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Form 990-EZ

Department of the Treasury Internal Revenue Service

Short Form
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)

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.

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

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

OMB No. 1545-1150

2011

Open to Public Inspection

A	LOI	me 2	o i i calendar y	year, or tax year	pedimini	an on r	OI	, 2011, an	u en	unig o	OIAT 2	<u> </u>	, 20	<u> </u>
В	Che	ck if licable	1	C Name of orga	nızation						D Emp	oyer id	entification n	umber
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-	1	ended r		City or town, state							F Grou			
\vdash		lication		STILLWATE		-					•	oer ▶		
G			ng Method:		Accrual	Other (spe				Н (rganization is	not
ī			_	SSMA.ORG		(-				- 1			Schedule B	
.i				eck only one) X 5	501(c)(3)	501(c)() ◀ (insert no.)	4947(a)(1) o	, ,	-	•		., or 990-PF).	
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-				ow) are \$500,000	-	·-	-					-		,693
П	Par			Expenses, ar										,000
		لستست		organization used										∀
_		1		, gifts, grants, and										<u>r</u>
		2		ice revenue includ								\vdash	1.4	5,031
		3	-	dues and assessn								3		9,660
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		72		f inventory, less re								00		· · · · · · · · · · · · · · · · · · ·
				goods sold				—				-		
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3		8	•	e (describe in Sch				•				8		2,090
7		9		e. Add lines 1, 2,								9		2,693
> _		10		milar amounts pai								10	# /	2,000
~	_	11	Benefits naid	to or for members	EIVE	1)	,					11		,
2	X	12	Salaries othe	r compensation, a	and emplo	vee béneti						12		
Z	P	13	Professional fe	eesiand other bay	Mania an	independe	ent contractors		• • • •			13	5	9,089
ב	EXPEZSES	14										14		2,002
7	E	15	Printing publi	entiautilities, and r cations, postage,	ร้างได้เก็บ Shini	DIDO E				• • • • • •		15		1,772
	S	16		es (describe in So								16	6	8,326
Ļ		17		es. Add lines 101								17		9,187
. —		18		ficit) for the year (18		3,506
	A	19	•	fund balances at	•								-	_,
N E T	ASSETS			figure reported on					_			19	3 ५	0,271
T	투	20	-	s in net assets or	-							20		-,
	S	21	•	fund balances at				•				21	393	777

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2011

JVA

Pa	other Information (Note the Schedule A and personal benefit contract 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	
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a	_	1.00	
	detailed description of each activity in Schedule O	33		x
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed		\vdash	Г
	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	L!	X
35 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		X
þ	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	<u> </u>	X
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		X
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		X
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a	_		ļ
b	Did the organization file Form 1120-POL for this year?	37b	ļ	X
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were			١.,
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	ļ	X
	If "Yes," complete Schedule L, Part II and enter the total amount involved	-[1	
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	-		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	-		
70a	section 4911 ▶; section 4912 ▶; section 4955 ▶		1	
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit	-		İ
_	transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			f
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I.	40b		l x
С	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			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
	reimbursed by the organization			
е	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		X
41	List the states with which a copy of this return is filed. ▶ OK			
42a	The organization's books are in care of ▶ SEE ATTACHMENT #4 Telephone no. ▶			
	Located at ► ZIP + 4 ►			
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 42b	 	X
	If "Yes," enter the name of the foreign country:			į
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			ĺ
_	and Financial Accounts.	40.		7,
C	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		X
43	If "Yes," enter the name of the foreign country: ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 Check here			▶ [
70	and enter the amount of tax-exempt interest received or accrued during the tax year	• • • • • •		•
	and enter the amount of tax-exempt interest received of accided during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be	F		
• •-	completed instead of Form 990-EZ	44a	1 1	х
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be			<u> </u>
_	completed instead of Form 990-EZ	44b	ĺ	х
С	Did the organization receive any payments for indoor tanning services during the year?	44c	 	X
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
	explanation in Schedule O	44d	†	;
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
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			
	Form 990-EZ (see instructions)	45b	1	x

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SCHOOL SCIENCE & MATHEMATI 36-6084546

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6					·	Yes	No
	Did the organization engage, directly or indire					ļ	<u></u>
	to candidates for public office? If "Yes," comp					<u> </u>	_X_
	Section 501(c)(3) organizations and section and 52, and complete the tables for Check if the organization used Sch	4947(a)(1) nonexempt lines 50 and 51.	charitable trusts must	answer questions 47-49b			on
_			· · · · · · · · · · · · · · · · · · ·			Yes	No
	Did the organization engage in lobbying active year? If "Yes," complete Schedule C, Part II		* -	-	47		х
	Is the organization a school as described in s	ection 170(b)(1)(A)(ii)?	If "Yes," complete Sch	edule E	48		X
1	Did the organization make any transfers to an					<u> </u>	X
)	If "Yes," was the related organization a section	-					X
	Complete this table for the organization's five	-			-		
	employees) who each received more than \$1	00,000 of compensatio			· · · · · · · · · · · · · · · · · · ·		
	(a) Name and title of each employee paid more than \$100,000	hours per wee	k compensation (Form				
77	NE	devoted to posi	tion W-2/1099-MISC)	and deferred compensation	other co	mpensa	
T	NE						
_	· · · · · · · · · · · · · · · · · · ·			- 	 		
					<u> </u>		
f	Total number of other employees paid over \$	100,000 ▶		_			
	Complete this table for the organization's five			s who each received more	than		
	\$100,000 of compensation from the organizat	ion. If there is none, er	iter "None."				
(a)	Name and address of each independent contractor paid	i more than \$100,000	(b) Type of service	e (c)	Compensatio	n	
)N	NE			 			-
	·· ·						
					<u>.</u>		
					•		
_							
_							
t	Total number of other independent contractor	-	•				
	Did the organization complete Schedule A? N		, -	* * * * * * * * * * * * * * * * * * * *	. 57	. 🗖	
	nonexempt charitable trusts must attach a cor				. ▶ X Ye		No
	r penalties of perjury, I declare that I have examined this correct, and complete. Declaration of preparer (other tha				edge and bei	ief, it is	
	Me de la la	7	· ·	· · · · · · · · · · · · · · · · · · ·	10	-2/) ~
gr	Signature of officer	0110			Date		
976		omas			Date		
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		Preparer's signature	On Date	/ / Check if	PTIN	-	
aic		Magan) M.	Stone 101	, ,, , = =	P0064	136	9
θĮ	parer Firm's name ▶ DUGGER & CO	CPAS PC	- 1V/ - 1- 1-7	Firm's EIN 7	3-132	HÃ	65
-	Only Firm's address ▶ PO BOX 1713				5-372-	3909	<u></u>
y t	the IRS discuss this return with the preparer sh	own above? See instru	ictions		▶ X Ye		No
		/Software Only 2011 TW			orm 990		011)

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate Instructions.

Employer Identification number

SCHOOL SCIENCE & MATHEMATICS ASSOCIATION B6-6084546 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(III). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(III). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 5 170(b)(1)(A)(lv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vI). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 🛮 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions--subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated b Type II d | Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting f organization, check this box..... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (I) A person who directly or indirectly controls, either alone or together with persons described in (ii) X and (III) below, the governing body of the supported organization? X Provide the following information about the supported organization(s). h (VI) Is the (I) Name of supported (II) EIN (IV) Is the organization (V) Did you notify the (vII) Amount of (III) Type of organization organization in col (I) organization in col. (I) listed in your organization in col. (I) (described on lines 1-9 support organized in the above or IRC section governing document? of your support? U.S.? (see instructions)) Yes No No Yes No

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Total

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10,276	13,494	10,873	16,315	19,660	70,618
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	148,242	140,475	81,535	73,214	145,031	588,497
3	Gross receipts from activities that are not an unrelated trade or business under section 513				,		
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	158,518	153,969	92,408	89,529	164,691	659,115
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)		<u> </u>		<u> </u>		659,115
	tion B. Total Support	_Y	,	1	,	1	
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6	158,518	153,969	92,408	89,529	164,691	659,115
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,847	10,536	8,033	9,241	6,024	41,681
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b	7,847	10,536	8,033	9,241	6,024	41,681
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		2,186	3,803		1,979	7,968
13	Total support. (Add lines 9, 10c, 11, and 12.)	166,365	166,691	104,244	98,770	172,694	708,764
14	First five years. If the Form 990 is for the or organization, check this box and stop here	<u></u>		•	•		<u></u> ▶
Sec	tion C. Computation of Public Sup	port Percer	itage				
15	Public support percentage for 2011 (line 8, c		•			15	92.99 %
16	Public support percentage from 2010 Sched			<u> </u>		16	90.56 %
Sec	tion D. Computation of Investmen	t Income Pe	rcentage				
17	Investment income percentage for 2011 (line	9 10c, column (f)	divided by line	13, column (f))		17	5.88 %
18	Investment income percentage from 2010 Se					18	7.03 %
19a	33 1/3 % support tests 2011. If the organ						
	not more than 33 1/3 %, check this box and	-		-			
b	33 1/3 % support tests 2010. If the organ						
	line 18 is not more than 33 1/3 %, check this						
20	Private foundation. If the organization did r	ot check a box	on line 14, 19a, d	or 19b, check thi	s box and see ir	structions	<u></u> ▶

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

SCHOOL SCIENCE & MATHEMATICS ASSOCIATION

Employer identification number

36-6084546

PART I LINE 8--OTHER REVENUES--THE OTHER REVENUES ARE LISTED IN THE DETAIL STATEMENT OF THIS RETURN.

PART I LINE 16--OTHER EXPENSES--THE OTHER EXPENSES ARE LISTED IN THE DETAIL STATEMENT OF THIS RETURN AS WELL AS DEPRECIATION OF \$1,045.

990 PRIMARY EXEMPT PURPOSE

ATTACHMENT 1: PAGE 1 - 990-EZ PAGE 2, PART III

OPEN TO PUBLIC

For calendar year 2011 or tax period beginning 07-01 , and ending INSPECTION

06-30-2012.

Name of Organization

Employer Identification Number

SCHOOL SCIENCE & MATHEMATICS ASSOCIATION

36-6084546

Primary Purpose

STRIVES TO BE AN INCLUSIVE PROFESSIONAL COMMUNITY BRINGING TOGETHER RESEARCHERS AND TEACHERS TO PROMOTE RESEARCH, SCHOLARSHIP, AND PRACTICE TO IMPROVE SCHOOL SCIENCE AND MATHEMATICS AND TO ADVANCE THE INTEGRATION OF SCHOOL SCIENCE AND MATHEMATICS.

990 PROGRAM SERVICE ACCOMPLISHMENT ATTACHMENT 2: PAGE 1 - 990-EZ PAGE 2, PART III OPEN TO PUBLIC For calendar year 2011 or tax period beginning 07-01-2011, and ending 06-30-2012. INSPECTION Employer Identification Number Name of Organization SCHOOL SCIENCE & MATHEMATICS ASSOCIATION 36-6084546 Part III - Statement of Program Service Accomplishments Amount includes foreign grants Program service expenses 54,270 Grants and allocations Exempt Purpose Achievements PUBLICATION OF JOURNAL "SCHOOL SCIENCE AND MATHEMATICS" AND ANNUAL CONVENTION-SESSIONS, SEMINARS AND WORKSHOPS FOCUSED ON THE IMPROVEMENT OF TEACHING AND LEARNING OF SCIENCE AND MATHEMATICS. 11 EOEZPIII Copyright Forms (Software Only) - 2011 TW L0531F

990 CURRENT OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

ATTACHMENT 3: PAGE 1 - 99	0-EZ PAGE 2,	PART IV		
OPEN TO PUBLIC		m 01 0011	. 06.30	2012
INSPECTION For calendar year 2011 or tax	period beginning 0	7-01-2011, and e		
Name of Organization	TGG 3.000CT3.TT	017		ification Number
SCHOOL SCIENCE & MATHEMAT			36-60845	
(A) Name and Title	(B) Average hours per week devoted to	(C) Compensation (Form W-2/1099-MISC)	(D) Cont. to employee ben. plans & def. comp.	(E) Expense account & other compensation
TIANT COLUMN	postion	(if not paid, enter -0-)	Dell. plans & del. comp.	& Other Compensation
LYNN COLUMBA				
27 MEMORIAL DRIVE WEST	DIRECTORS-AT-	0	0	0
BETHLEHEM, PA 18015		0	U U	U
GEORGIA COBBS	DIDECTOR AT I			
UNIVERSITY OF MONTANA	DIRECTOR-AT-L	0	0	0
MISSOULA, MT 59812		U	U	U
SUZANNE NESMITH	DIRECTOR-AT-L			
BAYLOR UNIVERSITY	DIRECTOR-AI-L	o	0	0
WACO, TX 76798 GILBERT NAIZER	NEWSLETTER	O	O O	U
TEXAS A&M	EDITOR			
UNIVERSITY-COMMERCE	BDITOR			
COMMERCE, TX 75429		o	o	0
JULIANA UTLEY	CO-EXECUTIVE		Ŭ	· ·
OKLAHOMA STATE UNIVERSITY				
STILLWATER, OK 74078		10,500	o	0
JULIE THOMAS	CO-EXECUTIVE	10,500	Ĭ	•
OKLAHOMA STATE UNVIERSTIY	i e			
STILLWATER, OK 74078		10,500	o	0
CARLA JOHNSON	JOURNAL	10,500	Ĭ	v
UNIVERSITY OF CINCINNATI	EDITOR			
CINCINNATI, OH 45252		o	0	0
DON BALKA	PRESIDENT			·
SAINT MARY'S COLLEGE				
,		o	o	0
MELANIE SHORES				
UNIVERSITY OF ALABAMA AT	DIRECTOR-AT-L			
BIRMINGHAM				
BIRMINGHAM, AL 35212		O	0	0
ZHONGE WU				
5245 PACIFIC CONCOURSE	DIRECTOR-AT-L			
DR. #100				
LOS ANGELES, CA 90045		0	0	0
RON ZAMBO			•	
PO BOX 870112	DIRECETOR-AT-			
ARIZONA STATE UNIVERSI,				
AZ 85287-0112		0	0	0
JOHN PARK				
2200 HILLSBOROUGH	PRESIDENT-ELE			
RALEIGH, NC 27695		0	0	0
SHELLY HARKNESS	JOURNAL			
	EDITOR			
CINCINNATI, OH 45252		0	0	0
NA CONTRACTOR OF THE CONTRACTO	05045	<u> </u>	<u> </u>	44 5057711
JVA Copyright Forms (Software Only) -2011 TW L	0531F			11_EOEZPVA

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ATTAC	CHMENT	4 -	990-E2	Z PAGE	3, PART	V, L	INE 42	A				
	O PUBLIC											_
INSPEC	TION	For cale	ndar year 20	11 or tax per	riod beginning	0	7-01	, ar	nd ending	06	5-30-2 <u>01</u> 2.	
	Organizatio										er Identification Number	_
SCHOO	OL SCI	ENCE	& MATH	IEMATIC	S ASSOC	IATIO	N			36-60	84546	
Part V -	Line 42a						_					
Individua or Business							JULIE	THOM	MAS			_
							OKLAH	OMA S	STATE	UNIV.	, WILLARD #245	_ _
U.S. Add	ress:											
	or .	74078	}	City	STILLWA	TER			Sta	te <u>OK</u>		
c	City											
								-	· · · · ·		10 - 10 A	_
C	Country .										····· _	_
F	Postal code											_
F	Phone Num	ber									(405)744-7346	
F	Fax Number	• • • • • • • • • • • • • • • • • • • •										_

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

2011

Department of the Treasury Internal Revenue Service (99)

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No. **179**

Name(s) shown on return SCHOOL SCIENCE & 1	«∧ጥ႘Ե <mark>™</mark> ∧ጥፐ»		tivity to which thi				identifying number 36-6084546
				<u> </u>			DO 0004240
Part I Election To Expe	inse Certain i listed property, co	Property Under Se emplete Part V before ye	ection 179 ou complete Par	t I.			
Maximum amount (see instructions)						1	
2 Total cost of section 179 proper	' -					2	
3 Threshold cost of section 179 p	* *					3	-
4 Reduction in limitation. Subtract						4	
5 Dollar limitation for tax year. Su						•	
see instructions					-	5	500,000
6 (a) Descriptio			st (busn. use on		ted cost		300,000
(a) Description	To property	(3) 00	st (basii. ase on	(0) 2180	7.60 COSI		1
······································			 	<u> </u>			1
- 1 - 1 - 1 - 1			T =				-
7 Listed property. Enter the amou					1		}
8 Total elected cost of section 17		• •			1	8	
9 Tentative deduction. Enter the					1	9	
O Carryover of disallowed deduct		-				10	·
Business income limitation. Ent							500,000
2 Section 179 expense deduction				 	<u></u>	12	
3 Carryover of disallowed deduct				<u> </u>			
ote: Do not use Part II or Part III I							
Part II Special Deprecia					ted prop	erty.)	(See instructions.)
4 Special depreciation allowance		• •					
during the tax year (see instruc						14	
5 Property subject to section 168						15	
6 Other depreciation (including A	CRS)					16	
Part III MACRS Deprect	ation (Do not inc	clude listed property.) (See instructions.))			
		Section	n A				
7 MACRS deductions for assets	placed in service in	n tax years beginning b	efore 2011			17	1,045
8 If you are electing to group any	assets placed in s	service during the tax ye	ear into one or m	ore	_		
general asset accounts, check	here				▶		
Section B	Assets Placed In	Service During 2011 T	Tax Year Using t	he General D	epreciat	on S	ystem
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depr. (business/investment use only see instructions)	(d) Recovery period	(e) Convention	(f) Met	hod	(g) Depreciation deduction
9a 3-year property							
b 5-year property	_] [
c 7-year property	_[
d 10-year property] [
e 15-year property							
f 20-year property] [
g 25-year property] /		25 yrs.		S/L		
h Residential rental			27.5 yrs.	ММ	S/L		
property			27.5 yrs.	ММ	S/L		
I Nonresidential real	 		39 yrs.	MM	S/L		
property			1	MM	S/L		
	ssets Placed In 5	Service During 2011 Ta	x Year Using th				System
Oa Class life					S/L		1
b 12-year	1]		12 yrs.	 	S/L		
c 40-year		•	40 yrs.	ММ	S/L		
Part IV Summary (See ins	tructions \		40 yio.	141141		•	<u> </u>
1 Listed property. Enter amount f					1	21	<u> </u>
22 Total. Add amounts from line 1					here	_41	
						22	1 045
and on the appropriate lines of	=					22	1,045
3 For assets shown above and p		_					
enter the portion of the basis at	tributable to section	on 263A costs	23				

				20	ZU11 Fed	lerai L	ederai Depreciation Schedule	lation	מכוועמת	<u>ല</u>				
SCHOOL SCIENCE & MATHEMATICS ASSOCIATION 36-6084546	MATHE	MATICS AS	SSOCIAT	NOF			•	C.						10-04-2012
Description	Date	Date Method Year	Year	Cost	Land/ Other	Prior §179	Current §179	Current Pr Spec Cur Spec §179 Allow Allow	Cur Spec Allow	Basis	Prior	Current	Accum Depr	Adj Basis
Form 990-EZ Line 16	9									:				
LAPTOP 0 COMPUTER	7-23-07	07-23-07 200DВНҮ	5	1,301	.	_	0	0	0	1,301	1,076	150	1,226	75
2 PROJECTOR 1	0-27-08	10-27-08 200DBHY	7	2,050	0	·	0 0	0	0	2,050	1,154	256	1,410	040
LAMP	0-27-08	10-27-08 200DBHY	7	450	0	۔	0 0	0	0	450	253	56	309	141
LAMP	10-13-09 S/LHY	S/LHY	7	450	0	_	0	0	0	450	96	2	160	
2 PROJECTORS 1	10-13-09 S/LHY	S/LHY	7	1,928	0	<u>-</u>	0	0	0	1.928	414	276	069	1,238
2 PROJECTORS 1	10-27-10	S/LHY	7	1,698	J	_	0	0	0	1,698	121	243	364	1.334
6 Assets			Totals:	7.877	0	٥	0 0	0	0	7.877	3.114	1.045	4,159	3.718
6 Assets		Grand Totals	Totals	7.877	0		0 0	0	0	7.877	3.114	1.045	4.159	3 718

^{*} Asset disposed this year

C Carryover basis in like-kind exchange transaction

B Excess basis in like-kind exchange transaction

2011 DETAIL STATEMENTS		
SCHOOL SCIENCE & MATHEMATICS A 6-6084546		PAGE
STATEMENT #1 - PROG. SERVICE REVENUE (990-EZ PG 1 LIN	E 2)	
SUBSCRIPTIONS	102,806 42,225	
TOTAL CARRIED TO 990-EZ PG 1 LINE 2		145,031
STATEMENT #2 - OTHER REVENUE (990-EZ PG 1 LINE 8)	,	
ENDOWMENT INCOME	100 1,879 111	•
TOTAL CARRIED TO 990-EZ PG 1 LINE 8	• • • • •	2,090
STATEMENT #3 - OTHER EXPENSES (EOEZ PG 1 LINE 16)		
CONVENTION EXPENSES	22,536 150 2,499 1,957	
MEALS AND ENTERTAINMENT	27,597 27,597 10 65	
SUPPLIES TRAVEL WEB SERVICE	583 6,568 2,268	
SOFTWARE	2,111	

BANK CHARGES.....

AWARDS.....

TOTAL CARRIED TO EOEZ PG 1 LINE 16.....

92

745 50

50

67,281