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DLN: 93493089007312

Form **990** 

Department of the Treasury

# **Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

Open to Public

Internal	Revenu	e Service	Fine organization may have	ve to use a copy of this return to satisfy	state reporting	requirement	Inspection		
A Fo	r the	2010 ca	lendar year, or tax year begir	nning 07-01-2010 and ending 06-30-20	11	D Formula	u idantification number		
		applicable	C Name of organization MID-EASTERN ATHLETIC CONFE	D Employer identification number					
☐ Ad c		_	Doing Business As			56-099	2403		
Nar	me cha	ange	boiling business ris			E Telephor	ne number		
┌ Inıt	ıal retu	urn		ıf maıl ıs not delivered to street address)	Room/suite	(757) 951-2055			
Ter	mınate	ed	2730 ELLSMERE AVENUE						
M Am	ended	return	City or town, state or country, a	nd ZIP + 4		<b>G</b> Gross rec	eipts \$ 6,531,243		
☐ App	olicatio	n pending	NORFOLK, VA 23513						
			F Name and address of p	orincipal officer	H(a) Isthisa	group return for a	offiliates? Yes No		
			DENNIS E THOMAS 2730 ELLSMERE AVENU	F					
			NORFOLK, VA 23513	_	H(b) Are all				
						o," attach a l p exemption	ist (see instructions)		
<b>I</b> Ta	x-exer	mpt status	501(c)(3) 501(c)(4)	◀ (insert no )	H(c) Grou	p exemption	number <b>F</b>		
	ebsit	e: ► WW	W MEACSPORTS COM						
V Eor	n of o	rannization	Corporation Trust Associa	ation C Other No.	I Voor of for	mation 1969	M State of legal domicile VA		
	rt I		mary	ation   Other F	L fear of for	mation 1969	M State of legal doffficile VA		
Гa			<u> </u>	sion or most significant activities					
Governance		ATHLET AND GR. VALUES	IC EXCELLENCE WHILE SIG ADUATION RATES, AND TO	ATHLETICS, THIS IS CONSISTENT, W. INIFICANTLY INCREASING STUDENT IN ASSURE EACH MEMBER INSTITUTION PROVE RELATIONSHIPS AMONG MENETITIVE ENVIRONMENT	-ATHLETE ACA N'S COMMITN	ADEMIC PE MENT TO TH	RFORMANCE LEVELS HE CONFERENCE'S		
Ŝ									
	2	Check th	nis box 🛏 if the organization	discontinued its operations or disposed	of more than 2	5% of its ne	t assets		
<u>e</u>			,	erning body (Part VI, line 1a)		1	3   13		
Activities &	4	Number	of independent voting membe	rs of the governing body (Part VI, line 11	o)	-	1 13		
Ą	5	Total nui	mber of individuals employed	ın calendar year 2010 (Part V, line 2a)			5 10		
	6	Total nui	mber of volunteers (estimate	ıfnecessary)			32		
	7a	Total uni	related business revenue from	n Part VIII, column (C), line 12		7	<b>a</b> 0		
	ь	Net unre	lated business taxable incom	e from Form 990-T, line 34		7	<b>b</b> 0		
					Prio	r Year	Current Year		
G)	8		• •	, line 1 h)		4,209,187			
Revenue	9	_		, line 2g)		2,207,98	· · ·		
	10			mn (A), lines 3, 4, and 7d)	•	11,839	,		
	11 12			A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 (must equal Part VIII, column (A), lii		21,140	6,750		
	12			· · · · · · · · · · · · · · · ·	ile	6,450,147	6,531,243		
	13			art IX, column (A), lines 1–3)		1,186,549	1,278,531		
	14	Benefi	ts paid to or for members (Pai	t IX, column (A), line 4)		(	0		
ø,	15	Salarıe	746,454	903.031					
386	16-	10)	aranal fundrararing food (Bart I		-				
Expenses	16a			(X, column (A), line 11e)			0		
Д	Ь   17		ndraising expenses (Part IX, column	(D), line 25) • 204,230 ), lines 11a-11d, 11f-24f)		4,205,628	3 4,392,188		
	18		expenses (Part IX, column (A expenses Add lines 13–17 (r		6,138,63				
	19		ue less expenses Subtract III		311,516				
<u>አ</u> ወ	† <del></del>				Beginning	of Current	,		
නි කිරීම විසිර						ear	End of Year		
Net Assets or Fund Balances	20					3,107,972	, ,		
3 E	21					962,377	<u> </u>		
	22			ct line 21 from line 20		2,145,59	2,202,188		
	rt II		ature Block						
	ledge	and belie	3 · · ·	nined this return, including accompanying te. Declaration of preparer (other than offic		,	•		
		****	**		20	12-03-29			
Sign	1	I B	ture of officer		Da				
Here		DENN	NIS E THOMAS COMMISSIONER						
			or print name and title						
		Print/Type		Preparer's signature MELINDA DAVIS		Check if self- employed F	_ PTIN		
Paid		preparer's Fırm's nar	ne DIXON HUGHES GOODMAN LLE			ampioyeu F	Eirm's ETN &		
Prepa	arer	Euro's ada	fress • 440 MONTICELLO AVE SUITE				Firm's EIN		
Haa (	S-1.	I min a auc	11000 - THE HONTICELLO MAT SOLLE	. 1100			Phone no 🕨 (757) 624-		

NORFOLK, VA 23510

May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . . . . . . . .

**Use Only** 

Phone no ▶ (757) 624-5100

Part	Statement of Progra Check if Schedule O cont.				
1	Briefly describe the organization	ı's mıssıon			
COND EXCEI RATES IMPRO	DLLABORATE WITH OTHER CO DUCT OF INTERCOLLEGIATE A LLENCE WHILE SIGNIFICANTL S, AND TO ASSURE EACH MEM DVE RELATIONSHIPS AMONG RONMENT	THLETICS, THIS IS CO Y INCREASING STUDE IBER INSTITUTION'S C	NSISTENT, WITH THE NT-ATHLETE ACADEM OMMITMENT TO THE	CONFERENCES VALUE IC PERFORMANCE LEV CONFERENCE'S VALUE	ES TO SUSTAIN ATHLETIC FELS AND GRADUATION ES, AND IN SO DOING, TO
	Did the organization undertake a the prior Form 990 or 990-EZ? If "Yes," describe these new serv		ervices during the year v	which were not listed on	「Yes 「No
3	Did the organization cease condiservices?  If "Yes," describe these changes	ucting, or make significar	nt changes in how it con	ducts, any program · · · · · ·	┌ Yes ┌ No
4	Describe the exempt purpose ac Section 501(c)(3) and 501(c)(4 allocations to others, the total ex	hievements for each of th ) organizations and section	on 4947(a)(1) trusts ar	e required to report the a	•
4a	(Code ) (Expert TO ADMINISTER THE COLLEGIATE ATH			) (Revenue \$	2,308,321 )
4b	(Code ) (Exper	nses \$	ıncludıng grants of \$	) (Revenue \$	)
4c	(Code ) (Exper	nses \$	including grants of \$	) (Revenue \$	)
4d	Other program services (Desc (Expenses \$	ribe in Schedule O) including grants o	f \$	) (Revenue \$	)
4e	Total program service expenses			, , , , , , , , , , , , , , , , , , , ,	,

Part IV	Checklist	of Rea	uired	Sched	dules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (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		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
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	Yes	
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? <i>If</i> " <i>Yes,"</i> 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
	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
	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
	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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "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		Νo
	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> " <i>Yes,"</i> 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? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> 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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	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? If "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		No
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	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
а	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? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		.୮	
			Yes	No
1	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	! 		
	<b>1b</b> 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
	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?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		Ν
)	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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		N
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			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
)	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
=	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	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		N
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
•	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
:	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
d	If "Yes," indicate the number of Forms 8282 filed during the year   7d			
_	Delther and the second of the			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	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		
	Section 501(c)(7) organizations. Enter  Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club  10b			
	facilities	1		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	<u> </u>		
D	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
а	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b	 		
_	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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		
h	Enter the amount of reserves the organization is required to maintain by the states			
ט	in which the organization is licensed to issue qualified health plans	]		
c	Enter the amount of reserves on hand			
a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Voc " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		<u>'\</u>

**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
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		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νο
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
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	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ection B. Policies (This Section B requests information about policies not required by the Internal 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?		V	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	Yes	
12a	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	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 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►VA			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply  Own website. Another's website. Upon request			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > JONATHAN GATTIS
  2730 ELLSMERE AVENUE

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

Check if Schedule O contains a response to any question in this Part VII . . . . . . . . . . . . . .

#### 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 compensated any current officer, director, or trustee

<b>(A)</b> Name and Title	ame and Title Average Position (check all hours that apply)					II		( <b>D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	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)	compensation from the organization and related organizations
(1) DR TRUDIE KIBBE REED BOARD MEMBER		х						0	0	0
(2) DR THELMA B THOMPSON BOARD MEMBER		х						0	0	0
(3) DR REGINALD AVERY BOARD MEMBER		х						0	0	0
(4) DR DAVID WILSON BOARD MEMBER		Х						0	0	0
(5) DR HARRY WILLIAMS BOARD MEMBER		х						0	0	0
(6) DR KIM LUCKES BOARD MEMBER		х						0	0	0
(7) DR JAMES AMMONS BOARD MEMBER		х						0	0	0
(8) DR HAROLD MARTIN BOARD MEMBER		Х						0	0	0
(9) DR WILLIAM R HARVEY BOARD MEMBER		Х						0	0	0
(10) DR GEORGE COOPER BOARD MEMBER		х						0	0	0
(11) DR SIDNEY RIBEAU BOARD MEMBER		х						0	0	0
(12) DR CHARLIE NELMS BOARD MEMBER		х						0	0	0
(13) DR EARL YARBROUGH BOARD MEMBER		х						0	0	0
(14) DR DENNIS THOMAS COMMISSIONER	70 00			х		х		229,701	0	39,363
(15) PATRICIA PORTER DIRECTOR OF MEDIA RELATION	55 00				х			62,202	0	19,546
(16) SONJA STILLS DIRECTOR OF COMPLIANCE	60 00				х			69,796	0	7,911
	•									Form 990 (2010)

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

	(A) Name and Title	(B) A verage hours		(( tion ( :hat a	che		II		(D) Reportable compensation from the	(E) Reportable compensatio from related		(F) Estima amount o	ated of other
		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)  MISC)		5	compens from i organizat relat organiza	the ion and ed
	RAYNOID DEDEAUX CTOR OF CHAMPIONSHIPS	55 00				×			61,796		0		3,918
	0.1.7.1							<u> </u>  ►					
1b c	Sub-Total						<u>· · ·</u>	-			+		
								<b>&gt;</b>	423,495		0		70,738
2	Total number of individuals (inclu \$100,000 in reportable compens	ıdıng but not lım	ıted to 1	those	lıst			who	received more than	1			
												Yes	No
3	Did the organization list any <b>form</b> on line 1a? <i>If</i> "Yes," complete Sch									ted employee	3		No
4	For any individual listed on line 1 organization and related organization and related organization.										4	Yes	
5	Did any person listed on line 1a is services rendered to the organiza										5		No
	ction B. Independent Cont											1	

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	<b>(B)</b> Description of services	<b>(C)</b> Compensation
LEVI RAY & SHOUP INC 2401 MONROE SPRINGFIELD, IL 62704	EDITING SYSTEM	121,671
SYNERGY SPORTS ENTRADERO AVENUE TORRANCE, CA 90503	VIDEO EXCHANGE	110,000

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 ►2

Program Service Revenue and other similar amount	and other similar amounts).  Income from investment of tax-exer	and 1f es 1a-1f \$	665,000  3,550,130  Business Code  711210  711210  711210  711210	(A) Total revenue  4,215,130  1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571 7,792	or exempt function revenue 1,315,320 493,431 329,810 80,800 63,944 18,266		(D) Revenu exclude from tax under section 512, 513, or 514
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	4,215,130 1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266	revenue	from tax under section 512, 513, o
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		from tax under section 512, 513, o
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		under section 512, 513, o
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		512, 513, o
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		513, o
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		513, o
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		514
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	b Membership dues	. 1b . 1c . 1d . 1e and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	c Fundraising events	and 1f es 1a-1f \$	3,550,130  Business Code  711210  711210  711210  711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	d Related organizations e Government grants (contributions)  f All other contributions, gifts, grants, similar amounts not included above Noncash contributions included in line h Total. A dd lines 1a-1f  2a  MEMBER OFFICIATING FEE  BASKETBALL TOURNAMENT  c ROYALTY INCOME d CLINIC AND CAMP FEES PROMOTIONAL ITEMS f All other program service reverse grants and other similar amounts) .  Income from investment of tax-exerts Royalties	and 1f es 1a-1f \$  enue dividends, interest  mpt bond proceeds	Business Code 711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	e Government grants (contributions)  f All other contributions, gifts, grants, similar amounts not included above Noncash contributions included in line h Total. A dd lines 1a-1f  MEMBER OFFICIATING FEE  BASKETBALL TOURNAMENT c ROYALTY INCOME d CLINIC AND CAMP FEES e PROMOTIONAL ITEMS f All other program service reverse Total. A dd lines 2a-2f  Investment income (including and other similar amounts) . Income from investment of tax-exer	le and lf es 1a-1f \$  enue  dividends, interest  mpt bond proceeds	Business Code 711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	f All other contributions, gifts, grants, similar amounts not included above Noncash contributions included in line h Total. A dd lines 1a-1f  MEMBER OFFICIATING FEE b BASKETBALL TOURNAMENT c ROYALTY INCOME d CLINIC AND CAMP FEES e PROMOTIONAL ITEMS f All other program service revolutions g Total. A dd lines 2a-2f  Investment income (including and other similar amounts) . Income from investment of tax-exer	enue  dividends, interest  mpt bond proceeds	Business Code 711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	f All other contributions, gifts, grants, similar amounts not included above Noncash contributions included in line h Total. A dd lines 1a-1f  MEMBER OFFICIATING FEE b BASKETBALL TOURNAMENT c ROYALTY INCOME d CLINIC AND CAMP FEES e PROMOTIONAL ITEMS f All other program service revolutions g Total. A dd lines 2a-2f  Investment income (including and other similar amounts) . Income from investment of tax-exer	enue  dividends, interest  mpt bond proceeds	Business Code 711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Program Service Revenue e e e e e e e e e e e e e e e e e e	similar amounts not included above Noncash contributions included in line  h Total. A dd lines 1a-1f  MEMBER OFFICIATING FEE  BASKETBALL TOURNAMENT  c ROYALTY INCOME  d CLINIC AND CAMP FEES  PROMOTIONAL ITEMS  f All other program service reverance of the control of the co	es 1a-1f \$  enue  dividends, interest  mpt bond proceeds	Business Code 711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Program Service Revenue  Program Service Revenue  3 4 5 6a 6	h Total. Add lines 1a-1f  MEMBER OFFICIATING FEE  BASKETBALL TOURNAMENT  C ROYALTY INCOME  d CLINIC AND CAMP FEES  PROMOTIONAL ITEMS  f All other program service revolutions  g Total. Add lines 2a-2f  Investment income (including and other similar amounts) .  Income from investment of tax-exerts  Royalties	enue dividends, interest mpt bond proceeds	711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
Brogram Service Revenue e e e e e e e e e e e e e e e e e e	MEMBER OFFICIATING FEE  b BASKETBALL TOURNAMENT c ROYALTY INCOME d CLINIC AND CAMP FEES e PROMOTIONAL ITEMS f All other program service revol g Total. Add lines 2a-2f 3 Investment income (including and other similar amounts) . 4 Income from investment of tax-exerts 5 Royalties	enue dividends, interest mpt bond proceeds	711210 711210 711210 711210	1,315,320 493,431 329,810 80,800 63,944 18,266 2,301,571	1,315,320 493,431 329,810 80,800 63,944 18,266		
3 4 5	MEMBER OFFICIATING FEE  BASKETBALL TOURNAMENT  C ROYALTY INCOME  d CLINIC AND CAMP FEES  PROMOTIONAL ITEMS  f All other program service revolutions g Total. Add lines 2a-2f  3 Investment income (including and other similar amounts) . 4 Income from investment of tax-exerts  Royalties	dividends, interest  property the state of	711210 711210 711210 711210	493,431 329,810 80,800 63,944 18,266 2,301,571	493,431 329,810 80,800 63,944 18,266		
3 4 5	MEMBER OFFICIATING FEE  BASKETBALL TOURNAMENT  C ROYALTY INCOME  d CLINIC AND CAMP FEES  PROMOTIONAL ITEMS  f All other program service revolutions g Total. Add lines 2a-2f  3 Investment income (including and other similar amounts) . 4 Income from investment of tax-exerts  Royalties	dividends, interest  property the state of	711210 711210 711210	493,431 329,810 80,800 63,944 18,266 2,301,571	493,431 329,810 80,800 63,944 18,266		
3 4 5	b BASKETBALL TOURNAMENT c ROYALTY INCOME d CLINIC AND CAMP FEES e PROMOTIONAL ITEMS f All other program service revol g Total. Add lines 2a-2f 3 Investment income (including and other similar amounts) . 4 Income from investment of tax-exer	dividends, interest  property the state of	711210 711210 711210	493,431 329,810 80,800 63,944 18,266 2,301,571	493,431 329,810 80,800 63,944 18,266		
3 4 5 6a	c ROYALTY INCOME d CLINIC AND CAMP FEES e PROMOTIONAL ITEMS f All other program service revol g Total. Add lines 2a-2f 3 Investment income (including and other similar amounts) . 4 Income from investment of tax-exer	dividends, interest  photograph bond proceeds proceeding proceeds proceeding proceeds proceeding proceeding proceeds proceeding pro	711210 711210	329,810 80,800 63,944 18,266 2,301,571	329,810 80,800 63,944 18,266		
3 4 5	d CLINIC AND CAMP FEES  PROMOTIONAL ITEMS  f All other program service revolutions  g Total. Add lines 2a-2f  Investment income (including and other similar amounts) .  Income from investment of tax-exerts  Royalties	dividends, interest  photograph bond proceeds proceeding proceeds proceeding proceeds proceeding proceeding proceeds proceeding pro	711210	80,800 63,944 18,266 2,301,571	80,800 63,944 18,266		
3 4 5 6a	PROMOTIONAL ITEMS  f All other program service revolutions  g Total. Add lines 2a-2f  3 Investment income (including and other similar amounts) .  4 Income from investment of tax-exerts  5 Royalties	dividends, interest  photograph bond proceeds proceeding proceeds proceeding proceeds proceeding proceeding proceeds proceeding pro		63,944 18,266 2,301,571	63,944 18,266		
3 4 5	g Total. Add lines 2a-2f  3 Investment income (including and other similar amounts) .  4 Income from investment of tax-exer	dividends, interest  photograph bond proceeds proceeding proceeds proceeding proceeds proceeding proceeding proceeds proceeding pro		18,266 2,301,571	18,266		
3 4 5	Investment income (including and other similar amounts). Income from investment of tax-exers Royalties	dividends, interest  purple bond proceeds		2,301,571			
3 4 5 6a	Investment income (including and other similar amounts). Income from investment of tax-exers Royalties	dividends, interest  purple bond proceeds					
4 5 6a	and other similar amounts).  Income from investment of tax-exer  Royalties	mpt bond proceeds		7,792			1
5 6a	Income from investment of tax-exers Royalties	mpt bond proceeds		· .			7,79
5 6a I	<b>5</b> Royalties						
6a	·						
l l	6a Gross Rents	(ı) Real	(II) Personal				
	on disas italias						
. ا	<b>b</b> Less rental						
	expenses c Rental income						
	or (loss)  d Net rental income or (loss).	<b>-</b>					
<u> </u>	u Net rental income of (1033).	(ı) Securities	(II) O ther				
78	<b>7a</b> Gross amount	(i) Securities	(ii) o thei				
	from sales of assets other						
	than inventory						
'	<b>b</b> Less cost or other basis and						
	sales expenses  • Gain or (loss)						
	d Net gain or (loss)						
0-	<b>8a</b> Gross income from fundraising						
<u> </u>	(not including						
	\$ of contributions reported on li	ne 1c)					
:	See Part IV, line 18						
		а					
	${f b}$ Less direct expenses						
_ <u>_</u> c	c Net income or (loss) from fund						
		tivities See Part IV, line 19 .					
	<b>b</b> Less direct expenses		ь				
<b>—</b>	c Net income or (loss) from gan						
10	10a Gross sales of inventory, less returns and allowances .						
		a					
י   י	<b>b</b> Less cost of goods sold .	. b					
_ c	c Net income or (loss) from sale	es of inventory 🕨					
	Miscellaneous Revenue		Business Code				
11	11a <sub>V IO L</sub> ATIONS		711210	6,750	6,750		
	b						
	с	_					
	<b>d</b> All other revenue						
	e Total. Add lines 11a-11d .			6.750			
		▶		6,750		ĺ	

				Page <b>10</b>
t IX Statement of Functional Expenses				
	-		(D)	
ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D</b> ) Fundraising expenses
Grants and other assistance to governments and organizations in the U S See Part IV, line 21		S. PS. III S.	general enpenses	
Grants and other assistance to individuals in the U.S. See Part IV, line 22	1,278,531	1,278,531		
Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16		, ,		
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and key employees	494,233	240,931	82,896	170,406
Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	201,367	104,791	44,018	52,558
Other salaries and wages				
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	47,563	24,752	10,397	12,414
Other employee benefits	17,529	9,122	3,832	4,575
Payroll taxes	43,239	22,502	9,452	11,285
Fees for services (non-employees)				·
Legal	22,329	2,679	19,650	
Accounting	41,980	5,038	36,942	
Lobbying				
Professional fundraising services See Part IV, line 17				
Investment management fees				
-	14,010	1,681	12,329	
Advertising and promotion	1,395			1,395
Office expenses	49,808	17,926	31,882	·
Information technology				
Royalties				
	96,972	73,235	17,507	6,230
	82,709	78,574	<del>                                     </del>	·
Payments of travel or entertainment expenses for any federal, state, or local public officials	·			
Conferences, conventions, and meetings	21,229	21,229		
Interest	43,640		43,640	
Payments to affiliates				
Depreciation, depletion, and amortization	32,018	32,018		
Insurance				
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)				
	1,454,431	1,454,431		
DISTRIBUTIONS TO MEMBER	1,088,488	1,088,488		
CHAMPIONSHIP MEETS AND	660,674	660,674		
ESPN CONTRACT TO INSTIT	252,083	252,083		
TOURNAMENT MARKETING AN	115,386	115,386		
All other expenses	415,036	218,258	191,405	5,373
Total functional expenses. Add lines 1 through 24f	6,474,650	5,702,329	508,085	264,236
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	-			· ·
	Section 501(c)(3) and 501(c)(4) organizations must lot her organizations must complete column (A) but are not required to cot include amounts reported on lines 6h, b, 9h, and 10b of Part VIII.  Grants and other assistance to governments and organizations in the U S See Part IV, line 21  Grants and other assistance to individuals in the U S See Part IV, line 22  Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958(p)(1)) and persons described in section 4958(p)(3)(B)  Other salaries and wages  Pension plan contributions (include section 401(k) and section 403(b) employer contributions)  Other employee benefits  Payroll taxes  Fees for services (non-employees)  Management  Legal  Accounting  Lobbying  Professional fundraising services See Part IV, line 17  Investment management fees  Other  Advertising and promotion  Office expenses  Occupancy  Travel  Payments of travel or entertainment expenses for any federal, state, or local public officials  Conferences, conventions, and meetings  Interest  Payments to affiliates  Depreciation, depletion, and amortization  Insurance  Other expenses Itemize expenses not covered above (List misscellaneous expenses in line 24f I filine 24f amount exceed 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)  OFFICIATING FEES  DISTRIBUTIONS TO MEMBER  CHAMPIONSHIP MEETS AND  ESPN CONTRACT TO INSTIT  TOURNAMENT MARKETING AN  All other expenses  Total functional expenses. Add lines 1 through 24f  Joint costs. Check here \mather if following  SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a	Section 501(c)(3) and 501(c)(4) organizations must complete column (a) but are not required to complete column (b), 9b, 40 and 10b of Part VIII.  Include amounts reported on lines 6b, 9b, 9b, and 10b of Part VIII.  Grants and other assistance to governments and organizations in the US See Part IV, line 21  Grants and other assistance to individuals in the US See Part IV, line 22  Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, line 27  Grants and other assistance to governments, organizations, and individuals outside the US See Part IV, line 17  Benefits paid to or for members  Compensation of current officers, directors, trustees, and key employees  Compensation not included above, to disqualified persons (as defined under section 4958 (f)(11)) and persons described in section 4958 (f)(3)(8) and persons described in section 4958 (f)(13) and persons described in sec	In other organizations must complete columns (B) (b) (C), and on include amounts reported on lines 6b), 6b, and 10b of Part VIII.    Grants and other assistance to governments and organizations in the U S See Part IV, line 21   Grants and other assistance to governments and organizations in the U S See Part IV, line 21   Grants and other assistance to governments, organizations and and the complete outside the U S See Part IV, line 22   Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16   Benefits pand to or for members	The the roganizations must complete column (A) but are not required to complete column (B), but are not required to column (B),

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1 469,228 503,160 2 Savings and temporary cash investments . . . . . . . 2,072,811 1,773,435 3 523,927 845,963 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 8 8 Prepaid expenses and deferred charges . . . . 9 10a Land, buildings, and equipment cost or other basis Complete 1.257.309 10a Part VI of Schedule D 10b 235.734 ь Less accumulated depreciation . . . . . 30.966 10c 1.021.575 11 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 13 Investments—program-related See Part IV, line 11 . . 14 14 11,040 15 2,004 15 16 3,107,972 16 4,146,137 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 137,946 17 160.451 17 Accounts payable and accrued expenses . 18 18 665,000 19 19 872.871 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 786.274 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . . 25 159,431 25 124.353 Other liabilities Complete Part X of Schedule D . . . . . 26 962,377 26 1,943,949 **Total liabilities.** Add lines 17 through 25 . . . . Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets . . . . -284,660 -337,531 Temporarily restricted net assets . . . . . 2,430,255 2,539,719 28 28 Fund 29 29 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here 🕨 🥅 and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds . . . . . Assets 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 2,145,595 33 2,202,188 33 Total net assets or fund balances . . . . 34 Total liabilities and net assets/fund balances . . . . . 3.107.972 4,146,137

Ра	Check if Schedule O contains a response to any question in this Part XI			.୮	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6.5	531,24
2	Total expenses (must equal Part IX, column (A), line 25)	2			474,65
3	Revenue less expenses Subtract line 2 from line 1	3			56,59
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,1	145,59
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
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		2,2	202,18
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			୮	•
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
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	1			
	Schedule O	•	2c		No
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				
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	2	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

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DLN: 93493089007312

OMB No 1545-0047

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# **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.

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

IIIICIIIai	Nevenue Service				Inspection
If the	e organization answered "Ye	es," to Form 990, Part IV, Line 3, or	Form 990-EZ, Pa	rt V, line 46 (Political (	Campaign Activities),
then					
	, ,, , <del>-</del>	omplete Parts I-A and B Do not comple			
		501(c)(3)) organizations Complete Pa	rts I-A and C below	Do not complete Part I-	В
	ction 527 organizations Complet				
	<del>-</del>	es," to Form 990, Part IV, Line 4, or		•	-
		at have filed Form 5768 (election under			
	, ,, , <del>-</del>	at have NOT filed Form 5768 (election t		• •	•
	_	es," to Form 990, Part IV, Line 5 (Pi	roxy rax) or Forn	n 990-E∠, Part V, line 3	5a (Proxy Tax), then
	ction 501(c)(4), (5), or (6) organ me of the organization	izations Complete Fart III		Employarid	entification number
	-EASTERN ATHLETIC CONFERENCE			Lilipioyer iu	entineation number
				56-099240	) 3
Par	I-A Complete if the or	rganization is exempt under	section 501(c	) or is a section 52	27 organization.
1	Provide a description of the oi	rganızatıon's dırect and ındırect politi	cal campaign acti	vities in Part IV	
2	Political expenditures		, -	▶	\$
3	Volunteer hours			·	Ψ
_	v oluliteer liours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(c	)(3).	
1	Enter the amount of any excis	e tax incurred by the organization un	der section 4955	<b>•</b>	\$
2	Enter the amount of any excis	e tax incurred by organization manag	jers under section	4955	\$
3	If the organization incurred a	section 4955 tax, did it file Form 472	20 for this year?		☐ Yes ☐ No
4a	Was a correction made?				□ Yes □ No
ь	If "Yes," describe in Part IV				·
		ganization is exempt under	section 501(c	) except section 5	01(c)(3).
1		ended by the filing organization for se			\$
2	Enter the amount of the filing	organization's funds contributed to ot	ther organizations	for section 527	
	exempt funtion activities		·	•	\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter here	and on Form 1120	)-POL, line 17b	\$
4	Did the filing organization file	Form 1120-POL for this year?			│ Yes │ No
5	organization made payments amount of political contributio	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid from Irrectly delivered t	n the filing organization o a separate political or	's funds Also enter the ganızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - (	contributions received

Sc	hedule C (Form 990 or 990-EZ) 2010						Page <b>2</b>
P	art II-A Complete if the organization under section 501(h)).	is ex	cempt under	section 501(c	)(3) and fi	led Form 5768	
A B	Check   If the filing organization belongs to a Check   If the filing organization checked bo			" provisions apply	/		
	Limits on Lobbying E (The term "expenditures" means a			)		<b>(a)</b> Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
<u>1</u> a	Total lobbying expenditures to influence public o	pinion	(grass roots lob	oyıng)			
b	Total lobbying expenditures to influence a legisl	atıve b	ody (direct lobby	ıng)			
c	Total lobbying expenditures (add lines 1a and 1	b)					
d	Other exempt purpose expenditures						
е	Total exempt purpose expenditures (add lines 1	c and :	Ld)				
f	Lobbying nontaxable amount Enter the amount columns	from th	e following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The	lobbying nontaxa	ble amount is:			
	Not over \$500,000	20%	of the amount on lin	e 1e			
	Over \$500,000 but not over \$1,000,000	\$100	,000 plus 15% of the	excess over \$500,00	0		
	Over \$1,000,000 but not over \$1,500,000	\$175	,000 plus 10% of the	excess over \$1,000,0	000		
	Over \$1,500,000 but not over \$17,000,000	\$225	,000 plus 5% of the	excess over \$1,500,00	00		
	Over \$17,000,000	\$1,00	00,000				
	Grassroots nontaxable amount (enter 25% of lir	ne 1 f)					
_	Subtract line 1g from line 1a If zero or less, ent	-					
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -					
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h d	or line 11, did the	organization file F	orm 4720 rep	orting	┌ Yes ┌ No
	4-Year Av (Some organizations that made a columns below. See t	secti	on 501(h) ele		havè to co		ne five
	Lobbying Exp	endit	ures During 4	l-Year Averag	jing Period		
	Calendar year (or fiscal year						

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> Total				
2a	Lobbying non-taxable amount									
b	Lobbying ceiling amount (150% of line 2a, column(e))									
С	Total lobbying expenditures									
d	Grassroots non-taxable amount									
e	Grassroots ceiling amount (150% of line 2d, column (e))									
f	Grassroots lobbying expenditures									

Part II-B	Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768
	(election under section 501(h)).

	(election under section 501(h)).					
		(;	a) 	-	(b)	
		Yes	No	/	A moun	it
1	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	V olunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?			1		
d	Mailings to members, legislators, or the public?					
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?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
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)?					
b	If "Yes," enter the amount of any tax incurred under section 4912		•	1		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5),	or s	ectio	n
	501(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		٦	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		l	2	Yes	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?		r	3		Νo
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	II-A,			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).					
	Current year	2a	<u> </u>			
	Carryover from last year	2b				
	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				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pä	art IV Supplemental Information	1				

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 1i Also, complete this part for any additional information

Identifier Return Reference Explanation

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DLN: 93493089007312

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** MID-EASTERN ATHLETIC CONFERENCE 56-0992403

Par		tions Maintaining Donor Acon answered "Yes" to Form 99	dvised Funds or Other Similar Fo	unds	or Accounts.	Complet	e if the
	or garnizado	Transwered res to rorm 55	(a) Donor advised funds	(	<b>b)</b> Funds and ot	her accoun	nts
1	Total number at end	lofyear			-		
2	Aggregate contribut	tions to (during year)					
	Aggregate grants fr	, , ,					
	Aggregate value at	, , ,					
5	Did the organization	n inform all donors and donor advi	sors in writing that the assets held in don	or advi	sed		
-	•		organization's exclusive legal control?			☐ Yes	┌ No
6	used only for charit conferring impermis	able purposes and not for the ben ssible private benefit	donor advisors in writing that grant funds efit of the donor or donor advisor, or for a	ny othe	r purpose	┌ Yes	☐ No
		•	if the organization answered "Yes" to	O FOLL	1 990, Part IV	ine 7.	
1	Preservation of Preservation o	f open space	on or pleasure) Preservation of an Preservation of a c	certifie	d historic struct	•	1
2		-2d if the organization held a quali st day of the tax year	fied conservation contribution in the form	ofaco	nservation		
					Held at the I	nd of the	Year
а	Total number of cor	nservation easements		2a			
b	Total acreage restr	ricted by conservation easements		2b			
c	Number of conserva	ation easements on a certified his	toric structure included in (a)	2c			
d	Number of conserva	ation easements included in (c) a	cquired after 8/17/06	2d			
3	Number of conservathe taxable year ►_		rred, released, extinguished, or terminate	ed by th	e organization d	uring	
4	Number of states w	here property subject to conserva	ation easement is located ►				
5		ion have a written policy regarding conservation easements it holds?	g the periodic monitoring, inspection, hand	dling of	violations, and	☐ Yes	┌ No
6	Staff and volunteer	hours devoted to monitoring, insp	pecting and enforcing conservation easem	nents d	uring the year ►		
7	A mount of expense	s incurred in monitoring, inspecti	ng, and enforcing conservation easements	s during	g the year ► \$ _		
8	Does each conserv 170(h)(4)(B)(ı) and		(d) above satisfy the requirements of sec	tion		☐ Yes	┌ No
	balance sheet, and the organization's a	include, if applicable, the text of t accounting for conservation easen	onservation easements in its revenue and the footnote to the organization's financial nents Ins of Art, Historical Treasures,	stater	nents that descr	ıbes	
<u> </u>			"Yes" to Form 990, Part IV, line 8.	JI ULI			
1a	art, historical treas	ures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or researd lancial statements that describes these it	ch in fu			,
b	historical treasures		116, to report in its revenue statement a public exhibition, education, or research i s				
	(i) Revenues includ	ded in Form 990, Part VIII, line 1			<b>►</b> \$		
	(ii) Assets included	d ın Form 990, Part X			<b>►</b> \$		
2		received or held works of art, histo required to be reported under SFA	orıcal treasures, or other sımılar assets fo S 116 relatıng to these items	or finan	cıal gaın, provid	e the	
а	Revenues included	ın Form 990, Part VIII, line 1			<b>►</b> \$		
b	Assets included in	Form 990, Part X			<b>►</b> \$_		

3	Using the organization's accession and othe						•				
	ıtems (check all that apply)			_							
а	Public exhibition		d	ı	Loan	orexch	nange prog	rams			
b	Scholarly research		e	Γ	Other	•					
c	Preservation for future generations										
	Provide a description of the organization's co	ollections and expla	aın hov	v the	y furthe	rthe o	organization	ı's e>	kempt purpose	n	
	During the year, did the organization solicit									_	_
	assets to be sold to raise funds rather than t		·							Yes	No
Pari	Part IV, line 9, or reported an an	•			_		answere	a "Y	es" to Form 9	190,	
	Is the organization an agent, trustee, custod included on Form 990, Part X?					itions c	or other ass	ets		┌ Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ing t	able		Γ		An	ount	
c	Beginning balance						Ī	1c			
d	Additions during the year						Ī	1d			
e	Distributions during the year						ļ	1e			
f	Ending balance						ļ	1f			
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	ie 21?				L		L	☐ Yes	Гио
	If "Yes," explain the arrangement in Part XIV	,								,	,
	t V Endowment Funds. Complete		n ans	were	ed "Ye	s" to f	Form 990	Par	t IV. line 10.		
		(a)Current Year		Prior			o Years Back		Three Years Back	(e)Four Y	ears Back
1a	Beginning of year balance										
b	Contributions										
c	Investment earnings or losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the yea	r end balance held	as			•			,		
а	Board designated or quasi-endowment										
b	Permanent endowment										
	Term endowment ▶										
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	are held	d and a	dmınıstere	d for	the		
	organization by									Yes	No
	(i) unrelated organizations			•				•	3a(		<del>                                     </del>
	(ii) related organizations If "Yes" to 3a(ii), are the related organizatio					• •		•	Sa(		<u> </u>
						• •		•	3.	<u> </u>	<u> </u>
4	Describe in Part XIV the intended uses of th										
	Describe in Part XIV the intended uses of the VI Investments—Land, Buildings		nt. S			90. Pa	art X. line	10.			
4 Pari	VI Investments—Land, Buildings		nt. S	ee F	orm 9	•	· ·		(c) Accumulated		
			e <b>nt.</b> S	ee F		other	(b)Cost or o	ther	(c) Accumulated depreciation	( <b>d</b> ) Bo	ook value
Part	VI Investments—Land, Buildings		. nt. S	ee F	orm 9	other	(b)Cost or o	ther		(d) Bo	ook value 232,300
Pari	Description of investment		e <b>nt.</b> S	ee F	orm 9	other	(b)Cost or obasis (other	other er)		( <b>a</b> ) BC	
Pari 1a L b B	Description of investment		ent. S	ee F	orm 9	other	(b)Cost or obasis (other	other er) ,300	depreciation	( <b>a</b> ) BC	232,300
Pari 1a L b B c L	Description of investment  and		• <b>nt.</b> S	ee F	orm 9	other	( <b>b</b> )Cost or c basis (other 232	other er) ,300	depreciation	2	232,300
Part  1a L b B c L d E	Description of investment  and		• <b>nt.</b> S	ee F	orm 9	other	(b)Cost or c basis (other 232 767	,300 ,700	depreciation	2	232,300 753,768

Part VIII Investments—Other Securities. See	Form 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)		Cost or end-or	f-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		
(a) Description of investment type	(b) Book value		d of valuation
	. ,	Cost or end-of	f-year market value
			_
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, III			
(a) Descrip	otion		(b) Book value
<b>—</b>	- \		
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 1			
Part X Other Liabilities. See Form 990, Part X	, line 25.		
1 (a) Description of Liability	(b) A mount		
Federal Income Taxes			
OTHER CURRENT LIABILITIES	-922		
DUE TO MEMBER SCHOOLS	25,000		
DEFERRED COMPENSATION	100,275		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	124,353		
	1		

orm 990 to Financial Statements	
1	6,531,243
2	6,474,650
3	56,593
4	
5	
6	
7	
8	
9	0
ines 3 and 9	56,593
al Statements With Revenue per Return	 n
ments 1	6,531,243
2	
2a	
. 2b	
2c	
2d	
2e	0
	6,531,243
1	
b . 4a	
. 4b	
4c	0
Part I, line 12 )	6,531,243
ial Statements With Expenses per Return	
1	6,474,650
2a	
2b	
2c	
2d	
2e	0
	6,474,650
b 4a	
4b	
4c	0
Part I, line 18 ) 5	6,474,650

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

Ident if ier Return Reference | Explanation

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**Schedule I** (Form 990)

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

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

Attach to Form 990

OMB No 1545-0047

DLN: 93493089007312

Department of the Treasury Internal Revenue Service

Name of the organization MID-EASTERN ATHLETIC CONFERENCE Employer identification number

56-0992403

the selection criteria used to Describe in Part IV the orga	anızatıon's procedu		e of grant funds in the	United States			
Form 990, Part IV	, line 21 for any	recipient that receive eded.	d more than \$5,000	. Check this box if	no one recipient rece	eived more than \$5,	
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 grant or assistance
(1) BETHUNE-COOKMAN UNIVERSITY			69,698				STUDENT ATHLETE OPPORTUNITY FUND
(2) COPPIN STATE UNIVERSITY			41,383				STUDENT ATHLETE OPPORTUNITY FUND
(3) DELAWARE STATE UNIVERSITY			78,410				STUDENT ATHLETE OPPORTUNITY FUND
(4) FLORIDA A&M UNIVERSITY			63,164				STUDENT ATHLETE OPPORTUNITY FUND
(5) HAMPTON UNIVERSITY			63,164				STUDENT ATHLETE OPPORTUNITY FUND
(6) HOWARD UNIVERSITY			69,698				STUDENT ATHLETE OPPORTUNITY FUND
(7) MORGAN STATE UNIVERSITY			41,383				STUDENT ATHLETE OPPORTUNITY FUND
(8) NC A&T STATE UNIVERSITY			52,274				STUDENT ATHLETE OPPORTUNITY FUND
(9) NORFOLK STATE UNIVERSITY			60,986				STUDENT ATHLETE OPPORTUNITY FUND
(10) SC STATE UNIVERSITY FOUNDATION			65,342				STUDENT ATHLETE OPPORTUNITY FUND
(11) UNIVERSITY OF MARYLAND EASTERN SHORE			26,137				STUDENT ATHLETE OPPORTUNITY FUND
				<u> </u>			

Enter total number of other organizations . . . . . .

Part III	Grants and Other Assistance to Individuals in the United States. $ extstyle  extstyle$	Complete if the organization	answered "Yes" to Fo	rm 990, Part IV, line	e 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) NCAA SPECIAL ASSISTANCE FUND	1703	646,892			

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

Ident if ier	Return Reference	Explanation
PROCEDURE FOR	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE MID-EASTERN ATHLETIC CONFERENCE ENSURES THAT ALL STUDENT ATHLETES
MONITORING GRANTS		SELECTED TO RECEIVE GRANT FUNDS ADHERE TO THE STATED REQUIREMENTS PER THE GRANT THE ENTITY
IN THE U S		ADHERE'S TO THE FOLLOWING GUIDELINES 1 A STUDENT ATHLETE IS LIMITED UP TO \$850 ASSISTANCE PER
		ACADEMIC YEAR OR LESS AS DEEMED BY THE INSTITUTION 2 UNLESS THERE IS AN UNUSUAL CIRCUMSTANCE
		ALL REQUESTS WILL BE PROCESSED ON A MONTHLY BASIS 3 RECEIPTS MUST BE INCLUDED WITH THE
		APPLICATION FOR MEDICAL EXPENSES 4 ALL RECEIPTS FOR MONIES DISBURSED MUST BE TURNED IN AND KEPT
		ON FILE WITH THE INSTITUTION FAILURE TO SUBMIT RECEIPTS WILL RESULT IN STUDENT ATHLETE'S ACCOUNT
		BEING ASSESSED IN ADDITION, MONIES RECEIVED MUST BE USED FOR THE APPROVED PURPOSE

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DLN: 93493089007312

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

	me of the organization D-EASTERN ATHLETIC CONFERENCE		Employer ide	ent if icat io	n nur	mber	
IVIIL	56-0992403						
Pa	art I Questions Regarding Compensation	1	·				
				_		Yes	Νo
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III						
	First-class or charter travel	Γ	Housing allowance or residence for personal use				
	Travel for companions	Γ	Payments for business use of personal residence	e			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees				
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)				
b	If any of the boxes in line 1a are checked, did the orgonerimbursement orprovision of all the expenses descr	-			1b		
2	Did the organization require substantiation prior to re officers, directors, trustees, and the CEO/Executive				2		
3	Indicate which, if any, of the following the organization organization organization organization that is all the content of th						
	✓ Compensation committee	<u>~</u>	Written employment contract				
	Independent compensation consultant		Compensation survey or study				
	Form 990 of other organizations	<u>  -                                   </u>	Approval by the board or compensation committ	ee			
4	During the year, did any person listed in Form 990, Por a related organization	art VII	I, Section A, line 1a with respect to the filing orga	nızatıon			
а	Receive a severance payment or change-of-control p	paymer	it from the organization or a related organization?		4a		Νo
ь	Participate in, or receive payment from, a supplemen	ital non	qualified retirement plan?		4b		Νo
С	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part III	Ī			
	Only 501(c)(3) and 501(c)(4) organizations only mus	st com	plete lines 5-9.				
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue any				
а	The organization?				5a		Νo
ь	Any related organization?				5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III						
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1a,	did the organization pay or accrue any				
а	The organization?				6a		Νo
ь	Any related organization?				6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			Ī			
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d				7		No
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III				8		No
9	If "Yes" to line 8, did the organization also follow the	rehutt	able presumption procedure described in Regulati	one t			

section 53 4958-6(c)?

### 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	W-2 and/or 1099-MI		(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) DR DENNIS (I) THOMAS (II)	196,794 0	32,907 0	0	10,000 0	29,363 0	269,064 0	o 0
(2) PATRICIA PORTER (I)	60,100 0	2,102 0	0	0	19,546 0	81,748 0	o 0
(3) SONJA STILLS (I)	65,687 0	4,109 0	0	0 0	7,911 0	77,707 0	o 0
(4) RAYNOID (I) DEDEAUX (II)	58,869 0	2,927 0	0	0	-	65,714 0	o 0
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
( 12 )							
( 13 )							
( 14 )							
( 15 )							
( 16 )							

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

Schedule J (Form 990) 2010

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2010

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## 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
MID-EASTERN ATHLETIC CONFERENCE

Employer identification number

56-0992403

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 IS REVIEWED FOR ANY DISCREPANCIES, QUESTIONS, AND CONCERNS BY THE EXECUTIVE AND FINANCE COMMITTEE UPON ADDRESSING AND RESOLVING SUCH ITEMS OF CONCERN THE 990 IS SUBSEQUENTLY APPROVED FOR FILING BY THE EXECUTIVE AND FINANCE COMMITTEE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THERE IS A DUTY TO DISCLOSE IN CONNECTION WITH ANY ACTUAL OR POSSIBLE CONFLICTS OF INTEREST, AN INTERESTED DIRECTOR OR INTERESTED OFFICER MUST DISCLOSE THE EXISTENCE AND NATURE OF HIS OR HER MATERIAL FINANCIAL INTEREST TO THE CONFLICTS COMMITTEE PRIOR TO THE CONSIDERATION OF PROPOSED TRANSACTION, CONTRACT, OR ARRANGEMENT BY THE BOARD OR ANY COMMITTEE OF THE BOARD DETERMINING WHETHER A CONFLICT OF INTEREST EXISTS AFTER THE DISCLOSURE OF THE FINANCIAL INTEREST, THE DISINTERESTED MEMBERS OF THE CONFLICTS COMMITTEE SHALL DETERMINE WHETHER A CONFLICT OF INTEREST EXISTS NEITHER THE BOARD NOR ANY COMMITTEE OF THE BOARD SHALL VOTE UPON ANY PROPOSED TRANSACTION, CONTRACT, OR ARRANGEMENT IN CONNECTION WITH WHICH AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST HAS BEEN DISCLOSED BY AN INTERESTED DIRECTOR UNTIL SUCH TIME AS THE CONFLICTS COMMITTEE HAS ADDRESSED THE ACTUAL OR POSSIBLE CONFLICT OF INTEREST FOR MATTERS PENDING BEFORE THE FULL BOARD OF DIRECTORS, A REFERRAL TO THE CONFLICTS COMMITTEE WILL NOT BE REQUIRED WHERE THE INTERESTED DIRECTOR FULLY DISCLOSES TO THE BOARD HIS OR HER FINANCIAL INTEREST AND ABSTAINS FROM PARTICIPATION IN THE BOARDS CONSIDERATION OF THE PROPOSED TRANSACTION, CONTRACT, OR ARRANGEMENT

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	WHEN ESTABLISHING THE COMPENSATION OF KEY EMPLOYEES THE COMMISSIONER MAKES RECOMMENDATIONS TO THE BOARD ANNUALLY IN MAY WHEN ESTABLISHING COMPENSATION FOR THE COMMISSIONER THE CHAIRPERSON OF THE BOARD WILL MAKE A RECOMMENDATION TO THE BOARD ANNUALLY IN MAY THIS PROCESS WAS PERFORMED IN MAY OF 2009 FOR EACH KEY EMPLOYEE AND TOP MANAGEMENT OFFICIAL

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS' GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST