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Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

2009

OMB No 1545-0047

Open to Public

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		[r, or tax year beginning 09 C Name of organization	-01-2009 and ending 08-31-2010		D Employer	identifica	ation number	
_	eck if a dress ch	-	Please Ise IRS	MARYLAND STATE EDUCATIO	52-0607	010				
		lange	abel or	Doing Business As			E Telephone			
_	me cha	t	orint or type. See				(410) 26	63-6600		
_	ial retu	I	Specific Instruc-	Number and street (or P O b) Room/suite	G Gross receip		30,762		
Ter	mınate	ed t	ions.	140 MAIN STREET						
☐ Am	ended	return		City or town, state or country ANNAPOLIS, MD 214012020	, and ZIP + 4	•				
	olication	n pending		ANNAPOLIS, MD 214012020						
			F Nan	ne and address of principa	officer	H(a) Is the	ı ıs a group ret	urn for		
				E Helfman AIN STREET		affilia			⊤Yes 🔽 No	
				POLIS, MD 214012020		H(h) Are al	l affiliates incl	uded2	□ Yes □ No	
									instructions)	
I Ta	x-exen	npt status	5 01(c)) (5) ◀ (insert no)	(a)(1) or 527		p exemption			
J W	ebsite	e: ► www i	maryland	educators org		. ,				
								.		
K For	n of or	ganization j	Corporat	tion Trust Association C	other F	L Year of to	rmation 1947	M State MD	of legal domicile	
Pa	rt I	Summ	ary							
	1				most significant activities					
					sion throughout the State of Maryla fare of the teachers and pupils of M		nt a clear inte	rpretati	on of the schools	
<u>မို</u>		to the put	one, to we	ork consistently for the we	Tare of the teachers and papils of h	arylalla				
룓										
Governance										
ŝ	2		,		itinued its operations or disposed o			et assets		
න් යේ	3				oody (Part VI, line 1a)				15	
Activities	4				e governing body (Part VI, line 1b)		•		12	
3	5			nployees (Part V, line 2a)					13	
ä	6			olunteers (estimate if nece					250	
		_		ted business revenue from	•			50,798		
	Ь	Net unrel	ated busi	ness taxable income from	Form 990-T, line 34	Т		7b ──────────────────────────────────	32,368	
					Prio	r Year	c	urrent Year		
an a	8			d grants (Part VIII, line 1h				-	0	
Revenue	9						18,237,619		18,806,283	
<u>\$</u>	10				lines 3, 4, and 7d)		79,621	 	50,481	
_	11				5, 6d, 8c, 9c, 10c, and 11e)		361,712		450,716	
	12				t equal Part VIII, column (A), line		18,678,952		19,307,480	
	13				olumn (A), lines 1-3)		995,240		830,980	
	14	Benefits	paid to o	or for members (Part IX, co	lumn (A), line 4)				0	
	15	Salaries	, other co	ompensation, employee be	nefits (Part IX, column (A), lines 5-	-				
Expenses		10)					11,755,639	1	13,096,401	
क्	16a	Professi	onal fund	raising fees (Part IX, colu	nn (A), line 11e)				0	
ਡੋ	Ь	Total fund	raising exp	enses (Part IX, column (D), line	25) ► ⁰					
	17	Otherex	kpenses ((Part IX, column (A), lines	11a-11d, 11f-24f)		4,959,013		4,689,069	
	18	Total ex	penses A	Add lines 13–17 (must eq	ual Part IX, column (A), line 25)		17,709,892		18,616,450	
	19	Revenue	less exp	penses Subtract line 18 fr	om line 12		969,060		691,030	
Not Assets or Fund Balances							g of Current	E	end of Year	
Set Han	20	Ta+=!	coto (D=	rt V Juno 15 \			16 246 037	1	14 445 401	
A.S.	20 21						9,083,996	+	8,289,750	
5.5 2.5	22						7,162,041	_	6,155,731	
	22 11 11	_	ture Blo		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7,102,041	•	0,155,751	
Fal	. 11	_			nined this return, including accompanying s	chedules and st	tatements and t	to the hes	t of my knowledge	
					on of preparer (other than officer) is based					
۵.										
Sign Here		Signati	re of office	ar		2011- Date	07-13			
		1.				Date				
			FLOYD PRE							
		 	<u> </u>		Data	oock if	Drona	ntifu	umbor	
Б		Preparer's signature		rco	se		Preparer's ide		umber	
Paid		-	<u> </u>		en	npolyed 🕨 🦵				
•	arer's	Firm's nam	e (or yours loved),	RSM MCGLADREY INC			EIN 🕨			
Use (Jniy	address, ar		9737 WASHINGTONIAN BLV	D 400					
				GAITHERSBURG, MD 2087	87340		Phone no 🕨	(301) 29	6-3600	
May	the IR	S discuss	this retu	,	above? (see instructions)				es Γ No	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The Maryland State Teachers Association dedicates itself to achieving high quality universal free public education built on quality teaching, high student expectations and a genuine opportunity to learn for each student, building a unified education profession with a powerful voice for the rights, professional interests and working conditions of educational employees, and working to enhance the rights of labor and human and civil rights for all

	. ocur program s	CITICO EXPCIISCSF 4			
4e	Total program s	ervice expenses►\$			
	(Expenses \$	•	grants of \$) (Revenue \$)
	Other program s	services (Describe in Schedule	0)		
	enhancing public re		a focused on advancing high quality univ slative and political relations. The Associal		
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	represent and serve job security, terms	e all members The Association shall pro and conditions of employment, and the	mote, strengthen, and enhance the capa right to collective bargaining and other c other barriers to equity as a result of soci	icity of its affiliates and members to collaborative processes. The Associat	improve their economic and tion shall promote human and
4b	(Code Member Well Beina) (Expenses \$ The Association shall promote member	including grants of \$ well being by strengthening its ability an) (Revenue \$ od capacity to attract diverse member) ership and effectively
	School QualityThe A		by working to enhance quality teaching,	quality education support personnel	, professional development
4a	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
4	Section 501(c)(3	and 501(c)(4) organizations a	ach of the organization's three lar nd section 4947(a)(1) trusts are enue, if any, for each program ser	required to report the amount	<u>-</u> '
	If "Yes," describe	these changes on Schedule O			
3	Did the organizat services?		ignificant changes in how it condu		Yes 🔽 No
	If "Yes," describe	these new services on Schedul	e O		
2	Did the organizat the prior Form 99		ogram services during the year wh		Yes ✓ No

Part IV	Checklist	of Red	uired	Sche	dules
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			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Νo
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete 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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
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		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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 U S? If "Yes," complete Schedule F, Part II	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
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		No
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		No
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		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
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? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	<i>IV</i>	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νο
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νο
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2009)

Form 990 (2009)								
Part V	Statements Regarding Other IRS Filings and Tax Compliance							
			Yes	No				

			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			
h	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?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this			
	return?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3Ь	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o
С	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		
6a	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		Νο
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	_		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting 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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
	facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

140 MAIN STREET

(410) 263-6600

ANNAPOLIS, MD 214012020

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

Se	ection A. Governing Body and Management						
			Yes	No			
_		1					
1a	Enter the number of voting members of the governing body 1a 15	!					
Ь	Enter the number of voting members that are independent 12						
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		Νο			
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		Νο			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο			
6	Does the organization have members or stockholders?	6	Yes				
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the						
	governing body?	7a	Yes				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а							
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		No			
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal	9		NO			
	evenue Code.)						
			Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a	Yes				
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?						
11	1 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?						
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	12c	Yes				
13	describe in Schedule O how this is done	13	Yes				
14	Does the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by	14	165				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	_	v.				
	The organization's CEO, Executive Director, or top management official	15a	Yes				
b	Other officers or key employees of the organization	15b	Yes				
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νο			
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					
Se	ection C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed▶MD						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)						
	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply						
10	Own website Another's website Vupon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the David E Helfman	ie orga	nızatıor	n ⊫ -			
	David FileHillali						

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

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, and current key employees 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, or 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 i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

1b	Total	0		492,462
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ►11			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete Schedule <i>J</i> for such individual	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	res	N o
\overline{s}	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ►0			
		F	orm 99 0	(2009)

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Form 990 (2009)

Form 99	•	,	6 D					Page 9
Part v	/1111	Statement of	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
# \$ # # # # # # # # # # # # # # # # # #	1a	Federated camp	paigns 1a					
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
% E	c	Fundraising eve	ents 1 c					
#£	d	Related organiz	ations 1d					
چ <u>∓</u>	e	Government grants	s (contributions) 1e					
ાં દુ	f	All other contribution	ons, gifts, grants, and 1f			İ		
돌을	g	sımılar amounts no Noncash contri	bt included above butions included in					
돌		lines 1a-1f\$_						
္မ	h		s 1a-1f	►				
				Business Code				
Program Service Revenue	2a	Dues		900,099	17,016,128	17,016,128		
es Es	ь	UNISERV/NEA		900,099	1,724,405	1,724,405		
93	c	CONVENTION INCO	DME	900,099	65,750			65,750
Ē.	d							
ى د	e							
ie i	f	All other progra	am service revenue					
Š	_	Total Addison		<u> </u>	10.006.202			
	д 3		s 2a-2f ome (including dividen		18,806,283			
			ar amounts)	. F	50,849			50,849
	4		tment of tax-exempt bond	-				
	5	Royalties		▶ ↑				
			(ı) Real	(II) Personal				
	6a	Gross Rents	19,207					
	ь	Less rental expenses						
	c	Rental income	19,207					
	d	or (loss) Net rental incor	me or (loss)		19,207			19,207
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of	122,914					
		assets other						
	ь	than inventory Less cost or	123,282					
		other basis and sales expenses						
	c	Gain or (loss)	-368					
	d	Net gain or (los	s)	▶	-368			-368
άs	8a	Gross income for events (not incline)						
Other Revenue		\$						
⊕ >		of contributions See Part IV, lin	reported on line 1c)					
Ģ.		See ruit IV, iiii	a a					
<u>∓</u>	ь	Less direct ex	penses b					
5	С	Net income or (loss) from fundraising	events ►				
	9a		rom gaming activities					
		See Part IV, lin	e 19 a					
	ь	Less directex	penses b					
	c		· (loss) from gaming activ	vities				
	10a	Gross sales of returns and allo						
	Ь	less costofa	oods sold b					
	c		(loss) from sales of inve	entory ►				
		Miscellaneous		Business Code				
	11a	DUSHANEINC	OME	900,099	288,395			288,395
	ь	OTHERINCOM	1 E	900,099	92,316			92,316
	С	AFFINITY CAR	lDS	900,004	27,939		27,939	
	d	All other revenu			22,859		22,859	
	е	Total. Add lines	s 11a-11d		431,509			
	12	Total revenue.	See Instructions .	•	19,307,480	18,740,533	50,798	516,149
	1				19,507,400	10,170,333	30,730	210,143

	990 (2009)				Page 10
Par	t IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations multiple that organizations must complete solution (A) but are not required to			(D)	
	Il other organizations must complete column (A) but are not required to ot include amounts reported on lines 6b,	(A)	(B) (B) Program service	(C)	(D) Fundraising
7b, 8l	b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	830,980			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,141,317			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	7,751,575			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	100,564			
9	Other employee benefits	3,440,446			
10	Payroll taxes	662,499			
11	Fees for services (non-employees)	332,.33			_
 а	Management				
b	Legal	45,365			
c	Accounting	53,600			
d	Lobbying	33,533			
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	8,273			
g	Other	175,601			
12	Advertising and promotion	525,198			
13	Office expenses	827,817			
14	Information technology	448,443			
15	Royalties	,			
16	Occupancy	181,552			
17	Travel	546,725			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	313,723			
19	Conferences, conventions, and meetings	899,969			
20	Interest	2,414			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	355,360			
23	Insurance	32,215			
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	income taxes	15,940			
b	Public Affairs	309,697			
c	Elections	109,157			
d	misCELLANEOUS EXPENSES	74,357			
е	OFC OF CHF COUNSEL	25,576			
f	All other expenses	51,810			
25	Total functional expenses. Add lines 1 through 24f	18,616,450			
26	Joint costs. Check here ► □ If following SOP 98-2				
	Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
		<u>'</u>			rm 990 (2009)

Pa	rt X	Balance Sheet							
					(A)		(B)		
					Beginning of year	_	End of year		
	1	Cash—non-interest-bearing			7 700 005	1	0.510.105		
	2	Savings and temporary cash investments	7,788,065	3	6,516,195				
	3	Pledges and grants receivable, net	grants receivable, net						
	4	Accounts receivable, net							
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key	employees, and					
		Schedule L				5			
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and					
		Schedule L				6			
ssets	7	Notes and loans receivable, net			271,291	7	663,292		
Š	8	Inventories for sale or use				8			
⋖	9	Prepaid expenses and deferred charges			1,486,984	9	1,058,512		
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	6,833,166					
	Ь	Less accumulated depreciation	10b	3,801,296	3,087,949	10c	3,031,870		
	11	Investments—publicly traded securities			1,659,368	11	2,031,762		
	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			273,523	15	369,842		
	16	Total assets. Add lines 1 through 15 (must equal line 34)			16,246,037	16	14,445,481		
	17	Accounts payable and accrued expenses .			8,660,725	17	7,856,253		
	18	Grants payable				18			
	19	Deferred revenue			29,211	19	63,655		
	20	Tax-exempt bond liabilities				20			
S	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.			21			
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
<u> </u>		persons Complete Part II of Schedule L				22			
_	23	Secured mortgages and notes payable to unrelated third parties			120,537	23			
	24	Unsecured notes and loans payable to unrelated third parties				24			
	25	Other liabilities Complete Part X of Schedule D			273,523	25	369,842		
	26	Total liabilities. Add lines 17 through 25			9,083,996	_	8,289,750		
		Organizations that follow SFAS 117, check here ▶ ▼ and comp	lete li	nes 27					
У Ф		through 29, and lines 33 and 34.							
ūΩ	27	Unrestricted net assets			7,162,041	27	6,155,731		
Fund Balance	28	Temporarily restricted net assets		28					
귤	29	Permanently restricted net assets				29			
ᆵ		Organizations that do not follow SFAS 117, check here ▶ ┌ an	d com	plete			_		
<u>~</u>		lines 30 through 34.							
	30	Capital stock or trust principal, or current funds				30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31			
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32			
Net	33	Total net assets or fund balances			7,162,041	33	6,155,731		
	34	Total liabilities and net assets/fund balances $\ . \ . \ . \ .$			16,246,037	34	14,445,481		

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
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			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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		No
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	3b		

Form **990** (2009)

Software ID: Software Version:

EIN: 52-0607919

Name: MARYLAND STATE EDUCATION ASSOCIATION

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(B) Average hours		tion (che)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other compensation	
week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
50 00	Х		х				154,178	0	33,879	
50 00	Х		x				112,796	0	5,363	
5 00	Х		×				20,000	0	0	
2 00	Х						0	0	0	
2 00	Х						0	0	0	
2 00	Х						0	0	0	
2 00	х						0	0	0	
2 00	х						0	0	0	
2 00	х						0	0	0	
2 00	х						0	0	0	
2 00	Х						0	0	0	
2 00	х						0	0	0	
2 00	х						0	0	0	
2 00	Х						0	0	0	
2 00	Х						0	0	0	
50 00			х				185,165	0	67,081	
50 00			х				154,707	0	52,859	
50 00			х				162,162	0	45,705	
50 00				х			153,771	0	59,158	
50 00					Х		142,694	0	40,688	
50 00					Х		145,587	0	40,424	
50 00					Х		140,543	0	40,424	
50 00					х		137,438	0	57,718	
50 00					х		132,002	0	49,163	
	(B) A verage hours per week 50 00 50 00 50 00 2 00 2 00 2 00 2 00	(B) A verage hours per week 50 00	(B) A verage hours per week 50 00	C Position (check hours per week Officer Individual trustee No. 1	C	C	C	Repertable	Column C	

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
income taxes	15,940			
Public Affairs	309,697			
Elections	109,157			
misCELLANEOUS EXPENSES	74,357			
OFc OF CHF COUNSEL	25,576			

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DLN: 93493195003001

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

al Revenue Service	► Attach to Fe	orm 990. ► See separate instructions.			Inspecti	on
i me of the organiza RYLAND STATE EDUCAT			Emp	loyer identificat	ion number	
				0607919		
		dvised Funds or Other Similar Fo	unds	or Accounts.	Complete	e if the
oi yanizai	tion answered "Yes" to Form 99	(a) Donor advised funds		(b) Funds and ot	her accoun	tc
Total number at e	and of year	(a) Bonor davised lands	'	b) i and and oc	ner account	
	butions to (during year)					
	from (during year)					
Aggregate value	, ,,					
	•					
funds are the org	anization's property, subject to the	sors in writing that the assets held in don organization's exclusive legal control?			☐ Yes	┌ No
used only for cha	- , , ,	donor advisors in writing that grant funds efit of the donor or donor advisor, or for ai			☐ Yes	┌ No
rt III Conserv	vation Easements. Complete	ıf the organızatıon answered "Yes" t	o Forn	n 990, Part IV,	line 7.	
Preservation Protection of Preservation Complete lines 2	nservation easements held by the on of land for public use (e.g., recreating finatural habitat in of open space a-2d if the organization held a qual last day of the tax year		certifie	d historic structi	-	
	,			Held at the E	nd of the \	Year
Total number of c	onservation easements		2a			
Total acreage res	stricted by conservation easements		2b			
Number of conse	rvation easements on a certified his	toric structure included in (a)	2c			
Number of conse	rvation easements included in (c) a	cquired after 8/17/06	2d			
Number of states	where property subject to conserva	ation easement is located 🛌	—–	violations and		
	ne conservation easements it holds?		annig or	violations, and	☐ Yes	┌ No
		pecting and enforcing conservation easem				
Does each conse	3, 1	(d) above satisfy the requirements of sec		y the year Frag	☐ Yes	Гм
In Part XIV, desc balance sheet, ar	cribe how the organization reports c	onservation easements in its revenue and the footnote to the organization's financial nents			nd	,
		rns of Art, Historical Treasures, 'Yes" to Form 990, Part IV, line 8.	or Otl	her Similar A	ssets.	
art, historical tre	asures, or other sımılar assets held	116, not to report in its revenue stateme for public exhibition, education or researd ancial statements that describes these it	ch ın fu			,
historical treasur		116, to report in its revenue statement a public exhibition, education, or research i ;				
(i) Revenues inc	luded in Form 990, Part VIII, line 1			► \$		
(ii) Assets includ	ded in Form 990, Part X			► \$		
If the organizatio	·	orical treasures, or other similar assets fo S 116 relating to these items	or finan			
		<u> </u>		► \$		
Mevenues include	ed in Form 990, Part VIII, line 1			- →		

b Assets included in Form 990, Part X

Loan or Other hey further historical tr the organiza ne organiz	at are a signific rexchange prog the organizatio reasures or other ation's collection ation answered 1. ons or other as	n's ex er sım n? ed "Y	empt purpos nilar es" to Form	e in T Yes	· · ·
O ther hey further historical tr the organiza ne organiz t X, line 2: or contributi	the organization reasures or othe ation's collection ation answere 1.	n's ex er sım n? ed "Y	empt purpos	┌ Yes 1 990, ┌ Yes	· · ·
hey further historical tr the organiza ne organiz t X, line 2: or contributi	reasures or othe ation's collectio ation answere 1.	ersım n? ed "Y	es" to Form	┌ Yes 1 990, ┌ Yes	· · ·
historical tr the organiza ne organiz t X, line 2: or contributi	reasures or othe ation's collectio ation answere 1.	ersım n? ed "Y	es" to Form	┌ Yes 1 990, ┌ Yes	· · ·
historical tr the organiza ne organiz t X, line 2: or contributi	reasures or othe ation's collectio ation answere 1.	ersım n? ed "Y	es" to Form	┌ Yes 1 990, ┌ Yes	· · ·
the organiza ne organiz t X, line 2: or contributi	ation's collectio ation answere 1.	n? ed "Y	es" to Form	990, □ Yes	· · · · · · · · · · · · · · · · · · ·
ne organiz t X, line 2: ir contributi	ation answere 1.	ed "Y	not	990, □ Yes	· · · · · · · · · · · · · · · · · · ·
t X, line 2: or contributi	1.		not	┌ Yes	 ; Ги
	ons or other as	sets			; Г n
g table				\ marint	
				4 IIIOUIIL	
		1c			
		1d			
		1e			
		1f			
	'			┌ Yes	— Ги
				,	,
ered "Yes'	" to Form 990	. Par	t IV. line 10).	
rior Year					ur Years Ba
1,825,325					
-80,653					
6,184					
1,738,488					
'				•	
at are held a	and administere	d for	the		
					es No
					N o
		•	🛚		No
		•		3D	
	n Dart V line	10			
	<u> </u>		(a) Assumula	tod	
) Book val
	51	6,300			516,
	3,85	8,837	1,671	,314	2,187,
	81	1,753	636	,641	175,
		6,276	1,493	,341	152,
ıne 10(c).)			•		3,031,
r	-80,653 -80,653 -80,653 -81,738,488 at are held and are held are held and are held and are held and are held are held and are held are	ror Year (c)Two Years Bac 1,825,325 -80,653 6,184 1,738,488 at are held and administered the funds E Form 990, Part X, line (b)Cost or basis (investment) (a) Cost or other basis (other basis (other basis) (other basis) 81 1,64	ered "Yes" to Form 990, Parror Year (c)Two Years Back (d) 1,825,325	## Pered "Yes" to Form 990, Part IV, line 10 rior Year (c)Two Years Back (d)Three Years Back 1,825,325	## Press ## Pre

Part VII Investments—Other Securities. See (a) Description of security or category		2. (c) Method of v	aluation
(including name of security)	(b)Book value	Cost or end-of-year	
Financial derivatives Classity hald agusty interests			
Closely-held equity interests Other			
	_		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			_
Part VIII Investments—Program Related. See		13.	
(a) Description of investment type	(b) Book value	(c) Method of v	
(a) Description of investment type	(B) Book value	Cost or end-of-year	market value
Part IX Other Assets. See Form 990, Part X, col (B) line 13)			
(a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability			
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	(b) A mount		

Pai	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,307,480
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	18,616,450
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	691,030
4	Net unrealized gains (losses) on investments	4	103,632
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,800,972
9	Total adjustments (net) Add lines 4 - 8	9	-1,697,340
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-1,006,310
_	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1	19,411,112
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		· · · · · · · · · · · · · · · · · · ·
а	Net unrealized gains on investments		
ь	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	103,632
3	Subtract line 2e from line 1	3	19,307,480
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	(
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	19,307,480
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Ret	
1	Total expenses and losses per audited financial statements	1	18,616,450
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	(
3	Subtract line 2e from line 1	3	18,616,450
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	18,616,450
Pa	rt XIV Supplemental Information		

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part V , Line 4	Description of Intended Use of Endowment Funds	This fund was established in 1974 for the purpose of providing financial assistance through loans and/or grants to the Association, local affiliates and members as provided for under the "Trust Guidelines" the goal is to set at \$1M and this fund is to increase each year by it's investment income, less operating expenses
Part X	Description of Uncertain Tax Positions Under FIN 48	On September 1 2009, the Association adopted the accounting standard on accounting for uncertainty in income taxes which addresses the determination of whether tax benefits claimed or expected to be claimed on a tax return should be recorded in the financial statements. Under this guidance, the Association may recognize the tax benefit from an uncertain tax position only if it is more-likely-than-not that the tax position will be sustained on examination by taxing authorities based on the technical merits of the position. The tax benefits recognized in the financial statements from such a position are measured based on the largest benefit that has a greater than 50% likelihood of being realized upon ultimate settlement. The guidance on accounting for uncertainty in income taxes also addresses de-recognition, classification, interest and penalties on income taxes, and accounting in interim periods. The Association had no such positions recorded in the financial statements at August 31,2010. With few exceptions, the Association is no longer subject to U.S. federal income tax positions by tax authorities for years before 2007.
Part XI, Line 8 - Other Adjustme	nts	FAS 158-PENSION adjustment -1800972

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

DLN: 93493195003001 OMB No 1545-0047

Employer identification number

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

Inspection

MARYLAND STATE EDUCATION AS	SSOCIATION						
MARTEAND STATE EDUCATION AS		52-0607919					
Part I General Information	on on Grants and	l Assistance				-	
 Does the organization maintain the selection criteria used to ave Describe in Part IV the organization 	ward the grants or as	sıstance?					✓ Yes —
Part II Grants and Other A Form 990, Part IV, Im Part IV and Schedule	Assistance to Go ne 21 for any recip	vernments and O	rganizations in the more than \$5,000. Ch	United States. Cor	e recipient receive	ed more than \$5,000	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 5	 01(c)(3) and governi	nent organizations .				· · · · •	
3 Enter total number of other orga	anızatıons					<u> ▶ </u>	32
For Privacy Act and Paperwork Reductio	n Act Notice, see the I	nstructions for Form 99	0.	Cat No 50055P		Schedu	ile I (Form 990) 2009

	,										
Part III	Grants and Othe	r Assistar	nce to Indivi	iduals in the	United States.	Complete if the	organization	answered "Ye	es" to Form 990,	Part IV,	line 22.
	Use Schedule I-1 ((Form 990)	if additional s	space is neede	ed.						

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	<u>I</u>	I.	ı	I.	L

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 The application requires the grant recipient to state the purpose of the grant, who the grant aligns with the affiliate's plan and MSTA's strategic objectives, and to explain how they will assess and evaluate the success of the program or activity for which the grant is used. The grant recipient also has to identify the criteria and parameters that will be used in the assessment. The recipient is required to submit a copy of its evaluation and assessment within 60 days of completing the program or activity.

Software ID:

Software Version:

EIN: 52-0607919

Name: MARYLAND STATE EDUCATION ASSOCIATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

Form 990,Schedule 1, Par	<u>t 11, Grants an</u>	d Other Assistance	2 to Governments	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
allegany county teachers association13145 warrior drive sw cresaptown, MD 215055179	23-7442507	501(c)(5)	12,909	970	book value	Desktop Computer	Capacity building, membership, training, advocacy, and special requests
Allegany county educational services council500 Greenway Avenue cumberland,MD 21502		501(c)(5)	10,154				Capacity building, membership, and advocacy
teachers association of anne arundel county2521 Riva Road Suite L7 annapolis,MD 21401	52-0733568	501(c)(5)	50,407				Capacity building, membership, training, and field service
SECRETARIES AND ASSISTANTS ASSOCIATION OF ANNE ARUNDEL COUNTY2521 Riva Road Suite L-3 annapolis, MD 21401		501(c)(5)	6,727				Capacity building and membership
teachers association of baltimore county305 East Joppa Road towson, MD 212863252	52-0623933	501(c)(5)	97,076				Capacity building, membership, training, special requests and field service
Education Support Professionals of Baltimore County1940G Greenspring Drive timonium, MD 21093		501(c)(5)	7,231				Capacity building, membership, training, advocacy, special requests
calvert education association 865 Main Street Prince Frederick, MD 20678	52-1055500	501(c)(5)	20,120				Capacity building, membership, training, advocacy, special requests, and releases
calvert association of educational support staff865 Main Street prince Frederick, MD 20678		501(c)(5)	10,865				Capacity building, membership, training, advocacy, and special requests
caroline county educators association255 Main Street preston, MD 216552215		501(c)(5)	6,883	1,597	book value	Laptop Computer and Case	
Carroll county education Association532 baltimore blvd suite 307 Westminster, MD 21157		501(c)(5)	4,823	995	book value	Desktop Computer	Capacity building, membership, training, advocacy

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (q) Description of (h) Purpose of grant ıf applıcable valuation non-cash assistance organization grant cash or assistance or government (book, FMV, appraisal, assistance other) carroll association of school 501(c)(5) membership employees70 Monroe Street 8,132 Westminster, MD 21157 cecil county clasroom 52-0941366 501(c)(5) 160 book value Software Capacity building, teachers association222 membership, 10,721 South Bridge Street Suite 6 advocacy, and Special elkton, MD 21921 requests cecil education support 501(c)(5) Capacity building, personnel association222 membership, 9.000 South Bridge Street Suite 2 development, and elkton, MD 21921 Special requests education association of 52-1048940 501(c)(5) 144 book value Substitute costs for Capacity building charles countyPO Box 877 members to attend membership, special 30,537 La Plata, MD 20646 training requests, and field service frederick county teachers 52-1014274 501(c)(5) Capacity building, association1 Wormans Mill membership, training, 23,946 Court suite 16 advocacy, and special frederick, MD 21701 requests 52-1594576 501(c)(5) 1,512 frederick association of book value Dell computer Capacity building, school support employees1 membership, 13,885 Wormans Mill Court Suite 15 advocacy, special frederick, MD 21701 requests, and releases 52-2021204 501(c)(5) 947 Desktop Computer GARRETT COUNTY book value Capacity building, **EDUCATION** and Case membership, training, 25,273 ASSOCIATIONP O Box and advocacy 2236 oakland, MD 21550 HARFORD COUNTY 501(c)(5) Capacity building, **EDUCATION** membership, training, 18,023 ASSOCIATION42 North advocacy, and field Main St Suite 200 service Bel Air, MD 21014 52-0939793 HOWARD COUNTY 501(c)(5) Capacity building, **EDUCATION** membership, training, 39,690 ASSOCIATION 5082 Dorsey advocacy, and special Hall Drive Suite 102 requests Ellicott City, MD 21042 Kent County Teachers 501(c)(5) 1.466 book value Laptop Computer and Capacity building and Association25301 lambs Case membership 6,979 meadow road worton, MD 21678

Form 990,Schedule I, Pari	t II, Grants and	d Other Assistance	to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENT COUNTY EDUCATION SUPPORT PROFESSIONAL ASSOCIATION114 South Main Street Galena, MD 21635	26-1491792	501(c)(5)	7,191	129	book value	Shirts and jackets for membership drive	Capacity building and membership
MONTGOMERY COUNTY EDUCATION ASSOCIATION12 Taft Court rockville, MD 208505321	52-0659775	501(c)(5)	181,325				Capacity building, membership, training, advocacy, special requests and field service
PRINCE GEORGE'S COUNTY EDUCATORS' ASSOCIATION8008 Marlboro Pike Forestville, MD 20747	52-0658540	501(c)(5)	109,456	148	book value	Computer Geeks	Capacity building, membership, training, advocacy, and field service
QUEEN ANNE'S COUNTY EDUCATION ASSOCIATION900 Love Point Road Stevensville, MD 216662120	52-1050091	501(c)(5)	13,193	1,610	book value	Laptop Computer and Case	Capacity building and membership
EDUCATION ASSOCIATION OF ST MARY'S COUNTY44219 Airport Road california, MD 20619	52-1052839	501(c)(5)	15,334				Capacity building, membership, training, advocacy, and special requests
COLLECTIVE EMPLOYEES ASSOCIATION OF ST MARY'S COUNTY44219 Airport Road Room 138 california, MD 20619		501(c)(5)	3,508	5,800	book value	Comcast for advertising, video services, Dell computer, LCD projector, Quick	Capacity building, membership, advocacy, and special requests
Somerset Education Association27323 crisfield marion road westover, MD 21871		501(c)(5)	5,030				membership
TALBOT COUNTY EDUCATION ASSOCIATION8221 Teal Drive Suite 420 easton, MD 21601	52-1050121	501(c)(5)	5,433				Capacity building and membership
WASHINGTON COUNTY TEACHERS ASSOCIATION 42 South Mulberry Street Hagerstown, MD 21740	52-6059401	501(c)(5)	12,230	1,750	book value	Fiscal Review Fees	Capacity building, membership, advocacy, and special requests
WASHINGTON COUNTY EDUCATIONAL SUPPORT PERSONNEL42 South Mulberry Street hagerstown, MD 21740		501(c)(5)	11,776	1,750	book value	Fiscal Review Fees	Capacity building, membership, and advocacy

Form 990,Schedule I, Par	form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
WICOMICO COUNTY EDUCATION ASSOCIATION1302 Old Ocean City Road Salisbury, MD 21804	52-1050640	501(c)(5)	7,847	970	book value	'	Capacity building, advocacy, and special requests	
WORCESTER COUNTY TEACHERS ASSOCIATION 1817 Old Virginia Road Pocomoke City, MD 21851	52-1050642	501(c)(5)	8,732	1,468	book value	QuickBooks software	, ,	

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DLN: 93493195003001

OMB No 1545-0047

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization MARYLAND STATE EDUCATION ASSOCIATION

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Employer identification number

52-0607919

Ра	Questions Regarding Compensation	<u>n</u>			
				Yes	Νo
1a		ovided any of the following to or for a person listed in Form I to provide any relevant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses desc	rganization follow a written policy regarding payment or ribed above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to rofficers, directors, trustees, and the CEO/Executive		2		
3	Indicate which, if any, of the following the organizatiorganization's CEO/Executive Director Check all the				
	Compensation committee	Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	payment?	4a		Νo
ь	Participate in, or receive payment from, a suppleme	ntal nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-b		4c		Νο
		ovide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	ust complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of				
а	The organization?		5a		
ь	Any related organization?		5b		
	If "Yes," to line 5a or 5b, describe in Part III				
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a, did the organization pay or accrue any			
а	The organization?		6a		
Ь	Any related organization?		6b		
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A payments not described in lines 5 and 6? If "Yes," of		7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III	paid or accured pursuant to a contract that was n Regs section 53 4958-4(a)(3)? If "Yes," describe	8		
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebuttable presumption procedure described in Regulations	9		

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

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	f W-2 and/or 1099-MI	ISC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Clara B FLOYD	(I) (II)	154,178 0	-	0 0	0 16,913 0 0	17,230 0	188,321	•
DAVID HELFMAN	(I) (II)	185,165 0	0	0 0	0 40,928 0 0	26,153 0	252,246 0 0	
mark dabkowskı	(ı) (ıı)	154,707 0	0) C	32,741	20,118	207,566	,
susan russell	(ı) (ıı)	162,162 0	0) C	35,646	10,059	207,867	
DALE TEMPLETON	(I) (II)	153,771 0	0	0 0	33,005	26,153 0	212,929	,
Kathie Hiatt	(I) (II)	142,694 0	0	0 0	30,626	10,059	183,379	
Patricia Alexander	(ı) (ıı)	145,587 0	0	0 0	30,365	10,059	186,011	
Jacqueline Harris	(I) (II)	140,543 0	0 (0 0	30,365	10,059	180,967	,
Herman Whitter	(I) (II)	137,438 0	0	0 0	30,365	27,353 0	3 195,156 0 0	
Damon Felton	(I) (II)	132,002	0 0	0 0 0	29,045	20,118		5
		!	 			 	<u>'</u>	<u> </u>
			 		+			-
				+	+			

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Ret urn Ref erence	Explanation
Supplemental Information		Form 990, Page 8, Part VII, Line 5 - Clara Floyd - President and Betty Weller - Vice President, are paid by both the filing organization and the montgomery county school system, the school system where they are both employed as teachers. The filing organization is billed by the mountgomery county school system for the time spent on organization business.

Schedule J (Form 990) 2009

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As Filed Data -

DLN: 93493195003001

OMB No 1545-0047

2009

Open to Public Inspection

SCHEDULE 0

(Form 990)

Department of the Treasury
Internal Revenue Service

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.

Name of the organization
MARYLAND STATE EDUCATION ASSOCIATION

Employer identification number

52-0607919

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 6		Our members are teachers, education support professionals, administrators, certificated specialists, higher education faculty, and student and retired members whose mission is to create great public schools for every child in Maryland

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		MSTA Officers and the Board of Directors are elected by the membership. The President, Vice Present and Treasurer are elected for three-year terms. The officers are limited to no more than two terms in the office to which they were elected. There are eight member- at- large directors. Four are elected each year for three-year terms. After two full terms, board members shall not be eligible again until a period equivalent to one term has passed. The Board also includes four state directors of the National Education Association (NEA). Their terms shall be in compliance with guidance established by the NEA.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7b		The MSTA Representative Assembly, which includes members from every local affiliate in proportion to membership, is MSTA'S primary policy-making body. The Representative Assembly meets annually to approve MSTA's legislative program and establish MSTA policy through resolutions. The body also has the pow er to amend MSTA bylaws.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Form 990 is prepared by the independent accounting firm (tax accountants) engaged by the Association The preparation is based on information provided by the Association's financial staff. The information is obtained from the Association's documents, records and audited financial statements. The completed Form 990 is reviewed by both the MSTA staff accountant and Assistant Executive Director prior to filing

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Employees A. The MSEA assistant executive director for business and policy operations shall is serve as the Conflict of Interest officer (Cl Officer), and shall in that capacity be re sponsible for the implementation of the Cl Policy. The Cl officer shall immintor the implementation of the Cl Policy, and recommend to the MSEA executive director codifications in the Policy. The MSEA Board of Directors shall make such modifications in the Policy as it may from time to time deem appropriate. B. (1) if an MSEA employee believes that he/she may be engaged or about to become engaged in an activity that is prohibited by the Cl Policy, he/she shall consult with the Cl officer. The MSEA employee and the Cl officer shall attempt to deal with the matter informally if they are unable to do so, the Cl officer shall submit to the MSEA employee a written opinion indicating whether the activity in question is prohibited by the Cl Policy and, if so, what should be done to correct the situation (2) if the MSEA employee disagrees, in whole or in part, with the conclusions of the Cl officer, he or she may appeal to the MSEA executive director by filing a written notice of appeal with the executive director within thirty (30) calendar days after receiving the opin ion of the Cl officer. The executive director shall decide the appeal as expeditiously as possible, and the decision of the executive director shall be final and binding, subject to whatever contractual rights the MSEA employee may have to challenge the MSEA executive director's decision, including, without intration, his/her right to challenge said decide in through the girevance procedure in a collective bargaining agreement with MSEA if the MSEA employee does not file a timely appeal, he/she shall comply with the opinion of the Cl officer if the MSEA employee is a member of a bargaining unit, he/she may, at his/her option, have a union representative participate in the consultation and appeal C (1) if an MSEA member or employee believes that an MSEA employee and the co

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c		th the Cl officer. The MSEA official and the Cl officer shall attempt to deal with the maitter informally. If they are unable to do so, the Cl officer shall submit to the MSEA official a wirtten opinion indicating whether the activity in question is prohibited by the Cl Policy and, if so, what should be done to correct the situation (2) if the MSEA official disagrees, in whole or in part, with the conclusions of the Cl officer, he or she may app eal to the MSEA Board of Directors by filing a written notice of appeal with the MSEA pres ident within thirty (30) calendar days after receiving the opinion of the Cl officer. The MSEA Board of Directors shall decide the appeal as expeditiously as possible, and the decision of the MSEA Board of Directors shall be final and binding. If the MSEA official files a timely appeal, he or she need not comply with the opinion of the Cl officer pending the outcome of the appeal. If the MSEA official does not file a timely appeal, he/she shall comply with the opinion of the Cl officer. C (1) if an MSEA member or employee believes that an MSEA official is engaged or is about to become engaged in an activity that is prohibited by the Cl Policy, the member or employee may file a wirtten complaint with the Cl officer. The complainant shall identify him/herself to the Cl officer, but the Cl officer shall, if requested to do so by the complainant, treat the complaint as confidential and not reveal the complainant's name. (2) Upon receiving a complaint, the Cl officer shall consult with the complainant and the MSEA official in question. Based on the information receive difform the complainant and the MSEA official, and/or other relevant information, the Cl officer shall decide whether the MSEA official is engaged or is about to become engaged in a nactivity that is prohibited by the Cl Policy, and, if so, what should be done to correct the situation. The Cl officer shall submit to the MSEA official and the complainant a written opinion setting forth his/her conclusions. (3) If the MSEA

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Compensation of the Executive Director is determined by the Board of Directors. The Association's financial condition, budget and staff contracts are considered. The Board of Directors through the President considers recommendation from appropriate staff.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The organization makes its governing documents and financial information available to the public upon request

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

DLN: 93493195003001

2009

OMB No 1545-0047

Open to Public Inspection

Schedule R (Form 990) 2009

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

ame of the organization ARYLAND STATE EDUCATION ASSOCIATION	dentification of Disregarded Entities (Complete If the organization answered "Yes" on Form 990, Part IV, Inne 33.) Name, address, and EIN of disregarded entity Pmmary activity Legal domicile (state or foreign country) Legal domicile (state or foreign country) Direct controlling entity End of each or foreign country) Direct controlling entity Direct controlling entity Direct controlling entity End of each or foreign country Direct controlling entity Direct controlling entity End of each or foreign country Direct controlling entity End of each or foreign country Pmmary activity Legal domicile (state or foreign country) Exempt Code section Public charty status (if section 501(c)(3)) Direct controlling entity					
		1 1157 11	- 000 B + 1	•		
Part I Identification of Disregarded Entities (Complete	te if the organization	answered "Yes" on	Form 990, Part IV	V, line 33.)		
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	Legal domicile (state	(d) Total income Er	(e) nd-of-year assets	Direct controlling	
Part II Identification of Related Tax-Exempt Organization or more related tax-exempt organizations during the	ations (Complete if e tax year.)	the organization an	swered "Yes" on F	Form 990, Part IV,	line 34 because it had one	
(a) Name, address, and EIN of related organization	(b) Primary activity	Legal domicile (state	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	Direct controlling	
1STA Fund for Children and Public Education						
40 Main Street	I	MD	527		N/A	
nnapolis, MD 21401 2-1369000						

Cat No 50135Y

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	during the tax year. (f) Share of total income	·		(h) Disproprt ear allocatio		Code amount II Sched	(i) V—UBI n box 20 of ule K-1 n 1065)	(j Gener mana parti	al or Iging
								Yes	No			Yes	No
												+	
				s a Corporation of treated as a corpo				nswer	ed "Y	es" on F	orm 990, P	art IV,	
	cause it had one t		ciacca organización.				(f))	Ī	(a)	(h)		
(a) Name, address, and EIN o	f related organization	(b) Primary ad	ctivity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	Share of incor	f total	Sh end-	(g) nare of -of-year issets	(h) Percentag ownership		
									1				
									1				

Pa	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 34, 35, or 36.)		V	N.				
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No				
	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		4-						
_	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No				
b	Gift, grant, or capital contribution to other organization(s)		1b		No				
	Gift, grant, or capital contribution from other organization(s)		1c		No				
	Loans or loan guarantees to or for other organization(s)		1d		No				
е	Loans or loan guarantees by other organization(s)		1e		No				
f	Sale of assets to other organization(s)		1f		No				
g	Purchase of assets from other organization(s)		1g 1h		No No				
h	h Exchange of assets								
i	Lease of facilities, equipment, or other assets to other organization(s)		1i		No_				
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No				
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No				
I	Performance of services or membership or fundraising solicitations by other organization(s)		11		No				
m	m Sharing of facilities, equipment, mailing lists, or other assets								
n	Sharing of paid employees		1n		No				
o	Reimbursement paid to other organization for expenses		10		No				
р	Reimbursement paid by other organization for expenses		1 p		No				
q	O ther transfer of cash or property to other organization(s)		1 q		No				
r	O ther transfer of cash or property from other organization(s)		1r		No				
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships	and transaction thres	holds						
	(a)	(b)		(c)					
	Name of other organization	Transaction type(a-r)		t involve	ed				
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h Gener mana partr	
			Yes	No		Yes	No		Yes	No
										+
										t
										L
										+
										t
										L
										-
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