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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

2009 Open to Public

<u></u>	F45- 20	09 calendar year, or tax year beginning $09/01/09$, and ending $08/31/19$		Terrients	Inspection
<u>A</u>			<u> </u>	B = 1	
В	7	una IDE	NT	D Emplo	oyer identification number
<u> </u>	Address chan	label or	N	20	6001046
L_	Name change				6081046
Г	Initial return	type. Number and street (or P O box if mail is not delivered to street address) See 5.00 Yango Board	Room/suite	E Teleph	none number
Ē	Termination	Specific 309 valice Road			
_	_	Instruc- City or town, state or country, and ZIP + 4		G Gross reco	erpts\$ 564,687
L	Amended retu	m tions. Midland MI 48640			
	Application pe	nding F Name and address of principal officer		H(a) Is this	a group return for
				affiliate	es? Yes X No
				H(b) Are all include	ed? Yes No
_				If "No,	attach a list (see instructions)
1	Tax-exemp				
J	Website:			H(c) Group	exemption number
<u>K</u>	Type of organ	Ization X Corporation Trust Association Other ► L	ear of formation		M State of legal domicile
	Part I	Summary			
	1 Brie	fly describe the organization's mission or most significant activities			
9	<u>n</u> E	ducational advancement of Children			
Š	<u> </u>				
,	<u> </u>				
ì	5 2 Che	eck this box > if the organization discontinued its operations or disposed of more than 25	5% of its net ass	ets .	
(5 3 Nur	nber of voting members of the governing body (Part VI, line 1a)		3	
	4 Nur	nber of independent voting members of the governing body (Part VI, line 1b)		4	
į	5 Tota	al number of employees (Part V, line 2a)		5	0
į	6 Tot	al number of volunteers (estimate if necessary)		6	
<		al gross unrelated business revenue from Part VIII, column (C), line 12		7a	
	I	unrelated business taxable income from Form 990-T, line 34		7b	0
SCANNED	D Net	uniciated business taxable income nom romi 550-1, line 54	Prior Yea		Current Year
	. 8 Cor	atributions and grants (Part VIII, line 1h)			
Z	9 Pro	gram service revenue (Part VIII, line 2g)	562	2,705	544,256
	10 Inve	estment income (Part VIII, column (A), lines 3, 4, and 7d)		113	84
	ž 11 Oth	er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	10	0,412	13,412
	•	al revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,230	557,752
MAR		nts and similar amounts paid (Part IX, column (A), lines 1–3)		2,600	2,600
~		efits paid to or for members (Part IX, column (A), line 3)		-, 000	2/000
	l	aries, other compensation, employee penetitis (Carvix, column (A), lines 5–10)	139	3,748	134,633
2	וע	ressional fundraising fees (Part IX, column (A), line 11e)		, , , 10	
0	b Tot				
₹ 5	b Tota	al fundraising expenses (Part Xəcolumn (Q), line 25) (Q) er expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	13.	1,359	416,925
	1		_	2,707	
	18 Tota	enue less expenses Subtract line 18 from line 25)	312	523	554,158
7		enue less expenses Subtractiline 18 from Jine 197	Beginning of Cur		3,594 End of Year
ets	20 Total	al assets (Part X, line 16)		2,968	126,562
Ass	21 Tot	al liabilities (Part X, line 26)		7,500	
Net	22 Net	assets or fund balances Subtract line 21 from line 20	123	2,968	126,562
	Part II	Signature Block		- , 500	120,302
-	I GIL II	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules			
		and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all info	ormation of which p	oreparer has	any knowledge
c	ign	X Hause & Lagrange (1)		W/ 1	r livil ii
	ere	Nacy reach		<u> </u>	414111
п	ere	Signature of officer X Laure S. Kaczmarek Treasurer		Date	
					
_	·	Type or print name and title	- · · · · · · · · · · · · · · · · · · ·		Proporario identificana number
P	aid	Preparer's Date	Check self-		Preparer's identifying number (see instructions)
	aiu reparer's	signature Fred J. Spiker # 22/1:	3/11 employ	ed ▶ X	P00118478
	reparer s	Firm's name (or vours) Fred Spiker, CPA		EIN ▶	38-2674231
U	Se Oilly	if self-employed), 2735 N. Eastman Road		Phone	
_		address, and ZIP + 4 Midland, MI 48642		no 🕨	989-832-0095
М	ay the IRS o	iscuss this return with the preparer shown above? (see instructions)			Yes No.
F	or Privacy A	ct and Paperwork Reduction Act Notice, see the separate instructions.			Form 990 (2009)
U	4A				_

			8-6081046	Page 2
·	Statement of Program Ser cribe the organization's mission	vice Accomplishments		
	onal advancement	of Children		
2 Did the orga	anization undodako any alamfioan	t program converse during the vector high ve	an ant listed on	
	orm 990 or 990-EZ?	t program services during the year which we	ere not listed on	Yes X No
	scribe these new services on Sch	edule O		1es 22 NO
		ake significant changes in how it conducts, a	iny program	
services?				Yes X No
	scribe these changes on Schedul			
		for each of the organization's three largest p		
		s and section 4947(a)(1) trusts are required revenue, if any, for each program service re	•	
	to others, the total expenses, and	Tovolido, il dily, for odoli program service il	ported	
4a (Code) (Expenses \$	2,600 including grants of \$	2,600) (Revenue \$)
		area of education adv	ancement,	•
		ren, and the improvement	ent of	
instruc	tional opportuni	ties for all.		
4b (Code) (Expenses \$	unallyding grants of C) (Payeaus f	,
4b (Code) (Expenses ϕ	including grants of \$) (Revenue \$,
		<u> </u>		
4c (Code) (Expenses \$	including grants of \$) (Revenue \$)
4d Other progra	am services (Describe in Schedu	le O)	***	
(Expenses	\$ 551,558 inc	luding grants of \$) (Revenue \$)
4e Total progr	ram service expenses >	554,158		

Р	ao	e	3

Pa	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		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4		<u> </u>		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	ا ،		
_	Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)	_		.,
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		<u> </u>
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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
-	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or	Ť		
10	quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
44	· · · · · · · · · · · · · · · · · · ·	-10		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,		x	
	VII, VIII, IX, or X as applicable	11		\vdash
•	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 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		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
_	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	170		
b		446		x
45	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			₹.
4-	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			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		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		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20_		X
		Form	990	(2009)

Form 990 (2009) MIDLAND CITY EDUCATION ASSOCIATION 38-6081046 Page 4 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 12 If "Yes," complete Schedule I, Parts I and II X 21 22 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 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X 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 b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b 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 X 26 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? 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, Part IV instructions for applicable filing thresholds, conditions, and exceptions) X a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete X Schedule L, Part IV 28b 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 Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, X Part 1 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete X Schedule N. Part II 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I X 33 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 Schedule R, Part V, line 2 35 X 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 Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,

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

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

Form **990** (2009)

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X

X

Form 990 (2009) MIDLAND CITY EDUCATION ASSOCIATION 38-6081046 Part V Statements Regarding Other IRS Filings and Tax Compliance

						Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of						
	U.S. Information Returns. Enter -0- if not applicable	1a	4				
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	oortable	 e				
	gaming (gambling) winnings to prize winners?				1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1 1				-	
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	0 _				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?			2b		
	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 covere	d by					
	this return?				3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O				3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authori	ty				
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancıal					
	account)?				4a		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?				5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?			5b		X
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Region	arding					
	Prohibited Tax Shelter Transaction?				5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	е					
	organization solicit any contributions that were not tax deductible?			<u></u>	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or					
	gifts were not tax deductible?			 	6b		
7	Organizations that may receive deductible contributions under section 170(c).			İ			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for g	goods					ļ
	and services provided to the payor?			<u> </u>	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			-	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	IS			_		
	required to file Form 8282?	1 [į.	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersona	ı		.		
	benefit contract?	~~4?			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contributions of qualified intellectual property, did the organization file Form 8899 as required?				7f		
g h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0				7g		 -
- 11	required?	, as			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			<u>-</u> -			
J	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring						
	organization, have excess business holdings at any time during the year?				8		
9	Sponsoring organizations maintaining donor advised funds.				Ť		
a	Did the organization make any taxable distributions under section 4966?			ŀ	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			<u> </u>	9b		
10	Section 501(c)(7) organizations. Enter						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter	البتتيا			,		
	Gross income from members or shareholders	11a		1			
b	Gross income from other sources (Do not net amounts due or paid to other sources against						
	amounts due or received from them)	11b		<u> </u>			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	10417	, ,		2a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b					
				_ _	Form	990	(2009)

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.					
<u>Sec</u>	tion A. Governing Body and Management					
		_			Yes	No
1a	Enter the number of voting members of the governing body	<u>1</u> a		_		
b	Enter the number of voting members that are independent	1b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with					
	any other officer, director, trustee, or key employee?			2		<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direct					
	supervision of officers, directors or trustees, or key employees to a management company or other person?			3		<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		X
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					
	the year by the following					
a	The governing body?			8a	X	
ь	Each committee with authority to act on behalf of the governing body?			8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached					
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	4	_1	9		X
	tion B. Policies (This Section B requests information about policies not required by the l	ntern	aı			
Rev	renue Code.)				. 1	•••
10-	Dong the arganization have lead chanters branches as affiliates?			40-	Yes	No X
10a	Does the organization have local chapters, branches, or affiliates?			10a		
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?			10ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			100	\vdash	
• •	form?			11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990					- 22
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13			12a		Х
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			120		
	rise to conflicts?			12b		
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			-120	\vdash	
Ū	describe in Schedule O how this is done			12c		
13	Does the organization have a written whistleblower policy?			13		X
14	Does the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approval by					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	!	X
b	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				ŀ	
	with a taxable entity during the year?			16a		X
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					
	the organization's exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed ▶ None					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3))	only)				
	available for public inspection. Indicate how you make these available. Check all that apply					
	Own website					
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of int	erest				

organization ▶ Laure Kaczmarek
Midland

DAA

policy, and financial statements available to the public

State the name, physical address, and telephone number of the person who possesses the books and records of the

MI 48642

4044 E Baker Road

989-615-8100

DÃA

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"
- 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		nsat	e an	y cur	rent	offic	ær, c	lirector, or trustee		
(A) Name and Title	(B) Average hours per			chec		that a		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	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)	other compensation from the organization and related organizations
Viola G. Collins										
President	40.00	┡	<u> </u>	X		 		121,887	0	4,981
Various	1 00			,,				F 505		
Rep. Laure Kaczmarek	1.00		-	X		_		5,505	0	C
Treasurer	3 00							1 715	_	_
Mark Pobocik	3.00	_	_	X				1,715	0	0
Vice Preside	3.00			x				545	0	
Dawn Moulthrop	3.00	\vdash		^				343	0	<u> </u>
Secretary	3.00			x				o	0	l

	02/13/2011 4 59 PM	CIMU DDI	~ 3.5			3.0		~ T	3. T. C.	1046	-		
	990 (2009) MIDLAND rt VII Section A. Officer								nd Highest Compensated			<u>P</u>	age 8
<u>. a.</u>	(A) Name and Title	(B) Average hours per	Pos	tion ((chec	C) k all	hat a	pply)	(D)	(E) Reportable compensation	(F) Estima amour	ted	
		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)	othe compens from t organize and rela organize	r sation he ation ated	
						ļ .							
			<u> </u>										
													
	• • • • • • • • • • • • • • • • • • • •		\vdash										
	 					-							
							<u> </u>						
1b	Total	<u> </u>			l	<u></u>		>	129,652		··· ·	4,	981
2	Total number of individuals (ii				thos	e lis	ted a	bov	e) who received more than	\$100,000 in			
	reportable compensation from	n the organizatio	n ▶	<u> </u>	_							Yes	No
3	Did the organization list any feemployee on line 1a? If "Yes,								oyee, or highest compensat	ed	3	163	X
4	For any individual listed on lin the organization and related of individual										4		x
5	Did any person listed on line services rendered to the orga									r 	5		x
Sect 1	tion B. Independent Contrac Complete this table for your fi		enea	tod i	nder	nend	ent c	ontr	actors that received more t	han \$100 000 of			
	compensation from the organ	(A) d business address		ieu i	ilaci					(B)		(C) npensa	
	Nane di	o business address							Безигр	out of services		препза	uO11
										···			
2	Total number of independent	contractors (incl	uding	but	not	lımıte	ed to	thos	se listed above) who receiv	ed			

more than \$100,000 in compensation from the organization ▶

Pa	rt V	III 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
t t	1a	Federated campaigns	1a				Tevenue		012, 013, 01314
E L	b.	Membership dues	1b		· · · · - · · - ·				
g,e	c	Fundraising events	1c						
ar a	d	Related organizations	1d						
S,E	e		1e						
rion	f	All other contributions, gifts, grants,							
챨		and similar amounts not included above	1f						
d i	a	Noncash contributions included in lines 1a		 \$					
ပ္ပန	h			•	•				
Program Service Revenue Contributions, gifts, grants					Busn. Code		· · · · · · · · · · · · · · · · · · ·		
Ven	2a	Dues				544,256	544,256		
Se.	b					2 2 3 7 2 2			
/ice	C								
Sen	đ								
Æ	е								
ogra	f	All other program service reve	nue						
ď	g	Total. Add lines 2a-2f			•	544,256			
	3	Investment income (including	dividen	ds, intere	est, and	-			-,
		other similar amounts)		▶	84			84	
	4	Income from investment of tax	-exem	pt bond p	roceeds 🕨				
	5	Royalties			▶				
		(ı) Real		(II) F	Personal				
	6a	Gross Rents 20,	347						
	b		935						
	С	Rental inc or (loss) 13,	412						
	_d	Net rental income or (loss)			•	13,412			13,412
	7a Gross amount from sales of assets (i) Securities (ii) G		Other						
		other than inventory							
	b	Less cost or other							
		basis & sales exps							
	С	Gain or (loss)							
	d	Net gain or (loss)			•				
ne	8a	Gross income from fundraising ever	nts					:	
enr		(not including \$							
Other Reven		of contributions reported on line 1c)	•						
er		See Part IV, line 18	а						
oth	ь	Less direct expenses	bį						
	C	Net income or (loss) from fund	r	events	•				
	9a	Gross income from gaming activitie							
	_	See Part IV, line 19	a						
		Less direct expenses	þ						
		Net income or (loss) from gam	ing act	tivities	•				
	10a	Gross sales of inventory, less							
		returns and allowances	a						
		Less cost of goods sold	þĺ						
	С	Net income or (loss) from sale		entory	Rusp Code				
	11-	Miscellaneous Revenue			Busn. Code				
	11a b								_
									
	d	All other revenue							
	e	Total. Add lines 11a-11d							
	12		ns			557,752	544,256	0	13,496
$\overline{}$, . 52			

Part IX Statement of Functional Expenses

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

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

	All other organizations must c	omplete column (A) but a	re not required to comple	ete columns (B), (C), ar	nd (D).
	o not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1			опролосо	goriara experience	5.75.1565
•	organizations in the U.S. See Part IV, line 21		,		
2	Grants and other assistance to individuals in		_		
_	the U S See Part IV, line 22	2,600	2,600		
3	Grants and other assistance to governments,	2,000	2,000		
•	organizations, and individuals outside the				
	-				
4	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees	+			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	404 400	101 000		
7	Other salaries and wages	134,633	134,633		
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	650	650		
d	Lobbying		-,,,		
е	Professional fundraising services See Part IV, line 17			<u></u>	
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses	732	732		
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	2,569	2,569		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				_
19	Conferences, conventions, and meetings	4,595	4,595		
20	Interest				
21	Payments to affiliates	400,076	400,076		
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Public Relations	2,462	2,462		
b	Awards, Honors & Gifts	1,790	1,790		
С	Contracted Services	1,638	1,638		
d	MPS - MCEA Sub Pay	1,555	1,555		
е	Negotiations-Crises Comm.	832	832		
f		26	26	······	1
25	` [554,158	554,158		1
	Joint costs. Check here ▶ ☐ If following	, = = =	7=		1
	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					= 000

					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest bearing			44,895	1	50,842
		Savings and temporary cash investments		-	1,885	2	1,266
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	
	5	Receivables from current and former officers, directors,	trustees, key				
		employees, and highest compensated employees Comp	plete Part II of				
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined	under section				
	i	4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete				
S	i	Part II of Schedule L		ļ		6	
Assets	7	Notes and loans receivable, net			3,122	7	3,825
188	8	Inventories for sale or use				8	
•	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	112,539			
	b	Less accumulated depreciation	10b	41,910	73,066	10c	70,629
	11	Investments—publicly traded securities				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	1)	Ī	122,968	16	126,562
	17	Accounts payable and accrued expenses			17	. -	
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities		Ī		20	· · · · · · · · · · · · · · · · · · ·
S	21	Escrow or custodial account liability Complete Part IV o	f Schedule D			21	
Liabilities	22	Payables to current and former officers, directors, truste					
<u>=</u>		employees, highest compensated employees, and disqu	alified				
<u>=</u>		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 pa	arties	Ī		24	
	25	Other liabilities Complete Part X of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25				26	
es		Organizations that follow SFAS 117, check here ▶	and				
Fund Balances		complete lines 27 through 29, and lines 33 and 34.	_				
ā	27	Unrestricted net assets				27	
ä	28	Temporarily restricted net assets			28		
ā	29	Permanently restricted net assets				29	
Ē		Organizations that do not follow SFAS 117, check he	ere ▶X				
7		and complete lines 30 through 34.					
Ś	30	Capital stock or trust principal, or current funds				30	
set	31	Paid-in or capital surplus, or land, building, or equipment	t fund			31	
Ş	32	Retained earnings, endowment, accumulated income, or			122,968	32	126,562
Net Assets or	33	Total net assets or fund balances		ļ	122,968		126,562
ž	34	Total liabilities and net assets/fund balances		ľ	122,968		126,562

Form **990** (2009)

Form 990 (2009) MIDLAND CITY EDUCATION ASSOCIATION 38-6081046		Pag	ge 12
Part XI Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 X Cash Accrual Other			
If the organization changed its method of accounting from a prior year or checked "Other," explain in			
Schedule O			
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b Were the organization's financial statements audited by an independent accountant?	2b		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
If the organization changed either its oversight process or selection process during the tax year, explain in			
Schedule O			
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
issued on a consolidated basis, separate basis, or both	İ		
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 Audit Act and OMB Circular A-133?	3a		
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	3ь		
	Form	990	(2009)

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

Open to Public Inspection

Name of the organization Employer identification number MIDLAND CITY EDUCATION ASSOCIATION 38-6081046 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) 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 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 a Total number of conservation easements 2a 2b Total acreage restricted by conservation easements 2c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 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 Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2009 MIDIAND C				01040	Page 2
Part III Organizations Maintaining					ts (continued)
3 Using the organization's acquisition, accessi collection items (check all that apply)	on, and other records, check	any of the following t	that are a signific	ant use of its	
a Public exhibition	d Loan or	exchange programs			
b Scholarly research	e Other				
c Preservation for future generations					
Provide a description of the organization's contract XIV	ollections and explain how th	ey further the organiz	ation's exempt pi	urpose in	
5 During the year, did the organization solicit or assets to be sold to raise funds rather than to					Yes No
Part IV Escrow and Custodial Arr IV, line 9, or reported an a	rangements. Complete	e if the organizat		"Yes" to Form	
1a Is the organization an agent, trustee, custodi			assets not	-	
included on Form 990, Part X?	an or other intermediary for	contributions of other	assets not		Yes No
b If "Yes," explain the arrangement in Part XIV	and complete the following	table			Yes No
b in res, explain the analigement in Part XIV	and complete the following	lable			Amount
c Beginning balance				10	Amount
d Additions during the year				1c	
e Distributions during the year					
				1e	
f Ending balance 2a Did the organization include an amount on F	arm 000 Bart V line 212			<u> </u>	
b If "Yes," explain the arrangement in Part XIV			,		∐ Yes ∐ No
Part V Endowment Funds. Comp		swered "Vec" to	Form 990 Pr	art IV line 10	
Lindownient i dida: Comp	(a) Current year		c) Two years back	(d) Three years bac	k (e) Four years back
1a Beginning of year balance	(a) canoni year	(B) i noi year (oj ino years back	(d) Thice years bac	(e) i odi years odek
b Contributions					
c Net investment earnings, gains,					
and losses					
d Grants or scholarships		-			*****
e Other expenditures for facilities			•		
·		İ			
and programs					
f Administrative expenses				-	
g End of year balance	15.1			<u> </u>	<u></u>
2 Provide the estimated percentage of the year					
a Board designated or quasi-endowment	%				
b Permanent endowment > %					
c Term endowment %	f the	b . l d d d	-1 d f db		
3a Are there endowment funds not in the posse	ssion of the organization tha	t are neid and adminis	stered for the		[Vee] No
organization by					Yes No
(i) unrelated organizations					3a(i)
(ii) related organizations	a listed as resulted as Cabar	tula DO			3a(ii)
b If "Yes" to 3a(II), are the related organization:					3b
4 Describe in Part XIV the intended uses of the Part VI Investments—Land, Build			Dort V line 1	^	·
Part VI Investments—Land, Build Description of investment					(d) Book value
Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	1 ' '	cumulated eciation	(d) Book value
10 Land	(integration)			30.000	16 000
1a Land		16,0 96,5		41 010	16,000
b Buildings		90,5	ودر	41,910	54,629
c Leasehold improvements					
d Equipment					
e Other Total Add lines 1a through 1a (Column (d) must o	agual Form 000, Part V, sales	mn (B) line 10(a) \	0	0	70 600
Total. Add lines 1a through 1e (Column (d) must e	equal Form 990, Part X, COIU	mm (B), line TU(C))		<u> </u>	70,629

					N ASSOCIATION	N 38-6	201040		Page 3
Part VII				See Form 99	0, Part X, line 12.				
		ption of security or o			(b) Book value		(c) Method of		
		ding name of secur	ity)				Cost or end-of-yea	ar market value	
Financial deriva									
Closely-held eq	uity interests								
Other		:							
									•
		_							
Total. (Column	(b) must equal	Form 990, Part X	. col (B) line	12)					
Part VIII					0, Part X, line 13.	_ 1			
		cription of investmen			(b) Book value		(c) Method of	f valuation	
	, ,				(=, = = = = = = = = = = = = = = = = = =		Cost or end-of-year		
						+	, , , ,		
						+			
						+			
				·		+		<u> </u>	
			· · · ·			+			
									
						- 			
			·			_			
		Form 990, Part X							
Total. (Column		Form 990, Part X ts. See Form	990, Parl	t X, line 15.					
			990, Parl					(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
			990, Parl	t X, line 15.				(b) Book va	lue
Part IX	Other Asse		990, Par	t X, line 15. a) Description			•	(b) Book va	lue
Part IX	(b) must equal l	ts. See Form	, col (B) line	t X, line 15. a) Description	5.		>	(b) Book va	lue
Part IX Total. (Column	(b) must equal	ts. See Form	, col (B) line	t X, line 15. a) Description	5. (b) Amount		•	(b) Book va	lue
Part IX Total. (Column	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X	(b) must equal to Other Liabi	Form 990, Part X	, col (B) line	t X, line 15. a) Description			•	(b) Book va	lue
Total. (Column Part X 1 Federal income	(b) must equal to Other Liabi (a) I taxes	Form 990, Part X	, col (B) line	t X, line 15. a) Description 2.15) Part X, line 2			•	(b) Book va	lue

Sche	dule D (Form 990) 2009 MIDLAND CITY EDUCATION ASSOCIA	ATI	ON 38-608104	6	Page 4
Pa	rt Xi Reconciliation of Change in Net Assets from Form 990 to	Aud	ited Financial State	ment	S
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			_6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV)			8	
9	Total adjustments (net) Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Stateme	nts V	Vith Revenue per Re	eturn	
1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIV)	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:)			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b		1	
	Add lines 4a and 4b			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents	With Expenses per	Retu	rn
1	Total expenses and losses per audited financial statements		· · · · · · · · · · · · · · · · · · ·	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a		:	
b	Prior year adjustments	2b			
С	Other losses	2c			
đ	Other (Describe in Part XIV)	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:] :			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV)	4b		1	
	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
Pa	rt XIV Supplemental Information				
Com	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, line	es 1a	and 4, Part IV, lines 1b		
	b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, line				
	art to provide any additional information		•		
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Schedule D	(Form 99	0) 2009	9 M	IDI	ANI	<u> </u>	ITY	ED	UC.	ATI	ON	AS	SO	<u>CIA</u>	TIC	<u> </u>	38	3-6	081	.04	<u>.6</u>					Page 5
Part XIV	Sup	plem	ental	Info	rma	tion	(con	tinue	ed)																	·
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SCHEDULE O (Form 990)

Supplemental Information to Form 990

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

• Attach to Form 990.

OMB No 1545-0047
2009
Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

38-6081046

MIDLAND CITY EDUCATION ASSOCIATION

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

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Forms		4
990	1	990-PF

Other Notes and Loans Receivable

2009

Totals

08/31/10 For calendar year 2009, or tax year beginning 09/01/09, and ending

name				En	nployer Identification	Number
MIDLAND CITY EDU	JCATION ASSO	CIATION		3:	8-6081046	
Form 990, Part 2	(, Line / -	Additiona	1 Informatio	<u>n</u>		
Name	of borrower			Relationship to disqual	lified nerson	
(1) Loan Receivabl	Le			relationship to disqual	inea person	
(2)						
(3)						
(4)						
(5)					· <u> </u>	
(6)						
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<u>(8)</u> <u>(9)</u>				· .		
(10)	·					
(10)		· · · · · · · · · · · · · · · · · · ·				
Original amount		Maturity			Inte	erest
borrowed	Date of loan	date	R	epayment terms		ate
(1)						
(2)						
(3)	ļ <u>-</u>					
(4)				-		
(5)	- ",					
<u>(6)</u> <u>(7)</u>						
(8)						
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	rovided by borrower			Purpose of loa	<u>n</u>	
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(4)						
(5)						
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(10)				· · · · · · · · · · · · · · · · · · ·		
		1				
Consideration fu	rnished by lender		Balance due at beginning of year	Balance due at end of year	Fair market v (990-PF or	
<u>(1)</u>			3,122	3,825	5	
(2)						
(3)						
(4)						
(5) (6)						
(7)						
(8)	<u> </u>					
(9)						
(10)						

3,122

3,825

Form **4562**

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

► See separate instructions.

(Including Information on Listed Property)

► Attach to your tax return

OMB No 1545-0172 2009

Attachment 67

Identifying number Name(s) shown on return MIDLAND CITY EDUCATION ASSOCIATION 38-6081046 Business or activity to which this form relates **Building Rental** Part I **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 250,000 Maximum amount. See the instructions for a higher limit for certain businesses. Total cost of section 179 property placed in service (see instructions) 2 2 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions 5 5 (a) Description of property (b) Cost (business use only) (c) Elected cost 6 Listed property Enter the amount from line 29 7 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instr.) Part II 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) Property subject to section 168(f)(1) election 15 15 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A MACRS deductions for assets placed in service in tax years beginning before 2009 2,437 17 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for depreciation (b) Month and year (d) Recovery (a) Classification of property (f) Method (business/investment use (e) Convention placed in (g) Depreciation deduction period service only-see instructions) 19a 3-year property 5-year property 7-year property d 10-year property e 15-year property 20-year property 25-year property 25 yrs S/L h Residential rental 27 5 vrs MM S/L property 27 5 yrs MM S/L Nonresidential real S/L 39 yrs property MM S/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life S/L b 12-year 12 yrs S/L 40-year MM S/L 40 yrs Summary (See instructions.) Part IV Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return Partnerships and S corporations—see instructions 2,437 22 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

38-6081046

99355 MIDLAND CITY EDUCATION ASSOCIATION 38-6081046 Federal Asset Report

02/13/2011 4:58 PM

FYE: 8/31/2010

Building Rental

Asset	Description	Date I <u>n Service</u>	Cost	Bus Se <u>%</u> 179		Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS: 2 Building 3 Carpeting 4 Addition		9/01/93 2/22/95 12/31/97	64,000 1,493 31,046 96,539		- -	64,000 1,493 31,046 96.539	10 HY S/L	27,897 1,493 10.083 39.473	1.641 0 796 2.437
Other Deprecia I Land	tion: Total Other Depreciation	9/01/93 _	16,000 16,000		- -	16.000 16.000	0 Land	0 0	0
	Total ACRS and Other Depre	eciation _	16.000		=	16,000			0
	Grand Totals Less: Dispositions and Transf Less: Start-up/Org Expense Net Grand Totals	ers —	112,539 0 0 112,539		_	112,539 0 0 112,539		39,473 0 0 39,473	2,437 0 0 2.437

99355 MIDLAND CITY EDUCATION ASSOCIATION
38-6081046 AMT Asset Report

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Building Rental

02/13/2011 4:58 PM

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FYE:	8	/31	/201	10

Asset	Description	Date In Service	Cost	Bus Sec % 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Prior MACRS: 2 Building 3 Carpeting 4 Additions	9	9/01/93 2/22/95 12/31/97	64,000 1.493 31,046 96,539	-	64,000 1,493 31.046 96.539	40 MM S/L 10 HY S/L 40 MM S/L	25,533 1,493 9.087 36,113	1,600 0 777 2.377
Other Deprecia l Land	tion: Total Other Depreciation	9/01/93 _	16.000 16.000	-	16.000 16.000	0 Land	0	0 0
	Total ACRS and Other Depre	eciation <u> </u>	16.000	=	16.000		0	0
	Grand Totals Less: Dispositions and Transf Net Grand Totals	ers	112,539 0 112.539	- -	112,539 0 112.539		36,113 0 36.113	2,377 0 2.377

38-6081046

993.55 MIDLAND CITY EDUCATION ASSOCIATION
38-6081046 Depreciation Adjustment Report

FYE: 8/31/2010

All Business Activities

02/13/2011 4:58 PM

Form MACR		Asset		Description	Tax	AMT	AMT Adjustments/ <u>Preferences</u>
Rental Rental Rental	1 1 1	2 3 4	Building Carpeting Additions		1,641 0 796 2.437	1,600 0 777 2.377	41 0 19 60

99355 MIDLAND CITY EDUCATION ASSOCIATION

Description

Total Other Depreciation

Grand Totals

Total ACRS and Other Depreciation

Future Depreciation Report FYE: 8/31/11

Date In Service

9/01/93

2/22/95 12/31/97

9/01/93

FYE: 8/31/2010

Building

Carpeting Additions

- 38-6081046

Prior MACRS:

Other Depreciation: Land

Asset

Building Re

16.000

112,539

02/13/2011 4:58 PM

Renta	! 		- <u>.</u>	
Cost	Tax	AMT		
64.000 1,493 31.046	1,64 1 0 797	1,600 0 776		
96.539	2.438	2.376		
1 < 000		•		
16.000	0	0		
16.000	0	0		

2.376

2,438

993.55 MIDLAND CITY EDUCATION ASSOCIATION
38-6081046 Federal Statements

38-6081046

2/13/2011 4:58 PM

FYE: 8/31/2010

Taxable Interest on Investments

Description	 Amount	Unrelated Business Code		Postal Code	Acquired after 6/30/75
Interest Income	\$ 84		14	MI	
Total	\$ 84				

2/13/2011 4:58 PM Fund Raising Management & General Form 990, Part IX, Line 24f - All Other Expenses Program Service Federal Statements ۰. Total Expenses 99355 MIDLAND CITY EDUCATION ASSOCIATION Description Miscellaneous FYE: 8/31/2010 38-6081046 Total