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DLN: 93493135018282

Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

A Fo	r the 20	 010 calendar year, or tax year be	ginning 07-01-2010 and ending 06-30-20	11		Inspection
	ck if app	C Name of organization			D Employer	identification number
_	ress cha	NATIONAL ASSOCIATION OF S	ECONDARY		52-6006	937
— Nan	ne chang	Doing Business As ge			E Telephone	numher
_	al return		f	I D / t	_	
_	mınated	1004 ACCOCIATION DDD/E	ox if mail is not delivered to street address)	Room/suite	(703) 86	
_	ended re dication p	RESTON, VA 201911537	, and ZIP + 4		G Gross recei	pts \$ 25,188,716
	·	F Name and address of	of principal officer	H(a) Jathua		liates 7 Yes V No
		JOANN BARTOLETTI		il(a) is this a	group return for am	liates / Yes / No
		1904 ASSOCIATION RESTON,VA 201911			affiliates included ." attach a lis	t (see instructions)
Tax	k-exemp	ot status) ◀ (insert no)		exemption r	
w	ebsite:	► WWW PRINCIPALS ORG		7		
Form	n of orga	anization Corporation Trust 🗸 Ass	ociation	L Year of for	nation 1916	M State of legal domicile VA
Pai	rt I	Summary		•	•	
sovemance	F(O	OCUSING ATTENTION ON NATI RGANIZATIONS INTERESTED I	SEARCH AND SERVICE, PROMOTING H IONAL EDUCATIONAL PROBLEMS, AND N THE SOLUTIONS TO PROBLEMS OF E OLS AND THE YOUTHS THEY SERVE	WORKING WIT	H OTHER PR	OFESSIONAL
	2 C	heck this box 🖛 if the organizati	on discontinued its operations or disposed	of more than 25	5% of its net	assets
waning a	3 N	umber of voting members of the go	overning body (Part VI, line 1a)		3	24
	4 N	umber of independent voting mem	bers of the governing body (Part VI, line 11	o)	4	24
	5 To	otal number of individuals employe	ed ın calendar year 2010 (Part V, line 2a)		5	110
	6 To	otal number of volunteers (estima	te if necessary)		6	26:
	7a ⊤o	otal unrelated busıness revenue fr	om Part VIII, column (C), line 12		7a	451,46
	ЬN	et unrelated business taxable inco	ome from Form 990-T, line 34		7b	-8,63
				Prior	Year	Current Year
a.	8	Contributions and grants (Part VI	•	2,402,550	2,943,007	
Hevenue	9	Program service revenue (Part V	III, line 2g)		11,286,710	10,719,714
34		Investment income (Part VIII, co		267,775	387,325	
_			n (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		6,740,879	6,776,227
	12	-	gh 11 (must equal Part VIII, column (A), lı		20,697,914	20,826,273
	13		(Part IX, column (A), lines 1-3)		548,000	688,000
	14		Part IX, column (A), line 4)		0	C
			ployee benefits (Part IX, column (A), lines			2.254.254
<u>ቖ</u>		5-10)			9,498,964	9,254,264
Expenses			rt IX, column (A), line 11e)		0	C
<u>ਬ</u>		Total fundraising expenses (Part IX, colu				
			(A), lines 11a-11d, 11f-24f)		9,884,810	9,743,983
		•	' (must equal Part IX, column (A), line 25)		19,931,774	19,686,247
67	19	kevenue less expenses Subtract	: line 18 from line 12	D	766,140	1,140,026
ရှိ ရောင်း				Beginning Ye	of Current ear	End of Year
1 mg	20	Total assets (Part X, line 16) .			17,295,529	17,752,075
nechases of Fund Balances					11,713,093	9,513,107
Ē			tract line 21 from line 20		5,582,436	8,238,968
Par	t II	Signature Block		!		•
nowl			xamined this return, including accompanying plete. Declaration of preparer (other than offic	er) is based on a		
ign		Signature of officer		Dat		
lere		JOHN N DRIPPS CFO Type or print name and title				
		rint/Type preparer's name	Preparer's signature		heck if self-	PTIN
aid	F	irm's name CLIFTONLARSONALLEN LLP	<u> </u>		1	Firm's EIN
Prepa Use C		irm's address 🕨 2900 SOUTH QUINCY ST	SUITE 150			Phone no • (703) 998-
		ARLINGTON, VA 22206	arer shown above? (see instructions) .			5100 ▼ Yes

Form	1990 (2010)					Page
Par		of Program Servional dule O contains a response	-			
1	Briefly describe the	organization's mission				
ENC NAT SOL	OURAGING RESEARGIONAL EDUCATIONA	CH AND SERVICE, PRO AL PROBLEMS, AND W	OMOTING HI ORKING WIT	IGH PROFESSIONAL S TH OTHER PROFESSIO	ROUGH INFORMATION AND TANDARDS, AND FOCUSIN NAL ORGANIZATIONS INT WELFARE OF SECONDARY S	G ATTENTION ON ERESTED IN THE
2				ervices during the year	which were not listed on	Yes ✓ No
	If "Yes," describe the	ese new services on Sc	hedule O			
3	Did the organization services?		nake sıgnıfıcaı	nt changes in how it con		Yes ✓ No
	If "Yes," describe the	ese changes on Schedu	le O			
4	Section 501(c)(3) ar	nd 501(c)(4) organızatı	ons and secti		argest program services by e re required to report the amou ervice reported	
	(Code) (Expenses \$	6,018,900	ıncludıng grants of \$	25,500) (Revenue \$	8,623,621)
	PROFESSIONAL GROWTH	H AND ENRICHMENT THROU	JGH AWARD-WIN	NING PUBLICATIONS, MEETI	PIRING SCHOOL LEADERS WITH THE NGS, CONVENTIONS, AND NATIONAL DGE OF THE PROFESSION AND TO (TASK FORCES AND
	(Code) (Expenses \$	5,957,285	ıncludıng grants of \$	211,500) (Revenue \$	8,669,488)
	LEADERS AND THE ACAL AND ELEMENTARY SCHO HONOR SOCIETY, AND N	DEMIC SUCCESS OF ALL STU DOL STUDENTS ITS MAJOR F NATIONAL ASSOCIATION OF S	DENTS THE ASS PROGRAMS ARE T STUDENT COUNC	OCIATION OFFERS LEADERSI THE NATIONAL HONOR SOCIE	UNCILSNASSP IS COMMITTED TO THE HIP & RECOGNITION PROGRAMS FOI ETY, NATIONAL JUNIOR HONOR SOCI RAMS, THE ASSOCIATION SPONSORS TIONS, AND SCHOLARSHIPS	R HIGH SCHOOL, MIDDLE LEVE ETY, NATIONAL ELEMENTARY
_	(0-1-	\	1.067.040		451 000 \ / Paulanua d	F00 161 \
4 c	RECOGNIZE EXCELLENC EDUCATIONAL LEADERS	E IN SECONDARY EDUCATIO HIP, TRAINING PROGRAMS I	N AND EDUCATI N EDUCATIONAL	ONAL LEADERSHIP THROUGH LEADERSHIP, IDENTIFYING A	451,000) (Revenue \$ NS, PROVIDES PROGRAMS AND RESE H RESEARCH PROJECTS TO IDENTIF AND RECOGNIZING HIGH PERFORMI VES TO IMPROVE SECONDARY-SCHO	Y BEST PRACTICES IN NG SECONDARY SCHOOLS, ANI
4d	Other program serv (Expenses \$	rices (Describe in Sche inclu	edule O) udıng grants o	f\$) (Revenue \$)
4e	Total program servi	ce expenses ⊩ \$	13 944 12) 5		

Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	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.	11b		No
c	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.	11c		No
d	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.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	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 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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		No
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		No
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		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance	

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
La	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 98			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
l a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🛌			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ā	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	file Form 8282?	7c		No
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
£	Contract?	7e 7f		No No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			NO
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	۳		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
LO	Section 501(c)(7) organizations. Enter			_
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	-		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
L	Enter the amount of reconnect the organization is recovered to maintain by the other.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	-		
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O.	14b		

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

_Se	ection A. Governing Body and Management							
			Yes	No				
4-								
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	Does the organization have members or stockholders?	6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes					
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b	Each committee with authority to act on behalf of the governing body?	8b	Yes					
9	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								
	evenue Code.)							
	,		Yes	No				
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo				
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						
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?							
_		11a	Yes					
b	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	Yes					
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes					
13	Does the organization have a written whistleblower policy?	13	Yes					
14	Does the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by		, 03					
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1				
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	Other officers or key employees of the organization	15b	Yes					
	If "Yes" to line 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		No				
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						
	List the States with which a copy of this Form 990 is required to be filed.							
17	List the States with which a copy of this Form 990 is required to be filed VA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)							
18	(3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request							

- Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨 JOHN N DRIPPS 1904 ASSOCIATION DRIVE

RESTON, VA 20191 (703)860-0200

<u>Part VIII</u> 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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensat								ated any current officer, director, or trustee					
(A) Name and Title	(B) Average hours		(C) Position (check all that apply)			Position (check all that apply)					(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations			
See Additional Data Table													

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title		(B) Average hours per	that apply)							(D) ortable ensation m the	(E) Reportable compensation from related		(F) Estimated amount of othe	
		week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organiz	zation (W- 9-MISC)	organizations (W- 2/1099- MISC)		from organiza rela organiz	the tion and ted
See A	odditional Data Table													
							<u> </u>							
								<u> </u>						
1b	Sub-Total							<u> </u>						
	Total from continuation sheets						<u> </u>	-						
d	Total (add lines 1b and 1c) .							F		1,854,206		0		156,208
2	Total number of individuals (incl \$100,000 in reportable compen	-				ted	above) who	receive	ed more tha	n			
3	Did the organization list any for on line 1a? <i>If</i> " <i>Yes," complete Scl</i>					ey e	mploy	ee, o	r highes	tcompens	ated employee		Yes	No
4	For any individual listed on line is organization and related organiz	1a, is the sum o	f report	able	com							3	·	No
5	Individual	receive or accri	ie comr	• pensa	• ation	• fror	n anv	• unrel	ated ord	· · ·	r individual for	4	Yes	
	services rendered to the organiz										•	5	;	No
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from			ndep	ende	ent c	contra	ctors	that red	ceived more	e than			
		(A) ne and business ad	dress							Descr	(B) iption of services			C) ensation
	INC HER COMMERCE PARK 16 AVENUE A SDALE, PA 15056									DATA ENTRY FULFILLMENT	& WAREHOUSE			486,908
PO BO	FREEMAN DECORATING PO BOX 650036 EXHIBIT/SHOW SERVICES 120, DALLAS, TX 752650036							120,454						
3217	MULTIMEDIA PRODUCTIONS N FLOOD AVE 1AN, OK 73069									MULTIMEDIA	PRODUCER			117,078
DAVII 730 N	OOFF COMMUNICATION I FRANKLIN ST SUITE 601 AGO, IL 60654									MANAGEMEN	T CONSULTANT			110,290

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

\$100,000 in compensation from the organization -4

	•	(2010)					Pa	ge 9
Part	<u>/111</u>	Statement of Revenu	e		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	
								512, 513, or 514
## ##	1a	Federated campaigns	1a					
Contributions, gifts, grants and other similar amounts	b	Membership dues	. 1b					
] ∰ેં	c	Fundraising events	. 1 c					
<u> </u>	d	Related organizations	. 1d					
Si Si	e	Government grants (contributions)	1 e					
3 2	f	All other contributions, gifts, grants,	and 1f	2,943,007			! 	!
a		similar amounts not included above Noncash contributions included in line	as 1a-1f ¢					
5 2					2 042 007			
	h	Total. Add lines 1a-1f	· · · · · · · · · · · · · · · · · · ·		2,943,007			
anu e	2-	MEMBERGHTR BUEG & GURG		Business Code				
Program Serwce Revenue	2a b	MEMBERSHIP DUES & SUBS CONFERENCE & MEETINGS		900099	8,321,675 1,605,851	8,321,675 1,309,835		296,01
ě E		ASSESSMENT CENTER FEES		900099	792,188			250,0
7.11	d							
ž.	e							
Jran	f	All other program service reve	enue					
<u>ڏ</u>	g	Total. Add lines 2a-2f			10,719,714			
_		Investment income (including			· · · ·			
		and other similar amounts) .			202,111			202,1
	4	Income from investment of tax-exer	mpt bond proceeds 🕨					
	5	Royalties		,	734,083			734,0
	c -	Grand Bonto	(ı) Real	(II) Personal				
		Gross Rents Less rental						
	_	expenses Rental income						
	_	or (loss)						
	d	Net rental income or (loss) .		(-) (-)				
	7a	Gross amount from sales of assets other than inventory	(1) Securities 2,260,599	(II) Other				
	b	Less cost or other basis and sales expenses	2,075,385					
		Gain or (loss)	185,214					
		Net gain or (loss)			185,214			185,2
	8a	Gross income from fundraising (not including \$						
2		of contributions reported on li See Part IV, line 18						
			а					
,		Less direct expenses						
		Net income or (loss) from fund						
		Less direct expenses	tivities See Part IV, line 19 . a					
		Net income or (loss) from gan						
		Gross sales of inventory, less						
		returns and allowances .	•					
	h	Less cost of goods sold .	a . h	7,523,799				
		Net income or (loss) from sale		2,287,058	5,236,741	5,236,741		
		Miscellaneous Revenue	·	Business Code				
	11a	ADVERTISING		541800	451,461		451,461	
	b	TRAVEL REBATE		900099	192,877			192,8
	c	HONORARIA		900099	104,310			104,3
	d	All other revenue			56,755			56,7
	е	Total. Add lines 11a-11d .			805,403			
	12	Total revenue. See Instructio	ns		20,826,273		451,461	1,771,30
						15,660,439		

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	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).									
Do no	other organizations must complete column (x) but are not required to cooperate amounts reported on lines 6b, p, 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	84,000	84,000		· ·					
2	Grants and other assistance to individuals in the U S See Part IV, line 22	604,000	604,000							
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16									
4	Benefits paid to or for members									
5	Compensation of current officers, directors, trustees, and key employees	1,302,123	456,615	836,618	8,890					
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	5,629,974	2,599,967	2,869,605	160,402					
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	826,666	487,202	312,776	26,688					
9	Other employee benefits	969,336	461,166	482,642	25,528					
10	Payroll taxes	526,165	232,003	281,312	12,850					
а	Fees for services (non-employees) Management									
b	Legal	18,573		18,573						
С	Accounting	72,505		72,505						
d	Lobbying									
е	Professional fundraising services See Part IV, line 17									
f	Investment management fees									
g	Other	1,385,236	981,713	303,233	100,290					
12	Advertising and promotion	783,835	122,737	661,046	52					
13	Office expenses	272,508	71,218	200,206	1,084					
14	Information technology	562,774	277,202	281,920	3,652					
15	Royalties									
16	Occupancy	430,577	85,551	345,026						
17 18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,179,075	807,580	357,980	13,515					
19	Conferences, conventions, and meetings	1,851,146	1,633,367	217,658	121					
20	Interest	108,884	2,400	106,484						
21	Payments to affiliates	,	_,							
22	Depreciation, depletion, and amortization	486,425		486,425						
23	Insurance	498,262	441,072	57,190						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	,	,	,						
а	PROGRAM DELIVERY & FULF	4,381,241	3,920,905	458,332	2,004					
b	OVERHEAD ALLOCATIONS	0	2,962,485	-3,054,023	91,538					
c	COST OF GOODS SOLD PART	-2,287,058	-2,287,058							
d										
e										
f	All other expenses									
25	Total functional expenses. Add lines 1 through 24f	19,686,247	13,944,125	5,295,508	446,614					
26	Joint costs. Check here ► □ If following									
	SOP 98-2 (ASC 958-720) Complete this line only if the									
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation									

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			696,357	1	1,942,712
	2	Savings and temporary cash investments			3,617,087	2	2,007,928
	3	Pledges and grants receivable, net			208,937	3	208,937
	4	Accounts receivable, net			1,335,792	4	1,545,160
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under s persons described in section $4958(c)(3)(B)$, and contributing eigensoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	mploy	ers, and			
ets		Schedule L				6	
ssets	7	Notes and loans receivable, net	•			7	
⋖	8	Inventories for sale or use			849,093	8	793,454
	9	Prepaid expenses and deferred charges			310,008	9	306,511
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	10,289,029			
	ь	Less accumulated depreciation	10b	6,644,911	4,108,670	10 c	3,644,118
	11	Investments—publicly traded securities			5,794,552	11	6,876,733
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			375,033	15	426,522
	16	Total assets. Add lines 1 through 15 (must equal line 34)			17,295,529	16	17,752,075
	17	Accounts payable and accrued expenses .			2,727,213	17	2,380,103
	18	Grants payable				18	
	19	Deferred revenue			4,013,083	19	3,300,517
_	20	Tax-exempt bond liabilities				20	
<u>.</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.			21	
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Ē		persons Complete Part II of Schedule L		•		22	
	23	Secured mortgages and notes payable to unrelated third parties			2,271,940	23	2,190,580
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D	•		2,700,857	25	1,641,907
	26	Total liabilities. Add lines 17 through 25			11,713,093	26	9,513,107
Fund Balances		Organizations that follow SFAS 117, check here ► $\sqrt{}$ and comp through 29, and lines 33 and 34.	lete l	ines 27			
ä	27	Unrestricted net assets			4,333,761	27	6,962,424
8	28	Temporarily restricted net assets			1,248,675	28	1,276,544
귤	29	Permanently restricted net assets				29	
Ē		Organizations that do not follow SFAS 117, check here ▶ ┌ ar	ıd com	plete			
<u>~</u>		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds	•			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	_
	32	Retained earnings, endowment, accumulated income, or other fu	ınds			32	
¥	33	Total net assets or fund balances			5,582,436	33	8,238,968
_	34	Total liabilities and net assets/fund balances			17,295,529	34	17,752,075

Pa	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		20,8	326,27
2	Total expenses (must equal Part IX, column (A), line 25)	2			 586,24
3	Revenue less expenses Subtract line 2 from line 1	3		1,1	.40,02
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		5,5	582,43
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1,5	516,50
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		8,2	238,96
Pai	The contains a response to any question in this Part XII			T	No
1	Accounting method used to prepare the Form 990			1 65	NO
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? \cdot .		2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of t audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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As Filed Data -

DLN: 93493135018282

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization NATIONAL ASSOCIATION OF SECONDARY

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection **Employer identification number**

SCHO	OL PRIN	ICIPALS							52-600693	37			
Pa	rt I	Reas	on for Pu	blic Charity Stat	tus (All org	ganızatıons	must comp	lete this pa	art.) See ins	structions			
The	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ines 1 throu	gh 11, check	only one bo	x)				
1	Γ	A churc	ch, conventi	on of churches, or as	ssociation of	churches de	scribed in se	ection 170(b))(1)(A)(i).				
2	Γ	A scho	school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	\vdash	A hosp	ıtal or a coo	perative hospital sei	rvice organiz	ation descri	oed in sectio i	n 170(b)(1)(A)(iii).				
4	Γ			n organization operat ty, and state	ed in conjun	ction with a	nospital desc	rıbed ın sect	tion 170(b)(1)(A)(iii). Er	iter the		
5	Γ	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)											
6	\vdash	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	,			at normally receives	5					m the gene	ral nublu	_	
•	,	describ		ic normany receives	a substantie	ii pait oi its .	зарроте пош	a governmen	ical aniic or ire	in the gene	ai publi	-	
		sect ion	170(b)(1)(A)(vi) (Complete P	art II)								
8	Γ	A comr	nunity trust	described in section	170(b)(1)(A)(vi) (Com	plete Part II)					
9		An orga	anızatıon tha	at normally receives	(1) more th	an 331/3% c	f its support	from contrib	utions, memb	ership fees	and gro	SS	
		receipt	s from actıv	ities related to its ex	empt function	ons—subject	to certain ex	cceptions, ar	nd (2) no mor	e than 331/3	3% of		
its support from gross investment income and unrelated business taxable income (less section 511 tax)									ax) from bus	ınesses			
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)											
10	Γ	An orga	anızatıon org	ganized and operated	lexclusively	to test for p	ublic safety	See section !	509(a)(4).				
11	Γ			ganized and operated									
				y supported organiza						e section 50	9(a)(3).	.Check	
		_	Type I	bes the type of supp b Type II			- Functionall			Гтуре	III - Ot	her	
e	Г	•		ox, I certify that the				-					
_	,			on managers and oth									
			509(a)(2)										
f			rganızatıon :hıs box	received a written de	etermination	from the IRS	Sthat it is a 1	Гуре I, Туре	II or Type II	I supportin	g organi	zation,	
g				2006, has the organi	zation accer	ted any gift	or contributio	on from any o	of the			1	
•			g persons?	, .		, , , , , , , , , , , , , , , , , , ,		,,,,,,					
		(i) a pe	rson who di	rectly or indirectly c	ontrols, eith	er alone or to	gether with p	persons desc	cribed in (ii)		Yes	No	
			•	governing body of th		_	tion?			11g(<u> </u>	
		(ii) a fa	mily membe	er of a person descril	bed in (i) abo	ve?				11g(_	<u> </u>	
				led entity of a persoi		., .,				11g(i	ii)		
h		Provide	the followir	ng information about	the supporte	ed organızatı	on(s)						
				(iii)	(iv)								
	/:>			Type of	Is the	e	(v) Did you not	ify the	(vi) Is the				
	(i) Name		organization organization in (described on col. (i) listed in				organizati		organizati			vii)	
9	suppor		EIN	lines 1- 9 above	col (ı) lıs [.] your gove		col (ı) of		col (ı) orga			unt of	
	rganıza			or IRC section	docume	_	suppor	t?	ın the U	S ?	sup	port	
				(see		1	V	NI-		NI.			
				inst ruct ions))	Yes	No	Yes	No	Yes	No			

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support		and to quanty t			Jaco complete	
	endar year (or fiscal year beginning						
Care	in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	ınclude any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
_	behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
_	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						
Ū	line 4						
S	ection B. Total Support		<u> </u>	I I.			
	endar year (or fiscal year beginning						
	ın) >	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	A mounts from line 4						
8	Gross income from interest,						
Ū	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business 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)						
12	Gross receipts from related activiti	es, etc (See inst	ructions)			12	
13	First Five Years If the Form 990 is t	for the organizati	on's first, second	, thırd, fourth, or	fifth tax year as a	501(c)(3) organı	
	check this box and stop here						►
	-tiC Ct-ti	L'a Carana at B					
<u> </u>	ection C. Computation of Pub Public Support Percentage for 2010			11 column (f))			
	· ·		•	II Column (1))		14	
15	Public Support Percentage for 2009	Schedule A, Pa	rt II, line 14			15	
16a	33 1/3% support test—2010. If the				line 14 is 33 1/3%	or more, check	
_	and stop here. The organization qua						▶ □
b	33 1/3% support test—2009. If the				5a, and line 15 is 3	33 1/3% or more,	- -
	box and stop here. The organization				45.46		►
1/a	10%-facts-and-circumstances test-						
	is 10% or more, and if the organization made						rt a d
	in Part IV how the organization mee	ts the "racts and	circumstances"	test ine organiz	ration qualifies as	a publicly suppo	
L	organization	_2000 If+ba a	anization did not	chack a hay an l	no 12 165 166 -	r 17a and line	► □
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						
	Explain in Part IV how the organization						v
	supported organization	aon meets the 10	acts and circuilis	tances test file	z organizacion qual	mes as a publici	y ▶[¯
18	Private Foundation If the organizati	on did not check	a box on line 13	. 16a. 16b. 17a o	r 17b, check this	box and see	- 1
	instructions	on ala not check	a box on fine 15	, 100, 100, 1700	I by check tills	SON GING SCC	▶ □

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

	ction A. Public Support		•		•	•		
Cale	ndar year (or fiscal year beginning in) ►	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20:	10	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	10,975,450	12,106,325	10,960,496	11,210,545	11,2	64,682	56,517,498
2	grants ") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	10,774,499	8,550,490	10,495,383	9,845,972	10,7	19,714	50,386,058
3	Gross receipts from activities that are not an unrelated trade or business 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							
6	Total. Add lines 1 through 5	21,749,949	20,656,815	21,455,879	21,056,517	21,9	84,396	106,903,556
	A mounts included on lines 1, 2, and 3 received from disqualified persons							0
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the							0
_	year Add lines 7a and 7b							0
8	Public Support (Subtract line 7c from line 6)							106,903,556
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 201	.0	(f) Total
9	A mounts from line 6	21,749,949	20,656,815	21,455,879	21,056,517	21,9	84,396	106,903,556
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	918,809	477,984	988,758	1,009,421	1,1	21,408	4,516,380
b	income (less section 511 taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b	918,809	477,984	988,758	1,009,421	1,1	21,408	4,516,380
11	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)	982,010	1,750,850	625,140	349,363	3	53,942	4,061,305
13	Total support (Add lines 9, 10c,	23,650,768	22,885,649	23,069,777	22,415,301	23,4	59,746	115,481,241
14	11 and 12) First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	I, thırd, fourth, or	fifth tax year as a	a section5()1(c)(3)) organization, ►
Se	ction C. Computation of Pul	olic Support P	ercentage					
15	Public Support Percentage for 201			13 column (f))		15		92 570 %
16	Public support percentage from 20	•				16		92 310 %
	stion D. Computation of In-	estment Inco	me Dercenta					
_ <u>S</u> e	ction D. Computation of Inv	restillent Inco	mic Fercenta	<u>gc</u>				
Se 17	Investment income percentage for				n (f))	17		3 910 %
17 18	•	2010 (line 10 c co m 2009 Schedule	olumn (f) dıvıded A , Part III , lıne :	by line 13 colum .7		18		4 110 %

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. 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 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

Part IV

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

Schedule A (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135018282

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),	
then	
◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C	

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

♣ Se If the	ction 501(c)(3) organizations that	t have filed Form 5768 (election under thave NOT filed Form 5768 (election under); s," to Form 990, Part IV, Line 5 (Properties)	nder section 501(h)) Complete Part II-B Do n	ot complete Part II-A
Na	me of the organization			Employer iden	tification number
	HOOL PRINCIPALS			52-6006937	
Par	t I-A Complete if the or	ganization is exempt under s	section 501(c) or is a section 527	organization.
1	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaign acti	vities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Dor	t I P Complete if the or	annization is exampt under	action E01/c	1/21	
1		ganization is exempt under setax incurred by the organization und)(3). ►	
		·		40EE .	\$
2		e tax incurred by organization manage		4955	\$ Yes
3		ection 4955 tax, did it file Form 472	u for this year?		
4a	Was a correction made?				│ Yes │ No
b Dar	If "Yes," describe in Part IV	ganization is exempt under s	section 501/c) except section E01	(c)(3)
1	•	ended by the filing organization for sec	-		¢
2		organization's funds contributed to oth			\$
3	·	tures Add lines 1 and 2 Enter here a	ınd on Form 1120)-POL, line 17b ►	\$
4	Did the filing organization file F	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid from rectly delivered t	m the filing organization's f to a separate political orga	unds Also enter the nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	n is exempt under section 501(c)(3) a	and filed Form 5768 ((election
4	Check If the filing organization belongs to			
<u>3</u>	Check If the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying I (The term "expenditures" means a		(a) Filing O rganization's Totals	(b) Affiliated Group Totals
1 a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	79,708	
b	Total lobbying expenditures to influence a legisl	lative body (direct lobbying)	347,010	
c	Total lobbying expenditures (add lines 1a and 1	b)	426,718	
d	O ther exempt purpose expenditures		18,812,915	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	19,239,633	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
 g	Grassroots nontaxable amount (enter 25% of li	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er-0-	0	

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expe	nditures During 4	1-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
_с	Total lobbying expenditures	168,648	229,753	177,777	426,718	1,002,896
d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f_	Grassroots lobbying expenditures	51,193	87,466		79,708	294,915

che	edule C (Form 990 or 990-EZ) 2010				Pί	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT fi	led F	orm	5768	3
		(;	a)		(b)	
		Yes	No	, r	Amoun	it
L	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			-		
	Mailings to members, legislators, or the public?		\vdash	+-		
			\vdash	+-		
e	Publications, or published or broadcast statements?			+-		
f	Grants to other organizations for lobbying purposes?			₩		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		<u> </u>	₩		
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV		 	\vdash		
j	Total lines 1c through 1i			+-		
, 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		I			
	If "Yes," enter the amount of any tax incurred under section 4912			┨		
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		I			
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01/6	1(5)			
	501(c)(6).	J)10-	<u> </u>			
			_	_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		- L	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
² aı	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 11

Identifier | Return Reference | Explanation

Part IV Supplemental Information

Also, complete this part for any additional information

5 Taxable amount of lobbying and political expenditures (see instructions)

5

DLN: 93493135018282

OMB No 1545-0047

Open to Public

Inspection

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.

Name of the organization

Employer identification number

TIONAL ASSOCIA CHOOL PRINCIPA	TION OF SECONDARY			-	006027	icion number	
	anizations Maintaining Donor Advised		ther Similar Fi		006937 or Accounts	. Complete	e if th
org	anization answered "Yes" to Form 990, Part	•					
		(a) Donor advi	sed funds	(b) Funds and o	ther accoun	ts
	er at end of year						
	contributions to (during year)						
	grants from (during year)						
Aggregate	value at end of year						
_	anization inform all donors and donor advisors in he organization's property, subject to the organiza	•		or advis	sed	☐ Yes	┌ No
used only f	anization inform all grantees, donors, and donor a or charitable purposes and not for the benefit of tl impermissible private benefit					┌ Yes	
	nservation Easements. Complete if the o	ornanization a	nswered "Yes" to	o Form	990 Part I\		•
Preser Protec Preser	of conservation easements held by the organizat vation of land for public use (e g , recreation or pl tion of natural habitat vation of open space lines 2a-2d if the organization held a qualified cor	leasure)	Preservation of an Preservation of a c	ertified	historic struc	•	
easement	on the last day of the tax year		ſ		Hold at the	End of the	/ear
Total numb	er of conservation easements			2a	riela at the	Lila of the	ı caı
	ige restricted by conservation easements			2b			
	conservation easements on a certified historic st	ructure included	dun (a)	2c			
	conservation easements included in (c) acquired		3 III (U)	2d			
	year ►states where property subject to conservation ea	sement is locat	ed ►				
Does the o	rganization have a written policy regarding the pe nt of the conservation easements it holds?		•		violations, and	┌ Yes	┌ N
Staff and v	olunteer hours devoted to monitoring, inspecting	and enforcing co	onservation easem	ents du	ring the year 🖡	•	
A mount of	expenses incurred in monitoring, inspecting, and	enforcing conse	rvation easements	during	the year \blacktriangleright \$ _		
	conservation easement reported on line 2(d) abo B)(ı) and 170(h)(4)(B)(ıı)?	ve satisfy the re	equirements of sec	tion		┌ Yes	┌ N
balance sh	, describe how the organization reports conserva eet, and include, if applicable, the text of the footi ation's accounting for conservation easements						
	panizations Maintaining Collections of nplete if the organization answered "Yes" to			or Oth	er Similar	Assets.	
art, historic	nization elected, as permitted under SFAS 116, no cal treasures, or other similar assets held for pub Part XIV, the text of the footnote to its financial s	lic exhibition, ed	ducation or researd	h in fur			
historical t	nization elected, as permitted under SFAS 116, to reasures, or other similar assets held for public e following amounts relating to these items						
(i) Revenu	es included in Form 990, Part VIII, line 1				► \$		
(ii) Assets	included in Form 990, Part X				F \$		
If the organ	nization received or held works of art, historical tr nounts required to be reported under SFAS 116 r			r financ	ial gain, provi	de the	
_	ncluded in Form 990, Part VIII, line 1	-			► \$		

Assets included in Form 990, Part X

	Using the organization's accession and othe		v of th								continued)
!	items (check all that apply)		.,		_		_				
a j	Public exhibition		d	Γ	Loan	or exc	hange progr	ams			
ь	Scholarly research		е	\sqcap	Other						
c l	Preservation for future generations										
	Provide a description of the organization's co Part XIV	ollections and expla	aın hov	w they	y furthe	r the c	organization	's ex	empt purpose II	า	
	During the year, did the organization solicit o									_	_
	assets to be sold to raise funds rather than t								·	Yes	No
Part	Escrow and Custodial Arrang Part IV, line 9, or reported an an				_		n answere	d "Y	es" to Form 9	90,	
1	Is the organization an agent, trustee, custod included on Form 990, Part X?					tions	or other ass	ets i		_ Yes	┌ No
b 1	If "Yes," explain the arrangement in Part XI\	/ and complete the	follow	ving ta	able		Г				
_	5							4 -	Am	ount	
_	Beginning balance							1c			
	Additions during the year						-	1d			
_	Distributions during the year							1e			
	Ending balance							1f			
	Did the organization include an amount on Fo		ne 21?						ı	Yes	No
	If "Yes," explain the arrangement in Part XIV				1 115 /						
Part	EV Endowment Funds. Complete	f the organizatio (a)Current Year)Prior \			<u>Form 990,</u> vo Years Back			(a)Four	Years Back
1a	Beginning of year balance	(a) Curient Tear	(0	JEHOL	39,481	(0)10	39,48	+ • •	Tillee Tears back	(e)i oui	Tears back
	Contributions				,						
	Investment earnings or losses				40		43	7			
	Grants or scholarships										
	Other expenditures for facilities	0			39,521		43	7			
	and programs				,						
f	Administrative expenses										
g	End of year balance						39,48	1			
2	Provide the estimated percentage of the yea	r end balance held	as								
a	Board designated or quasi-endowment 🕨										
b i	Permanent endowment 🕨										
С -	Term endowment 🕨										
3a /	Are there endowment funds not in the posses	ssion of the organiz	zation	that a	are held	d and a	dministered	for	the		
	organization by									Yes	No
	(i) unrelated organizations							•	3a(i	-	
	(ii) related organizations							•	3a(i		+
	Describe in Part XIV the intended uses of th	•						•	<u>3b</u>		
Part						90 D:	art X line	10			
rare	111 Cottilients Land, Bandings	s, and Equipme	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				(b)Cost or o		(a) Assumulated		
	Description of investment) Cost or Is (Invest		basis (othe		(c) Accumulated depreciation	(d) E	Book value
	and		•				153	,958			153,958
1a La				1			I 5 4 3 0	935	3.060.09	۱ .	
	uildings		•				5,128	,,,,,	2,969,98	J	2,158,955
b B	uildings		٠.					,783			2,158,955 54,852
b Bi	_		•					,783	113,93	1	
b B(c L(d E(easehold improvements		• •				168 4,595	,783	113,93 3,319,110	1	54,852

Investments—Other Securities. See	roilli 990, Pait A, iiile 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)20011 14140	Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
		,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
	2 1 F	
PETITION Other Assets. See Form 990. Part X. lin	e 15.	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
		(b) Book value
(a) Descrip	tion	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1:	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes RETIREMENT BENEFITS	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.)	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	20,826,273
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,686,247
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	1,140,026
4	Net unrealized gains (losses) on investments	4	564,225
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	952,281
9	Total adjustments (net) Add lines 4 - 8	9	1,516,506
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	2,656,532
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	22,726,006
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	2,287,058
3	Subtract line 2e from line 1	3	20,438,948
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	387,325
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	20,826,273
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	21,973,305
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	2,287,058
3	Subtract line 2e from line 1	3	19,686,247
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	19,686,247
Pai	rt XIV Supplemental Information		

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE ASSOCIATION IS AN EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE ASSOCIATION IS NOT A PRIVATE FOUNDATION HOWEVER, THE ASSOCIATION IS REQUIRED TO REPORT UNRELATED BUSINESS INCOME TO THE INTERNAL REVENUE SERVICE AND THE COMMONWEALTH OF VIRGINIA, AS WELL AS PAY CERTAIN OTHER TAXES TO LOCAL JURISDICTIONS THERE IS NO UNRELATED BUSINESS INCOME TAX LIABILITY FOR THE YEAR ENDED JUNE 30, 2011 THE ASSOCIATION HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THE ADOPTION OF THIS STANDARD HAD NO IMPACT ON THE ASSOCIATION FILES AS A TAX-EXEMPT ORGANIZATION SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, THE ASSOCIATIONS 2008, 2009 AND 2010 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN LONG TERM PENSION LIABILITY 952,281
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOOD SOLD 2,287,058
PART XII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT INCOME 387,325
PART XIII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 2,287,058

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OMB No 1545-0047

DLN: 93493135018282

Schedule I

(Form 990)

Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

Grants and Other Assistance to Organizations,

Internal Revenue Service			Attach to Form 990				Inspection
Name of the organization	0.110.4.07					Employer identificati	on number
NATIONAL ASSOCIATION OF SEC SCHOOL PRINCIPALS	ONDARY					52-6006937	
Part I General Information	n on Grants and	l Assistance				•	
 Does the organization maintain the selection criteria used to av Describe in Part IV the organization 	vard the grants or as ation's procedures fo	sistance? r monitoring the use o	f grant funds in the Unite	d States			Γ Yes Γ I
Part II Grants and Other A Form 990, Part IV, lin duplicated if additional	e 21 for any recip	ient that received n	nore than \$5,000. Che	eck this box if no one	recipient receive	ed more than \$5,000	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 503 Enter total number of other orga	-	_				<u>*</u> -	0

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) PRUDENTIAL SPIRIT OF THE COMMUNITY	102	152,000			
(2) NATIONAL HONOR SOCIETY SCHOLARSHIPS	200	200,000			
(3) PRINCIPAL LEADERSHIP AWARD SCHOLARSHIPS	200	249,000			

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

Explanation

PROCEDURE FOR MONITORING GRANTS IN THE U S

Identifier

PART I, LINE 2

Return Reference

SCHEDULE I, PART I, LINE 2 JUDGING PROCESSES FOR THE NATIONAL HONOR SOCIETY SCHOLARSHIP PROGRAM AND THE PRINCIPAL'S LEADERSHIP AWARD SCHOLARSHIP PROGRAM THE NATIONAL HONOR SOCIETY SCHOLARSHIP PROGRAM AND THE PRINCIPAL'S LEADERSHIP AWARD SCHOLARSHIP PROGRAM ARE ADMINISTERED BY THE NASSP STUDENT ACTIVITIES OFFICE UNDER DIRECTION OF THE PROGRAM MANAGER, WANDA CARROLL EACH SCHOLARSHIP PROGRAM HAS A FOUR-PAGE NOMINATION (APPLICATION) FORM HIGH SCHOOLS ACROSS THE COUNTRY ARE MAILED COPIES OF THE NOMINATION FORMS WITH INSTRUCTIONS THIS INFORMATION IS ALSO POSTED ON THE NASSP WEB SITES NATIONAL HONOR SOCIETIES MAY NOMINATE TWO SENIORS MEMBERS OF THE NATIONAL HONOR SOCIETY TO COMPETE PRINCIPALS MAY NOMINATE ONE SENIOR FOR THE PRINCIPAL'S LEADERSHIP AWARD WINNERS ARE CHOSEN USING A THREE STEP PROCESS THE FIRST PHASE SCORES THE NOMINATION FORMS USING AN ESTABLISHED ALGORITHM DEVELOPED BY NASSP DATA FROM EACH NOMINATION FORM RECEIVED IS INPUT INTO THE COMPUTER THE ALGORITHM IS APPLIED AND THE TOP APPLICANTS ARE SELECTED THE TOP 1,000-1,200 NOMINATION FORMS ARE SELECTED USING THE ALGORITHM TO ADVANCE TO THE SECOND ROUND OF SCORING, THAT BY THE EIGHT MEMBER NATIONAL SELECTION COMMITTEES FOR THE NATIONAL HONOR SOCIETY THE NATIONAL SELECTION COMMITTEE MEMBERS ARE INVITED BY NASSP TO SERVE ON THE SELECTION COMMITTEE MEMBERS REPRESENT EACH OF THE EIGHT REGIONS DEFINED BY NASSP ALL MEMBERS OF THE COMMITTEE ARE HIGH SCHOOL PRINCIPALS THE SELECTION COMMITTEE MEMBERS READ THE 1,000-1,200 NOMINATION FORMS TO DETERMINE THE STATE FINALISTS TO RECEIVE A \$1,000 SCHOLARSHIP FROM THE STATE FINALISTS THE COMMITTEE WILL SELECT 53 STATE WINNERS TO RECEIVE AN ADDITIONAL \$500 SCHOLARSHIP ONCE THE STATE WINNERS ARE SELECTED THE COMMITTEE WILL DETERMINE THE NINE REGIONAL WINNERS THAT RECEIVE AN ADDITIONAL \$1,500 SCHOLARSHIP, FROM THE NINE REGIONAL WINNERS ONE NATIONAL WINNER WILL BE IDENTIFIED TO RECEIVE AN ADDITIONAL \$10,000 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL AND WINNER CATEGORIES TOTALING A \$13,000 SCHOLARSHIP FOR THE PRINCIPAL'S LEADERSHIP AWARD THE NATIONAL SELECTION COMMITTEE MEMBERS ARE INVITED BY NASSP TO SERVE ON THE SELECTION COMMITTEE MEMBERS REPRESENT EACH OF THE EIGHT REGIONS DEFINED BY NASSP ALL MEMBERS OF THE COMMITTEE ARE HIGH SCHOOL PRINCIPALS THE SELECTION COMMITTEE MEMBERS READ THE 1,000-1,200 NOMINATION FORMS TO DETERMINE THE STATE FINALISTS TO RECEIVE A \$1,000 SCHOLARSHIP FROM THE STATE FINALISTS THE COMMITTEE WILL SELECT EIGHT REGIONAL AWARD WINNERS WILL BE IDENTIFIED FROM THE EIGHT (8) NASSP DEFINED REGIONS OF THE UNITED STATES THE EIGHT REGIONAL WINNERS WILL EACH RECEIVE AN ADDITIONAL \$500 SCHOLARSHIP, MAKING THEIR TOTAL AWARD \$1,500 ONE NATIONAL SEMI-FINALIST WILL BE IDENTIFIED FROM AMONG THE EIGHT REGIONAL WINNERS TO RECEIVE AN ADDITIONAL \$3,500 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL, AND SEMI-FINALIST WINNER CATEGORIES TOTALING A \$5,000 SCHOLARSHIP ONE NATIONAL FINALIST WILL BE IDENTIFIED FROM AMONG THE EIGHT REGIONAL WINNERS TO RECEIVE AN ADDITIONAL \$7,000 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL, AND FINALIST WINNER CATEGORIES TOTALING AN \$8,500 SCHOLARSHIP ONE NATIONAL WINNER WILL BE IDENTIFIED FROM AMONG THE EIGHT REGIONAL WINNERS TO RECEIVE AN ADDITIONAL \$10,500 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP

AWARD FROM THE STATE, REGIONAL, AND WINNER CATEGORIES TOTALING \$12,000 IN SCHOLARSHIP AWARDS

DLN: 93493135018282

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS

Employer identification number

52-6006937

Pa	rt 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 idemnification and gross-up payments			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
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?	_	.,	
	officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 147	2	Yes	
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 ✓ Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, 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 from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes	
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only 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		No
b	Any related organization?	5b		No
	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		Νo
b	Any related organization?	6b		No
	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		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III			
		8		No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name	(B) Breakdown of	of W-2 and/or 1099-MI	.SC compensation	(C) Retirement and		(E) Total of columns	(F) Compensation	
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) GERALD N (1) TIRO ZZI (11		19,788		7,800 0	6,353 0	426,741 0	0	
(2) HERSEY LENOR G			, 0	6,894 0	12,623 0	324,629 0	0	
(3) JOHN N DRIPPS (1)) 187,532) 0	0	0	5,987 0	15,366 0	208,885 0	0	
(4) RICHARD (1) FLANARY (II		7 O	, o	4,552			0	
(5) RON HODGE (1)		1,868 0	0 0	4,663	8,717 0	169,494 0	0	
(6)		,	1					
(7)				1				
(8)				<u> </u>				
(9)				1				
(10)			<u> </u>	<u> </u>				
(11)				1				
(12)				1				
(13)				1				
(14)				1				
(15)				1				
(16)			<u> </u>	1				

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
		TAX INDEMNIFICATION/GROSS-UP PAYMENTS, TRUST - \$44,440 63 BONUS - \$19,787 65 HEALTH OR SOCIAL CLUB DUES - NOT INCLUDED IN INCOME JOHN N DRIPPS - \$300 JOHN NORI - \$300 NANCY RIVIERE - \$300 GERALD N TIROZZI - \$150
	· ·	GERALD N TIROZZI, EXECUTIVE DIRECTOR, IS PARTICIPATING IN A NONQUALIFIED RETIREMENT PLAN THE INCREASE IN THE PLAN VALUE FOR FISCAL YEAR ENDED JUNE 30, 2010 WAS \$28,107

Schedule J (Form 990) 2010

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135018282

2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Name of the organization NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS **Employer identification number**

52-6006937

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		ACTIVE ACTIVE MEMBERS SHALL CONSIST OF THOSE INDIVIDUALS ENGAGED IN THE PRACTICE OR SUPERVISION OF SECONDARY (MIDDLE LEVEL AND/OR HIGH SCHOOL) ADMINISTRATION WITHIN ONE OF THE EIGHT REGIONS AS DEFINED IN ARTICLE II OF THE BY LAWS ASSOCIATE ASSOCIATE MEMBERS SHALL CONSIST OF PERSONS, INSTITUTIONS, OR OTHER ENTITIES THAT DO NOT MEET THE CRITERIA FOR ACTIVE MEMBERSHIP LIFE MEMBERS LIFE MEMBERSHIP MAY BE CONFERRED BY THE BOARD OF DIRECTORS AND PROVIDES AN INDIVIDUAL WITH ALL OF THE PRIVILEGES OF AN ACTIVE MEMBER, EXCEPT THE ABILITY TO BECOME AN OFFICER, DIRECTOR, OR STATE COORDINATOR OF THE ASSOCIATION

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		VOTING RIGHTS ONLY ACTIVE MEMBERS IN GOOD STANDING SHALL HAVE THE RIGHT TO VOTE AT THE ANNUAL MEETING OF THE MEMBERS ON THOSE ITEMS SPECIFIED IN ARTICLE IV, SECTION 5 OF THE BY LAWS, AS WELL AS TO VOTE ON SUCH OTHER ISSUES AS THE BOARD MAY CHOOSE TO BRING BEFORE THE MEMBERS OTHER CLASSES OF MEMBERS MAY ATTEND MEETINGS, BUT MAY NOT VOTE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		A THERE SHALL BE AN ANNUAL BUSINESS MEETING OF THE MEMBERS DURING THE ASSOCIATION'S ANNUAL CONVENTION OR UPON SUCH DATE, TIME AND PLACE AS THE BOARD SHALL DETERMINE. WRITTEN NOTICE OF THE ANNUAL BUSINESS MEETING SHALL BE GIVEN AT LEAST 30 DAY'S PRIOR TO THE MEETING DURING THE ANNUAL BUSINESS MEETING, VOTING MEMBERS SHALL HAVE THE RIGHT TO VOTE ON THE FOLLOWING MATTERS ONLY I ELECTION OF THE BOARD OF DIRECTORS AND OFFICERS II APPROVAL OF AMENDMENTS TO THE ARTICLES OF INCORPORATION OR BYLAWS III APPROVAL OF ANNUAL MEMBERSHIP DUES INCREASES IV APPROVAL OF ANY PLAN OF MERGER OR CONSOLIDATION V SALE, LEASE, EXCHANGE, MORTGAGE, PLEDGE, OR OTHER DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE PROPERTY AND ASSETS OF THE ASSOCIATION

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE RETURN IS PREPARED BY THE ORGANIZATION'S ACCOUNTANT AND REVIEWED BY MANAGEMENT PRIOR TO THE MAY BOARD OF DIRECTORS MEETING THE DRAFT 990 IS POSTED TO A BOARD MEMBER ONLY WEBSITE FOR THEIR REVIEW SHOULD THERE BE QUESTIONS OR COMMENTS, THESE ARE ADDRESSED AT THE MAY MEETING

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THIS CONFLICT OF INTEREST POLICY IS DESIGNED TO HELP DIRECTORS, OFFICERS, AND EMPLOY EES OF THE NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS (NASSP) IDENTIFY SITUATIONS THAT PRESENT POTENTIAL CONFLICTS OF INTEREST AND TO PROVIDE NASSP WITH A PROCEDURE THAT, IF OBSERVED, WILL ALLOW A TRANSACTION TO BE TREATED AS VALID AND BINDING EVEN THOUGH A DIRECTOR, OFFICER, OR EMPLOYEE HAS OR MAY HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE TRANSACTION. IN THE EVENT THERE IS AN INCONSISTENCY BETWEEN THE REQUIREMENTS AND PROCEDURES PRESCRIBED HEREIN AND THOSE IN FEDERAL OR STATE LAW, THE LAW SHALL CONTROL. ALL CAPITALIZED TERMS ARE DEFINED IN PART 2 OF THIS POLICY ADDITIONALLY, ANY PERSON WHO HAS SERVED OR IS SERVING AS AN OFFICER OR DIRECTOR SHALL NOT SOLICIT BUSINESS FROM OR BRITER INTO ANY AGREEMENT OR CONTRACT WITH NASSP FOR A PERIOD OF ONE YEAR AFTER THE CONCLUSION OF HIS OR HER SERVICE AS AN OFFICER OR DIRECTOR OF THE ASSOCIATION 1 CONFLICT OF INTEREST DEFINED FOR PURPOSES OF THIS POLICY, THE FOLLOWING CIRCUMSTANCES SHALL BE DEEMED TO CREATE CONFLICTS OF INTEREST A OUTSIDE INTERESTS A A CONTRACT OR TRANSACTION BETWEEN NASSP AND AN ESPINISHE PERSON OR FAMILY MEMBER BA CONTRACT OR TRANSACTION BETWEEN NASSP AND AN ENTITY IN WHICH A RESPONSIBLE PERSON OR FAMILY MEMBER HAS A MATERIAL FINANCIAL INTEREST OR OF WHICH SUCH PERSON IS A DIRECTOR, OFFICER, AGENT, PARTINER, ASSOCIATE, TRUSTIEF, PERSONAL REPRESENTATIVE (EXCLUDING AFFILIATED STATE ASSOCIATIONS) B OUTSIDE ACTIVITIES A A RESPONSIBLE PERSON COMPETING WITH NASSP IN THE REDDERING OF SERVICES OR IN ANY OTHER CONTRACT OR TRANSACTION BETWEEN NASSP AND AN ENTITY IN WHICH A RESPONSIBLE PERSON OR FAMILY MEMBER HAS A MATERIAL FINANCIAL INTEREST OR OF WHICH SUCH PERSON IS ADDITECTOR, OFFICER, AGENT, PARTINER, ASSOCIATE, TRUSTIEF, PERSONAL REPRESENTATIVE (EXCLUDING AFFILIATED STATE ASSOCIATIONS) B OUTSIDE ACTIVITIES A A RESPONSIBLE PERSON COMPETING WITH NASSP IN THE REDDERING OF SERVICES OR IN ANY OTHER CONTRACT OR TRANSACTION WITH A THIRD PARTY B A RESPONSIBLE PERSON HA

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD OF DRECTORS WILL CONDUCT AN ANNUAL EVALUATION OF THE EXECUTIVE DIRECTOR SUCH EVALUATION WILL BE BASED ON THE EXTENT TO WHICH THE EXECUTIVE DIRECTOR HAS ADDRESSED THE BOARD STATED GOALS AND OBJECTIVE AS SPECIFIED IN ITS STATEDIC CHAIR AN INTHIS REPOCESS, THE BOARD WILL ALSO REVIEW THE STAFFS WORKFLAN AS RELATED TO FACH GOAL AND OBJECTIVE WHICH INCLUDES SPECIFIC TIMELINES AND MEASURABLE OUTCOMES THE BOARD WILL EVALUATE THE EXECUTIVE DIRECTOR AT THE CONNENTION BOARD MEETINS THE BOARD WILL USEA THREE-POINT RATING SCALE AS FOLICOVS 3. SUPERIOR 2-EFFECTIVE 1-NOT EFFECTIVE IT IS EXPECTED THAT EACH BOARD MEMBER WILL, IN ADDITION TO PROVIDING A NUMERICAL RATING FOR EACH OF THE GOALS, ALSO INCLUDE NARRATIVE COMMENTS WHICH PROVIDE GREATER DETAIL TO THE RESPECTIVE PARTINGS. IT IS EXPECTED THAT THE EXECUTIVE DIRECTOR WILL PROVIDE UPDATES TO THE BOARD ON A REGULAR BASIS AS TO THE ROGRESS BEING MADE TO ACHEVE THE GOALS AND/OR THE NEED TO MAKE MODIFICATIONS AS RELATED THERETO AT THE DEFECTIVE DORDOR MEETING, THE BOARD PRESIDENT WILL EXPLAIN MORE SPECIFICALLY THE PROCESS TO BE FOLLOWED IN EVALUATION THE RESPECTIVE DIRECTOR EVALUATION FORMS WILL BE DISTRIBUTED TO EACH OF THE DIRECTOR BY MID-DECEMBER, WITH THE EXPECUTATION THAT THE EVALUATION WILL BE COMPLETED AND RETURNED TO THE PRESIDENT BY MID-JANUARY THE PRESIDENT WILL PROVIDE A COPY OF THE COMPLETED EVALUATION TO THE EXECUTIVE DIRECTOR AND THE BOARD STEERING COMMITTEE AT LEAST TWO WEBEXS PRICE TO THE ANNUAL CONVENTION FOR REVIEW AT THE BOARD STEERING COMMITTEE AN LEAST TWO WEBEXS PRICE TO THE ANNUAL CONVENTION FOR REVIEW AT THE REVALUATION WILL AN EMPHASIS ON IDENTIFYING MAJOR AREAS OF STRENGTHS AND AREAS IN NEED OF IMPROVEMENT THE STEERING COMMITTEE WILL THEN CONDUCT AND EXECUTIVE DIRECTOR AND PROTUNITY TO DISCUSS HIS PERSONAL REACTIONS TO THE EVALUATION TO THE EXECUTIVE DIRECTOR OF AN OPPORTUNITY TO DISCUSS HIS PERSONAL REACTIONS TO THE EXPLAINATION FOR THE STEERING COMMITTEE WILL THEN CONDUCT THE STEERING COMMITTEE WILL THEN CONDUCT THE STEERING COMMITTEE WILL T

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY & FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 564,225 CHANGE IN LONG TERM PENSION LIABILITY 952,281 TOTAL TO FORM 990, PART XI, LINE 5 1,516,506

Software ID: Software Version:

EIN: 52-6006937

Name: NATIONAL ASSOCIATION OF SECONDARY

SCHOOL PRINCIPALS

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

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours	Posi t			/)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Kej emplojee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JANA FRIELER PRESIDENT	20 00	Х		х				0	0	0
KEN GRIFFITH PRESIDENT ELECT	10 00	Х		x				0	0	0
MICHAEL ALLISON DIRECTOR	4 00	Х						0	0	0
STEVEN BUHROW DIRECTOR	4 00	Х						0	0	0
G A BUIE DIRECTOR	4 00	Х						0	0	0
DAVID ELLENA DIRECTOR	4 00	Х						0	0	0
JAYNE ELLSPERMANN DIRECTOR	4 00	Х						0	0	0
DENISE GREENE-WILKINSON DIRECTOR	4 00	Х						0	0	0
JANE GRIFFIN DIRECTOR	4 00	Х						0	0	0
ALLYN HUTTON DIRECTOR	4 00	Х						0	0	0
BEVERLY HUTTON DIRECTOR	4 00	Х						0	0	0
SUZI JENSEN DIRECTOR	4 00	Х						0	0	0
JERRY KEEPERS DIRECTOR	4 00	Х						0	0	0
TRACEY LAMB DIRECTOR	4 00	Х						0	0	0
LARRY LENZ DIRECTOR	4 00	Х						0	0	0
DONALD MACRINO DIRECTOR	4 00	Х						0	0	0
KENT MANN DIRECTOR	4 00	Х						0	0	0
JILL MARTIN DIRECTOR	4 00	Х						0	0	0
BOB MOORE DIRECTOR	4 00	Х						0	0	0
DORA OLIVARES DIRECTOR	4 00	Х						0	0	0
BARBARA-JANE PARIS DIRECTOR	4 00	Х						0	0	0
WILLIAM SCALETTA DIRECTOR	4 00	Х						0	0	0
KIM SLOTSVE DIRECTOR	4 00	Х						0	0	0
RICHARD SNYDER DIRECTOR	4 00	Х						0	0	0
GERALD N TIRO ZZI EXEC DIR /SECRETARY/TREAS	37 50	Х		х				412,588	0	14,153

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

(A) Name and Title	(B) Average hours per week	Posi	tion a Institutional Truste	C) (chec	cka)	Highest compens	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		itee	Istee		Ō.	sated				
HERSEY LENOR G DEPUTY EXECUTIVE DIRECTOR	37 50			х				305,112	0	19,517
JOHN N DRIPPS CHIEF FINANCIAL OFFICER	37 50			х				187,532	0	21,353
RICHARD FLANARY SENIOR DIRECTOR OF LEADERSHIP SERVIES	37 50				×			156,167	0	16,208
RON HODGE CHIEF INFORMATION OFFICER	37 50				X			156,114	0	13,380
JOHN NORI DIRECTOR,SCHOOL LEADERSHIP SERVICES	37 50					x		132,659	0	9,882
NANCY RIVIERE SENIOR DIRECTOR, EVENT SERVICES	37 50					х		129,637	0	15,830
PETER REED ASSOCIATE DIRECTOR, PDS	37 50					Х		127,846	0	15,480
BEVERLY CONEY DIRECTOR, EXECUTIVE SERVICES	37 50					Х		123,890	0	15,251
SANDRA FULGHAM CONTROLLER	37 50					х		122,661	0	15,154

Software ID: Software Version:

EIN: 52-6006937

Name: NATIONAL ASSOCIATION OF SECONDARY

SCHOOL PRINCIPALS

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRANKLIN MIDDLE SCHOOL817 N HARRIS CHAMPAIGN,IL 61820		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY
AMITYVILLE HIGH SCHOOL150 PARK AVENUE AMITYVILLE,NY 11701		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLUMBUS UNIFIED HIGH SCHOOL802 S HIGH SCHOOL AVENUE COLUMBUS, KS 66725		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY
BF TERRY HIGH SCHOOL 3911 AVENUE I ROSENBURG,TX 77471		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SMOKEY ROAD MIDDLE SCHOOL965 SMOKEY ROAD NEWNAN,GA 30260		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY
MO RAMAY JR HIGH SCHOOL1000 W STONE STREET FAYETTEVILLE,AK 72701		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY

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WORCESTER HIGH SCHOOL455 MAIN STREET WORCESTER, MA 01608		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY
HAYMON MORRIS1008 HAYMON-MORRIS ROAD WINDER, GA 30680		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY

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ROBERT M FINLEY MIDDLE SCHOOL150 DOSORIS LANE GLEN COVE,NY 11542		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY
NORTH BRUNSWICK HIGH SCHOOL35 REFERENDUM DRIVE NE BOLIVIA,NC 28422		PUBLIC SCHOOL	5,000				BREAKTHROUGH HIGH SCHOOLS GRANT - THE GOAL OF THE PROJECT IS TO IDENTIFY, RECOGNIZE, AND SHOWCASE MIDDLE LEVEL AND HIGH SCHOOLS THAT SERVE LARGE NUMBERS OF STUDENTS LIVING IN HIGH POVERTY

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SPRINGDALE HAR-BER HIGH SCHOOL300 JONES ROAD SPRINGDALE,AK 72762		PUBLIC SCHOOL	5,000				NAT'L ASSISTANT PRINCIPAL OF THE YEAR AWARDS RECOGNIZES OUTSTANDING MIDDLE LEVEL AND HIGH SCHOOL ASSISTANT PRINCIPALS WHO HAVE DEMONSTRATED SUCCESS IN LEADERSHIP, CURRICULUM AND PERSONALIZATION
DUNIWAY MIDDLE SCHOOL575 NW MICHELBOOK LANE MINNVILLE,OR 97128		PUBLIC SCHOOL	5,000				NATIONAL PRINCIPAL OF THE YEAR FINALISTS HONORS SECONDARY SCHOOL PRINCIPALS WHO HAVE SUCCEEDED IN PROVIDING HIGH- QUALITY LEARNING OPPORTUNITIES FOR STUDENTS AS WELL AS DEMONSTRATING EXEMPLARY CONTRIBUTIONS TO THE PROFESSION

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LOWNDES HIGH SCHOOL 1606 NORMAN DRIVE VALDOSTA, GA 31601		PUBLIC SCHOOL	5,000				NATIONAL PRINCIPAL OF THE YEAR FINALISTS HONORS SECONDARY SCHOOL PRINCIPALS WHO HAVE SUCCEEDED IN PROVIDING HIGH- QUALITY LEARNING OPPORTUNITIES FOR STUDENTS AS WELL AS DEMONSTRATING EXEMPLARY CONTRIBUTIONS TO THE PROFESSION