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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

	Revenue		lendar year, or tax year beginning	07-01-2011 and ending 06-30-	2012			Inspection
		pplicable	C Name of organization NATIONAL ASSOCIATION OF SECONDA	RY			•	ntification number
	ress ch	_	SCHOOL PRINCIPALS Doing Business As				006937 hone nu	
_	ne char)860-0	
∏ Initi ∏ Teri			Number and street (or P O box if ma 1904 ASSOCIATION DRIVE	il is not delivered to street address) Rooi	m/suite		-	5 24,817,751
_	ended r	return ı pending	City or town, state or country, and ZII RESTON, VA 201911537	· + 4				
			F Name and address of princ	ıpal officer	H(a) Is t	J	n return	for
			JOANN BARTOLETTI			iates?	preturn	「Yes ▼ No
			1904 ASSOCIATION DRIVE RESTON, VA 201911537		H(b) Are	all affiliate	s include	sd?
								(see instructions)
I Tax	k-exem	pt status	✓ 501(c)(3)	sert no) 4947(a)(1) or 527		up exemp		·
J W	ebsite	:► WW	W PRINCIPALS ORG					
K Form	n of org	ganızatıon	Corporation Trust Association	Other 🕨	L Year of	formation 1	916 M	State of legal domicile VA
Pai	rt I	Sum	mary		•			
Governance	F	FO CUSI O RGA NI	SHIP, ENCOURAGING RESEARC NG ATTENTION ON NATIONAL ZATIONS INTERESTED IN THE E OF SECONDARY SCHOOLS AI	EDUCATIONAL PROBLEMS, AN SOLUTIONS TO PROBLEMS OF	ID WORKING W	ITH OTHE	ER PRO	FESSIONAL
	2 (Check th	ns box দ if the organization disc	ontinued its operations or dispos	ed of more than	25% of it	s net as	sets
Activities &			of voting members of the governin				3	24
¥.			of independent voting members of	- , , , ,	•	•	4	24
¥			mber of individuals employed in ca mber of volunteers (estimate if ne	, , ,	a)		5 6	209
			related business revenue from Pai	• •			7a	280,291
			lated business taxable income fro		•		7b	-19,599
				·	Pr	ior Year	<u> </u>	Current Year
	8	Contri	butions and grants (Part VIII, line	e 1h)		2,943	,007	2,696,012
Revenue	9	Progra	m service revenue (Part VIII, line	e 2g)		10,719	,714	10,114,064
39Ve	10		ment income (Part VIII, column (•		,325	330,396	
_	11 12		revenue (Part VIII, column (A), lı evenue—add lınes 8 through 11 (line	6,776	,227	6,847,516
	12		· · · · · · · · · · · · ·			20,826	,273	19,987,988
	13		and similar amounts paid (Part I			688	,000	547,000
	14		ts paid to or for members (Part IX				0	0
8	15	5-10)	es, other compensation, employee	Denefits (Part 1x, column (A), lin	es	9,254	,264	9,050,948
Expenses	16a	Profes	sional fundraising fees (Part IX, c	olumn (A), line 11e)			0	C
ਬੌ	b	Total fu	ndraısıng expenses (Part IX, column (D),	line 25) ▶ <u>368,921</u>	_			
_	17		expenses (Part IX, column (A), lır			9,743		9,831,837
	18		expenses Add lines 13–17 (must		1	19,686		19,429,785
- er	19	Keven	ue less expenses Subtract line 1	3 from line 12		1,140 ng of Curre		558,203
Net Assets or Fund Balances					Degililli	Year		End of Year
Asse Bak	20		assets (Part X, line 16)			17,752		17,384,048
det /	21		iabilities (Part X, line 26)		•	9,513		10,502,297
	22		sets or fund balances Subtract li	ne 21 from line 20		8,238	,968	6,881,751
Under	edge a	ties of po	ature Block erjury, I declare that I have examined f, it is true, correct, and complete. D		fficer) is based or			
Sign		I B	iture of officer			Date		
Here			RLES P WELLARD DEP EXEC DIR DEPUTY I or print name and title	EXEC DIRECT, OPERATIONS				
		Preparer	's L	Date	Check If			er identification number
Paid		signature			self- employed 🕨	(see ins	tructions) 514	
Prepa	arer's	Firm's na	nme (or yours L CLIFTONLARSONALLEN	EIN ▶ 41-0746749				
Use C	Only	If self-er	nployed), and ZIP + 4 4250 N FAIRFAX DRIVE		— EIN F 41-0/46/49			
			ARLINGTON, VA 22200	3		Phone r	io 🕨 (57	1) 227-9500
May t	he IR:	S discus	s this return with the preparer sho					▼Yes 「No

FUIII	990 (2011)					Page
Par		nt of Program Service chedule O contains a response			II	
1	Briefly describe t	he organization's mission				
ENC NAT SOL	OURAGING RESEA IONAL EDUCATIO	ARCH AND SERVICE, PRO DNAL PROBLEMS, AND W SLEMS OF EDUCATION A	OMOTING HI ORKING WIT	GH PROFESSIONAL H OTHER PROFESS	THROUGH INFORMATION L STANDARDS, AND FOCU IONAL ORGANIZATIONS HE WELFARE OF SECONDA	SING ATTENTION ON INTERESTED IN THE
2	Did the organizati		nt program se	ervices during the ye	ar which were not listed on	┌ Yes ┌ No
	If "Yes," describe	these new services on Sc	hedule O			
3	services?			nt changes in how it c	conducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Schedu	le O			
4	expenses Sectio	n 501(c)(3) and 501(c)(4)	organizations	s and section 4947 (a	three largest program servic a)(1) trusts are required to r ach program service reporte	eport the amount of
	(Code) (Expenses \$	6,115,803	ıncludıng grants of \$	2,000) (Revenue s	10,550,694)
	PROFESSIONAL GRO	WTH AND ENRICHMENT THROU	JGH AWARD-WIN	NING PUBLICATIONS, ME	ASPIRING SCHOOL LEADERS WITH ETINGS, CONVENTIONS, AND NAT: WLEDGE OF THE PROFESSION AND	
	(Code) (Expenses \$	6,079,927	ıncludıng grants of \$	154,000) (Revenue s	9,967,373)
	LEADERS AND THE A AND ELEMENTARY S HONOR SOCIETY, AI	IS - NATIONAL HONOR SOCIETIE ACADEMIC SUCCESS OF ALL STU CHOOL STUDENTS ITS MAJOR F	DENTS THE ASSIPEROGRAMS ARE TO	OCIATION OF STUDENT C OCIATION OFFERS LEADE HE NATIONAL HONOR SO ILS THROUGH THESE PR	RSHIP & RECOGNITION PROGRAM CIETY, NATIONAL JUNIOR HONOR OGRAMS, THE ASSOCIATION SPON	O THE DEVELOPMENT OF STUDENT S FOR HIGH SCHOOL, MIDDLE LEVE SOCIETY, NATIONAL ELEMENTARY ISORS TRAINING PROGRAMS,
	(Code) (Expenses \$	1,688,976	ıncludıng grants of \$	391,000) (Revenue \$	5 1,378,794)
4c	RESEARCH AND REC RECOGNIZE EXCELL EDUCATIONAL LEAD	COGNITIONTHE ASSOCIATION, IN ENCE IN SECONDARY EDUCATIO ERSHIP, TRAINING PROGRAMS I	I COOPERATION N AND EDUCATION N EDUCATIONAL	WITH OTHER ORGANIZAT DNAL LEADERSHIP THROU LEADERSHIP, IDENTIFYIN	IONS, PROVIDES PROGRAMS AND UGH RESEARCH PROJECTS TO IDE	RESEARCH TO ENHANCE AND TO NTIFY BEST PRACTICES IN DRMING SECONDARY SCHOOLS, AN
4d	Other program s (Expenses \$	ervices (Describe in Sche inclu	edule O) iding grants o	f \$) (Revenue \$)
<u>4e</u>	Total program se	ervice expenses►\$	13 884 70	6		

Part IV	Checklist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 📆	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	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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 1	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 temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? 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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	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, Part 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, Part 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? If "Yes," complete Schedule G, Part I	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		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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Par	t IV Checklist of Required Schedules (continued)		1	
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 questions 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		
С	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 a	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) A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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	Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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	35b		No
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		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		-1	
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	· · · · · · · ·			
	1a 79			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
_		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account or securities account)?	4a		Νo
L	·			NO
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited toy shelter transaction at any time down the tay was 2	5a		No
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			
D	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		
		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
L	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
ט	were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		Νo
_	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<u> </u>		110
9	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.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
	facilities			
L	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
22	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	u		
ט	year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
-	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	13a		
	allocated to each state			
D	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the aggregate amount of reserves on hand			
_	13c			
ła	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
L	If "Ves " has it filed a Form 720 to report these payments? If "Ne " provide an explanation in Schedule O	146		

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

Check if Schedule i) contains a response to	any question in this Part VI										٠,١	_
---------------------	--------------------------	------------------------------	--	--	--	--	--	--	--	--	--	-----	---

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			
Id	year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	H	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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		No
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			V	NI.
102	Did the organization have local chapters, branches, or affiliates?	102	Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a 12a 12b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes	
11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	
11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
11a b 12a b c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes	No

- 17 List the States with which a copy of this Form 990 is required to be filed►IL
- 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 made these available. Check all that apply

Own website 🔽 Another's website 🔽 Upon request

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

1904 ASSOCIATION DRIVE RESTON, VA 20191

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or 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 or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
(A) Name and Title	(B) A verage hours per week (describe	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				\vdash			_			

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

(A) Name and Title	(B) Average hours per week (describe hours	Average hours more than one box, compensation per unless person is both week (describe director/trustee) Position (do not check compensation work an officer and a director/trustee) 2/1099-MISC)										(F) Estimated amount of other compensation from the organization and related		
	for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			MISC)		organiza		
See Additional Data Table						-					+			
			\vdash								+			
											十			
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											+			
											\dagger			
1b Sub-Total	<u> </u>			٠.	٠.		<u> </u>				十			
c Total from continuation sheet	s to Part VII, Sec	tion A					►							
d Total (add lines 1b and 1c) .							<u> </u>		1,946,910		0		170,599	
Total number of individuals (in \$100,000 of reportable compe						above) who	o receive	ed more tha	n				
												Yes	No	
3 Did the organization list any fo										ated employee				
on line 1a? If "Yes," complete S 4 For any individual listed on line								other se		• • • •	3	-	No	
organization and related organ														
individual5 Did any person listed on line 1	a receive or accri		nanca	• •	• • fro	m anv	• unre	lated ord	· · ·	or individual for	4	Yes		
services rendered to the organ								_		• Individual for	5		No	
Section P. Indopendent Co	ntractors													
Section B. Independent Co Complete this table for your five	e highest compei													
\$100,000 of compensation fro or within the organization's tax		n Repo	ort co	mpe	nsa	tıon fo	r the	calenda	r year endı	ng with				
N	(A) ame and business ad	dress							Descr	(B) ription of services		(C Comper		
ABDI INC BUNCHER COMMERCE PARK 16 AVENUE A										JLFILLMENT AND		•	859,668	
TMA RECOURCES 1919 GALLOWS ROAD SUITE 400									AMS SOFTWA	ARE SUPPORT AND	\dagger		261,135	
VIENNA, VA 221823964 SERVANT MARKETING GROUP 39161 LOGANS CREEK LANE										SERVICES, PRINTING	+		257,762	
LARSON ALLEN LLP 9515 DEERECO ROAD SUITE 500										AX SERVICES	+		103,513	
TIMONIUM, MD 21093 FREEMAN DECORATING CO											+			
PO BOX 650036									CONFERENC	E DECORATING			102,441	

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

\$100,000 of compensation from the organization \blacktriangleright 5

Form 99								Page 9
Part	/1111	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
#\$ st	1a	Federated cam	paigns 1a					
og är	b	Membership du	es 1b					
ું.⊞	C	Fundraising eve	ents 1c					
<u>≅</u> ,≅	d		zations 1d					
ns, sim	e	Government grant	·					
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no Noncash contri	ons, gifts, grants, and 1f ot included above ibutions included in	2,696,012				
a E	h		s 1a-1f	▶	2,696,012			
				Business Code				
Program Serwce Revenue	2a	MEMBERSHIP DUE	S & SUBS	900099	7,918,144	7,918,144		
196 186	ь	CONFERENCE & M	EETINGS	900099	1,529,634	1,256,794		272,840
93	c	ASSESSMENT CEN	TER FEES	900099	666,286	666,286		
≥	d							
S =	e							
E	f	All other progra	am service revenue					
Š	g	Total. Add lines	s 2a-2f	<u></u> ▶	10,114,064			
	3		ome (including dividen		, ,			
		and other simil	ar amounts)	▶	233,888			233,888
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties			630,970			630,970
			(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	-	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	 7a	Gross amount	(ı) Securities 2,503,465	(II) O ther				
	"	from sales of assets other	_,,					
	_	than inventory Less cost or	2,406,957					
	b	other basis and sales expenses	2,400,937					
	c	Gain or (loss)	96,508					
	d	Net gain or (los	ss)	▶	96,508	96,508		
an	8a	Gross income f						
Other Revenue		\$of contributions See Part IV, lin	s reported on line 1c) ne 18					
ē.	ь	Less direct ex	penses b					
δ	C	Net income or ((loss) from fundraising	events 🟲				
	9a		rom gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti	vities				
	10a	Gross sales of returns and allo	owances .					
	 	Loop seed 5	ada aald	8,030,811				
	b c	_	oods sold b (loss) from sales of inv	2,422,806 entory ►	5,608,005	5,608,005		
	۲	Miscellaneous		Business Code	-,,	.,,		
	11a	ADVERTISING		541800	280,291		280,291	
	b	TRAVEL REBA		900099	166,454			166,454
	c	HONORARIA		900099	100,736			100,736
	d		ue		61,060			61,060
	e	Total. Add lines	s 11a-11d		608,541			
	12	Total revenue.	See Instructions .	· · •	19,987,988	15,545,737	280,291	1,465,948

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns

	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	547,000	547,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	1,073,305	374,208	690,506	8,591
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,629,403	2,639,971	2,859,509	129,923
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	904,953	401,601	484,985	18,367
9	Other employee benefits	947,454	437,397	490,418	19,639
10	Payroll taxes	495,833	222,974	262,612	10,247
11	Fees for services (non-employees)				
а	Management				
b	Legal	31,613		31,613	
С	Accounting	104,031		104,031	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				_
f	Investment management fees	30,504		30,504	_
g	Other	1,293,761	1,066,584	164,177	63,000
12	Advertising and promotion	763,509	165,053	598,244	212
13	Office expenses	285,942	72,715	210,720	2,507
14	Information technology	564,186	281,715	279,425	3,046
15	Royalties				
16	Occupancy	451,619	86,492	365,127	
17	Travel	1,179,913	824,027	350,449	5,437
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,816,635	1,660,759	155,718	158
20	Interest	103,121		103,121	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	474,938		474,938	
23	Insurance	476,875	409,747	67,128	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	PROGRAM DELIVERY & FULF	2,255,190	1,634,438	620,295	457
b	PROGRAM OVERHEAD	0	412,000	-412,000	
c	SALE OFFICE OVERHEAD	0	1,216,865	-1,216,865	
d	ADMINISTRATIVE OVERHEAD	0	1,431,160	-1,538,497	107,337
e					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	19,429,785	13,884,706	5,176,158	368,921
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm 990 (2011)

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,942,712	1	2,638,572
	2	Savings and temporary cash investments			2,007,928	2	1,509,167
	3	Pledges and grants receivable, net			208,937	3	208,680
	4	Accounts receivable, net			1,545,160	4	1,547,941
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	s, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of					
76		Schedule L		6			
Assets	7	Notes and loans receivable, net		7			
8	8	Inventories for sale or use			793,454	8	708,434
⋖	9	Prepaid expenses and deferred charges			306,511	9	487,473
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	10,410,720			
	ь	Less accumulated depreciation	10b	7,119,850	3,644,118	10 c	3,290,870
	11	Investments—publicly traded securities			6,876,733	11	6,950,911
	12	Investments—other securities See Part IV, line 11				12	_
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			426,522	15	42,000
	16	Total assets. Add lines 1 through 15 (must equal line 34)			17,752,075	16	17,384,048
	17	Accounts payable and accrued expenses .			2,380,103	17	2,392,027
	18	Grants payable				18	
	19	Deferred revenue			3,300,517	19	3,279,342
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.			21	
abilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified		•			
졅		persons Complete Part II of Schedule L				22	
Ï	23	Secured mortgages and notes payable to unrelated third parties			2,190,580	23	2,105,715
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to relate and other liabilities not included on lines 17-24) Complete Par	ed thi	rd parties,			
		D			1,641,907	25	2,725,213
	26	Total liabilities. Add lines 17 through 25			9,513,107	26	10,502,297
Balances		Organizations that follow SFAS 117, check here ▶ ▽ and comp through 29, and lines 33 and 34.	lete I	ines 27			
an	27	Unrestricted net assets			6,962,424	27	5,589,412
8	28	Temporarily restricted net assets			1,276,544	28	1,292,339
돧	29	Permanently restricted net assets				29	
Fund		Organizations that do not follow SFAS 117, check here ► ┌ an	ıd con	nplete			
ŏ		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
ď	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			8,238,968	33	6,881,751
_	34	Total liabilities and net assets/fund balances			17,752,075	34	17,384,048

	Check if Schedule O contains a response to any question in this Part XI	•		. 🔽			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		19,9	87,98		
2	Total expenses (must equal Part IX, column (A), line 25)	2			129,78		
3	Revenue less expenses Subtract line 2 from line 1	3	558,				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	8,238,9				
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-1,915,42				
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	6,881,75				
Par	TXII 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		Νo		
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes			
C	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of to 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 its Schedule O		2 c	Yes			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both	ssued					
	▼ Separate basis				1		
3a	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?		За		No		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b				

Software ID: Software Version:

EIN: 52-6006937

Name: NATIONAL ASSOCIATION OF SECONDARY

SCHOOL PRINCIPALS

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) (C) A verage Position (check all that apply)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation					
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations	
KEN GRIFFITH PRESIDENT	20 00	Х		х				0	0	0	
DENISE GREENE-WILKINSON DIRECTOR	10 00	Х		Х				0	0	0	
MICHAEL E ALLISON DIRECTOR	4 00	х						0	0	0	
G A BUIE DIRECTOR	4 00	Х						0	0	0	
DAVID S ELLENA DIRECTOR	4 00	Х						0	0	0	
JAYNE ELLSPERMANN DIRECTOR	4 00	Х						0	0	0	
JEFFREY GEIHS DIRECTOR	4 00	Х						0	0	0	
JANE GRIFFIN DIRECTOR	4 00	Х						0	0	0	
SUZI M JENSEN DIRECTOR	4 00	Х						0	0	0	
BONNIE JOHNSON-ATEN DIRECTOR	4 00	Х						0	0	0	
JERRY KEEPERS DIRECTOR	4 00	Х						0	0	0	
TROY KILZER DIRECTOR	4 00	Х						0	0	0	
TRACEY LAMB DIRECTOR	4 00	Х						0	0	0	
DONALD MACRINO DIRECTOR	4 00	Х						0	0	0	
BOB MOORE DIRECTOR	4 00	Х						0	0	0	
DAVID MORROW DIRECTOR	4 00	Х						0	0	0	
DORA OLIVARES DIRECTOR	4 00	Х						0	0	0	
JOHN OSGOOD DIRECTOR	4 00	Х						0	0	0	
BARBARA-JANE PARIS DIRECTOR	4 00	Х						0	0	0	
STEVE QUINTUS DIRECTOR	4 00	Х						0	0	0	
WILLIAM J SCALETTA DIRECTOR	4 00	Х						0	0	0	
MIKE SCHOLZ DIRECTOR	4 00	Х						0	0	0	
RICHARD SNYDER DIRECTOR	4 00	Х						0	0	0	
DAVID L THOMSON DIRECTOR	4 00	Х						0	0	0	
TIROZZI GERALD N EXECUTIVE DIRECTOR	37 50			х				459,059	0	1,750	

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

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) Average hours	A verage Position (control that approximately provided the provided that approximately provided the provided that approximately provided the provided that approximately provided the provided				ıII		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	Key employee Officer Institutional Trustee Individual trustee or director		Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations			
HERSEY LENOR G DEPUTY EXECUTIVE DIRECTOR	37 50			Х				225,181	0	4,752	
BARTOLETTI JOANN EXECUTIVE DIRECTOR	37 50			х				209,248	0	38,392	
DRIPPS JOHN N DIRECTOR, BUSINESS ADMINISTRATION	37 50				х			200,406	0	24,974	
HODGE RONALD CHIEF INFORMATIONAL OFFICER	37 50				х			161,453	0	19,346	
FLANARY RICHARD DEPUTY DIRECTOR, PROGRAMS	37 50					х		159,112	0	20,369	
NORI JOHN DIR SCHOOL LEADERSHIP SERV	37 50					х		139,562	0	10,447	
RIVIERE NANCY INTERIM DEPUTY EXEC DIRECTOR	37 50					Х		139,512	0	20,137	
REED PETER D ASSOCIATE DIRECTOR, PROGRAM SERVICES	37 50					х		128,723	0	18,319	
CONEY BEVERLY A ASSOCIATE DIRECTOR	37 50					х		124,654	0	12,113	

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection **Employer identification number**

NATIO	NAL AS		zation N OF SECONDA	ARY					Employer	identificatio	n number	
		ICIPALS							52-6006			
	rt I			blic Charity Sta						instructions		
The c	rganı			te foundation becaus			-		x)			
1	<u> </u>		•	on of churches, or a			•	o)(1)(A)(i).				
2		A scho	ol described	in section 170(b)(1	L)(A)(ii). (At	tach Sched	ule E)					
3		A hosp	ital or a cod	perative hospital se	rvice organiz	zatıon desci	ibed in sectio	on 170(b)(1)	(A)(iii).			
4	Γ			h organization operat ity, and state	ted in conjun	iction with a	hospital des	cribed in sec	tion 170(b)	(1)(A)(iii). E	nter the	
5	Γ	=	•	erated for the benefi	_	e or univers	ty owned or o	perated by a	governmei	ntal unit desc	rıbed ın	
	_			A)(iv). (Complete P	•							
6		A feder	al, state, or	local government or	government	tal unit desc	rıbed ın sect	ion 170(b)(1)(A)(v).			
7		describ	oed in	at normally receives (A)(vi) (Complete P		al part of its	support from	a governme	ntal unit or	from the gene	eral public	
8	Г			described in sectior		A)(vi) (Co	mplete Part I	I)				
9	Ī			at normally receives					outions, me	mbership fees	s, and gross	
	•			ities related to its e								
				oss investment inco								
				ganızatıon after June						,		
10	Г											
11										09(a)(3). Check		
e	Γ	other t	_	ox, I certify that the on managers and ot	_				=' '='	•	•	
f		If the o	rganization this box	received a written de						III supportir	ng organization,	
g		followir	ng persons?	2006, has the organi rectly or indirectly c				-		١	Yes No	
				governing body of th	•		_	p = 1.0 0 1.10 0.00				
				er of a person descri								
			-	lled entity of a perso			above?			11g(
h				ng information about								
(i) Name of (ii) supported EIN organization		(iii) Type of organization (described on lines 1- 9 above or IRC section	Is the organizati col (i) list	(iv) Is the organization in col (i) listed in your governing		tify the ion in your rt?	(vi Is t organiza col (i) or in the l	he ition in ganized	(vii) A mount of support?			
				(see instructions))	Yes	No	Yes	Yes No		No	1	
									Yes	-		
										1		
	1					1	1	1	1	1	+	

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶ □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

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.)

50	ction A. Public Support	zation falls to c	luality under the	e tests listed be	elow, please co	mpiete Part II.)
	ndar year (or fiscal year beginning	(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")	12,106,325	10,960,496	11,210,545	11,264,682	10,614,156	56,156,204
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	8,550,490	10,495,383	9,845,972	10,719,714	10,917,145	50,528,704
3	Gross receipts from activities that are not an unrelated trade or						
4	business under section 513 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	20,656,815	21,455,879	21,056,517	21,984,396	21,531,301	106,684,908
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	A mounts included on lines 2 and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
c	Add lines 7a and 7b						0
8	Public Support (Subtract line 7c from line 6)						106,684,908
	ction B. Total Support ndaryear (or fiscal year						
Care	beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	A mounts from line 6	20,656,815	21,455,879	21,056,517	21,984,396	21,531,301	106,684,908
L0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	477,984	988,758	1,009,421	936,194	864,858	4,277,215
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	477,984	988,758	1,009,421	936,194	864,858	4,277,215
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,750,850	625,140	349,363	353,942	328,250	3,407,545
13	Total support (Add lines 9, 10c, 11 and 12)	22,885,649	23,069,777	22,415,301	23,274,532	22,724,409	114,369,668
14	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second,	, thırd, fourth, or f	fifth tax year as a	501(c)(3) organ	nization,
	ction C. Computation of Pub	lic Support D	ercentage				
Se				13 column (f))		15	93 280 %
Se 15	Public Support Percentage for 201	1 (line 8 column	(i) divided by lille				
15		•				16	92 150 %
15 16	Public Support Percentage for 201	10 Schedule A, F	art III, line 15	je		16	92 150 %
15 16 Se	Public Support Percentage for 201 Public support percentage from 20	10 Schedule A, P	ome Percentag		(f))	16	92 150 %
15 16	Public Support Percentage for 201 Public support percentage from 20	estment Inco	ome Percentagolumn (f) divided b	y line 13 column	(f))		

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

Schedule A (Form	990 or	990-EZ)	2011
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Page **4**

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, PART II, LINE 12, EXPLANATION OF OTHER INCOME TRAVEL REBATE HONORARIA SUBSCRIPTIONS OTHER MAILING LIST OTHER FEES ADVERTISING

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493189002354

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
- ◆ Section 527 organizations Complete Part I-A only
- If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
- If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

Provide a description of the organization's direct and indirect political campaign activities on behalf of or

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

in opposition to candidates for public office in Part IV

Name of the organization
NATIONAL ASSOCIATION OF SECONDARY
SCHOOL PRINCIPALS

Employer identification number

┌ Yes

52-6006937

Part I-A	Complete if	the organization is	<u>s exempt under se</u>	ction 501(c)) or is a section 5	<u>27 organization.</u>

- Political expenditures
- Volunteer hours

art I-B	Complete	it the or	ganization is	s exempt	unaer	section	501(C)((3)	

- Enter the amount of any excise tax incurred by the organization under section 4955 1
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- ☐ Yes
- Was a correction made?
- If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 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
- 3 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?
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a

separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(e) A mount of political (a) Name (b) Address (c) EIN (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none. enter -0-

section 4911 tax for this year?

☐ Yes ☐ No

elledale e (i	5111 556 51 556 EE/ E011		ı uy
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5	768 ((election
	under section 501(h)).		

A Ch	heck	\Box	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,
		_	expenses, and share of excess lobbying expenditures)

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	131,224		
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	372,246	
c	Total lobbying expenditures (add lines 1a and 1b	p)	503,470	
d	O ther exempt purpose expenditures		22,312,293	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	22,815,763	
f	Lobbying nontaxable amount Enter the amount f	1,000,000		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r - 0 -	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 472) reporting	□ Vas □ Na

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

Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year (a) 2008 **(b)** 2009 (d) 2011 (c) 2010 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 Lobbying non-taxable amount 4,000,000 Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 229,753 177,777 426,718 503,470 Total lobbying expenditures 1,337,718 Grassroots non-taxable amount 250,000 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) 87,466 131,224 76,548 79,708 374,946 Grassroots lobbying expenditures

_	edule C (Form 990 or 990-EZ) 2011				Page 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has f (election under section 501(h)).	NOT f	iled Fo	orm 57	768
		(a)	(b)
		Yes	No	Am	ount
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?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
C	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	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	O ther 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				
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), d	or sect	tion
			_	Y	es 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?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
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

DLN: 93493189002354

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, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization
NATIONAL ASSOCIATION OF SECONDARY

Employer identification number

SCF	OOL PRINCIPALS				52-6	5006937		
Pa	rt I Organizations Maintaining Donor Adorganization answered "Yes" to Form 99			ther Similar F	unds	or Account	ts. Comple	te ıf the
		(a) Donor	adv	ised funds	((b) Funds and	l other accou	nts
1	Total number at end of year							
2	Aggregate contributions to (during year)							
3	Aggregate grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor advi funds are the organization's property, subject to the				nor advı	sed	┌ Yes	┌ No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit						☐ Yes	┌ No
Pai	t II Conservation Easements. Complete	ıf the organizatio	n a	nswered "Yes"	to Forn	n 990, Part	IV, line 7.	
1	Purpose(s) of conservation easements held by the o Preservation of land for public use (e g , recreated Protection of natural habitat	_		hat apply) Preservation of a Preservation of a		, .	,	a
	Preservation of open space							
2	Complete lines 2a-2d if the organization held a qual	ıfıed conservatıon c	ont	rıbutıon ın the forr	n of a co	nservation		
	easement on the last day of the tax year					Hold at th	ne End of the	Voar
а	Total number of conservation easements				2a	neiu at ti	ie chu or the	Teal
b	Total acreage restricted by conservation easements	3			2b			
c	Number of conservation easements on a certified his		ude	d ın (a)	2c			
d	Number of conservation easements included in (c) a			. ,	2d			
3	Number of conservation easements modified, transfe			ushed orterminat	ed by th	ie organizatio	n durina	
	the taxable year	errea, releasea, exti	iiigu	noned, or terminat	ca by ci	ic organizacio	ii ddiiiig	
_	, <u> </u>							
4	Number of states where property subject to conserve							
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds		torır	ng, inspection, har	idling of	violations, ai	nd Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, insp	pecting and enforcir	ng c	onservation easer	ments d	uring the year	r ▶	
7	A mount of expenses incurred in monitoring, inspecti \$\blue{\sigma}\$ \text{\$\sigma}\$	ng, and enforcing co	onse	ervation easement	ts during	g the year		
8	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy tl	he r	equirements of se	ction		┌ Yes	┌ No
9	In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of the organization's accounting for conservation easer	the footnote to the o						
Par	Organizations Maintaining Collection Complete if the organization answered				or Otl	her Simila	r Assets.	
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	l for public exhibitio	n, e	ducation or reseal	rch ın fu			_ _
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, ed					•	
	(i) Revenues included in Form 990, Part VIII, line 1					► \$		
	(ii) Assets included in Form 990, Part X					- s		
2	If the organization received or held works of art, hist following amounts required to be reported under SFA				for finan			
а	Revenues included in Form 990, Part VIII, line 1	5				► \$		

Assets included in Form 990, Part X

Part	att Organizations Maintaining Co										ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	y of tl	he fol	lowing th	hat are	e a significa	nt us	e of its collecti	on	
а	Public exhibition		d	\vdash	Loan o	rexcl	hange progra	ams			
b	Scholarly research		e	\vdash	Other						
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	ain ho	w the	v further	rthe o	rganization'	SAVE	emnt nurnose in		
	Part XIV						_				
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	□ No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Compl	ete ıf	the	organiz	zatıor			<u> </u>		,
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other asse	ets no	ot 「	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	wing t	able				•		
_							H.	_	Ame	ount	
C .ı	Beginning balance						 	1c			
d	Additions during the year						<u> </u>	ld .			
e	Distributions during the year						<u> </u>	le			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lir	e 217	>					Г	Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV										
Pa	rt V Endowment Funds. Complete									(-) [Yan ra Da ak
1-	Beginning of year balance	(a)Current Year	(D)Prior	Year	(c)IW	o Years Back 39,481	(a)1	hree Years Back 39,481	(e)Four Y	ears back
1a b	Contributions						33,101		33,101		
_					+		40		437		
C	Investment earnings or losses				+		40		437		
d	Grants or scholarships				+		39,521		437		
е	Other expenditures for facilities and programs						39,321		437		
f	Administrative expenses										
g	End of year balance								39,481		
2	Provide the estimated percentage of the yea	r end balance held	as						•		
а	Board designated or quasi-endowment										
b	Permanent endowment ►										
c 3a	Term endowment ► Are there endowment funds not in the posse:	scion of the organi	ation	that	ara bald	and a	dministored	for t	ho		
За	organization by	ssion of the organiz	ation	lliat .	are neru	aliu a	allillisterea	101 L	ne	Yes	No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(II), are the related organizatio	ns listed as require	d on S	Sched	dule R?				3b		
4	Describe in Part XIV the intended uses of th										
Par	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa	art X	, line 1	0					
	Description of property) Cost or o		(b) Cost or ot basis (other		(c) Accumulated depreciation	(d) B	ook value
1a	Land						153,	958			153,958
b	Buildings						5,160,	761	3,156,114		2,004,647
c	Leasehold improvements						168,	783	121,581		47,202
d	Equipment						4,685,	328	3,600,265		1,085,063
e	Other						241,	890	241,890		0
	I. Add lines 1a-1e (Column (d) should equal Fo		mn (B), line	10(c).)			•	•		3,290,870
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·							Schedule D	(Form 9	

Part VIII Investments—Other Securities. See	orm 990, Part X, line 12		
(a) Description of security or category	(b)Book value		d of valuation
(including name of security)	(2)20011 1212	Cost or end-of-	year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
			d of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-	year market value
			,
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
(-,,			
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion		(b) Book value
Part IX Other Assets. See Form 990, Part X, line (a) Descrip	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	e 15. tion 5.) , line 25.		(b) Book value
Part IX Other Assets. See Form 990, Part X, line (a) Descrip	e 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X	e 15. tion 5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion 5.) , line 25.		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	E 15. tion 5.)		(b) Book value

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,987,988
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	19,429,785
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	558,203
4	Net unrealized gains (losses) on investments	4	-381,453
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-1,533,967
9	Total adjustments (net) Add lines 4 - 8	9	-1,915,420
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,357,217
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	22,080,398
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
е	Add lines 2a through 2d	2e	2,422,806
3	Subtract line 2e from line 1	3	19,657,592
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
С	Add lines 4a and 4b	4c	330,396
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	19,987,988
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	21,852,591
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	1	
c	Other losses	1	
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	2,422,806
3	Subtract line 2e from line 1	3	19,429,785
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	19,429,785

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

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	PROVIDE FOR SPEAKER EXPENSES, HONORIA AND/OR TRAVEL COSTS, AT THE MIDDLE LEVEL PRE-CONFERENCE AT THE NASSP ANNUAL CONVENTION
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION IS AN EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE ASSOCIATION IS NOT A PRIVATE FOUNDATION HOWEVER, THE ASSOCIATION IS REQUIRED TO REPORT UNRELATED BUSINESS INCOME TO THE INTERNAL REVENUE SERVICE AND THE COMMONWEALTH OF VIRGINIA, AS WELL AS PAY CERTAIN OTHER TAXES TO LOCAL JURISDICTIONS THERE IS NO UNRELATED BUSINESS INCOME TAX LIABILITY FOR THE YEARS ENDED JUNE 30, 2012 THE ASSOCIATION HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THE ADOPTION OF THIS STANDARD HAD NO IMPACT ON THE ASSOCIATION FILES AS A TAX-EXEMPT ORGANIZATION SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, THE ASSOCIATION'S 2009, 2010 AND 2011 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS
PART XI, LINE 8 - OTHER ADJUSTMENTS		CHANGE IN LONG TERM PENSION LIABILITY -1,533,967
PART XII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOOD SOLD 2,422,806
PART XII, LINE 4B - OTHER ADJUSTMENTS		INVESTMENT INCOME 330,396
PART XIII, LINE 2D - OTHER ADJUSTMENTS		COST OF GOODS SOLD 2,422,806

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Schedule I

(Form 990)

Department of the Treasury

DLN: 93493189002354 OMB No 1545-0047

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

Name of the organization						Employer identificati	on number
NATIONAL ASSOCIATION OF SEG SCHOOL PRINCIPALS	CONDARY					52-6006937	
Part I General Informati	ion on Grants and	l Assistance				•	
 Does the organization maintain the selection criteria used to a Describe in Part IV the organical 	award the grants or as	sıstance [?]					∀ Yes
Part II Grants and Other Form 990, Part IV, II	Assistance to Go	vernments and O	rganizations in the nore than \$5,000. Ch	United States. Coneck this box if no one	recipient receive	d more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount 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 grai or assistance
Enter total number of sectionEnter total number of other org						_	
For Privacy Act and Paperwork Reducti	on Act Notice, see the I	nstructions for Form 99	0.	Cat No 50055P		Schedu	le I (Form 990) 2011

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

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
See Additional Data Table					

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

PROCEDURE FOR MONITORING GRANTS IN THE U S

Identifier

Explanation

Return Reference

PART I, LINE 2

SCHEDULE I, PART I, LINE 2 JUDGING PROCESSES FOR THE NATIONAL HONOR SOCIETY SCHOLARSHIP PROGRAM AND THE PRINCIPAL'S LEADERSHIP AWARD SCHOLARSHIP PROGRAM THE NATIONAL HONOR SOCIETY SCHOLARSHIP PROGRAM AND THE PRINCIPAL'S LEADERSHIP AWARD SCHOLARSHIP PROGRAM ARE ADMINISTERED BY THE NASSP STUDENT ACTIVITIES OFFICE UNDER DIRECTION OF THE PROGRAM MANAGER, WANDA CARROLL EACH SCHOLARSHIP PROGRAM HAS A FOUR-PAGE NOMINATION (APPLICATION) FORM HIGH SCHOOLS ACROSS THE COUNTRY ARE MAILED COPIES OF THE NOMINATION FORMS WITH INSTRUCTIONS THIS INFORMATION IS ALSO POSTED ON THE NASSP WEB SITES NATIONAL HONOR SOCIETIES MAY NOMINATE TWO SENIORS MEMBERS OF THE NATIONAL HONOR SOCIETY TO COMPETE PRINCIPALS MAY NOMINATE ONE SENIOR FOR THE PRINCIPAL'S LEADERSHIP AWARD WINNERS ARE CHOSEN USING A THREE STEP PROCESS THE FIRST PHASE SCORES THE NOMINATION FORMS USING AN ESTABLISHED ALGORITHM DEVELOPED BY NASSP DATA FROM EACH NOMINATION FORM RECEIVED IS INPUT INTO THE COMPUTER THE ALGORITHM IS APPLIED AND THE TOP APPLICANTS ARE SELECTED THE TOP 1,000-1,200 NOMINATION FORMS ARE SELECTED USING THE ALGORITHM TO ADVANCE TO THE SECOND ROUND OF SCORING, THAT BY THE EIGHT MEMBER NATIONAL SELECTION COMMITTEES FOR THE NATIONAL HONOR SOCIETY THE NATIONAL SELECTION COMMITTEE MEMBERS ARE INVITED BY NASSP TO SERVE ON THE SELECTION COMMITTEE MEMBERS REPRESENT EACH OF THE EIGHT REGIONS DEFINED BY NASSP ALL MEMBERS OF THE COMMITTEE ARE HIGH SCHOOL PRINCIPALS THE SELECTION COMMITTEE MEMBERS READ THE 1,000-1,200 NOMINATION FORMS TO DETERMINE THE STATE FINALISTS TO RECEIVE A \$1,000 SCHOLARSHIP FROM THE STATE FINALISTS THE COMMITTEE WILL SELECT 53 STATE WINNERS TO RECEIVE AN ADDITIONAL \$500 SCHOLARSHIP ONCE THE STATE WINNERS ARE SELECTED THE COMMITTEE WILL DETERMINE THE NINE REGIONAL WINNERS THAT RECEIVE AN ADDITIONAL \$1,500 SCHOLARSHIP, FROM THE NINE REGIONAL WINNERS ONE NATIONAL WINNER WILL BE IDENTIFIED TO RECEIVE AN ADDITIONAL \$10,000 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL AND WINNER CATEGORIES TOTALING A \$13,000 SCHOLARSHIP FOR THE PRINCIPAL'S LEADERSHIP AWARD THE NATIONAL SELECTION COMMITTEE MEMBERS ARE INVITED BY NASSP TO SERVE ON THE SELECTION COMMITTEE MEMBERS REPRESENT EACH OF THE EIGHT REGIONS DEFINED BY NASSP ALL MEMBERS OF THE COMMITTEE ARE HIGH SCHOOL PRINCIPALS THE SELECTION COMMITTEE MEMBERS READ THE 1,000-1,200 NOMINATION FORMS TO DETERMINE THE STATE FINALISTS TO RECEIVE A \$1,000 SCHOLARSHIP FROM THE STATE FINALISTS THE COMMITTEE WILL SELECT EIGHT REGIONAL AWARD WINNERS WILL BE IDENTIFIED FROM THE EIGHT (8) NASSP DEFINED REGIONS OF THE UNITED STATES THE EIGHT REGIONAL WINNERS WILL EACH RECEIVE AN ADDITIONAL \$500 SCHOLARSHIP, MAKING THEIR TOTAL AWARD \$1,500 ONE NATIONAL SEMI-FINALIST WILL BE IDENTIFIED FROM AMONG THE EIGHT REGIONAL WINNERS TO RECEIVE AN ADDITIONAL \$3,500 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL, AND SEMI-FINALIST WINNER CATEGORIES TOTALING A \$5,000 SCHOLARSHIP ONE NATIONAL FINALIST WILL BE IDENTIFIED FROM AMONG THE EIGHT REGIONAL WINNERS TO RECEIVE AN ADDITIONAL \$7,000 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL, AND FINALIST WINNER CATEGORIES TOTALING AN \$8,500 SCHOLARSHIP ONE NATIONAL WINNER WILL BE IDENTIFIED FROM AMONG THE EIGHT REGIONAL WINNERS TO RECEIVE AN ADDITIONAL \$10,500 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL, AND WINNER CATEGORIES TOTALING \$12,000 IN SCHOLARSHIP AWARDS

Software ID: Software Version:

EIN: 52-6006937

Name: NATIONAL ASSOCIATION OF SECONDARY

SCHOOL PRINCIPALS

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(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
PRUDENTIAL SPIRIT OF THE COMMUNITY	112	152,000			
NATIONAL HONOR SOCIETY SCHOLARSHIPS	300	192,000			
PRINCIPAL LEADERSHIP AWARD SCHOLARSHIPS	200	125,000			
AWARDS BREAK THROUGH HIGH SCHOOLS	10	50,000			
AWARDS PRINCIPAL OF THE YEAR	6	16,000			
AWARDS ASS'T PRINCIPAL OF THE YEAR	3	8,000			
MIDDLE SCHOOL DISERTATION AWARD	2	2,000			
SHULL AWARD	3	1,500			
NATIONAL ASSOCIATION OF STUDENT COUNCIL AWARD	1	500			

DLN: 93493189002354

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

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

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

Name of the organization NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS

Employer identification number

52-6006937

Pa	It I Questions Regarding Compensation	n				
					Yes	Νo
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part II					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	▼ Travel for companions	Γ	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Г	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the oreimbursement orprovision of all the expenses described.			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2	Yes	
3	Indicate which, if any, of the following the organization's CEO/Executive Director Check all to Compensation committee		y			
	Independent compensation consultant	<u> </u>	• •			
	Form 990 of other organizations	<u>ب</u>	·			
	, Torm 550 or other organizations	•	ripproval by the board or compensation committee			
4	During the year, did any person listed in Form 990, or a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	l paymen	t?	4a		No
b	Participate in, or receive payment from, a suppleme	ental non	qualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-b	ased co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and \boldsymbol{p}					
	Only 501(c)(3) and 501(c)(4) organizations only m	ust comp	olete 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		No
b	Any related organization?			5b		No
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of $% \left\{ 1,2,3,3,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4,4$, lıne 1a,	did the organization pay or accrue any			
а	The organization?			6a		No
ь	Any related organization?			6b		No
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A	, line 1a	, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported in Form 990, Part VII,		ny relevant information regarding these items sing allowance or residence for personal use ments for business use of personal residence lith or social club dues or initiation fees sonal services (e.g., maid, chauffeur, chef) Illow a written policy regarding payment or If "No," complete Part III to explain rallowing expenses incurred by all garding the items checked in line 1a? 1b Yes tablish the compensation of the ten employment contract internation survey or study roval by the board or compensation committee tion A, line 1a with respect to the filing organization fied retirement plan? 1a No fied retirement plan? 2 Yes field retirement plan? 3 Ab Yes field retirement plan? 4 No he organization pay or accrue any 5 No Sb No No Sb No Sb No Sb No Sb No Sb No Sb No Sh No S			
	subject to the initial contract exception described i	n Regs	section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow th section 53 $4958-6(c)$?	ie rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable	(E) Total of columns	
		(i) Base (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)TIROZZI GERALD N	(I) (II)	394,402 0	27,428	37,229	0 0	1,750	0 460,809 0 0	,
(2) HERSEY LENOR G	(I) (II)	195,521 0	29,660	0 0	3,002	1,750	0 229,933 0 0	,
(3) BARTOLETTI JOANN	(I) (II)	129,248 0	80,000	0 0	35,596	•	6 247,640 0 0	,
(4) DRIPPS JOHN N	(I) (II)	188,870 0	11,536	0 0	8,852		2 225,380 0 0	,
(5) HODGE RONALD	(I) (II)	161,453 0	0	0 0	6,906	· ·	0 180,799 0 0)
(6) FLANARY RICHARD	(I) (II)	159,112 0	0	0 0	7,848	12,521	1 179,481 0 0	,
(7) NORI JOHN	(I) (II)	139,055	5 5 0	0 0	6,249	4,198	8 150,009 0 0	,
(8) RIVIERE NANCY	(1)	139,512	0 0	0 0	7,401		6 159,649 0 0	,
	!		<u> </u>		-		'	
	'					 		
	!							
							<u> </u>	
	<u> </u>	,				1		

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

Ident if ier	Return Reference	Explanation
		BARTOLETTI, JOANN - COMPANION TRAVEL - NOT INCLUDE IN INCOME DRIPPS, JOHN N - HEALTH CLUB - NOT NCLUDED IN INCOME FLANARY, RICHARD - HEALTH CLUB - NOT INCOME
	4B	GERALD N TIROZZI, EXECUTIVE DIRECTOR, PARTICIPATED IN A NONQUALIFIED RETIREMENT PLAN THE PLAN LIABILITY OF \$342,057 WAS PAID OUT DURING THE YEAR JOANN BARTOLETTI, EXECUTIVE DIRECTOR, PARTICIPATED IN A NONQUALIFIED RETIREMENT PLAN THE CONTRIBUTION TO THE PLAN FOR FISCAL YEAR ENDED JUNE 30, 2012 WAS \$-0-

Schedule J (Form 990) 2011

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As Filed Data -

DLN: 93493189002354

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.

OMB No 1545-0047

2011

Open to Public

Inspection

Name of the organization NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS

Employer identification number

52-6006937

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 1	THE STEERING COMMITTEE SHALL ASSIST THE BOARD OF DIRECTORS IN ITS OVERSIGHT RESPONSIBILITIES BY EXERCISING THE FULL POWERS AND AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS OF THE ASSOCIATION IN BETWEEN REGULAR BOARD MEETINGS AND IN REVIEWING AND MAKING RECOMMENDATIONS TO THE FULL BOARD AS TO FAIR AND REASONABLE EXECUTIVE COMPENSATION LEVELS THE STEERING COMMITTEE SHALL NOT HAVE THE POWER OR AUTHORITY TO - FILL VACANCIES ON THE BOARD OF DIRECTORS - ADOPT, AMEND, OR REPEAL THE BYLAWS - ACT ON MATTERS COMMITTED BY THE BYLAWS OR RESOLUTION OF THE BOARD OF DIRECTORS TO ANOTHER COMMITTEE OF THE BOARD - ACT ON MATTERS PERTAINING TO THE ACQUISITION, SALE, MORTGAGE, OR PLEDGE OF REAL PROPERTY THE STEERING COMMITTEE SHALL CONSIST OF THE PRESIDENT, PRESIDENT-ELECT, AND TWO OTHER DIRECTORS ELECTED ANNUALLY BY THE BOARD ALL ACTIONS OF THE STEERING COMMITTEE SHALL BE SUBJECT TO RATIFICATION BY THE FULL BOARD THE STEERING COMMITTEE MAY MEET IN ANY MANNER NECESSARY TO CONDUCT ITS BUSINESS AND SHALL KEEP REGULAR MINUTES OF ITS PROCEEDINGS AND REPORT THE SAME TO THE BOARD AT THE NEXT MEETING OF THE BOARD OF DIRECTORS

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

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

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

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

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

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD OF DIRECTORS WILL CONDUCT AN ANNUAL EVALUATION OF THE EXECUTIVE DIRECTOR SUCH EVALUATION WILL BE BASED ON THE EXTENT TO WHICH THE EXECUTIVE DIRECTOR HAS ADDRESSED THE BOARD'S STATED GOALS AND OBJECTIVE AS SPECIFIED IN ITS STRATEGIC PLAN IN THIS PROCESS, THE BOARD WILL ALSO REVIEW THE STAFF'S WORKPLAN AS RELATED TO EACH GOAL AND OBJECTIVE WHICH INCLUDES SPECIFIC TIMELINES AND MEASURABLE OUTCOMES LAST UNDERTAKEN IN 2012 KEY STAFF PERFORMANCE IS REVIEWED BY THE EXECUTIVE DIRECTOR IN ACCORANCE WITH STANDARD STAFF PERFORMANCE APPRAISAL PROCEDURES COMPENSATION DECISIONS ARE MADE BY THE EXECUTIVE DIRECTOR PERIODIC SALARY COMPARISONS ARE PERFORMED TO ENSURE STAFF COMPEMSATION IS IN LINE WITH OTHER ASSOCIATIONS OF SIMILAR SIZE AND SCOPE

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

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR	FORM 990, PART	NET UNREALIZED LOSSES ON INVESTMENTS -381,453 CHANGE IN LONG TERM
FUND BALANCES	XI, LINE 5	PENSION LIABILITY -1,533,967 TOTAL TO FORM 990, PART XI, LINE 5 -1,915,420

ldentifier	Return Reference	Explanation
REASON FOR AMENDED RETURN	FORM 990, PAGE 1, SECTION B, AMENDED RETURN	THE FORM 990 AT JUNE 30, 2012 IS BEING AMENDED TO REPORT THE PARTICIPATION IN A 457(F) PLAN FOR THE ORGANIZATION'S CURRENT EXECUTIVE DIRECTOR, JOANNE BARTOLETTI NO CONTRIBUTIONS HAVE BEEN MADE ON HER BEHALF DURING THE FISCAL YEAR ENDED JUNE 30, 2012 THE AMENDMENT ALSO REFLECTS THE PAYOUT OF A FORM 457(F) PLAN FOR THE ORGANIZATION'S FORMER EXECUTIVE DIRECTOR, GERALD TIROZZI THIS DISCLOSURE IS INCLUDED ON SCHEDULE J, PART I LINE 4B IN ADDITION, THE BREAKDOWN OF W-2 REPORTING IN PART II OF SCHEDULE J FOR GERALD TIROZZI REFLECTS A CHANGE IN COLUMN (B)(I) AND (B)(III)