 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. Part III 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 2 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 Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 NATIONAL A	ASSOCIATION	FOR COMMUNI	TY 26-0	704711	Page 2				
Pa	rt III Organizations Maintaining	Collections of Art	, Historical Treas	ures, or Other	Similar Asse	ts (continued)				
3	3 'Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)									
а	Public exhibition	d Loar	n or exchange program	าร						
b										
С	Preservation for future generations									
4	 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 									
5	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No									
Pa	Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part									
	IV, line 9, or reported an am									
1a	Is the organization an agent, trustee, custodian	or other intermediary for	r contributions or other	assets not						
	included on Form 990, Part X?					Yes No				
b	If "Yes," explain the arrangement in Part XIV and	d complete the following	ı table							
						Amount				
С	Beginning balance				1c					
d	Additions during the year	•			_1d					
е	Distributions during the year				1e					
f	f Ending balance									
2a	2a Did the organization include an amount on Form 990, Part X, line 21?									
<u>b</u>	If "Yes," explain the arrangement in Part XIV.									
Pa	rt V Endowment Funds. Comple	te if organization a	answered "Yes" to	<u> Form 990, Pa</u>	rt IV, line 10.					
		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years t	pack (e) Four years back				
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains,									
	and losses									
d	Grants or scholarships									
e	Other expenditures for facilities		•							
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the year er	nd balance held as			_					
а	Board designated or quasi-endowment	%								
b	Permanent endowment ▶ %									
С	Term endowment ▶ %									
3a	Are there endowment funds not in the possession	on of the organization th	at are held and admin	stered for the						
	organization by	·				Yes No				
	(i) unrelated organizations					3a(i)				
	(ii) related organizations					3a(ii)				
ь	If "Yes" to 3a(ii), are the related organizations lis	sted as required on Schi	edule R?			3b				
4	Describe in Part XIV the intended uses of the or	·								
Pa	rt VI Investments—Land, Buildir), Part X, line 1	0.					
	Description of investment	(a) Cost or other basis			ccumulated	(d) Book value				
		(investment)	basis (other	r) de _l	oreciation					
1a	Land					.,				
	Buildings									
	Leasehold improvements									
	d Equipment 21,789 10,381 11,408									
	Other					<u> </u>				
	l. Add lines 1a through 1e (Column (d) must equ	al Form 990, Part X, col	lumn (B), line 10(c))	•	>	11,408				

NATIONAL ASSOCIATION FOR COMMUNITY

Schedule D (Form 990) 2009

26-0704711

Page 3

organization's liability for uncertain tax positions under FIN 48

	dule D (Form 990) 2009 NATIONAL ASSOCIATION FOR C				Page 4				
	rt XI Reconciliation of Change in Net Assets from Form 9	90 to Audite	d Financial Stateme	ents					
1	*Total revenue (Form 990, Part VIII, column (A), line 12)			1	566,784				
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	488,107				
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	78,677				
4	Net unrealized gains (losses) on investments			4					
5	Donated services and use of facilities			5					
6	Investment expenses			6					
7	Pnor period adjustments		ļ	7					
8	Other (Describe in Part XIV)			8					
9	Total adjustments (net) Add lines 4 through 8			9					
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3			10	78,677				
Pa	Reconciliation of Revenue per Audited Financial Sta	tements Wit	h Revenue per Retu		- FE4 FO4				
1	Total revenue, gains, and other support per audited financial statements		ļ	1	574,584				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1							
а	Net unrealized gains on investments	2a	7.000						
b	Donated services and use of facilities	_2b	7,800						
C	Recoveries of prior year grants	2c							
d	Other (Describe in Part XIV)	2d			5 000				
е	Add lines 2a through 2d			2е	7,800				
3	Subtract line 2e from line 1	(1		3	566,784				
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							
þ	Other (Describe in Part XIV)	4b							
_	Add lines 4a and 4b			4c	F.C. 70A				
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	-4	:	5	566,784				
	Reconciliation of Expenses per Audited Financial St	atements vv	itn Expenses per Ri	eturn	495,907				
1	Total expenses and losses per audited financial statements			1	495,907				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	اما	7,800						
a	Donated services and use of facilities	2a 2b	7,800						
D.	Prior year adjustments	2b 2c							
C	Other losses	2c 2d							
d	Other (Describe in Part XIV)			20	7,800				
9	Add lines 2a through 2d			2e 3	488,107				
3 4	Subtract line 2e from line 1	1 1		3	400,107				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	40							
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b							
	Other (Describe in Part XIV)	[40]		4c					
	Add lines 4a and 4b Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)			5	488,107				
	rt XIV Supplemental Information			3	100,107				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part	III lines 1a and	4 Part IV lines 1h						
	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part X								
	eart to provide any additional information	in, inica za ana	45 7 1130 Complete						
	ART XIV - SUPPLEMENTAL FINANCIAL INFORMA	ТОИ							
A	_PRIOR_PERIOD_CHANGE_IN_NET_ASSET_BALANO	E WAS M	ADE_IN THE CU	RREN	r YEAR IN _				
וידי	HE AMOUNT OF \$26,017 DUE TO A CHANGE IN	METHOD (OF ACCOUNTING	. PRI	OR TO THE				
	 								
_C <u>1</u>	CURRENT YEAR ANNUAL CONFERENCE EXPENSES WERE CONSIDERED PREPAID EXPENSES UP								
TT	NTIL THE DATE THE CONFERENCE WAS HELD. I	BECAUSE '	THESE EXPENSE	SARE	E NOT				
	- 				-				
_R	EFUNDABLE IT_WAS_DETERMINED THAT_A_MORE	<u>APPROPR</u>	IATE ACCOUNTI	NG_F	DR_THESE				
E	XPENSES WOULD BE TO REPORT THEM IN THE Y	TEAR THE	Y OCCURRED						

Schedule D (Fo	rm 990) 2009	NATIONAL	ASSOCIATION	FOR COMMU	NITY 26-0704711	Page 5
Part XIV	Suppleme	NATIONAL ntal Information	(continued)			
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SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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.

2009 Open to Public Inspection

OMB No 1545-0047

NATIONAL ASSOCIATION FOR COMMUNITY COLLEGE ENTREPRENEURSHIP, INC

Employer identification number 26-0704711

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
BOARD MEMBERS RECEIVE A DRAFT OF THE FORM 990 FOR REVIEW PRIOR TO THE
FINAL COPY BEING FILED. ALL COMMENTS FROM BOARD MEMBERS ARE FORWARDED TO
FINANCE COMMITTEE AND AS NECESSARY TO THE PREPARER.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

AT ALL BOARD MEETINGS BOARD MEMBERS ARE ASKED TO INDENTIFY ANY CONFLICTS OF

INTERST THEY MAY HAVE. BOARD MEMBERS ALSO ANNUALLY SIGN A CONFLICT OF

INTEREST DISCLOSURE FORM.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ELECTORNIC OR PAPER COPIES OF DOCUMENTS ARE PROVIDED UPON REQUEST.

26-0704711	Federal Statements	tements		
Form 99	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	ees for Service (Non-en	nployee)	-
Description	Total Expenses	Program Service	Management & General	Fund Raising
VISUAL STER EQ, I CER EQ, I CELATIC NAL EVALUCONSULTAM PLANNI CONSULTICONSULTA SULTICONSULTA \$ 10,876 2,700 6,440 840 370 78,675 18,092	\$ 10,876 480 78,675 18,092	\$ 2,700 6,440 360 370	w.	
SALES CONSULTANT & COMMISSION TOTAL	13,049 \$ 131,042	13,049 \$ 121,172	\$ 9,870	\[\cdot \]
	Form 990, Part IX, Line 24f	Line 24f - All Other Expenses	:	
Description	Total Expenses	Program Service	Management & General	Fund Raising
FEES & DUES DESIGN TELECOMMUNICATIONS POSTAGE	\$ 7,013 5,600 4,748 3,771	\$ 5,194 5,600 3,771	\$ 1,819	· ·
	\$ 26,349	\$ 17,836	\$ 2,000	\$
			i i	:

6-0704711	Federal Statements								
. <u>Taxable Interest on Investments</u>									
Description	Unrelated Exclusion Postal Acquired afte Amount Business Code Code Code 6/30/75								
TOTAL	\$ 435 \$ 435								

26-0704711

Federal Asset Report Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
1	Depreciation: FURNITURE & FIXTURES COMPUTER EQUIPMENT TELEPHONE SYSTEM Total Other Depreciation	8/08/07 8/08/07 8/08/07 -	8,653 7,499 5,637 21,789		-	8,653 7,499 5,637 21,789	5 MO S/L	2,740 1,875 1,409 6,024	1,730 1,500 1,128 4,358
Total ACRS and Other Depreciation			21,789		=	21,789		6,024	4,358
	ization: GRANT SEARCH SOFTWARE	5/01/08 _	7,280 7,280			7,280 7,280	5 MOAmort	1,200	1,456 1,456
	Grand Totals Less: Dispositions and Transfers Less: Start-up/Org Expense Net Grand Totals					29,069 0 0 29,069		7,224 0 0 7,224	5,814 0 0 5,814