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SCANNED OCT 2 0 2010

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 2009

Interi	nal Reveni	ue Service		► The organization	may have to use	a copy of this r	eturn to satisfy s	tate reporti	ing requirem	ients.	O p	an to Public) Insi	eetton
	For the	2009 calend	lar year, o	or tax year beginn	ing Jul :	1	, 2009, ar	nd ending	g Jun	30		,2010	-	
	Check if a			C Name of organiza			· · · · · · · · · · · · · · · · · · ·			D Employ	er Iden	tification Numb	er	
_		ess change	Please use IRS label	MICHIGAN AS	SOCTATIO	N OF BETT	RED SCHOO	I. PERS	SONNET.	38-2	2038	1135		
	-	· ·	or print or type.	Number and stree						E Telepho				
	H	e change	See		-								,	
		il return	specific Instruc-	PO BOX 232 City, town or cour			Chata 71	P code + 4		(21	1) 3	37-1757		
	Term	nination	tions.	1	ntry									
	Ame	nded return		LANSING			MI 4	18909				\$ 1,065,		
	Appli	ication pending	F Name a	and address of principal	officer				• •	a group retur		filiates?	Yes	X No
			MARIE L W	LLDERSON 3645 E	JOLLY ROAL	LANSING	MI 4	8910		affiliates incl attach a list		structions)	Yes	∐ No
<u> </u>	Tax-e	xempt status	s X 501	(c) (4)◀	(insert no)	4947(a)(1) or	527	•		•	•		
J	Webs	site: ► N/.	A						H(c) Group	exemption nu	ımber l	-		
ĸ	Form o	f organization	X Corpora	ation Trust	Association	Other ►	L Yea	r of Format	ion 195	1 M s	state of	legal domicile	MI	
Pa	rft ()	Summa				·								
		·		janization's missio	on or most sid	inificant activ	uties: INFO	AND SUP	PORT SER	VICES FOR	RETI	RED SCHOOL	PER	SONNEL
		,		,		,							· - -	
nce	_										- - -			
na	_				-									
ve	2 C	heck this bo	y ▶ □	if the organization		t its operation	as or dispose	d of more	– – – – e than 25'	% of its as				
Ö	_			bers of the govern				a 01 111011	C (Hall 25	70 OI 113 U.	3	40		
S				t voting members							4	40		
itie	5 T	otal number	of employ	yees (Part V, line	2a)						5	10		
Activities & Governance	6 T	otal number	of volunt	eers (estimate if n	ecessary)						6	175		
Ă	7a ⊺	otal gross ur	nrelated b	usiness revenue f	rom Part VIII	, Icolumn (C)	, ine 12			i	7 a			860.
	bΝ	let unrelated	business	taxable income fi	rom Form 990)-T, line 34					7 b			
									Р	rior Year		Curre	nt Ye	ar
_	8 C	Contributions	and gran	ts (Part VIII, line 1	lh) .					,019,8	88.	-	_	728.
Revenue				ue (Part VIII, line						,, -				
Vel				ırt VIII, column (A		and 7d) .				20,3	342.		9.	237.
æ	l		-	II, column (A), line		•					15.		_	229.
	l			nes 8 through 11 (2)	1	,046,1		1.0		194.
				ounts paid (Part I)				.=/ .						
	l													
	l	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)								323,095.			201	464.
es	l	referenced fundamental form							-	323,093.			, , , ,	404.
Expenses	l				CP1 'LN/		•					· · · · · · · · · · · · · · · · · · ·		
χ	b T	otal fundrais	ing exper	nses (Part IX , col L	ımn (D), line	23)		0.		·				
	17 C	Other expens	es (Part I	Part IX, column (A), lines 11a-11d, 11f-24f) ()						644,374.			514,	231.
	18 T	otal expense	es Add Iır	nes 13-1/7 (must e	Eulai Part IXI	glumh (3),	line 25)			967,4	69.	1,0	05,	695.
				s. Subtract line 18		الأوا	•			78,6			57.	499.
50		·		00	SDEVI				Regis	nning of Y		End o		
a ge	20 T	otal assets ((Part X III	ne 16)	BDEN, L)				2,215,2				348.
A B		otal liabilitie	• •	•			•	• •		,113,5				093.
Not Assets or Fund Balancos			•	•	. 01 6 1	- 00								
	<u>22 </u>		ure Blo	nces. Subtract lin	ie ∠i from iin	e 20			<u></u>	,101,7	56.	1,1	.59 ,	255.
ΨĢ	រា៤ ហ													
		true, correct, a	s of perjury, and complete	declare that I have ex Declaration of prepare	camined this retur er (other than offi	n, including acco cer) is based on	mpanying schedu all information of	iles and sta which prepa	itements, ani arer has any	d to the best knowledge	of my k	nowledge and I	belief, i	it is
c:		$\vdash \setminus \mathcal{V}$	· ·						1	0 "	_			
Sig He	jii	Signature	of officer	V: KJ_							<u>. 10</u>) 0		
116	16	> Signature	ازیم	B. 11 L	ERG		7 . 22	210	Da	ste				
		·	noc		LEKO-	(/	LEASUR	CER						
		Type or pr	rint name an	a title V										
_				$\overline{}$			Date	e		heck if		Preparer's ident see instructions	ıfyıng r 3)	number
Pai		Preparer's	_ / .), \ \ \ \	14	u Cop				elf- mployed ►				
Pre		signature		aves .	(Turbolis	11, 11		/07/1	0					
Us	rer's	Firm's name (or DAV	ID E. HADDE					<u> </u>					
On		yours if self- employed),		N CAPITOL						ın ►				
U II	··y	address, and ZIP + 4		SING		M	I 48906	5114		hone no				_
May	the IR			with the preparer s	shown above?							X Yes		No
				,			,					1-1 103		, ,,,,

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

Form \$

TEEA0101

07/20/09

orn	n 990 (2009) MICHIGAN ASSOCIATION OF RETIRED SCHOOL PERSONNEL 3	8-2038135 ·	Page 2
_	rt III Statement of Program Service Accomplishments		
1		· · · · · · · · · · · · · · · · · · ·	
•	The second secon		•
			
			- -
			
2	Did the organization undertake any significant program services during the year which were not listed on the pi		<u></u>
	Form 990 or 990-EZ? .	∐ Yes	i ⊠ 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?	∐ Ye	s 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 ex	penses. Section	501(c)(3)
	and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and alloc	ations to others, t	he total
	expenses, and revenue, if any, for each program service reported.		
4:	a (Code) (Expenses \$ 256,072. including grants of \$ 0.) (Reve	nue \$	860.)
•	PUBLICATIONS: 6 ISSUES OF THE VANGUARD PER YEAR TO		
	DISSEMINATE PERTINENT INFORMATION TO OVER 43,000 MEMBERS		
		 _	
			
			
4		nue \$	0.)
•	MEETINGS: BOARD, COMMITTEES, WORKSHOPS, ANNUAL MEETING		
	PROVIDES INTERACTION BETWEEN MEMBERS TO PROVIDE EDUCATION		_
	TRAINING AND GOAL SETTING		
	~		
		- -	
4	c (Code:) (Expenses \$85,285. including grants of \$0.) (Reve	nue \$	0)
	LEGISLATIVE REPRESENTATION: MONITORING AND DISEMINATION OF	<u> </u>	
	INFORMATION REGARDING PRESENT & PENDING LEGISLATION &		
	TOLO DECLOSO ON VENDERS		-
	IT'S EFFECTS ON MEMBERS		-
			- - -
		· – – – -	
4	d Other program services (Describe in Schedule O)		
-	·		
4).)
	e Total program service expenses ► 795,880.		

MICHIGAN ASSOCIATION OF RETIRED SCHOOL PERSONNEL 38-2038135 Page 3 Part IV Checklist of Required Schedules Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete 2 Is the organization required to complete Schedule B, Schedule of Contributors? Х Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 for public office? If 'Yes,' complete Schedule C, Part I Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete 4 Schedule C. Part II 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 Х 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, 6 Х 7 Х Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part III 8 Х 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 9 Х Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 10 Х Yes,' complete Schedule D, Part V Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or 11 • Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule • 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 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 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII 12AWas the organization included in consolidated, independent audited financial statement for the tax Yes No year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E. 13 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 Х 16 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
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
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
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
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
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

X

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19

Part IV Checklist of Required Schedules (continued) Yes No 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 Х 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 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 23 Х Schedule J 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25 24a Х 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? 240 . . d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? ... 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х b is the organization aware that it engaged in an excess benefit transaction with a disgualified 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 25b X 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 Х Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete 27 Х Schedule L. Part III . Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions). a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV . 28a Х b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b Х 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, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I 31 Х 32 X Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301 7701-3? If 'Yes,' complete Schedule R, Part I 33 Х Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1 and the control of th 34 Х Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2 . $\tilde{}$. 35 Х .. 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 Х Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?

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

X Form 990 (2009)

38

gai	Compliance Tegalding Other INST IIIngs and Tax Compliance			
			Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns. Enter -0- if not applicable			
Ŀ	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Х	
2 8	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			
21	olf at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X_	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	Х	
ŀ	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь	X	
48	a 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		х
ŧ	o 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 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? .	5a		X
ŀ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		X
(c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	X	
ł	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b	Х	
7	Organizations that may receive deductible contributions under section 170(c).			
â	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		X
ŀ	o If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		х
	d If 'Yes,' indicate the number of Forms 8282 filed during the year Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? In For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7g 7h		 -
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	Valor Street	
9	Sponsoring organizations maintaining donor advised funds.			
	a Did the organization make any taxable distributions under section 4966?	9a	 _	
	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		-
	Section 501(c)(7) organizations. Enter:			
	a Initiation fees and capital contributions included on Part VIII, line 12	-		
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter:			7
	a Gross income from other members or shareholders 11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b	10		
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	of If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			4 - 3 G . 17 - 45

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Form **990** (2009)

Park 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.

Sec	tion A.	Governing I	Body and Ma	nagement									
							ı	1 1				Yes	No
1 a	Enter the	number of votin	g members of th	ne governing b	ody			1a 4				į	
ł	Enter the	number of votin	g members that	are independe	ent .	•	. [1b 4	0			ij	
2	Did any officer, d	officer, director, t irector, trustee o	rustee, or key e r key employee?	mployee have	a family rela	tionship or a	business rela	ationshij	p with any o	other	2		Χ
3	Did the o	organization deleg s, directors or tri	gate control ove ustees, or key ei	r management	duties custo	marily perfor	med by or un	ider the	direct supe	ervision	3		Х
4		rganization mak		. •	-						4		X
		prior Form 990				•							
5	Did the o	rganization beco	me aware durin	g the year of a	material div	ersion of the	organization'	's asset	s?		5		<u> X</u>
6	Does the	organization hav	ve members or :	stockholders?							6		<u>X</u>
7 8	Does the	organization hav	ve members, sto	ockholders, or	other persons	s who may e	lect one or m	ore mer	mbers of th	e 	7a		Х
	-	decisions of the	governing body	subject to appr	oval by mem	bers, stockh	olders, or oth	er pers	ons?		7b		X
8	Did the o	organization conti	emporaneously	document the	meetings hel	d or written a	ections undert	taken dı	uring the ye	ar by			
		erning body? .				•			•		8a	Х	
	•	nmittee with auth	nority to act on t	ehalf of the go	overning body	y?					8b	Х	
9	Is there a	any officer, direction's mailing ad	tor or trustee, or dress? <i>If 'Yes' i</i>	key employee	e listed in Pai mes and add	rt VII, Section Tresses in Sci	n A, who canr	not be r	eached at t	he	9		Х
			This Section									ı	
	enue Code	•		,									
		•										Yes	No
10:	a Does the	organization ha	ve local chapter	s, branches, o	r affiliates?						10a	Х	
1	b If 'Yes,' o and bran	does the organization	ation have writte	n policies and are consistent	procedures of with those of	governing the	e activities of	such ch	napters, aff	lıates,	10b	х	
		organization prov									11		X
11.	A Describe	ın Schedule O t	he process, if ar	ny, used by the	organization	to review th	is Form 990.		_				
12:	a Does the	organization ha	ve a written con	flict of interest	policy? If 'Ne	o,' go to line	1 3				12a	Х	
1	Are office to conflic	ers, directors or tots?	trustees, and ke	y employees r	equired to dis	sclose annua	lly interests ti	hat coul	d give rise		12b	Х	
•	Does the	e organization req e O how this is d	gularly and cons	stently monito	r and enforce	e compliance	with the poli	cy? <i>If</i> '\	res,' descri	be ın	12c	х	
13	Does the	organization ha	ve a written whi	stleblower poli	cy?						13	Х	
14	Does the	organization ha	ve a written doc	ument retentio	n and destru	ction policy?					14	Х	
15	Did the p	process for determined to comparability de	mining compens	ation of the fol	llowing perso	ns include a	review and a	pproval	by indeper	ndent			
		ınızatıon's CEO,							,		15a	Х	
		ficers of key emp			-						15b	Х	-
	If 'Yes' to	o line 15a or 15b	, describe the p	ocess in Sche	dule O (See	instructions	.)						
16	a Did the o	organization inver	st in, contribute	assets to, or p		a joint ventui		arrangei		taxable	16 a		X
l	in joint v	has the organizate enture arrangement of the spect to such the respect to such the respect to such the respect to such the such that the such that the such that the such that the such that the such the such that the such the su	ents under appl	icable federal t	r procedure r tax law, and	equiring the taken steps t	organization t	to evalu the orga	ate its part inization's e	exempt	16b		
Sec		Disclosures		·	'	-		-	·		100	!	
17		states with which		orm 990 is red	uired to be f	ıled ► Mid	chigan						
18		6104 requires an						nd 990-T	(501(c)(3)	s only) ava	 ilable	for pu	blic
	Own	website	Another's	website	X Upo	on request							
	statemer	in Schedule O vots available to the	ne public.										ıal
		e name, physical E_CARPENTE		lephone numb 45 E JOLI					d records of 18910	_		<u> 184-</u> 1	L <u>757</u>

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations'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 employees.'
- 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	compens	ate an	у сі	ırrer	nt of	ficer,	direc	tor, or trustee.		
(A)	(B)			-	c)			(D)	(E)	(F)
Name and Title	Average hours per week						y) Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other composition
		adividi al frustee or director	institutional faust en	3	key employee	Higt est compensaled employee	mer	(W-2/1099-MISC)	(W-2/1099-MISC)	amount of other compensation from the organization and related organizations
BONNIE J CARPENTER EXEC DIR	50.00					x		102,257.	0.	0.
BOARD OF DIRECTORS PER LIST	1.00							0.	0.	0.
									,	

Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization >

BAA

Pai	rt VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribus included in lns 1a-1f: 1 a 1 b 1,037,574. 1 c 1 d 1 e 1 1 0,154.				
Ş₹	h Total. Add lines 1a-1f	1,047,728.			
	Business Code	2,021,71201			
PROGRAM SERVICE REVENUE	b c d e f All other program service revenue g Total. Add lines 2a-2f				
	 Investment income (including dividends, interest and other similar amounts)	9,237.	0.	0.	9,237.
	(i) Real (ii) Personal 6a Gross Rents . b Less. rental expenses . c Rental income or (loss) d Net rental income or (loss)				,
	7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)				
OTHER REVENUE	8a Gross income from fundraising events (not including \$\frac{0}{0}\$. of contributions reported on line 1c). See Part IV, line 18 a 6,178. b Less direct expenses b 2,065.				
٥	c Net income or (loss) from fundraising events	4,113.	0.	0.	4,113.
	9a Gross income from gaming activities. See Part IV, line 19				
	b Less direct expenses b				
	c Net income or (loss) from gaming activities			· · · · · · · · · · · · · · · · · · ·	
	10a Gross sales of inventory, less returns and allowances a				
	b Less' cost of goods sold b				
	c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code				
	11a ADVERTISING 511120	860.	0.	960	
	b MISCELLANEOUS	1,256.	1,256.	860.	0.
	d All other revenue		-	· · · · · · · · · · · · · · · · · · ·	
	e Total. Add lines 11a-11d	2,116.			
	12 Total revenue. See instructions	1,063,194.	1,256.	860.	13,350.

Part X Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	_		j Barana sa	a enabre man nume narre en una
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16			<u>.</u>	
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	103,827.	72,679.	31,148.	0.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)		ļ		
7	Other salaries and wages	163,527.	114,469.	49,058.	0.
8	Pension plan contributions (include section				
0	401(k) and section 403(b) employer contributions)	20,291.	14,204.	6,087.	0.
9	Other employee benefits	78,943.	55,260.	23,683.	_ 0.
10	Payroll taxes	24,876.	17,413.	7,463.	0.
11	Fees for services (non-employees)				
á	Management				
1	Legal	3,053.	0.	3,053.	0.
	Accounting	8,700.	0.	8,700.	0.
	Lobbying .	18,000.	18,000.	0.	0.
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	Other	11,153.	11,153.	0.	0.
	Advertising and promotion				
13	Office expenses	163,030.	148,010.	15,020.	0.
14	Information technology	34,569.	24,198.	10,371.	0.
15	Royalties				
16	Occupancy	87,871.	61,510.	26,361.	0.
17	Travel	6,235.	4,364.	1,871.	0.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	73,096.	64,306.	8,790.	0.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	48,605.	34,023.	14,582.	0.
23	Insurance	_7,254.	5,078.	2,176.	0.
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25			!	
	below.)				
	MEMBER PROMOTION	147,825.	147,825.	0.	0.
	DUES/SUBSCRIPTIONS	4,761.	3,333.	1,428.	0.
•	MISCELLANEOUS	79.	55.	24.	0.
•	[
•					
	All other expenses	1 005 605			
	Total functional expenses. Add lines 1 through 24f 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	1,005,695.	795,880.	209,815.	0.
BAA	campaign and fundraising solicitation				Form 990 (2009)

•	•	(A) Beginning of year		(B) End of year
1	Cash non-interest-bearing		1	
2	Savings and temporary cash investments	1,264,375.	2	1,436,21
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	7,689.	4	12,99
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	
7 8	Notes and loans receivable, net		7	
8	Inventories for sale or use	3,623.	8	1,48
9	Prepaid expenses and deferred charges	165,269.	9	149,91
10 a	Land, buildings, and equipment: cost or other basis. 10a 1,410,276. Complete Part VI of Schedule D			
b	Less. accumulated depreciation	774,323.	10 c	729,73
11			11	
12	Investments – other securities. See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	2,215,279.	16	2,330,34
17	Accounts payable and accrued expenses	63,076.	17	45,06
18	Grants payable		18	
19	Deferred revenue	953,722.	19	1,026,40
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 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	96,725.	25	99,62
26	Total liabilities. Add lines 17 through 25	1,113,523.	26	1,171,09
	Organizations that follow SFAS 117, check here ► X and complete lines			
	27 through 29 and lines 33 and 34.			
27	Unrestricted net assets	987,717.	27	1,037,01
28	Temporarily restricted net assets	114,039.	28	122,23
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ▶ □ and complete			
	lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, and equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	1,101,756.	33	1,159,25
34	Total liabilities and net assets/fund balances	2,215,279.	34	2,330,34
A		2,213,213.		Form 990 (20

Form 990 (2009) MICHIGAN ASSOCIATION OF RETIRED SCHOOL PERSONNEL Park XIII Financial Statements and Reporting

		Yes	No
		163	110
1 Accounting method used to prepare the Form 990:		į	
If the experience channel to method of accounting from a page year of backed 'Other' available			
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		X
b Were the organization's financial statements audited by an independent accountant?	. 2b	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,		
review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
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.	ed on a		
consolidated basis, separate basis, or both			
X Separate basis 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	i	
Audit Act and OMB Circular A-133?	3a		Х
b if 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit		
or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

BAA

Form **990** (2009)

MICHIGAN	ASSOCIATION OF	RETIRED SCHOOL	DEDCONNEL
IVIIC PILEMIN	ADDUCTATION OF	- RETIRED SUBDICE	PERSUNIVE

38-2038135

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Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

4d Describe th	e exempt purpose achievements for each of the organization's other program
services. S	ection 501(c)(3) and (4) organizations and 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 progr	am service reported.
0-4-	Described to the control of the cont

Code:	Description:	VARIOUS INFORMATION: REFERRALS AND SUPPORT SERVICES FOR MEMBERS
Expenses	316,738.	
Grants Of	0.	
Revenue	0.	

MARSP BOARD OF DIRECTORS JULY 1, 2009 - JUNE 30, 2010

Telephone & E-mail Listing

VOTING MEMBERS Updated 12/01/09

Officers & Chairmen

Marie L. Wılkerson President Vice-president Leslie E. Nixon Secretary Fayda J. Mills Treasurer Paul B. Lerg Past-president Donald E. Miller Bylaws Gordon W. Draper Finance Thomas A. Nyquist Legislative Donald E. Miller Membership Linda L. Hawley Foundation Charles W. Jones

Area Directors

Aica Directors	
Area 1	Ellen M. Burgess
Area 2	VACANT
Area 3	Robert W. Wiles
Area 4	Arthur E. Mills
Area 5	Dawn Ann Humphreys
Area 6	Margaret E. Albert
Area 7	Carol J. Pratt
Area 8	Alta Ruth Ferguson
Area 9	Harriet J. Oliver
Area 10	VACANT
Area 11	Joan C. Hildinger
Area 12	Marilyn E. Schneider
Area 13	Lynda J. Manthey
Area 14	Anne L. Rossi
Area 15	Patricia H. McCollum
Area 16	Louise G. Somerlot
Area 17	Joan V. Mills
Area 18	Edward D. Stone
Area 19	Heston Bates
Area 20	Douglas Shonk
Area 21	Kenneth L. Kelley
Area 22	Monroe Johnson Jr.
Area 23	Julie A. Olsen
Area 24	H. Frank Green
Area 25	Allan A. Edwards
Area 26	Naomi E. Phillips
Area 27	Lois J. Zilka
Area 28	David N. Babbage
Area 29	Clarence L. Miller
Area 30	Carol L. Pontious

NON-VOTING MEMBERS

Parliamentarian Etta Mae Chapman

VANGUARD Editor Ruth A. Hill

EX-OFFICIO

Executive Director Bonnie J. Carpenter

GUEST\LOBBYIST

Karoub Associates Kim Rhead N/A

N/A

ASSISTANT AREA DIRECTORS JULY 1, 2009 - JUNE 30, 2010

Area 1 Valerie Lind
Area 2 VACANT
Area 3 Rosemarie Krall

Area 4 Janice K. Smith
Area 5 Mila MacNaughton

Area 6 VACANT

Area 7 Sharon Flewelling

Area 9 VACANT Area 10 VACANT VACANT

Area 11 Beverly J. Shelburg
Area 12 Doris vanderZee
Area 13 Jane Nally

Area 14 Mary (Kit) Rykse

Area 15 VACANT

Area 16 G. Duane Davis
Area 17 Mary L. Boucher
Area 18 Carol Zimmerman
Area 19 Thomas D. Johnson

Area 20 VACANT

Area 21 Donald D. Allison
Area 22 Rosie P. Henderson

Area 23 Sallie A. Pope
Area 24 Bertha H. Booker
Area 25 Elizabeth Coller
Area 26 Erma W. Gaddis

Area 27 VACANT

Area 28 Frances Babbage

Area 29 VACANT

Area 30 Clifford R. Cross

EXECUTIVE COMMITTEE JULY 1, 2008 - JUNE 30, 2009

Officers

President Marie L. Wilkerson Treasurer Paul B. Lerg
Vice-president Leslie E. Nixon Past-president Donald E. Miller
Secretary Fayda J. Mills Parliamentarian Etta Mae Chapman

Regional Director Representatives

Central Louise Somerlot Eastern Ken Kelley

Marilyn Schneider

Metro David Babbage

Allan Edwards

North Central Northern Southwestern Carol Pratt Bob Wiles Julie Olsen

Patricia McCollum

Ex-Officio

Executive Director Bonnie J. Carpenter

board of directors \ 2009-10 \ bd phone-email

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

Open (o Public Inspection Employer Identification number

MICHIGAN ASSOCIATION OF RETIRED SCHOOL PERSONNEL	38-2038135			
Partile Organizations Maintaining Donor Advised Funds or Other Similar Funds o	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 donor advisors are the organization's property, subject to the organization's exclusive legal control?	vised Yes No			
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit??				
Rart II Conservation Easements Complete if the organization answered 'Yes' to Fo	orm 990. Part IV. line 7.			
1 Purpose(s) of conservation easements held by the organization (check all that apply)	330, 1 4, 11, 11, 11, 11			
	nistorically important land area			
	ified historic structure			
Preservation of open space				
2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form	m of a conservation easement on the			
last day of the tax year.	The first delibertation education of the			
	Held at the End of the Year			
a Total number of conservation easements	2a			
b Total acreage restricted by conservation easements	2b			
c Number of conservation easements on a certified historic structure included in (a)	2c			
	2d			
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by t	he 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, handling of and enforcement of the conservation easement it holds?				
6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ►				
7 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 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	Yes No			
9 In Part XIV, describe how the organization reports conservation easements in its revenue and experinclude, if applicable, the text of the footnote to the organization's financial statements that describe conservation easements	nse statement, and balance sheet, and s the organization's accounting for			
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Oth	er Similar Assets			
Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.				
1 a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items.	balance sheet works of art, historical public service, provide, in Part XIV,			
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and bal- treasures, or other similar assets held for public exhibition, education, or research in furtherance of amounts relating to these items:	ance sheet works of art, historical public service, provide the following			
(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 finar amounts required to be reported under SFAS 116 relating to these items:	ncial gain, provide the following			
a Revenues included in Form 990, Part VIII, line 1	. ▶\$			
b Assets included in Form 990, Part X	> \$			
	•			

Part III Organizations Mainta				Other Similar Acc		Page 2
			-			
3 Using the organization's acquisition items (check all that apply):	on accession a			at are a significant use o	of its collect	ion
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e 💹 Other				
c Preservation for future generation						
4 Provide a description of the organ Part XIV.		·	,		in	
5 During the year, did the organizar assets to be sold to raise funds re					Yes	No
9, or reported an amo				ed 'Yes' to Form 9	90, Part I' 	V, line ———
1 a Is the organization an agent, trus included on Form 990, Part X?	tee, custodian,	or other intermediary	for contributions or other		Yes	No
b If 'Yes,' explain the arrangement	in Part XIV and	d complete the following	ig table:		Amount	
c Beginning balance				1c	Amount	
d Additions during the year .			•	1d		
D 1 1 1 11			•	1e		
f Ending balance	•• •			1f		
2a Did the organization include an a	mount on Form	1990 Part X June 212		[Yes	No
b If 'Yes,' explain the arrangement		1 330, 1 art X, mic 21:		• ••		
Part V Endowment Funds Co		ganization answer	ed 'Yes' to Form 99	0 Part IV line 10		
	(a) Current				(e) Four	vears back
1 a Beginning of year balance.	(a) carrone	(b) (110) year	(c) Two years back	(a) Tillee years back	(C) Tour	Jeans back
b Contributions					+	
				. refres i ilizali azme		
 c Net Investment earnings, gains, and losses 				i		
d Grants or scholarships			<u></u>	· · · · · · · · · · · · · · · · · · · · · ·		
e Other expenditures for facilities and programs				in the second		
f Administrative expenses .						
g End of year balance						
2 Provide the estimated percentage	of the year er	nd halance held as:		والمادة المحدد المحدد المحافدات	1	
a Board designated or quasi-endow		9				
b Permanent endowment ►		•				
c Term endowment ►						
3a Are there endowment funds not in organization by:	n the possession	on of the organization t	hat are held and admınıs	stered for the	Ye	s No
(i) unrelated organizations .					3a(i)	3 110
(ii) related organizations					3a(ii)	
b If 'Yes' to 3a(II), are the related o					3b	
4 Describe in Part XIV the intended					<u> </u>	
Parti VII Investments—Land, B	uildings, ar	nd Equipment. See	e Form 990. Part X	line 10	··	
Description of investment	1	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book	√ Value
1 a Land		,	82,600.	_ 0,100,14,1011		82,600.
b Buildings			1,034,916.	440,589.		94,327.
c Leasehold improvements						12,361.
d Equipment	. · · · · · · · · · · · · · · · · · · ·		276,106.	235,865.		10 241
e Other	`		16,654.	4,085.		40,241.
Total. Add lines 1a through 1e (Column	n (d) must equa	al Form 990 Part X co		4,085.		12,569. 29,737.
ВАА	1-7		(D), mic 10(c).)		dule D (Form	
				Juleu	P (1 () ()	. JJUJ 2009

Schedule D (Form 990) 2009 MICHIGAN ASSOCIATION			8-2038135 Page 3
Part VII Investments—Other Securities See Fo (a) Description of security or category	(b) Book value	(c) Method	of valuation
(including name of security)		Cost or end-of-y	ear market value
Financial derivatives Closely-held equity interests Other			
Outei			
		-	
Total. (Column (b) must equal Form 990 Part X, col (B) line 12.) ► Part VIII Investments—Program Related (See F	Form 990 Part Y Jir	no 13)	
(a) Description of investment type	(b) Book value	(c) Method	of valuation
		Cost or end-of-y	ear market value
Total. (Column (b) must equal Form 990, Part X, Col. (B) line 13.) Part IX Other Assets (See Form 990, Part X,	line 15)		
	scription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B), lin	ne 15)	· · · · · · · · · · · · · · · · · · ·	
Part X Other Liabilities (See Form 990, Part			
(a) Description of Liability Federal Income Taxes	(b) Amount		
ACCRUED POST RETIREMENT BENEFIT OBLIGATION	ON 99,62	<u> </u>	
		_	
		_	·
		_	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)	99,62	7	
2. FIN 48 Footnote In Part XIV, provide the text of the footnote			ts the organization's liability

for uncertain tax positions under FIN 48

Schedule D (Form 990) 2009 MICHIGAN ASSOCIATION OF RETIRED SCHOOL E		2030133
RartiXI Reconciliation of Change in Net Assets from Form 990 to	Financial Statements	1 063 104
1 Total revenue (Form 990, Part VIII,column (A), line 12)		1,063,194.
2 Total expenses (Form 990, Part IX, column (A), line 25)	••• • • • • • • • • • • • • • • • • • •	1,005,695.
3 Excess or (deficit) for the year. Subtract line 2 from line 1	• • •	57,499.
4 Net unrealized gains (losses) on investments	• • • • •	
5 Donated services and use of facilities	••	
6 Investment expenses	• •	
7 Prior period adjustments		·
8 Other (Describe in Part XIV)	•	••
9 Total adjustments (net). Add lines 4 through 8		57.400
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3		57,499.
Part XIII Reconciliation of Revenue per Audited Financial Statemer		
1 Total revenue, gains, and other support per audited financial statements		1 1,063,194.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	اما	
a Net unrealized gains on investments b Donated services and use of facilities	2a	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIV)	. 2d	2.
e Add lines 2a through 2d		2e 1 062 104
3 Subtract line 2e from line 1	· · · ·	3 1,063,194.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		12.0
a Investments expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIV)	4a	
c Add lines 4a and 4b	. 4b	
	• • •	4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) Rart XIII Reconciliation of Expenses per Audited Financial Statement		5 1,063,194.
1 Total expenses and losses per audited financial statements	ents with Expenses per r	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		1 1,005,695.
·		
a Donated services and use of facilities	2a	
b Prior year adjustments c Other losses	2b	
d Other (Describe in Part XIV)	2c	
. 4.4.1	. 2d	
a Subtract line 2e from line 1		2e
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		3 1,005,695.
· · · · · · · · · · · · · · · · · · ·		
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIV)	4b	2.3
c Add lines 4a and 4b		_4c
Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18). Rart XIV Supplemental Information	·····	5 1,005,695.
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Par ine 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d an information.	rt III, lines 1a and 4; Part IV, line nd 4b. Also complete this part to	es 1b and 2b; Part V, o provide any additional
·		
		

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2009

Open to Public Inspection

Employer Identification number

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

, and or got made of	38-2038135
Pt VI-B, Line 11A 990 IS REVIEWED BY EXECUTIVE DIRECTOR AND AT	
LEAST ONE BOARD OFFICER BEFORE IT IS FILED	
Pt_VI-B, Line 12c ALL OFFICERS, DIRRECTORS AND KEY EMPLOYEES ANNU	ALLY
SIGN A STATEMENT THAT THERE IS NO CONFLICT OF	
INTEREST OTHER THAN ANY DISCLOSED	
Pt_VI-B, Line 15 EXECUTIVE DIRECTOR IS EVALUATED AND COMPENSATIO	<u>N</u>
SET BY EXECUTIVE COMMITTEE, COMPENSATION FOR OT	HER
STAFF SET BY PAY SCHEDULE APPROVED BY BOARD AND	
IN BUDGET APPROVED BY BOARD	
Pt VI-C, Line 19 NO DOCUMENTS ARE AVAILABLE TO THE PUBLIC	
	
	
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