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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	or the	2009 cal	endar year, or tax year beginning SEP 1, 2009 and ending	AUG 31, 2010	
В	Check if applicable	020 11/2	C Name of organization	D Employer identific	cation number
	Addres change Name change	e print or	NATIONAL SCHOOL PUBLIC RELATIONS ASSOC. Doing Business As		060603
	Initial retum Termin ated	See	Number and street (or P 0 box if mail is not delivered to street address) Room/su		519-0496
F	Ameno return Applica	ded tions	City or town, state or country, and ZIP + 4 ROCKVILLE, MD 20855-2123	G Gross receipts \$ H(a) Is this a group re	1,072,170.
	pendin	F Nar	ne and address of principal officer:RICHARD D BAGIN	for affiliates? H(b) Are all affiliates inc	Yes X No
$\overline{}$	Fax-exe		us: X 501(c) (3		list. (see instructions)
			W.NSPRA.ORG	H(c) Group exemption	
				ear of formation 1973 N	
	art I	Summ			
			scribe the organization's mission or most significant activities: THE PURPO	OSE IS THE SE	RVING THE
Activities & Governance		CITIZ	ENRY OF THE NATION BY PROMOTING A BETTE		
r.	I .	Check thi	. —		
Š	i		of voting members of the governing body (Part VI, line 1a)	3	12
Ğ	I		of independent voting members of the governing body (Part VI, line 1b)	4	12
οğ ()	I		aber of employees (Part V, line 2a)	5	9
iţie	1		aber of volunteers (estimate if necessary)	6	64
흕	I		is unrelated business revenue from Part VIII, column (C), line 12	7a	30,200.
ď			ated business taxable income from Form 990-T, line 34	7b	-169.
	-	14et umek	area business taxable income from 1 orni 990-1, inte 54	Prior Year	Current Year
	8	Contribut	ions and grants (Part VIII, line 1h)	436,778.	450,383.
Revenue	1		service revenue (Part VIII, line 2g)	664,274.	599,887.
Ş	1	_		26,074.	21,900.
æ			nt income (Part VIII, column (A), lines 3, 4, and 7d)	20/0/10	21/3000
			enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,127,126.	1,072,170.
			nue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,000.	20,000.
			d similar amounts paid (Part IX, column (A), lines 1-3)	10,000.	20,000.
	1		paid to or for members (Part IX, column (A), line 4)	871,503.	706,149.
Ses	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)	0/1,303.	700,143.
Expenses	16a		nal fundraising fees (Part IX, column (A), line 11e)		
X	b		draising expenses (Part IX, column (D), line 25) 5,944.	470 337	100 007
	17		enses (Part IX, column (A), lines 11a-11d, 11f-24f)	478,327.	406,867.
			enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1,359,830.	1,133,016.
_ 0	19	Revenue	less expenses. Subtract line 18 from line 12	-232,704.	-60,846.
Net Assets or Fund Balances			ets (Part X, line 16) lities (Part X, line 26)	Beginning of Current Year	End of Year
Sse	20		ets (Part X, line 16)	827,395.	809,073.
ag a	21		s or fund balances. Subtract line 21 from line 20	340,462.	342,840.
몵	22		s or fund balances. Subtract line 21 from line 20	486,933.	466,233.
P	art II		ture Block		and the start of the form of the start of th
Ξ`		and comple	ities of perjury, I declare that I have examined this return including accompanying scredules and statement to Declaration of preparer (other than officer) is based on all information of which preparer had any unowier	its, and to the best of my knowled; dge	ge and belief, it is true, correct,
, , ,			P. () P I TOGDER	1 3/11	
Sig	n	200	the state of the s	Date	ZP
Hei	re	٠ - ١	lature of officer	Date	
چ			CHARD D BAGIN, EXECUTIVE DIRECTOR		
<u> </u>		Тур	e or print name and title	Charlet O	de latestifica e combos
Paid Pro	i parer's	Preparer's signature	Den W. Kendall UTA 01/26/11	Check if self- employed X	er's identifying number structions)
اد ال	Only	Firm's name yours if	RENDALL, PREDOLA AND CONED CIAD	EIN ►	
Ž	Only	self-employ			
₹.		address, an ZiP + 4	BEDFORD, PA 15522-0259	Phone no ► (
(Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions)		X Yes No

Part 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)?		v	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			Х
	public office? If "Yes," complete Schedule C, Part I	4		X
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		
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_		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			١,,
	If "Yes," complete Schedule D, Part V	10		X
11	is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X		v	
	as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI.			
•	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			.,
	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
	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	4.0		х
	located outside the United States? If "Yes," complete Schedule F, Part III	16		^
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		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)

Page 4

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		.03	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	1		
	any tax-exempt bonds?	24c		-
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
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		X
Þ	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	051		х
00	Schedule L, Part I	25b		_ A
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X_
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	_30	ļ	Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			.,
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			х
	Schedule N, Part II	32	ļ <u> </u>	^
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			Х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity?	34	x	
35	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Is any related organization a controlled entity within the meaning of section 512(b)(13)?			 -
J J	If "Yes," complete Schedule R, Part V, line 2	35	x	
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		X
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		X
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	Х	<u> </u>
		Form	990 (2009

009) NATIONAL SCHOOL PUBLIC RELATIONS ASSOC. 52-6060603 Page 5
Statements Regarding Other IRS Filings and Tax Compliance Part V

1a Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmitted of U.S. Information Returns. Enter 0-fi not applicable Enter the number of Forms W2G included in line 1a. Enter 0-fi not applicable Did the organization comply with backup withholding rules for repotable payments to vendors and reportable gaming (gambling) with more of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or writin the year covered by this return. See Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or writin the year covered by this return. So Did the organization and 2a is greater than 250, you may be required to e-file this return, (see instructions) 3a Did the organization we unrelated business gross income of \$1,000 or more during the year covered by this return? If Yes, a set if filed a Form 890 or for the year of 11 "No, "provide a required to e-file this return, (see instructions) 3b Did the organization than a set in the set of the s			l 1	1		Yes	No
b Enter the number of Forms W-2G included in line 1a. Enter O- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gamining (gambling) without provided to the organization of the organization file of the declardary are androlly with or within the year covered by this return 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 1 and 2a is greater than 250, you may be required to e-file this return. (See instructions) The instruction of the organization are surrelated business gross income of \$1,000 or more during the year covered by this return? If 'Yes,' has it filed a form 890-T for this year? If 'No., 'provide an explanation in Schedule O At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account; a country (such as a bank account, securities account, or other financial account)? If 'Yes,' has it filed a foreign country,' such as a bank account, securities account, or other financial account)? If 'Yes, 'to line 5 acr 5b, did the organization that it was or its a party to a prohibited tax shelter transaction? If 'Yes,' to line 5 acr 5b, did the organization that it was or its a party to a prohibited tax shelter transaction? If 'Yes,' to line 5 acr 5b, did the organization the file was or its a party to a prohibited tax shelter transaction? If 'Yes,' to line 5 acr 5b, did the organization that it was or its a party to a prohibited tax shelter transaction? If 'Yes,' to line 5 acr 5b, did the organization that it was or its a party to a prohibited tax shelter transaction? If 'Yes,' to line 5 acr 5b, did the organization that it was or its a party to a prohibited tax shelter transaction? If 'Yes,' indicate the number of Form 8282 filed during the year organization and the party acrease any funds, directly or indirectly, to pay premiums on a personal benefit contrac	1a	·		1.4			
Either are further to minimal variety with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, gradient of the calendar year ending with or within the year covered by this return 5 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. Gee instructions) 8 Did the organization have unrelated business gross income of \$1,000 or more dumpt the year covered by this return? 8 If Yes, * has if filed a Form 990-T for this year? If "No," provide an explanation in Schadule O 4 Al All any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly? • 8 If Yes, * enter the name of the foreign country; • 8 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 9 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 8 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? 9 If Yes, * did the organization include with every celicitation an express statement that such contributions or grifts were not tax deductible? 10 If the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 10 If the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 11 Yes, * did the organization onlify the donor of the value of the goods or services provided? 12 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			1		'		
(gambling) winnings to prize winners? 2 Enter the number of employees reported on Form W3, Transential of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 3 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 1 and 2a is greater than 250, you may be required to e-file this return. (see instructions) 3a D did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? bif Yes, it filed a Form 990-ff for this year? If Wa, "provide an explanation in Schedule O the August and the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; but a sale and a sun interest in, or a signature or other authority over, a financial account in a foreign country; but have a sale account, securities account, or other financial account)? 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? 5b Was 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? 5c Desist the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). bif the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). bif the organization on include with every solicitation and party for goods and services provided to the payor? biff of the organization on include with every solicitation and party for which it was required to file Fo							
2a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, field for the calendar year ending with or within the year covered by this return by If at least one is reported on line 28, did the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file this return. (see instructions) 3a Did the organization have unnelled business gross income of \$1,000 or more during the year covered by this return? by If Yes, and tifled a Form 990-T for this year? If YNo, "provide an explanation in Schedule O 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; when the same of the foreign country; when the same of the foreign country; when the same of the foreign country is better the name of the foreign country; when the same of the foreign country; when the same of the foreign country is better than \$100,000 and the organization aparty to a prohibited tax shelter transaction? by If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? by If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? by If Yes, to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? consider that the same of the organization that it was or is a party to a prohibited tax shelter transaction? by If Yes, to line the same of the organization that it was or is a party to a prohibited tax shelter transaction? consider that the same of the organization and prohibited tax shelter transaction? by If Yes, to line the same of the organization that it was or is a party to a prohibited tax shelter transaction? consider that the same of the organization and the organization and prohibited tax shelter transaction? consider that the same of the organization	C		еропа	bie gaming		v	
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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) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? 5b If Yes, * has it filed a Form 990-T for this year? If *No.* provide an explanation in *Scheckle* O* 4a At any time during the celeradry 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)? b If Yes,* enter the name of the foreign country. c If Yes,* enter the name of the foreign country. b If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? c If Yes,* to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction? 6b 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? 7b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section \$170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7b If Yes,* indicate the number of Forms 8892 filed during the year a Did the organization, during the year, peay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7c If Ordine forms 8282? 7d If Yes,* indicate the number of Forms 8282 filed during the year a Did the organization, or a donor advised funds and section \$99(s) (3) supporting organizations. Did the supporting organizations maintaining	2a	· · ·	0-	Q			
Note. If the sum of lines is a and 2a is greater than 250, you may be required to e-flie this return. (see instructions) 3a					26	x	
38 bit the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? b if Yes,* has it flied a Form 990 Tor this year? if Yo," provide an explanation in Schedule O the 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)? 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. See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. b If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? c If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 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? b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? b If Yes,* did the organization notify the donor of the value of the goods or services provided? b If Yes,* did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? d If Yes,* indicate the number of Forms 8282 flied during the year Did the organization, during the year, pereituring, directly or indirectly, to pay premiums on a personal benefit contract? 7b Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7c X For contributions of cars, boats, airplanes, and other vehic	D			otions)	-20		
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		in res, enter the amount of tax-exempt interest received or accroed during the year	120	· · · · · · · · · · · · · · · · · · ·	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.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			ı
b	Enter the number of voting members that are independent	2		Ì
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Ì
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	İ		Ì
	of officers, directors or trustees, or key employees to a management company or other person?	3_		X
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			Ì
	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:			
а	The governing body?	8a	Х	
ь	Each committee with authority to act on behalf of the governing body?	8b	X	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	X	
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?	10b	X	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	X	
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this is done	12c	Х	
13	Does the organization have a written whistleblower policy?	13	Х	
14	Does the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
	Other officers or key employees of the organization	15b	Х	
-	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			***************************************
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
_	taxable entity during the year?	16a	•	Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation			
_	In joint venture arrangements under applicable federal tax law, and taken steps to safeguard 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)s only) availab	le for		
. •	public inspection. Indicate how you make these available. Check all that apply.			
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy,	and fine	ncial	
	statements available to the public.	IIIIG	, ,	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the organization of the person who possesses the books and records of the person who person of the person	ation:	•	
	ORGANIZATION - 301-519-0496			
	15948 DERWOOD ROAD, ROCKVILLE, MD 20855			
		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.

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours				osition all that apply)			Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional frustee	Officer		Highest compensated employee		from	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
TIM HENSLEY, APR								_		
PRESIDENT	2.00	X		X		_		0.	0.	0
RONALD E. KOEHLER, APR	1 00	J.						0.	0.	0
PRESIDENT ELECT MATT LEIGHNINGER	1.00	X		├	├—	-	H	U .	0.	
VICE PRESIDENT AT LARGE	1.00	X						0.	0.	0
STEPHANIE M. BATEMAN	1.00	A				1	\vdash			
VP OF DIVERSITY ENGAGEME	1.00	X						0.	0.	0
SANDY HUSK, PHD					-		Г			
VP AT LARGE-SUPT. OF SCH	1.00	X						0.	0.	0
JIM VAN DEVELDE										
DIRECTOR NORTHEAST	1.00	X						0.	0.	0
DEBRA Q. MARLOW										
DIRECTOR MIDEAST	1.00	X		<u> </u>			_	0.	0.	0
JOHN H. MERRILL	1 00								_	_
DIRECTOR SOUTHEAST	1.00	X		-	-	-	\vdash	0.	0.	0
MARY ELLEN MARNHOLTZ DIRECTOR NORTH CENTRAL	1.00	v						0.	0.	0
NICOLE KIRBY	1.00	^	-			┼	-			
DIRECTOR SOUTH CENTRAL	1.00	x		ł				0.	0.	0
MAUREEN WHEELER, APR	2,00	<u> </u>	_	 	<u> </u>	-	-			
DIRECTOR NORTHWEST	1.00	X						0.	0.	0
JIM CUMMINGS, APR										
DIRECTOR SOUTHWEST	1.00	X						0.	0.	0
RICHARD D BAGIN										
EXECUTIVE DIRECTOR	40.00			X	X	X		178,424.	0.	0
KAREN H KLEINZ						1				
ASSOCIATE DIRECTOR	40.00			X				109,776.	0.	0
				_		<u> </u>	_			
				-		-				
			L		<u> </u>	<u> </u>	l	<u> </u>		000 (coo

	(A) Name and title	(B) Average			(C Posi)			(D) Reportable	(E) Reportable		Fe	(F) timate	ed.
	Name and title	hours	1				app	ly)	compensation	compensation from related		am	ount other	
		week	Individual trustee or director	institutional trustee	Officer	кеу епріоуев	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	5)	comp fro orga and	oensa om the anizat I relat nizati	e ion ed
												<u>-</u>		
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1 b	Total Total number of individuals (including but	not limited to th	nose	liste	d at	oove	e) wt	10 re	288,200. ecceived more than \$100		0.[0. 2
3	compensation from the organization Did the organization list any former office	r. director or tru	stee	. ke	em	volar	vee.	or h	nighest compensated er	nplovee on	Γ		Yes	No
4	line 1a? If "Yes," complete Schedule J for For any individual listed on line 1a, is the s	such individual sum of reportab	le co	ompe	ensa	ition	anc	l oth	ner compensation from		,	3		Х
5	and related organizations greater than \$15 Did any person listed on line 1a receive or the organization? If "Yes," complete Sche	accrue compe	nsat	on f						ices rendered to	-	5	Х	х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest c the organization. NONE	ompensated in	depe	ende	nt c	ontr	acto	rs t	hat received more than	\$100,000 of comp	ensat	tion fi	om	
	(A) Name and busines	s address							(B) Description of s	ervices	Со	(C mper) isatio	n
								\dashv	,					
				-				+						
								\neg						
2	Total number of independent contractors													

Part VIII Statement of Revenue					OP LOPPI	C RELATION	S ASSUC.	32-0000	003 Page 9
Total Add lines 1s-1	Pa	rt VI	II Statement of Rever	nue			Related or	Unrelated	excluded from
1							, ,		sections 512,
2 a PROGRAM FEES 541900 486,314. 486,314. b PUBLICATIONS & SUBSCRI 511130 83,373. 83,373. c ADVERTISING 541800 25,375. 25,375. d CONFERENCE EXHIBITS 519100 4,825. f All other program service revenue 7 total. Add lines 2a2f 599,887. 3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties (i) Personal 5 Royalties (ii) Personal 5 Royalties (iii) Personal 5 Royalties (iii) Personal 5 Royalties (iii) Personal 6 a Gross Rents (iii) Personal 6 a Gross amount from sales of assets other than inventory 5 Less: cost or other basis and sales expenses (iii) Cher assets other than inventory 6 Royalties (iii) Cher assets other than inventory 6 Royalties (iii) Cher assets other than inventory 6 Royalties (iii) Cher assets other from fundraising events (not including \$ _ of contributions reported on line 10). See Part IV, line 18	<u></u>								513, or 514
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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 compl	ete column (A) but are		ete columns (B), (C), and	
	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	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	20,000.	20,000.		
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	326,127.	293,067.	28,229.	4,831.
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	235,760.	110,280.	125,480.	
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	31,059.	14,546.	16,513.	
9	Other employee benefits	31,059. 77,395.	58,287.	18,428.	680.
10	Payroll taxes	35,808.	25,225.	10,280.	303.
11	Fees for services (non-employees):				
а	Management				
b	Legal				
С	Accounting	25,220.		25,220.	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	37,140.	31,640.	5,500.	
12	Advertising and promotion				
13	Office expenses	16,417.	3,414.	13,003.	
14	Information technology	147,458.	118,746.	28,679.	33.
15	Royalties				
16	Occupancy	24,774.	17,991.	6,686.	97.
17	Travel	35,638.	35,557.	81.	
18	Payments of travel or entertainment expenses	·			
	for any federal, state, or local public officials	Ì			
19	Conferences, conventions, and meetings	64,105.	60,890.	3,215.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	29,599.		29,599.	
23	Insurance	6,255.	1,449.	4,806.	
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)		Ň		
а	BANK AND CREDIT CARD CH	19,976.	0.	19,976.	0.
ь	TEMPORARY HELP	285.	285.	0.	0.
c					
d					
e					
ť	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	1,133,016.	791,377.	335,695.	5,944.
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	İ			
	educational campaign and fundraising solicitation				
	and the second s				Form 990 (2009)

(B)

End of year

548.

109,706.

55,570.

45,446.

20,089.

182,396.

395,318.

809,073.

164,423.

178,417.

342,840.

441,913. 24,320.

27

28

29

30

31

32

33

24,503.

486,933.

827,395.

Form 990 (2009) NATIONAL SCHOOL PUBLIC RELATIONS ASSOC. Part X Balance Sheet (A) Beginning of year 532. 1 1 Cash - non-interest-bearing 115,432. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 32,471. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 Notes and loans receivable, net Assets 49,777. Inventories for sale or use 8 14,757. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 500,993. basis. Complete Part VI of Schedule D 10a 318,597. 216,783. b Less: accumulated depreciation 10b 10c 11 11 Investments · publicly traded securities 397,643. 12 12 Investments - other securities. See Part IV, line 11 13 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 827,395. 16 Total assets. Add lines 1 through 15 (must equal line 34) 73,144. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 267,318. 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 25 25 Other liabilities. Complete Part X of Schedule D 340,462. 26 26 Total liabilities. Add lines 17 through 25 X and complete Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 462,430.

> 809,073. Form **990** (2009)

466,233.

27

28

30

31

32

33

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Paid in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Organizations that do not follow SFAS 117, check here

Form	990 (2009)	NATIONAL	SCHOOL	PUBLIC	RELATIONS	ASSOC.	52-6060	603	Pag	ge 12
Par	t XI Financial S	Statements and R	eporting	· · · ·						
									Yes	No
1	Accounting method	used to prepare the Fo	orm 990: 🗀	Cash X	Accrual O	her		· · · · · ·		
		hanged its method of a			or checked "Other,"	explain in Schedu	ile O.			
2a	Were the organization	on's financial statement	s compiled or	reviewed by a	n independent acco	ountant?		2a		Х
b	Were the organization	on's financial statement	s audited by a	an independen	t accountant?			2b	X	
С	If "Yes" to line 2a or	2b, does the organizat	ion have a co	mmittee that a	ssumes responsibili	ty for oversight of	the audit,			
	review, or compilation	on of its financial staten	nents and sele	ection of an inc	dependent accounta	int?		2c	X	
	If the organization c	hanged either its overs	ght process o	r selection pro	cess during the tax	year, explain in Se	chedule O.			
d	If "Yes" to line 2a or	2b, check a box below	to indicate w	hether the fina	ncial statements for	the year were iss	ued on a	1		
	consolidated basis,	separate basis, or both	:							
	Separate basi	s X Consolidated	basis	Both consoli	dated and separate	basis				
3a	As a result of a fede	ral award, was the orga	ınızatıon requi	red to undergo	an audit or audits	as set forth in the	Single Audit			
	Act and OMB Circul	ar A-133?						3a		X
b	If "Yes," did the orga	anization undergo the r	equired audit	or audits? If th	e organization did n	ot undergo the re	quired audit			
	or audits, explain wh	ny in Schedule O and d	escribe any st	ens taken to u	ndergo such audits			3b		

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public

Name of the organization

Employer identification number

			NATIONA	L SCHOOL PUE	BLIC R	ELATI	ONS A	ssoc.		52	-6060	603	
Part		Reason	for Public Char	ity Status (All organi	zations mu	st complet	te this part	:.) See inst	tructions.				
he org	anız	ation is not a	private foundation	because it is: (For lines	1 through	11, check	only one b	ox.)					
1	_			s, or association of chur									
2] ,	A school des	cribed in section 17	70(b)(1)(A)(ii). (Attach Sc	hedule E.)								
3] ,	A hospital or	a cooperative hospi	tal service organization	described	ın section	170(b)(1)	(A)(iii).					
4] ,	A medical res	search organization	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(ii	ii). Enter th	ne hospital	's nam	ıe,
		city, and stat	e:					_			_		
5] ,	An organizatı	on operated for the	benefit of a college or u	niversity o	wned or op	perated by	a governi	mental uni	t describe	d in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)									
6] ,	A federal, sta	ite, or local governm	ent or governmental un	t describe	d ın sectic	n 170(b)(1)(A)(v).					
7	_			eives a substantial part					r from the	general p	ublic desc	nbed i	in
	;	section 170(b)(1)(A)(vi). (Comple	ete Part II.)									
8] ,	A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9 X] ,	An organizati	on that normally rec	eives: (1) more than 33	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, an	d gross re	ceipts	from
		activities rela	ted to its exempt fu	nctions - subject to cert	ain excepti	ons, and (2) no more	than 33 1	/3% of its	support f	rom gross	invest	ment
				axable income (less sec									
	;	See section	509(a)(2). (Complete	e Part III.)									
10 🗀] ,	An organizati	on organized and o	perated exclusively to te	st for publ	ic safety. S	See sectic	n 509(a)(4	1).				
11 🗀] ,	An organizati	on organized and o	perated exclusively for t	he benefit	of, to perfo	orm the fui	nctions of,	or to carr	y out the p	ourposes o	of one	or
		more publicly	supported organization	ations described in sect	on 509(a)(1) or section	on 509(a)(2	2). See se c	ction 509(a)(3). Che	ck the box	that	
				organization and comp									
_	_	a 🔲 Type I		• •	с 📖 Тур		•	-			Type III - (
е 📖				at the organization is not									ın
				than one or more publicl						9(a)(1) or s	ection 509)(a)(2).	
f		lf the organiz	ation received a write	tten determination from	the IRS th	at it is a Ty	pe I, Type	II, or Type	e III				
	:	supporting o	rganization, check ti	his box									L
9				organization accepted a									
	1	(i) A perso	n who directly or inc	directly controls, either a	lone or tog	jether with	persons o	lescribed i	ın (iı) and ((III) below,		Yes	No
		_		upported organization?							11g(i)	├	
			•	n described in (i) above?							11g(ii)		
			•	person described in (i)							11g(iii)	<u> </u>	<u>. </u>
h		Provide the f	ollowing information	about the supported or	ganization	(s).							
				/III) Type of	L		17.7.		(11)	****			
		f supported	(II) EIN	(III) Type of organization		organization sted in your			Torganizati	on in col l	(vil) Ar		f
0	rgar	iization		(described on lines 1-9		document?		r support?	(i) organiz U S	red in the i	sup	port	
				above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
				(800 11181120118119))	103	110	103		103	+			
					 	 			<u> </u>	 			
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					<u></u>								
						 				 			_
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otal													

(Complete only if you check	-			y(b)(1)(A)(IV) an	G 170(D)(1)(A)(\	/i)
Section A. Public Support		, , , , , , , , , , , , , , , , , , , ,				
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not		:				
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to		1				
the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions						
by each person (other than a						
governmental unit or publicly						
supported organization) included						
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)						
6 Public support. Subtract line 5 from line 4						
Section B. Total Support	- 	,	T			·
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4				ļ		
8 Gross income from interest,		!				
dividends, payments received on				1 ,		
securities loans, rents, royalties						
and income from similar sources						
9 Net income from unrelated business	i	†		·		
activities, whether or not the						
business is regularly carried on						
10 Other income. Do not include gain						
or loss from the sale of capital	•					
assets (Explain in Part IV.)						·
11 Total support. Add lines 7 through 10		<u> </u>	1	<u></u>	1	L
12 Gross receipts from related activities	•	•			12	
13 First five years. If the Form 990 is for	•	s first, second, thi	rd, fourth, or fifth t	tax year as a section	on 501(c)(3)	_
organization, check this box and sto Section C. Computation of Pub		rcentage			· · · · · · ·	
14 Public support percentage for 2009			column (fl)		14	%
15 Public support percentage from 200	•		33.3 (1))		15	%
16a 33 1/3% support test - 2009.If the	•	· ·	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
stop here. The organization qualifies	-				,	▶□
b 33 1/3% support test - 2008.if the		-		l line 15 is 33 1/3%	or more, check th	is box
and stop here. The organization qua	-					▶□
17a 10% -facts-and-circumstances te	•			e 13, 16a, or 16b, a	and line 14 is 10%	or more,
and if the organization meets the "fa	-					
meets the "facts-and-circumstances					•	▶□
b 10% -facts-and-circumstances te					17a, and line 15 is	 10% or
more, and if the organization meets						
organization meets the "facts-and-ci						▶ 🗀
18 Private foundation. If the organization						s >
					edule A (Form 990	

Schedule A (Form 990 or 990 EZ) 2009 NATIONAL SCHOOL PUBLIC RELATIONS ASSOC. 52-6060603 Page 3 Part III | Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I) Section A. Public Support (e) 2009 (f) Total Calendar year (or fiscal year beginning in) (a) 2005 **(b)** 2006 (c) 2007 (d) 2008 1 Gifts, grants, contributions, and membership fees received. (Do not 396,637. 422,221. 443,568. 450,383 2112000. 399,191. include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the 4357513. 599,887. 1087000. 987,437. 1018820. 664,369. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or busmess under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 1441041. 1107937. 1050270. 6469513. 1486191. 1384074. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 0. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0. amount on line 13 for the year Ō. c Add lines 7a and 7b 6469513 8 Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning in) (d) 2008 (e) 2009 (f) Total (a) 2005 (b) 2006 (c) 20071107937. 1050270 6469513. 1486191. 1384074. 1441041. 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties 29,422. 36,523. 27,852 26,158 21,900 141,855. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 21,900 141,855. 29,422. 36,523. 27,852. 26,158. c Add lines 10a and 10b Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 1515613. 1420597. 1468893. 1134095. 1072170. 13 Total support (Add tines 9, 10c, 11, and 12) 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 97.85 15 % 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) $97.\overline{91}$ 16 % 16 Public support percentage from 2008 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 2.15 17 % 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) 2.09 18 Investment income percentage from 2008 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not $\triangleright [X]$ more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Schedule D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

NATIONAL SCHOOL PUBLIC RELATIONS ASSOC

Employer identification number 52-6060603

Par	t I Organizations Maintaining Donor Advise		s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor adv	ised funds
•	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a	•	
•	for charitable purposes and not for the benefit of the donor o		-
	impermissible private benefit?	donor advisor, or for any other purpose	Yes No
Par	t II Conservation Easements. Complete if the org	panization answered "Yes" to Form 990	
1	Purpose(s) of conservation easements held by the organization		7 (117) 1110 77
•	Preservation of land for public use (e.g., recreation or p		istorically important land area
	Protection of natural habitat		rtified historic structure
	Preservation of open space	Fiese valion of a cer	Titled Historic Structure
2		ind announcing contribution in the form	of a concentration assembnt on the last
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form	i oi a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
_	Total number of conservation easements		2a
a _			2b
b	Total acreage restricted by conservation easements	usture included in (a)	
C	Number of conservation easements on a certified historic structure of conservation easements in aluded in (c) accounted	• • •	2c 2d
d	Number of conservation easements included in (c) acquired a		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by tr	ne organization during the tax
_	year -		
4	Number of states where property subject to conservation eas		:
5	Does the organization have a written policy regarding the per		Yes No
e	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) abov	e satisfy the requirements of section 17	∪(⊓)(4)(B)(I)
^	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organizat	ion's linancial statements that describes	s the organization's accounting for
Da.	conservation easements. III Organizations Maintaining Collections of	Art Historical Treasures or (Other Similar Assets
	Complete if the organization answered "Yes" to Form		Strict Chillian Account
	Complete in the organization answered Tree to Form	000,1 41(17,1110 0.	
10	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and	halance sheet works of art, historical
10	treasures, or other similar assets held for public exhibition, ec		
			ublic service, provide, in Fart XIV, the text of
	the footnote to its financial statements that describes these i		and about works of out biotomical transcures
b	If the organization elected, as permitted under SFAS 116, to	•	
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	e, 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 treat		aı gaın, provide
	the following amounts required to be reported under SFAS 1	to relating to these items:	.
a	Revenues included in Form 990, Part VIII, line 1		\$
þ	Assets included in Form 990, Part X		▶ \$

Pert till Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)			L SCHOOL P							60603	
coheck all that apply : a	Par	t III Organizations Maintaining C	ollections of A	rt, His	torical T	reasures,	or Othe	er Simila	<u>ar Asse</u>	ts (contin	.red)
a Public exhibition b Schalary research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Parl XIV. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Parl XIV. 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Parl XIV. 5 During the year, did the organization of receive donations of art, histonical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? The part XI Secret wand Custodial Arrangements. Complete forganization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 2.0. Tal. Is the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 2.1. The second plainance of the part of the organization answered "Yes" to Form 990, Part IV, line 10. The Second plainance of the organization include an amount on Form 990, Part X, line 2.1? The Beginning of year balance of the organization answered "Yes" to Form 990, Part IV, line 10. The Beginning of year balance of the organization answered "Yes" to Form 990, Part IV, line 10. The Beginning of year balance of the organization answered "Yes" to Form 990, Part IV, line 10. The Beginning of year balance of the organization answered "Yes" to Form 990, Part IV, line 10. The Beginning of year balance of the organization answered "Yes" to Form 990, Part IV, line 10. The Beginning of year balance of the organization that are held and administered for the organization of the organization section of the organization that are held and administered for the organization of the organization section of the organization of the organization of the organization of the pass ginnestment funds. The The Theorems of the Part XIV the	3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of th	e following the	at are a si	ıgnıficant ı	use of its	collection	tems
b Scholarly research e Other Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be seld to raise funds rather than to be maintained as part of the organization collection?		(check all that apply):									
c	а	Public exhibition	C			change progr	ams				
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be solicit or raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 1b If "Yes," explain the arrangement in Part XIV and complete the following table: 1	b	Scholarly research	•	• 🔲	Other						
5 During the year, did the organization solient or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part M Secrow and Custodial Arrangements. Complete forganization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is Is the organization an aspect, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table: Beginning balance 1d	C	Preservation for future generations									
to be sold to rase funds rather than to be maintained as part of the organization collection?	4	Provide a description of the organization's co	ollections and expla	ın how th	ney further	the organizat	ion's exe	mpt purpo	se in Pari	XIV.	
Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X IV Yes No If "Yes," explain the arrangement in Part XIV and complete the following table: □ Beginning balance □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year □ Distributions during the year (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (d) Three years back (e) Four years back (e) Four years back (e) Turne years back (e) Four years back (e) Four years back (e) Four years back (e) Four years back (e) Turne years back (e) Four years	5	During the year, did the organization solicit o	r receive donations	of art, hi	storical tre	asures, or oth	ner sımılar	assets	_	,	
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year 1 1e 1 1g 2 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds if I Part IV	T ===										No_
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	Pa			lete if org	ganızation	answered "Ye	es" to For	m 990, Pa	rt IV, line	9, or	
on Form 990, Part X? b if "Yes," explain the airrangement in Part XIV and complete the following table: Amount Beginning balance d Additions during the year e Distributions during the year f Ending balance bif "Yes," explain the airrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Fart V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance (a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back		·	· · · · · · · · · · · · · · · · · · ·								
b If "Yes," explain the arrangement in Part XIV and complete the following table: C Beginning balance d Additions during the year e Distributions during the year 1 Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. [a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back or No the investment earnings, gains, and losses of Christian or scholarships c Net investment earnings, gains, and losses of Christian or scholarships d Arroninstrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasiendowment 5 Permanent endowment 5 % 6 Term endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (i	1a	Is the organization an agent, trustee, custode	an or other interme	diary for	contribution	ons or other a	ssets not	ıncluded	_	1	
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2 Did the organization include an amount on Form 990, Part X, line 217 2 Did the organization include an amount on Form 990, Part X, line 217 2 Did the organization include an amount on Form 990, Part X, line 217 2 Did the organization include an amount on Form 990, Part X, line 217 3 Did the organization include an amount on Form 990, Part X, line 217		on Form 990, Part X?								」Yes	L No
c Beginning balance d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 bif Yes, explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. [a) Current year (b) Pnor year (c) Two years back (d) Three years back (e) Four years back (d) Contributions c Net investment earnings, gains, and losses d Grants or scholarships c Net reveal the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	Ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table:						
d Additions during the year e Distributions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 21? Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships c Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶										Amount	
Ending balance Tending bal	C	Beginning balance .	•					1c			
Did the organization include an amount on Form 990, Part X, line 21? Did the organization include an amount on Form 990, Part X, line 21? Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. A Beginning of year balance (a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years back	d	Additions during the year						1d			
2a Did the organization include an amount on Form 990, Part X, line 21? b If 'Yes,' explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered 'Yes' to Form 990, Part IV, line 10. 1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	е	Distributions during the year						1e			
Bill *Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete if the organization answered *Yes* to Form 990, Part IV, line 10.	f	Ending balance						1f			
Endowment Funds, Complete if the organization answered "Yes" to Form 990, Parl IV, line 10. Comparison Comparison Complete if the organization answered "Yes" to Form 990, Parl IV, line 10. Comparison		•		21?					L	Yes	∟ No
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back (d) Three years back (e) Four years back (e) F											
Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	Pa	TV Endowment Funds. Complete				. 1					
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶			(a) Current year	(b) F	rior year	(c) Two yea	ars back	(d) Three y	ears back	(e) Four y	ears back
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	1a	Beginning of year balance								··	
d Grants or scholarships e Other expenditures for facilities and programs 1 Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	Ь	Contributions									
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶				ļ					*******	*** *********	******
and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	d	Grants or scholarships									
f Administrative expenses g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶	е	Other expenditures for facilities				ĺ					
g End of year balance 2 Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment ▶		and programs		ļ							
Provide the estimated percentage of the year end balance held as: a Board designated or quasi-endowment	f	•		ļ							·····
a Board designated or quasi-endowment	9	·		L			L				
b Permanent endowment	2		r end balance held :	as:							
c Term endowment ▶	а			%							
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land b Buildings 225,244. 76,489. 148,755. c Leasehold improvements d Equipment 227,301. 121,474. 5,827. e Other Other	b										
Yes No (i) unrelated organizations 3a(i)	C		• •								
(ii) unrelated organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other depreciation (c) Accumulated depreciation 1a Land b Buildings 225,244. 76,489. 148,755. c Leasehold improvements d Equipment e Other Other	3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held	and administ	ered for t	he organiz	ation		
(ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value Buildings 225,244. 76,489. 148,755. c Leasehold improvements d Equipment 217,301. 121,474. 5,827. e Other		-									es No
b If "Yes" to 3a(II), are the related organizations listed as required on Schedule R? 4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value Buildings 225,244. 76,489. 148,755. c Leasehold improvements d Equipment 2127,301. 121,474. 5,827. e Other											
4 Describe in Part XIV the intended uses of the organization's endowment funds. Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 225,244. 76,489. 148,755. c Leasehold improvements d Equipment 217,301. 121,474. 5,827. e Other					_						
Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10. Description of investment (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation	ь									3b	
Description of investment	4							•			
basis (investment) basis (other) depreciation 1a Land 225,244. 76,489. 148,755. c Leasehold improvements 127,301. 121,474. 5,827. e Other 148,448. 120,634. 27,814.	Fai					· ·					
1a Land b Buildings 225,244. 76,489. 148,755. c Leasehold improvements 127,301. 121,474. 5,827. e Other 148,448. 120,634. 27,814.		Description of investment					1 .		ed	(d) Book	value
b Buildings c Leasehold improvements d Equipment e Other 225,244. 76,489. 148,755. 127,301. 121,474. 5,827. 148,448. 120,634. 27,814.			pasis (investi	ment)	Dasi	s (otner)	der	preciation			
c Leasehold improvements d Equipment 127,301. 121,474. 5,827. e Other 148,448. 120,634. 27,814.						25 244		76 4	-	140	755
d Equipment 127,301. 121,474. 5,827. e Other 148,448. 120,634. 27,814.		_				<u> </u>		/0,4	9.	148	, /33.
e Other 148,448. 120,634. 27,814.		•			1	27 201	1 -	121 4	74	E	027
	e		15 222 5					120,0	34.	182	396

Schedule D (Form 990) 2009

Schedule D (Form 990) 2009 NATIONAL SC	HOOL PUBLIC R	ELATIONS AS	SOC. 52	-6060603	Page 3
Part VII Investments - Other Securities. Se					
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua or end-of-year mar		•
Financial derivatives					
Closely-held equity interests					
Other					
CERTIFICATE OF DEPOSIT	59,617.		AR MARKET		
EQUITY SECURITIES	118,982.		AR MARKET		
DEBT SECURITIES	216,719.	END-OF-YE	AR MARKET	VALUE	· · · -
					
		 			
					•
Total. (Col (b) must equal Form 990, Part X, col (B) line 12)	395,318.			· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments - Program Related. Se	ee Form 990, Part X, line 1	3			
(a) Description of investment type	(b) Book value		(c) Method of value		
tel becomption of investment type		Cost	or end-of-year mar	ket value	
					
					
					
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) ▶	-				
Part IX Other Assets. See Form 990, Part X, line					
(a)	Description			(b) Book v	alue
					
		· 			
					
		·			
Total. (Column (b) must equal Form 990, Part X, col (B) line			<u> </u>		
Part X Other Liabilities. See Form 990, Part X, 1. (a) Description of liability	line 25.	(b) Amount	,, , , , , , , , , , , , , , , , , , ,		
<u> </u>		(b) Amount			
Federal income taxes	-				
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.)				

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

	dule D (Form 990) 2009 NATIONAL SCHOOL PUBLIC RELA				5060603 Page 4
Pa	TXI Reconciliation of Change in Net Assets from Form 990 to	Audited Finance	ial State	ment	<u> </u>
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1		1,072,170.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		1,133,016.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		-60,846.
4	Net unrealized gains (losses) on investments	Ĺ	4		40,147.
5	Donated services and use of facilities .	<u> </u>	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		40,146.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	d 9	10		-20,700.
Pa	t XII Reconciliation of Revenue per Audited Financial Stateme		ue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements		-	1	1,113,957.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a 40	0,147.		
ь	Donated services and use of facilities	2b			
	Recoveries of prior year grants	2c		1	
ď	Other (Describe in Part XIV.)		1,640.		
	Add lines 2a through 2d	LEEL	· · · · · · · · · · · · · · · · · · ·	2e	41,787.
3	Subtract line 2e from line 1			3	41,787. 1,072,170.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	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	- 10		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	1,072,170.
	rt XIII Reconciliation of Expenses per Audited Financial Statement	ents With Expe	nses per		
1	Total expenses and losses per audited financial statements		•	1	1,137,253.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
_	Donated services and use of facilities	2a			
a		2b		1 1	
	Prior year adjustments Other leader	2c		1 1	
_	Other losses Other (Describe in Part XIV.)		4,237.	1	
d	,	20	1/20/	2e	4,237.
	Add lines 2a through 2d			3	1,133,016.
3	Subtract line 2e from line 1			-	2/200/0200
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a			
	Investment expenses not included on Form 990, Part VIII, line 7b			1 1	
	Other (Describe in Part XIV.)	4b		40	0.
	Add lines 4a and 4b			4c	1,133,016.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			3	1/133/010.
	rt XIV Supplemental Information	U. b	4 IV 1 1 4		Shi David V. Jian di David
X, lin	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp $RT\ XII\ LINE\ 2D\ OTHER\ REVENUE\ $1,640\ CONTRIBUTION CONTRIBUTI$	olete this part to prov	ride any ad	ditional	information.
OR	GANIZATION FOUNDATION FOR THE ADVANCEMENT (OF EDUCATION	ON CON	SOL	IDATED FOR
FI	NANCIAL STATEMENT PURPOSES BUT NOT FOR FOR	M 990 PURP	OSES.		
PA	RT XIII LINE 2D OTHER EXPENSES \$4,237 EXPE	NSES OF AF	FILIAT	ED	
OR	GANIZATION FOUNDATION FOR THE ADVANCEMENT (OF EDUCATION	ON CON	SOL	IDATED FOR
FI	NANCIAL STATEMENT PURPOSES BUT NOT FOR FOR	M 990 PURP	OSES.		

Employer identification number 2009 Open to Public Inspection OMB No 1545-0047 Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ► Attach to Form 990. Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE 1 (Form 990)

Schodule I (Form 990) 2009				uctions for Form 990	see the Instructions	ction Act Notice	THA For Privacy Act and Paperwork Reduction Act Notice, see the Instr
•7	:	:			rganizations	ind government o	 2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations
		:					
PROVIDES LEADERSHIP FOR COMMUNICATION PROJECT.			0.	10,000.	501 C (3)		AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATORS - 801 QUINCY ST, STE 700 - ARLINGTON, VA 22203
PROVIDE A SCHOLARSHIP FOR A SCHOOL DISTRICT THAT DEMONSTRATES LEADERSHIP THROUGH COMMUNICATION.			0.	10,000.			TWIN RIVERS UNIFIED SCHOOL DISTRICT - 5115 DUDLEY BLVD BAY D - SACRAMENTO, CA 95834
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	(d) Amount of cash grant	(c) IRC section if applicable	(p) EIN	1 (a) Name and address of organization or government
IV, line 21, for any al space is needed	ns in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed	anization answered "Y art IV and Schedule I-1	omplete if the organ \$5,000. Use Pa	• United States. C	d Organizations in the s box if no one recipier	Governments an 55,000. Check this	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Check this box if no one recipient that received more than \$5,000. Check this box if no one recipient that received more than \$5,000. Check this box if no one recipient that received more than \$5,000.
X Yes No			d States.	funds in the Unite	toring the use of grant	stance? scedures for mont	criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.
	stance, and the select	y for the grants or ass	grantees' eligibility	or assistance, the	e amount of the grants	o substantiate the	1 Does the organization maintain records to substantiate the amount of the grants or assistance, and the selection
52-6060603				ONS ASSOC	BLIC RELATIONS	SCHOOL PUBLIC and Assistance	NATIONAL SCHOOL I Part i General Information on Grants and Assistance

Schedule I (Form 990) 2009

932102 02-02-10

Page 2

52-6060603

NATIONAL SCHOOL PUBLIC RELATIONS ASSOC.

Schedule I (Form 990) 2009

Part III

SCHEDULE J (Form 990)

Compensation Information

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

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

► See separate instructions.

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

NATIONAL SCHOOL PUBLIC RELATIONS ASSOC.

Attach to Form 990.

Employer identification number 52-6060603

P	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,	, ,,,,,		
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments X Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b_		X
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	Compensation committee X Written employment contract	-		
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a	_	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a	-	X
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			.,
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		X
8				,
_	initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4058.6(a)2	l a	ı	1

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

Schedule J (Form 990) 2009

Part # Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. Schedule J (Form 990) 2009

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	9	Q	(9)	9
		(-)			Retirement and	Nontaxable	Total of columns	Compensation
(A) Name		(i) Base compensation	(ii) Bonus & incentive	(iii) Other reportable	other deferred compensation	benefits	(B)(i)-(D)	reported in prior Form 990 or
			Compensation	Compensation				Form 990-EZ
	Θ	178,424.	0	0	0	0	178,424.	0
RICHARD D BAGIN	(ii)	0	0	0	0	0	0.	0
	ω							
	(ii)							:
	(i)							
	(ii)							
	Ξ							
:	(3)							
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Schedule J (Form 990) 2009

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

NATIONAL SCHOOL PUBLIC RELATIONS ASSOC.

Employer identification number 52-6060603

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OBJECTIVES, ACCOMPLISHMENTS AND NEEDS OF THE SCHOOLS OF THE UNITED
STATES. THE ASSOCIATION ACCOMPLISHES ITS PURPOSES: (1) BY DEVEOPING
MATERIALS THAT ASSIST THE SCHOOLS OF THE NATION IN BUILDING BOTH AN
INCREASED PUBLIC UNDERSTANDING OF THE ROLE OF EDUCATION AND AN
INCREASED AWARENESS, KNOWLEDGE AND UNDERSTANDING OF CURRENT MANAGEMENT
PRACTICES AND EDUCATIONAL DEVELOPMENTS; (2) BY PLACING BEFORE THE
PUBLIC FACTS AND VIEWPOINTS WHICH WILL LEAD TO A BETTER UNDERSTANDING,
APPRECIATION, AND SUPPORT OF THEIR SCHOOLS; AND (3) BY ENCOURAGING THE
USE OF SOUND PUBLIC RELATIONS PROCEDURES BY ALL THOSE AT WORK IN THE
SCHOOLS OF THE UNITED STATES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
NATION IN BUILDING BOTH AN INCREASED PUBLIC UNDERSTANDING OF THE ROLE
OF EDUCATION AND AN INCREASED AWARENESS, KNOWLEDGE AND UNDERSTANDING OF
CURRENT MANAGEMENT PRACTICES AND EDUCATIONAL DEVELOPMENTS; (2) BY
PLACING BEFORE THE PUBLIC FACTS AND VIEWPOINTS WHICH WILL LEAD TO A
BETTER UNDERSTANDING, APPRECIATION, AND SUPPORT OF THEIR SCHOOLS; AND
BELLEN CHAPTER THE LEGISLANT LEGISLANT OF THE CONTROL OF THE CONTR
(3) BY ENCOURAGING THE USE OF SOUND PUBLIC RELATIONS PROCEDURES BY ALL
(3) BY ENCOURAGING THE USE OF SOUND PUBLIC RELATIONS PROCEDURES BY ALL
(3) BY ENCOURAGING THE USE OF SOUND PUBLIC RELATIONS PROCEDURES BY ALL
(3) BY ENCOURAGING THE USE OF SOUND PUBLIC RELATIONS PROCEDURES BY ALL THOSE AT WORK IN THE SCHOOLS OF THE UNITED STATES.

FORM 990, PART VI, SECTION A, LINE 7A: ANNUALLY THE MEMBERSHIP ELECTS THE

NEW MEMBERS TO THE BOARD OF DIRECTORS.

Schedule O (Form 990) 2009

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009
Open to Public Inspection

Name of the organization

NATIONAL SCHOOL PUBLIC RELATIONS ASSOC.

Employer identification number 52-6060603

Schedule O (Form 990) 2009

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS FORWARDED TO THE
PRESIDENT OF THE BOARD OF DIRECTORS FOR REVIEW AND FOR REPORTING TO THE
BOARD OF HIS FINDINGS AND HIS APPROVAL OF THE FILING OF THE FORM 990.
FORM 990, PART VI, SECTION B, LINE 12C: CONFLICT OF INTEREST IS REVIEWED
ANNUALLY IN NOVEMBER AT THE FIRST BOARD MEETING AND DURING THE YEAR WHEN A
NEW KEY EMPLOYEE IS HIRED. COMPLIANCE IS ENFORCED BY THE EXECUTIVE
DIRECTOR AND IS PART OF NSPRA'S POLICY MANUAL
FORM 990, PART VI, SECTION B, LINE 15: ANNUALLY AT THE LAST BOARD MEETING
OF EACH FISCAL YEAR THE BOARD OF DIRECTORS REVIEW THE SALARY AND FRINGE
BENEFIT DATA OF COMPARABLE ORGANIZATIONS, EVALUATES THE PERFORMANCE OF THE
EXECUTIVE DIRECTOR AND ESTABLISH A SALARY FOR EXECUTIVE DIRECTOR FOR THE
NEXT FISCAL YEAR. IN ADDITION THE BOARD OF DIRECTORS AT THE SAME MEETING
REVIEWS THE SALARIES PERFORMANCE AND ESTABLISHES THE BASIS OF SALARIES FOR
THE NEXT FISCAL YEAR.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION'S GOVERNING
DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE
AVAILABLE UPON REQUEST AT NSPRA'S OFFICE AND A COPY CAN BE OBTAINED FOR THE
COST OF
REPRODUCTION.
FORM 990 PAGE 12 XI, LINE 2C

THERE HAS NOT BEEN ANY CHANGE IN THE AUDIT COMMITTED ROLE IN ASSUMING

SCHEDULE O

Department of the Treasury Internal Revenue Service

(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.

2009
Open to Public Inspection

Employer identification number Name of the organization 52-6060603 NATIONAL SCHOOL PUBLIC RELATIONS ASSOC. THE OVERSIGHT OF THE AUDIT REPORT OF THE INDEPENDENT AUDITOR.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2009 Open to Public Inspection

OMB No 1545-0047

Schedule R (Form 990) 2009 **Employer identification number** NATIONAL SCHOOL PUBLIC RELATIONS ASSOCIATION Direct controlling Direct controlling 52-6060603 entity entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) End-of-year assets status (if section NOT A PRIVATE Public charity 501(c)(3)) **e** PDN ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. Exempt Code Total Income 501 (C) (3) section D ► See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) SCHOOL PUBLIC RELATIONS ASSOC. LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. TRAINING AWARDS TO INCREASE UNDERSTANDING OF EDUCATION ▶ Attach to Form 990. Primary activity Primary activity **@** 54-1418962, 15948 DERWOOD ROAD, ROCKVILLE, FOUNDATION FOR ADVANCEMENT OF EDUCATION NATIONAL Name, address, and EIN Name, address, and EIN of related organization of disregarded entity Name of the organization Department of the Treasury Internal Revenue Service 20855 Part # Part Ð

52-6060603

Page 2

Schedule R (Form 990) 2009 NATIONAL SCHOOL PUBLIC RELATIONS ASSOC.

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(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)		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes No	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing partner?
								:		
Part IV Identification of Related Orgonizations treated as a cor	Identification of Related Organizations Taxable as a Corporation or Trust (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	soration or year.)	Frust (Complete if t	he organization	on answered "Ye	es to Form 99	30, Part IV, lin	e 34 because i	t had one or more	related
(a) Name, address, and EIN of related organization	<u>Z</u> c	d d	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(C corp, S corp, or trust)		(f) Share of total income	(g) Share of Fend-of-year assets	(h) Percentage ownership
		 								
932162 07-21-10			33					Š	Schedule R (Form 990) 2009	990) 2009

Page 3

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, or 36.)

Note Complete line 1 if any entity is listed in Parts II III or IV of this schedule		Yes No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		-
a Receipt of (i) interest (ii) annutties (iii) royalties or (iv) rent from a controlled entity		Ta X
b Gift, grant, or capital contribution to other organization(s)		1b
c Gift, grant, or capital contribution from other organization(s)		1c X
		×
		†
e Loans or loan guarantees by other organization(s)		1e A
f Sale of assets to other organization(s)		14 X
Purchase of assets from other organization(s)		T X
	•	
n Exchange of assets	:	
i Lease of facilities, equipment, or other assets to other organization(s)		j.
		-
j Lease of facilities, equipment, or other assets from other organization(s)		1j X
k Performance of services or membership or fundraising solicitations for other organization(s)		1k X
Performance of services or membership or fundraising solicitations by		1 X
m Sharon of facilities acuitoment mailton lists or other assets		×
		╁
n Sharing of paid employees	•	Ju uL
• Rembursement paid to other organization for expenses		10 X
p Reimbursement paid by other organization for expenses		1 ₀ ×
	•	
		×
		1
r Other transfer of cash or property from other organization(s)		1r A
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	saction thresholds.	
(e)	(9)	(5)
Name of other organization(s)	Transaction	Amount involved
	(1 m) and (1	
(1) HOUSED WITHIN NSPRA NO MONETARY EXCHANGE	М	0
(2) REIMBURSEMENT OF EXPENSES INCURRED BY NSPRA FOR FEA	Д	1,936.
A1		
(4)		
(9)		
34	Sche	Schedule R (Form 990) 2009

3 Page 4

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.) Part VII 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)	(9)	(0)	9	(e)	£	(b)	(£)
Name, address, and EIN of entity	Primary activity	nicile	Are all partners section 501(c)(3)	Share of end-of- year assets	- N	Code V-UBI amount in box 20	9 2 3
			Yes No			Form 1065)	1
							_
							_
					·		
					_		
							<u>.</u>
					-		
							- -
						Schedule R (Form 990) 2009	n 990) 2009

Form **8868**

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

OMB No. 1545-1709

Internal Revenue S	ervice	► File a separate application for each return.				
 If you are f 	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box					
		n Additional (Not Automatic) 3-Month Extension, complete only Part II (on pag Inless you have already been granted an automatic 3-month extension on a prev			_	
Part I Auto	matic 3-	Month Extension of Time. Only submit original (no copies needed).	•		_	
		o file Form 990-T and requesting an automatic 6-month extension - check this b	ox and com	plete	_	
Part I only	-			` ▶ ∟	╛	
All other corpo time to file inco		fincluding 1120-C filers), partnerships, REMICs, and trusts must use Form 76 eturns	004 to requ	uest an extension	of	
one of the ref electronically i returns, or a co	turns not if (1) you omposite	. Generally, you can electronically file Form 8868 if you want a 3-month autoed below (6 months for a corporation required to file Form 990-T). However, want the additional (not automatic) 3-month extension or (2) you file Forms or consolidated From 990-T. Instead, you must submit the fully completed and on the electronic filing of this form, visit www.irs.gov/efile.and.click.on.e-file.for.C.	er, you car 990-BL, 60 I signed pag	nnot file Form 886 069, or 8870, grou ge 2 (Part II) of For	88 up	
Type or	Name of	Exempt Organization	Employer	identification number	_	
print	NATIO	NAL SCHOOL PUBLIC RELATIONS ASSOCIATION	52-6060	0603		
· .		street, and room or suite no. If a P.O. box, see instructions				
File by the due date for	15948 DERWOOD ROAD					
filing your		or post office, state, and ZIP code. For a foreign address, see instructions.			_	
return See instructions		ILLE, MD 20855				
Check type o	f return t	o be filed (file a separate application for each return)		•	_	
X Form 990 Form 990-T (corporation) Form 4720						
Form 990	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5227		m 5227			
Form 990-	Form 990-EZ Form 990-T (trust other than above) Form 6069					
Form 990-PF		Form 1041-A For	m 8870			
 If the organ If this is for for the whole gnames and EIN 1 I reques 	nization de a Group group, che Ns of all n	nembers the extension will cover. utomatic 3-month (6 months for a corporation required to file For		If this is list with the] ne	
until APR		$\frac{2011}{1000}$, to file the exempt organization return for the organization n's return for.	ı named ab	ove The extension	ı is	
X	calendar tax year	yearor beginning SEPTEMBER 1 , 2009 , and ending AUGUST 31	,	2010		
2 If this tax	year is fo	or less than 12 months, check reason Initial return Final return] Change i	in accounting period	d	
•	•	is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,	less any			
		dits See instructions		3a \$		
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments				25 6		
made Include any prior year overpayment allowed as a credit Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See				3b \$	_	
				4		
				├ ─┤ .		
instruction				3c \$	_	
=		g to make an electronic fund withdrawal with this Form 8868, see Form 8453-E	O and Form	8879-EO		
for payment ins					_	
Ear Drivaay Aa	at and Da	nemyork Paduction Act Notice, see Instructions		Form 8868 (Pay 4-20)	no,	