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As Filed Data -

DLN: 93492046000373

H Check ► If the organization is not

OMB No 1545-1150

Open to Public Inspection

Form 990-EZ

Department of the Treasury Internal Revenue Service

Address change

Name change

Initial return

Terminated

Amended return

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and

certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions)
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form

Short Form

Return of Organization Exempt From Income Tax

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

A For the 2011 calendar year, or tax year beginning 07-01-2011 and ending 06-30-2012 Check if applicable D Employer identification number C Name of organization Oregon Small Schools Association 23-7448458 Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone number 2001 SW Nye (541) 966-3103 City or town, state or country, and ZIP + 4 F Group Exemption Pendleton, OR 97801 Number Application pending

I Website: http://oregonssa.org J Tax-Exempt status(check only one) 501(c)(3) 501(c)() 4(insert no) 4947(a)(1) or 527	G Accounting method	H Check ► I I If the organization is a required to attach Schedule B (Form 990, 990-EZ, or 990-PF)
J Tax-Exempt status(check only one) — 501(c)(3) 501(c)() ★(Insert no) 4947(a)(1) or 527	I Website: http://oregonssa.org	
	J Tax-Exempt status (check only one)— 501(c)(3) 501(c)() ★(insert no) 4947(a)(1) or 527	

K Check 🗐 if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000 A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions) But if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts, If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

Pa	art I	Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instruct Check if the organization used Schedule O to respond to any question in this Part I	ions fo	r Part I)
	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	45,134
	4	Investment income	4	15
	5a	Gross amount from sale of assets other than inventory 5a		
숄	Ь	Less cost or other basis and sales expenses 5b 0		
Revenue	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
ă	6	Gaming and fundraising events		
	а	Gross income from gaming (attach Schedule G if greater than \$15,000)		
	ь	Gross income from fundraising events (not including \$ _of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)		
		6b 0		
	C	Less direct expenses from gaming and fundraising events 6c 0	- I	
	d	Net income or (loss) from gaming and fundraising events (Add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances	-	
	b	Less cost of goods sold	-	
	C	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	5,871
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	51,020
	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
Expenses	13	Professional fees and other payments to independent contractors	13	37,700
ĕ	14	Occupancy, rent, utilities, and maintenance	14	
ä	15	Printing, publications, postage, and shipping	15	2,729
	16	Other expenses (describe in Schedule O)	16	6,766
	17	Total expenses. Add lines 10 through 16	17	47,195
Ŕ	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	3,825
ς. O	19	Net assets or fund balances at beginning of year (from line 27 , column (A)) (must agree with		
Net.Assets		end-of-year figure reported on prior year's return)	19	18,814
ž	20	Other changes in net assets or fund balances (explain in Schedule O)	20	
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	22,639

Part II Balance Sheets						<u></u>
Check if the organization use	d Schedule O to respond to	any question in t	his Part II	<u>.</u>		<u></u>
(See the instru	ctions for Part II)		(A) Beg	Jinning of year		(B) End of year
22 Cash, savings, and investments .				18,814	22	26,586
23 Land and buildings				•	23	
24 Other assets (describe in Schedule ())				24	
25 Total assets				18,814	25	26,586
26 Total liabilities (describe in Schedule	.0)				26	3,947
27 Net assets or fund balances (line 27	of column (B) must agree wi	th line 21) .		18,814	27	22,639
Check if the organization use What is the organization's primary exemp Improve instruction in small Oregon scho Describe the organization's program serv measured by expenses In a clear and co benefited, and other relevant information	ed Schedule O to respond to t purpose? ols ce accomplishments for each noise manner, describe the s	any question in t	gest progr	am services, as	(c)(org - 494	Expenses quired for section 501 (3) and 501(c)(4) anizations and section 47(a)(1) trusts, ional for others)
28 Conducted conferences/workshops and elementary and secondary Oregon school	d mailed newsletter for conti				28a	
(Grants \$) If the state of the	nis amount includes foreign (grants, check her	re	. ▶┌	29a	
(Grants \$) If the	nis amount includes foreign (grants, check her	re	. ▶ ┌	30a	
31 Other program services (describe in S (Grants \$)	chedule O) nis amount includes foreign (grants, check her	re	. . . ⊢	31a	
32 Total program service expenses (add II				▶	32	47,19
Part IV List of Officers, Directors, Tr						ns for Part IV)
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensa (If not paid enter -0)	ntion em	(d) Contribution ployee benefit p eferred compens	s to lans &	(e) Expense account and other allowances
See Additional Data Table						

Form	990-EZ (2011)			Page
Pa	Other Information (Note the statement requirements in the instructions for Part V.)			
	Check if the organization used Schedule O to respond to any question in this Part V $$. $$. $$. $$. $$. $$. $$. $$			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		No
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		No
35	If the organization had income from business activities, such as those reported on lines 2,6a, and 7a (among others), but not reported on Form 990-T, explain in Schedule O why the organization did not report the income of Form 990-T	n		
a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		No
b	If 'Yes' to line 35a, has the organization filed a Form 990-T for the year? If 'No,' provide an explanation in Schedule O	35b		No
c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If 'Yes,' complete Schedule C, Part III	35c		No
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		No
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions 37a			
b	Did the organization file Form 1120-POL for this year?	37b		No
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		No
Ь	If "Yes," complete Schedule L, Part II and enter the total amount involved . 38b			
39	Section 501(c)(7) organizations. Enter	7		
a		o		
ь	Gross receipts, included on line 9, for public use of club facilities 39b	0		
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under			
	section 4911 •, section 4912 •, section 4955 •			
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			
		40b		No
c	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958	_		
	Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization			
	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		No
	List the states with which a copy of this return is filed •			
42a	The organization's books are in care of 🕨 Umatilla Morrow Education Serv	<u>(54</u>	1)966	-3103
_	2001 SW Nye Located at Pendleton, OR ZIP + 4	▶ 9	7801	
b	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)?	42b	Yes	No No
	If "Yes," enter the name of the foreign country 🕨			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
c	At any time during the calendar year, did the organization maintain an office outside of the U S $^\circ$	42c		No
	If "Yes," enter the name of the foreign country			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the tax year			▶ Г
			Yes	No
44a	Did the organization maintain any donor advised funds? If "Yes", Form 990 must be completed instead of		163	140
	Form 990-EZ.	44a		No
b	Did the organization operate one or more hospital facilities during the year? If 'Yes,' Form 990 must be completed instead of Form990-EZ	44b		No
c	Did the organization receive any payments for indoor tanning services during the year?	44c		No
d	If 'Yes' to line 44c, has the organization filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	7		
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	44d		No
		45a		No
45b	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,' Form 990 and Schedule R may need to be completed instead of Form990-EZ (see instructions)	45b		No

Form 990-	EZ (2011)							Page 4
							Yes	No
	he organization engage, directly o idates for public office? If "Yes,"			on behalf of or	ın opposition to	46		No
Part VI	All section 501(c)(3) organ			-			-	stions
	47-49b and 52. Check if the organization used	l Schedule O to respon	id to any question in th	ıs Part VI				Г
	ondon in the organization about		a to any quotion men				Yes	No
	he organization engage in lobbyin es," complete Schedule C, Part I:		section 501(h) electio	n ın effect durı	ng the tax year?	47	Yes	
48 Is the	e organization a school described	d in section 170(b)(1)('A)(II)? If "Yes." comple	ete Schedule E		48		No
	he organization make any transfe					49a		No
	es," was the related organization			in Edicion		49b		No
		-						
	plete this table for the organization oyees) who each received more t							
	and address of each employee ıd more than \$100,000	(b) Title and averag hours per week devoted to position	(c) Compensation	on employee	ntributions to benefit plans & compensation	a	Experior account a	and
NONE								
of co	plete this table for the organization mpensation from the organization ame and address of each indeper	If there is none, ente	r "None "		pe of service		an \$10	
NONE								
d Tot	al number of other independent c	ontractors each reserv	ung over \$100,000					
52 Did	of the organization complete Sche st attach a completed Schedule .	dule A? NOTE: All Sec	tıon 501(c)(3) organız				ritable /es	
	lties of perjury, I declare that I have and belief, it is true, correct, and co							
	<u> </u>							
Sign	****** Signature of officer				2013-02-15 Date			
Here	Michael Lasher Executive Direc							
	Type or print name and title							
Paid	Preparer's Signature Christopher J Cockburn		Date	Check if self-employed •	Preparer's taxpay (See instructions)		ıfıcatıon r	ıumber
Preparer's Use Only	Only if self-employed), EIN							
Jilly	address, and ZIP + 4 116 SE 2nd				Phone no 1 (54	41) 276-	3521	
May the ID	Pendleton, of Sidiscuss this return with the pre		ee instructions			<u> </u>		No
may the IR	o discuss this return with the pre	:parer snown above? S	ee mstructions	<u> </u>	<u> </u>	1. A	es I	NO

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93492046000373

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Employer identification number

		l Schools A												
					. (411			1	23-7448					
	rt I			blic Charity Sta						nstructions	<u> </u>			
1 ne c	rigaiii			te foundation becaus ion of churches, or a			= -							
2	<u>'</u>			d in section 170(b)(1)(±)(A)(I).						
3	'r			perative hospital se				n 170(h)(1)	(A)(iii)					
4	,	A medi	cal researc	h organization opera ity, and state						(1)(A)(iii).	Enter the			
5	Γ	_	•	erated for the benefi (A)(iv). (Complete P	_	or universi	ty owned or o	perated by a	a governmer	ntal unit des	cribed in			
6	\sqcap	A feder	ral, state, or	local government o	r government	tal unit desc	rıbed ın secti	ion 170(b)(1	L)(A)(v).					
7	Γ	describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	a governme	ental unit or	from the gen	eral public			
8	Γ	A com	munity trust	described in sectio i	n 170(b)(1)(A)(vi) (Cor	nplete Part II	[)						
9	굣	receipt	s from activ	at normally receives rities related to its e oss investment inco	xempt functi	ons—subjec	t to certain e	xceptions, a	and (2) no m	ore than 33	1/3% of			
				ganızatıon after June						•				
10	Γ	An organization organized and operated exclusively to test for public safety Seesection 509(a)(4).												
11	Γ	one or the box												
e	Γ	other t		ox, I certify that the ion managers and ot										
f		If the c	organization this box	received a written d						III support	ng organization,			
g		followir	ng persons?	2006, has the organ rectly or indirectly or		_				.	Yes No			
h		and (III (ii) a fa (iii) a 3) below, the amily members 35% contro	governing body of the er of a person descri lled entity of a perso ng information about	ne the suppoi bed in (i) abo n described	rted organiz ove? in (i) or (ii) a	ation? above?	persons des	scribed iii (ii	11 <u>0</u> 11 <u>0</u>	Yes No g(i) l(ii) (iii)			
(i) Name of supported organization		e of (ii) (described on rted EIN lines 1-9 above		Type of organization	organızatı col (ı) lıst	Is the organization in col (i) listed in your governing		(v) Did you notify the organization in col (i) of your support?) ne tion in ganized J S ?	(vii) A mount of support?			
				(see (nstructions))	Yes	No	Yes	No	Yes	No	7			
				,,										
Total														

	(Complete only if ye						
	ùnder Part III. If th						
	ection A. Public Support	_	_			•	
Cale	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	1 (f) Total
1	in) Gifts, grants, contributions, and						
_	membership fees received (Do not	:					
	include any "unusual						
2	grants ") Tax revenues levied for the						
_	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
•	furnished by a governmental unit to						
_	the organization without charge			+			
4	Total. Add lines 1 through 3 The portion of total contributions						
5	by each person (other than a						
	governmental unit or publicly						
	supported organization) included o	n					
	amount shown on line 11, column						
	(f)						
6	Public Support. Subtract line 5 from line 4	ו					
S	ection B. Total Support				<u> </u>	I	
	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201:	1 (f) Total
_	ın)	(4) 2007	(2) 2000	(6) 2005	(4) 2010	(0) 201	(1) 1 otal
7 8	A mounts from line 4 Gross income from interest,						
0	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 (Explain in Part						
	IV) Do not include gain or loss						
11	from the sale of capital assets Total support (Add lines 7						
	through 10)						
12	Gross receipts from related activit	ies, etc (See inst	cructions)			12	
13	First Five Years If the Form 990 is	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	
	check this box and stop here						▶ □
S	ection C. Computation of Pu	blic Support F	Percentage				
14	Public Support Percentage for 201	1 (line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percentage for 201	0 Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test—2011. If the				line 14 is 33 1/3%	⁄₀ or more, c	
h	and stop here. The organization qu 33 1/3% support test—2010. If the	•	, ,,		Sa and line 15 is	33 1/3% or	more check this
_	box and stop here. The organization				sa, ana mie 15 io	33 1,370 01	▶ □
17a	10%-facts-and-circumstances test						
	is 10% or more, and if the organization me						
	organization			iic organiz	quannes as	a pasiiciy s	▶厂
b	10%-facts-and-circumstances test						
	15 is 10% or more, and if the orga Explain in Part IV how the organize						
	supported organization	meets the 1	and chedills		- organization qua	cs as a pt	▶□
18	Private Foundation If the organization	tion did not check	a box on line 13	, 16a, 16b, 17a o	r 17b, check this	box and see	▶ ┌
	ınstructions						F

Part III Support Schedule for Organizations Described in IRC 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201	.1	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not	63,249	69,515	45,110	53,012		45,134	276,020
	include any "unusual grants ")						\rightarrow	
2	Gross receipts from admissions, merchandise sold or services							
	performed, or facilities furnished in							0
	any activity that is related to the							0
	organization's tax-exempt							
3	purpose Gross receipts from activities that							
3	are not an unrelated trade or							0
	business under section 513						\longrightarrow	
4	Tax revenues levied for the							
	organization's benefit and either paid to or expended on its							0
	behalf							
5	The value of services or facilities							
	furnished by a governmental unit to							0
_	the organization without charge	63,249	69,515	45,110	53,012		45,134	276,020
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2,	05,243	05,515	+5,110	55,012		13,134	270,020
<i>7</i> a	and 3 received from disqualified							0
	persons							
b	Amounts included on lines 2 and 3							
	received from other than disqualified persons that exceed							0
	the greater of \$5,000 or 1% of the							
	amount on line 13 for the year						\longrightarrow	
C	Add lines 7a and 7b						\longrightarrow	
8	Public Support (Subtract line 7c							276,020
Se	rction B. Total Support							
	ndar year (or fiscal year beginning	() 2007	(1) 2000	()2000	(D 2010	() 201		
	ın)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201		(f) Total
9	A mounts from line 6	63,249	69,515	45,110	53,012		5,134	276,020
L0a	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties	252	253	235	60		15	815
	and income from similar							
	sources						\rightarrow	
Ь	Unrelated business taxable income (less section 511 taxes)							
	from businesses acquired after							0
	June 30, 1975							
C	Add lines 10a and 10b	252	253	235	60		15	815
11	Net income from unrelated							
	business activities not included in line 10b, whether or not the							0
	business is regularly carried on							
12	Other income Do not include							
	gain or loss from the sale of	1,442	1,231	3,395	3,350		5,871	15,289
	capital assets (Explain in Part IV)							
13	Total support (Add lines 9, 10c,	64,943	70,999	48,740	56,422		51,020	292,124
	11 and 12)			<u>'</u>	·			
14	First Five Years If the Form 990 is for check this box and stop here	or the organizatio	n's first, second,	third, fourth, or fi	fth tax year as a	501(c)(3)	organız	ation, ▶☐
	check this box and stop here							-1
Se	ction C. Computation of Publ							
15	Public Support Percentage for 2011	(line 8 column (f) dıvıded by lıne 1	3 column (f))		15	•	94 490 %
16	Public support percentage from 201	0 Schedule A, Pa	rt III, line 15			16		
Se	ction D. Computation of Inve	stment Incor	ne Percentag	е				
17	Investment income percentage for 2	011 (line 10c col	umn (f) dıvıded by	line 13 column	(f))	17		0 280 %
18	Investment income percentage from	2010 Schedule A	, Part III, line 17	,		18		
19a	33 1/3% support tests—2011. If the	organization did	not check the box	on line 14, and	line 15 is more th	nan 33 1/3 ⁰	% and I	ıne 17 ıs not
-	more than 33 1/3%, check this box a						•	▶ ▽

33 1/3% support tests-2010. 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

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93492046000373

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

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ 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

the Se the Se Na Ore	e organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobby ction 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do notion 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Potion 501(c)(4), (5), or (6) organizations Complete Part III me of the organization gon Small Schools Association Employer 23-7448 TI-A Complete if the organization is exempt under section 501(c) or is a section	ot co Do roxy	ompletonot co y Tax) ntifica	e Part II-B mplete Part , then tion numbe	II-A er	
L 2 3	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV Political expenditures Volunteer hours		\$ <u>_</u>			_
Par L 2 3 4a b	Enter the amount of any excise tax incurred by the organization under section 4955 Enter the amount of any excise tax incurred by organization managers under section 4955 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made? If "Yes," describe in Part IV	>	\$ \$	┌ Yes	✓ No ✓ No	
_	Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year?	50 ► ►	\$ \$ \$	(3).	□ No	
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organization organization made payments. For each organization listed, enter the amount paid from the filing organization amount of political contributions received that were promptly and directly delivered to a separate political separate segregated fund or a political action committee (PAC). If additional space is needed, provide information of the pro	on's org	funds anızat	Also ente ion, such a	r the	

(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-

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not 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 \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠		
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election		
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,		
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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 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000				
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Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount										
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Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five		
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d			
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
	2a	Lobbyin	g non-taxable amount							
	b									
c Total lobbying expenditures	c	Total loi	obying expenditures							
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount							
e Grassroots ceiling amount (150% of line 2d, column (e))	e									

Pa	complete if the organization is exempt under section 501(c)(3) and (election under section 501(h)).	has NOT f	led Fo	Page rm 5768
	(cicción dilder section 301(ii)).	((a)	
		Yes	No	Amount
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	Volunteers?		No	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		No	
c	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
е	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		No	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No	
i	Other activities? If "Yes," describe in Part IV		No	
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)?		l No	
b	If "Yes," enter the amount of any tax incurred under section 4912		'	
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912		ŀ	
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		l No l	

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			res	NO
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is Part III-B answered "Yes". 4

-	Dues, assessments and similar amounts nom members	_	
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	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

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

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93492046000373

OMB No 1545-0047

2011

Open to Public Inspection

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 Oregon Small Schools Association

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

23-7448458

ldentifier	Return Reference	Explanation
Form 990-EZ, Part II, Line 26 1003	Total Liabilities 1003	Deferred Revenue - Beginning \$0 Deferred Revenue - Ending \$3569
Form 990-EZ, Part II, Line 26 1001	Total Liabilities 1001	Accounts Payable and Accrued Expenses - Beginning \$0 Accounts Payable and Accrued Expenses - Ending \$378
Form 990-EZ, Part I, Line 16 2	Other Expenses 2	Other Expenses \$1294
Form 990-EZ, Part I, Line 16 1012	Other Expenses 1012	Insurance \$351
Form 990-EZ, Part I, Line 16 1005	Other Expenses 1005	Travel \$5086
Form 990-EZ, Part I, Line 16 1002	Other Expenses 1002	Office Expenses \$35
Form 990-EZ, Part I, Line 8 1	Other Revenue 1	Miscellaneous Income \$5871

Software ID: 11000144 **Software Version:** 2011v1.5

EIN: 23-7448458

Name: Oregon Small Schools Association

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Brad Royse 201 SE 4th St Enterprise, OR 97828	Director 2 00	0		
Steve Staniak 57566 Fort Rock Rd Silver Lake, OR 97638	Director 2 00	0		
Tım Porter PO Box 615 Condon,OR 97823	Director 2 00	0		
Jerry Copeland 375 S Fifth St Athena, OR 97813	Director 2 00	0		
Brad Yates PO Box 197 Mill City, OR 97360	Director 2 00	0		
Jeff Davis 39516 Ellensburg Ave Gold Beach, OR 974449754	Director 2 00	0		
Ed Curtis 331 E Blakely Ave Brownsville,OR 97327	Director 2 00	0		
Dan Forbess PO Box 390 Oakland, OR 97462	Director 2 00	0		
Peter Tarzian PO Box 290 Falls City, OR 97344	Director 2 00	0		
Janelle Beers 526 Ferry St Dayton, OR 97114	Director 2 00	0		
Craig Brewington 820 SW Cedar Street Warrenton, OR 97146	Director 2 00	0		
Michael Lasher 2001 SW Nye Pendleton, OR 97801	Executive Direc 2 00	0		