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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)	OMB No 1545-0047 2011 Open to Public Inspection
	The organization may have to use a copy of this return to satisfy state reporting requirements	

A For the 2011 calendar year, or tax year beginning 09-01-2011 and ending 08-31-2012		D Employer identification number 52-0607919	
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization MARYLAND STATE EDUCATION ASSOCIATION		E Telephone number (410) 263-6600
	Doing Business As		G Gross receipts \$ 19,372,468
	Number and street (or P O box if mail is not delivered to street address) 140 MAIN STREET	Room/suite	
	City or town, state or country, and ZIP + 4 ANNAPOLIS, MD 214012020		
F Name and address of principal officer DAVID E HELFMAN 140 MAIN STREET ANNAPOLIS, MD 214012020		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status ☐ 501(c)(3) ☒ 501(c) (5) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527			
J Website: ▶ WWW.MARYLANDEDUCATORS.ORG			
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 1947	M State of legal domicile MD

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO UNIFY AND STRENGTHEN THE EDUCATION PROFESSION THROUGHOUT THE STATE OF MARYLAND, TO PRESENT A CLEAR INTERPRETATION OF THE SCHOOLS TO THE PUBLIC, TO WORK CONSISTENTLY FOR THE WELFARE OF THE TEACHERS AND PUPILS OF MARYLAND			
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3 Number of voting members of the governing body (Part VI, line 1a)	3	14	
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	11	
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	103	
	6 Total number of volunteers (estimate if necessary)	6	250	
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	41,071	
b Net unrelated business taxable income from Form 990-T, line 34	7b	30,798		
Revenue	8 Contributions and grants (Part VIII, line 1h)		Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)		57,000	0
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)		18,917,924	18,853,598
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		63,462	82,775
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)		449,146	393,467
			19,487,532	19,329,840
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		918,841	919,192
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		13,786,338	14,032,194
	16a Professional fundraising fees (Part IX, column (A), line 11e)		0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ☐ 0			
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)		4,847,673	3,966,050
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		19,552,852	18,917,436
	19 Revenue less expenses Subtract line 18 from line 12		-65,320	412,404
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)		14,768,175	15,535,176
	21 Total liabilities (Part X, line 26)		9,101,429	12,789,197
	22 Net assets or fund balances Subtract line 21 from line 20		5,666,746	2,745,979

Part II	Signature Block
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	***** Signature of officer			2013-07-08 Date	
	ELIZABETH WELLER, PRESIDENT Type or print name and title				
Paid Preparer's Use Only	Preparer's signature	WILLIAM E TURCO, CPA	Date	Check if self-employed ☐	Preparer's taxpayer identification number (see instructions) P00369217
	Firm's name (or yours if self-employed), address, and ZIP + 4	MCGLADREY LLP 9737 WASHINGTONIAN BLVD 400 GAITHERSBURG, MD 208787340			EIN 42-0714325
					Phone no (301) 296-3600

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

Part III

Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III ☐ ☒

1

Briefly describe the organization's mission

THE MARYLAND STATE TEACHERS ASSOCIATION DEDICATES ITSELF TO ACHIEVING HIGH QUALITY UNIVERSAL FREE PUBLIC EDUCATION BUILT ON QUALITY TEACHING, HIGH STUDENT EXPECTATIONS AND A GENUINE OPPORTUNITY TO LEARN FOR EACH STUDENT, BUILDING A UNIFIED (SEE SCHEDULE O) EDUCATION PROFESSION WITH A POWERFUL VOICE FOR THE RIGHTS, PROFESSIONAL INTERESTS AND WORKING CONDITIONS OF EDUCATIONAL EMPLOYEES, AND WORKING TO ENHANCE THE RIGHTS OF LABOR AND HUMAN AND CIVIL RIGHTS FOR ALL

2

Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a

(Code) (Expenses \$ including grants of \$) (Revenue \$)

SCHOOL QUALITY THE ASSOCIATION SHALL PROMOTE SCHOOL QUALITY BY WORKING TO ENHANCE QUALITY TEACHING, QUALITY EDUCATION SUPPORT PERSONNEL, PROFESSIONAL DEVELOPMENT AND TRAINING, AND STUDENT ACHIEVEMENT

4b

(Code) (Expenses \$ including grants of \$) (Revenue \$)

MEMBER WELL BEING THE ASSOCIATION SHALL PROMOTE MEMBER WELL BEING BY STRENGTHENING ITS ABILITY AND CAPACITY TO ATTRACT DIVERSE MEMBERSHIP AND EFFECTIVELY REPRESENT AND SERVE ALL MEMBERS. THE ASSOCIATION SHALL PROMOTE, STRENGTHEN, AND ENHANCE THE CAPACITY OF ITS AFFILIATES AND MEMBERS TO IMPROVE THEIR ECONOMIC AND JOB SECURITY, TERMS AND CONDITIONS OF EMPLOYMENT, AND THE RIGHT TO COLLECTIVE BARGAINING AND OTHER COLLABORATIVE PROCESSES. THE ASSOCIATION SHALL PROMOTE HUMAN AND CIVIL RIGHTS FOR ALL AND THE ELIMINATION OF DISCRIMINATION AND OTHER BARRIERS TO EQUITY AS RESULT OF SOCIAL, ECONOMIC, AND POLITICAL CONDITIONS

4c

(Code) (Expenses \$ including grants of \$) (Revenue \$)

PUBLIC AGENDA THE ASSOCIATION SHALL PROMOTE A PUBLIC AGENDA FOCUSED ON ADVANCING HIGH QUALITY UNIVERSAL FREE PUBLIC EDUCATION. THIS INCLUDES STRENGTHENING AND ENHANCING PUBLIC RELATIONS PROGRAMS, PUBLICATIONS, AND LEGISLATIVE AND POLITICAL RELATIONS. THE ASSOCIATION WILL WORK WITH PARTNERS AND COALITIONS TO ACHIEVE COMMON LEGISLATIVE, PROFESSIONAL, EDUCATION AND COMMUNITY GOALS

4d

Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e

Total program service expenses \$

Form 990 (2011)

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	No
2	Is the organization required to complete Schedule B, Schedule of Contributors(see instructions)?	2	No
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	
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 I 	6	No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes
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		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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	Yes
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	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>	22		No
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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		
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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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 "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	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 ☐			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a	25
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	0
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	103
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	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
4a	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	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	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	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	
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	
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	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	
10	Section 501(c)(7) organizations. Enter		
a	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.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. 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 allocated to each state.	13a	
b	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.	13b	
c	Enter the aggregate amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	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?		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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?	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?	Yes	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	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		No

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	Yes	
10b	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?	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		No
11b	Describe in Schedule O the process, if any, used by the organization to review the Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
12b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	MD
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	
19	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.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	DAVID E HELFMAN 140 MAIN STREET ANNAPOLIS, MD 214012020 (410) 263-6600

Part VII

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, 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 organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) CLARA FLOYD PRESIDENT	50 00	X		X				155,529	0	38,287
(2) BETTY WELLER VICE PRESIDENT	50 00	X		X				124,336	0	4,984
(3) BILL FISHER TREASURER	5 00	X		X				6,667	0	0
(4) GARY BRENNAN NEA DIRECTOR	4 00	X						0	0	0
(5) STEVEN BROOKS NEA DIRECTOR	4 00	X						0	0	0
(6) MAVIS ELLIS NEA DIRECTOR	4 00	X						0	0	0
(7) WANDA TWIGG NEA DIRECTOR	4 00	X						0	0	0
(8) CHERYL BOST MEMBER-AT-LARGE	4 00	X						0	0	0
(9) ANNA GANNON MEMBER-AT-LARGE	4 00	X						0	0	0
(10) TED PAYNE MEMBER-AT-LARGE	4 00	X						0	0	0
(11) DOUG PROUTY MEMBER-AT-LARGE	4 00	X						0	0	0
(12) PHYLLIS ROBINSON MEMBER-AT-LARGE	4 00	X						0	0	0
(13) JANE STERN MEMBER-AT-LARGE	4 00	X						0	0	0
(14) AMY WATKINS MEMBER-AT-LARGE	4 00	X						0	0	0
(15) DAVID HELFMAN EXECUTIVE DIRECTOR	50 00			X				200,331	0	75,709
(16) MARK DABKOWSKI ASSISTANT EXECUTIVE DIRECTOR	50 00			X				160,393	0	59,748
(17) SUSAN RUSSELL CHIEF COUNSEL	50 00			X				178,642	0	53,501

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 for related organizations in Schedule O)	(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-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DALE TEMPLETON ASSISTANT EXECUTIVE DIRECTOR	50 00				X			159,241	0	65,848
(19) KATHLEEN HIATT MANAGING DIRECTOR RESEARCH	50 00					X		154,486	0	47,704
(20) PATRICIA ALEXANDER MANAGING DIRECTOR, COLLECTIVE BAR	50 00					X		149,206	0	46,436
(21) JACQUELINE HARRIS MANAGING DIRECTOR ORGANIZING	50 00					X		148,777	0	46,334
(22) SEAN JOHNSON MANAGING DIR POL & LEG AFFAIRS	50 00					X		144,712	0	62,361
(23) HERMAN WHITTER MANAGING DIR, COLLECTIVE BARGAINING	50 00					X		145,703	0	64,579
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,728,023	0	565,491

2

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization▶49

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	Yes	

Section B. Independent Contractors

1

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

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 ▶0

Part VIII

Statement 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	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f \$ _____						
	h	Total. Add lines 1a-1f						
Program Service Revenue			Business Code					
	2a	DUES	900099	17,195,020	17,195,020			
	b	UNISERV/NEA	900099	1,599,193	1,599,193			
	c	CONVENTION INCOME	900099	59,385	59,385			
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		18,853,598				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		64,639			64,639	
	4	Income from investment of tax-exempt bond proceeds . .						
	5	Royalties						
	6a	(i) Real		(ii) Personal				
		Gross rents	6,686					
		b Less rental expenses	0					
		c Rental income or (loss)	6,686					
	d	Net rental income or (loss)		6,686			6,686	
	7a	(i) Securities		(ii) Other				
		Gross amount from sales of assets other than inventory		60,764				
		b Less cost or other basis and sales expenses		42,628				
		c Gain or (loss)		18,136				
	d	Net gain or (loss)		18,136			18,136	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from fundraising events . .						
	9a	Gross income from gaming activities See Part IV, line 19	a					
	b	Less direct expenses	b					
	c	Net income or (loss) from gaming activities . .						
	10a	Gross sales of inventory, less returns and allowances	a					
	b	Less cost of goods sold	b					
	c	Net income or (loss) from sales of inventory . .						
Miscellaneous Revenue		Business Code						
11a	DUSHANE INCOME	900099	283,588			283,588		
b	OTHER INCOME	900099	62,122			62,122		
c	AFFINITY CARDS	900004	22,589		22,589			
d	All other revenue		18,482		18,482			
e	Total. Add lines 11a-11d		386,781					
12	Total revenue. See Instructions		19,329,840	18,853,598	41,071	435,171		

Part IX Statement of Functional Expenses

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

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

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

Do not include amounts reported on lines 6b, 7b, 8b, 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	919,192			
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	1,263,804			
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	7,690,123			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	136,208			
9	Other employee benefits	4,278,401			
10	Payroll taxes	663,658			
11	Fees for services (non-employees)				
a	Management				
b	Legal	172,922			
c	Accounting	53,600			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees	9,541			
g	Other	283,330			
12	Advertising and promotion	336,934			
13	Office expenses	592,205			
14	Information technology	276,309			
15	Royalties				
16	Occupancy	180,162			
17	Travel	571,514			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	654,972			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	270,007			
23	Insurance	29,752			
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)				
a	INCOME TAXES	19,299			
b	PUBLIC AFFAIRS	335,463			
c	OTHER EXPENSES	80,754			
d	AFFILLIATES	39,561			
e					
f	All other expenses	59,725			
25	Total functional expenses. Add lines 1 through 24f	18,917,436			
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				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				1	
	2	Savings and temporary cash investments			7,614,139	2	7,101,089
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			497,873	4	813,008
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			589,738	7	499,267
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			788,428	9	1,659,103
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	6,952,776			
	b	Less: accumulated depreciation	10b	4,308,137	2,810,015	10c	2,644,639
	11	Investments—publicly traded securities			1,998,793	11	1,499,586
	12	Investments—other securities. See Part IV, line 11				12	770,451
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			469,189	15	548,033
16	Total assets. Add lines 1 through 15 (must equal line 34)			14,768,175	16	15,535,176	
Liabilities	17	Accounts payable and accrued expenses			826,623	17	914,590
	18	Grants payable				18	
	19	Deferred revenue			59,122	19	30,345
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			8,215,684	25	11,844,262
	26	Total liabilities. Add lines 17 through 25			9,101,429	26	12,789,197
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			5,666,746	27	2,745,979
	28	Temporarily restricted net assets				28	
	29	Permanently restricted net assets				29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			5,666,746	33	2,745,979
34	Total liabilities and net assets/fund balances			14,768,175	34	15,535,176	

Part XI Reconciliation of Net Assets

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	19,329,840
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,917,436
3	Revenue less expenses Subtract line 2 from line 1	3	412,404
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,666,746
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-3,333,171
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,745,979

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis		
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?		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
MARYLAND STATE EDUCATION ASSOCIATION

Employer identification number
52-0607919

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit	
	☐ Yes ☐ No	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes

☐ No

6

Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes

☐ No

9

In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a

If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i)

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

(ii)

Assets included in Form 990, Part X

▶ \$ _____

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization’s accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a** ☐ Public exhibition
- d** ☐ Loan or exchange programs
- b** ☐ Scholarly research
- e** ☐ Other
- c** ☐ Preservation for future generations

4 Provide a description of the organization’s collections and explain how they further the organization’s exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization’s collection? ☐ **Yes** ☐ **No**

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ **Yes** ☐ **No**

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a Beginning of year balance	2,002,660	1,856,523	1,738,488	1,825,325	
b Contributions					
c Investment earnings or losses	164,543	152,515	126,308	-80,653	
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses	9,541	6,378	8,273	6,184	
g End of year balance	2,157,662	2,002,660	1,856,523	1,738,488	

2 Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶ 100 000 %
- b** Permanent endowment ▶
- c** Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
(i) unrelated organizations	3a(i)	No
(ii) related organizations	3a(ii)	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b	

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		516,300		516,300
b Buildings		3,889,843	1,920,273	1,969,570
c Leasehold improvements				
d Equipment		351,764	289,332	62,432
e Other		2,194,869	2,098,532	96,337
Total. Add lines 1a-1e <i>(Column (d) should equal Form 990, Part X, column (B), line 10(c).)</i> ▶				2,644,639

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,329,840
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	18,917,436
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	412,404
4	Net unrealized gains (losses) on investments	4	216,562
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,549,733
9	Total adjustments (net) Add lines 4 - 8	9	-3,333,171
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,920,767

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	19,546,402
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	216,562
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	216,562
3	Subtract line 2e from line 1	3	19,329,840
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	19,329,840

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	18,917,436
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	18,917,436
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	18,917,436

Part XIVSupplemental 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 X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THIS FUND WAS ESTABLISHED IN 1974 FOR THE PURPOSE OF PROVIDING FINANCIAL ASSISTANCE THROUGH LOANS AND/OR GRANTS TO THE ASSOCIATION, LOCAL AFFILIATES, AND MEMBERS, AS PROVIDED FOR UNDER THE "TRUST GUIDELINES," AS ADOPTED BY THE MSEA REPRESENTATIVE ASSEMBLY IN 1974 AND AMENDED IN 2004 IN 1984, THE TRUSTEES LIFTED THE LIMIT OF \$350,000 AND SET A GOAL OF AT LEAST \$1,000,000 FOR THE CRISIS TRUST ACTIVITIES' NET ASSETS THE TRUST IS TO BE INCREASED EACH YEAR BY ITS INVESTMENT INCOME, LESS OPERATING EXPENSES
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE ASSOCIATION IS GENERALLY EXEMPT FROM FEDERAL INCOME TAXES UNDER THE PROVISIONS OF SECTION 501 (C)(5) OF THE INTERNAL REVENUE CODE (THE CODE) UNDER CURRENT INTERNAL REVENUE SERVICE (IRS) REGULATIONS, MEMBERSHIP BENEFIT REVENUE EARNED FROM OTHER INSURANCES AND PERSONAL AND FINANCIAL SERVICES ARE SUBJECT TO UNRELATED BUSINESS INCOME TAX FOR THE YEARS ENDED AUGUST 31, 2012 AND 2011, THE ASSOCIATION HAD \$19,299 AND \$56 OF TAX EXPENSE, RESPECTIVELY, ON UNRELATED BUSINESS INCOME, WHICH IS INCLUDED IN STRATEGIC OBJECTIVE #2 IN THE ACCOMPANYING STATEMENTS OF ACTIVITIES THE ASSOCIATION ADOPTED THE ACCOUNTING STANDARD ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH ADDRESSES THE DETERMINATION OF WHETHER TAX BENEFITS CLAIMED OR EXPECTED TO BE CLAIMED ON A TAX RETURN SHOULD BE RECORDED IN THE FINANCIAL STATEMENTS UNDER THIS GUIDANCE, THE ASSOCIATION MAY RECOGNIZE THE TAX BENEFIT FROM AN UNCERTAIN TAX POSITION ONLY IF IT IS MORE-LIKELY-THAN-NOT THAT THE TAX POSITION WILL BE SUSTAINED ON EXAMINATION BY TAXING AUTHORITIES BASED ON THE TECHNICAL MERITS OF THE POSITION THE TAX BENEFITS RECOGNIZED IN THE FINANCIAL STATEMENTS FROM SUCH A POSITION ARE MEASURED BASED ON THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT THE GUIDANCE ON ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES ALSO ADDRESSES DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES ON INCOME TAXES, AND ACCOUNTING IN INTERIM PERIODS THE ASSOCIATION HAD NO SUCH POSITIONS RECORDED IN THE FINANCIAL STATEMENTS AT AUGUST 31, 2012 AND 2011 GENERALLY, THE ASSOCIATION IS NO LONGER SUBJECT TO U S FEDERAL INCOME TAX EXAMINATIONS BY TAX AUTHORITIES FOR YEARS BEFORE 2009
PART XI, LINE 8 - OTHER ADJUSTMENTS		ASC 715-PENSION ADJUSTMENTS -3,549,733

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
MARYLAND STATE EDUCATION ASSOCIATION

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

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

OMB No 1545-0047

2011

Open to Public
Inspection

Employer identification number
52-0607919

Part I

General Information on Grants and Assistance

- 1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶

3

Enter total number of other organizations listed in the line 1 table ▶

33

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)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE APPLICATION REQUIRES THE GRANT RECIPIENT TO STATE THE PURPOSE OF THE GRANT, WHO THE GRANT ALIGNS WITH THE AFFILIATE'S PLAN AND MSTA'S STRATEGIC OBJECTIVES, AND TO EXPLAIN HOW THEY WILL ASSESS AND EVALUATE THE SUCCESS OF THE PROGRAM OR ACTIVITY FOR WHICH THE GRANT IS USED THE GRANT RECIPIENT ALSO HAS TO IDENTIFY THE CRITERIA AND PARAMETERS THAT WILL BE USED IN THE ASSESSMENT THE RECIPIENT IS REQUIRED TO SUBMIT A COPY OF ITS EVALUATION AND ASSESSMENT WITHIN 60 DAYS OF COMPLETING THE PROGRAM OR ACTIVITY

Software ID:
Software Version:
EIN: 52-0607919
Name: MARYLAND STATE EDUCATION ASSOCIATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLEGANY COUNTY TEACHERS ASSOCIATIONPO BOX 5179 CRESAPTOWN, MD 215055179	23-7442507	501(C)(5)	10,647	394	BOOK VALUE	LAPTOP CASE AND QUICKBOOKS SOFTWARE	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND SPECIAL REQUESTS
ALLEGANY COUNTY EDUCATIONAL SERVICES COUNCIL13201 NEW SCHOOL ROAD NW MOUNT SAVAGE, MD 21545		501(C)(5)	10,647				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND SPECIAL REQUESTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TEACHERS ASSOCIATION OF ANNE ARUNDEL COUNTY2521 RIVA ROAD SUITE L7 ANNAPOLIS, MD 21401	52-0733568	501(C)(5)	58,508				CAPACITY BUILDING, MEMBERSHIP, TRAINING, AND FIELD SERVICE
TEACHERS ASSOCIATION OF BALTIMORE COUNTY305 EAST JOPPA ROAD TOWSON, MD 212863252	52-0623933	501(C)(5)	101,246				CAPACITY BUILDING, MEMBERSHIP, TRAINING, SPECIAL REQUESTS AND FIELD SERVICE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION SUPPORT PROFESSIONALS OF BALTIMORE COUNTY1940G GREENSPRING DRIVE TIMONIUM,MD 21093		501(C)(5)	6,249	1,612	BOOK VALUE	LAPTOP CASE AND QUICKBOOKS SOFTWARE	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS
CALVERT EDUCATION ASSOCIATION865 MAIN STREET PRINCE FREDERICK, MD 20678	52-1055500	501(C)(5)	15,270				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS, AND RELEASES

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALVERT ASSOCIATION OF EDUCATIONAL SUPPORT STAFF865 MAIN STREET PRINCE FREDERICK, MD 20678	52-2058647	501(C)(5)	10,139				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND SPECIAL REQUESTS
CAROLINE COUNTY EDUCATORS ASSOCIATION255 MAIN STREET PRESTON, MD 216552215	27-1270094	501(C)(5)	5,293	1,337	BOOK VALUE	COPIER USAGE CHARGES	MEMBERSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARROLL COUNTY EDUCATION ASSOCIATION532 BALTIMORE BOULEVARD SUITE 307 WESTMINSTER, MD 21157	51-0159565	501(C)(5)	21,640				MEMBERSHIP
CECIL COUNTY CLASROOM TEACHERS ASSOCIATION222 SOUTH BRIDGE STREET SUITE 6 ELKTON, MD 21921	52-0941366	501(C)(5)	11,964				CAPACITY BUILDING, MEMBERSHIP, ADVOCACY, AND SPECIAL REQUESTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CECIL EDUCATION SUPPORT PERSONNEL ASSOCIATION222 SOUTH BRIDGE STREET SUITE 2 ELKTON, MD 21921		501(C)(5)	10,000				CAPACITY BUILDING, MEMBERSHIP, DEVELOPMENT, AND SPECIAL REQUESTS
EDUCATION ASSOCIATION OF CHARLES COUNTY PO BOX 877 LA PLATA, MD 20646	52-1048940	501(C)(5)	32,215				CAPACITY BUILDING, MEMBERSHIP, SPECIAL REQUESTS, AND FIELD SERVICE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DORCHESTER EDUCATORS5A CEDAR STREET CAMBRIDGE, MD 21613	52-1050192	501(C)(5)	16,105	1,850	BOOK VALUE	COPIER USAGE CHARGES AND COMPUTER	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS AND FIELD SERVICE
FREDERICK COUNTY TEACHERS ASSOCIATION1 WORMANS MILL COURT SUITE 16 FREDERICK, MD 21701	52-1014274	501(C)(5)	22,826				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND SPECIAL REQUESTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FREDERICK ASSOCIATION OF SCHOOL SUPPORT EMPLOYEES1 WORMANS MILL COURT SUITE 15 FREDERICK, MD 21701	52-1594576	501(C)(5)	11,252				CAPACITY BUILDING, MEMBERSHIP, ADVOCACY, SPECIAL REQUESTS, AND RELEASES
GARRETT COUNTY EDUCATION ASSOCIATIONP O BOX 2236 OAKLAND, MD 21550	52-2021204	501(C)(5)	19,710				CAPACITY BUILDING, MEMBERSHIP, TRAINING, AND ADVOCACY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARFORD COUNTY EDUCATION ASSOCIATION42 NORTH MAIN ST SUITE 200 BEL AIR, MD 21014	52-0939793	501(C)(5)	20,964	3,654	BOOK VALUE	COMPUTER AND CONSULTANT FEES	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND FIELD SERVICE
HARFORD COUNTY EDUCATIONAL SERVICES211 PYLESVILLE ROAD PYLESVILLE, MD 21132		501(C)(5)	5,060				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND SPECIAL REQUESTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOWARD COUNTY EDUCATION ASSOCIATION5082 DORSEY HALL DRIVE STE 102 ELLICOTT CITY, MD 21042	52-0855686	501(C)(5)	45,218				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS AND FIELD SERVICE
KENT COUNTY TEACHERS ASSOCIATION 25301 LAMBS MEADOW ROAD WORTON, MD 21678	52-1020950	501(C)(5)	5,309	439	BOOK VALUE	COPIER USAGE CHARGES	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS AND FIELD SERVICE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KENT COUNTY EDUCATION SUPPORT PROFESSIONAL ASSOCIATION 21601 HIDDEN CREED DRIVE ROCK HALL, MD 216610281	26-1491792	501(C)(5)	5,897	234	BOOK VALUE	COPIER USAGE CHARGES	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS AND FIELD SERVICE
MONTGOMERY COUNTY EDUCATION ASSOCIATION12 TAFT COURT ROCKVILLE, MD 208505321	52-0659775	501(C)(5)	205,143				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, SPECIAL REQUESTS AND FIELD SERVICE

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PRINCE GEORGE'S COUNTY EDUCATORS' ASSOCIATION8008 MARLBORO PIKE FORESTVILLE, MD 20747	52-0658540	501(C)(5)	97,733				CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND FIELD SERVICE
QUEEN ANNE'S COUNTY EDUCATION ASSOCIATION900 LOVE POINT ROAD STEVENSVILLE, MD 216662120	52-1050091	501(C)(5)	8,781	4,633	BOOK VALUE	COPIER USAGE CHARGES, QUICKBOOKS, COMPUTER	CAPACITY BUILDING AND MEMBERSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATION ASSOCIATION OF ST MARY'S COUNTY 44219 AIRPORT ROAD CALIFORNIA, MD 20619	52-1052839	501(C)(5)	13,321	1,671	BOOK VALUE	PRINTER	CAPACITY BUILDING, MEMBERSHIP, TRAINING, ADVOCACY, AND SPECIAL REQUESTS
COLLECTIVE EMPLOYEES ASSOCIATION OF ST MARY'S COUNTY 44219 AIRPORT ROAD ROOM 138 CALIFORNIA, MD 20619	52-1600939	501(C)(5)	9,000	1,755	BOOK VALUE	COMPUTER	CAPACITY BUILDING, MEMBERSHIP, ADVOCACY, AND SPECIAL REQUESTS

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOMERSET EDUCATION ASSOCIATION 27323 CRISFIELD MARION ROAD WESTOVER, MD 21871	51-0176849	501(C)(5)	9,900				MEMBERSHIP
TALBOT COUNTY EDUCATION ASSOCIATION8221 TEAL DRIVE SUITE 420 EASTON,MD 21601	52-1050121	501(C)(5)	15,501				CAPACITY BUILDING AND MEMBERSHIP

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WASHINGTON COUNTY TEACHERS ASSOCIATION42 SOUTH MULBERRY STREET HAGERSTOWN, MD 21740	52-6059401	501(C)(5)	13,488				CAPACITY BUILDING, MEMBERSHIP, ADVOCACY, AND SPECIAL REQUESTS
WASHINGTON COUNTY EDUCATIONAL SUPPORT PERSONNEL42 SOUTH MULBERRY STREET HAGERSTOWN, MD 21740	51-0562118	501(C)(5)	9,500				CAPACITY BUILDING, MEMBERSHIP, AND ADVOCACY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WICOMICO COUNTY EDUCATION ASSOCIATION1302 OLD OCEAN CITY ROAD SALISBURY, MD 21804	52-1050640	501(C)(5)	36,566				CAPACITY BUILDING, ADVOCACY, AND SPECIAL REQUESTS
WORCESTER COUNTY TEACHERS ASSOCIATION1817 OLD VIRGINIA ROAD POCOMOKE CITY, MD 21851	52-1050642	501(C)(5)	17,492				CAPACITY BUILDING, MEMBERSHIPS, ADVOCACY, AND SPECIAL REQUESTS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WORCESTER COUNTY EDUCATION SUPPORT PERSONNEL ASSOCIATION308 SOUTH CHURCH STREET SNOW HILL, MD 21863		501(C)(5)	12,161				CAPACITY BUILDING, MEMBERSHIPS, ADVOCACY, AND SPECIAL REQUESTS

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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.

Name of the organization

MARYLAND STATE EDUCATION ASSOCIATION

Employer identification number

52-0607919

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	☐ First-class or charter travel ☒ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	☒ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	
b	Any related organization?	5b	
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	
b	Any related organization?	6b	
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use 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 W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) CLARA FLOYD	(i)	138,081	0	17,448	20,302	17,985	193,816	0
	(ii)	0	0	0	0	0	0	0
(2) DAVID HELFMAN	(i)	200,331	0	0	48,079	27,630	276,040	0
	(ii)	0	0	0	0	0	0	0
(3) MARK DABKOWSKI	(i)	138,393	0	22,000	38,494	21,254	220,141	0
	(ii)	0	0	0	0	0	0	0
(4) SUSAN RUSSELL	(i)	160,642	0	18,000	42,874	10,627	232,143	0
	(ii)	0	0	0	0	0	0	0
(5) DALE TEMPLETON	(i)	159,241	0	0	38,218	27,630	225,089	0
	(ii)	0	0	0	0	0	0	0
(6) KATHLEEN HIATT	(i)	154,486	0	0	37,077	10,627	202,190	0
	(ii)	0	0	0	0	0	0	0
(7) PATRICIA ALEXANDER	(i)	149,206	0	0	35,809	10,627	195,642	0
	(ii)	0	0	0	0	0	0	0
(8) JACQUELINE HARRIS	(i)	148,777	0	0	35,707	10,627	195,111	0
	(ii)	0	0	0	0	0	0	0
(9) SEAN JOHNSON	(i)	144,712	0	0	34,731	27,630	207,073	0
	(ii)	0	0	0	0	0	0	0
(10) HERMAN WHITTER	(i)	144,343	0	1,360	36,579	27,630	209,912	0
	(ii)	0	0	0	0	0	0	0

Part III

Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	CLARA FLOYD RECEIVED TAXABLE HOUSING ALLOWANCE IN THE AMOUNT OF \$17,448
SUPPLEMENTAL INFORMATION	PART III	FORM 990, PAGE 8, PART VII, LINE 5 - CLARA FLOYD - PRESIDENT (\$103,634) AND BETTY WELLER - VICE PRESIDENT (\$76,414), ARE PAID BY MONTGOMERY COUNTY SCHOOL SYSTEM AND KENT COUNTY SCHOOL SYSTEM, RESPECTIVELY, THE SCHOOL SYSTEMS WHERE THEY ARE BOTH EMPLOYED AS TEACHERS. THE FILING ORGANIZATION IS BILLED BY THE MOUNTGOMERY COUNTY AND KENT COUNTY SCHOOL SYSTEMS FOR THE TIME SPENT ON ORGANIZATION BUSINESS.

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 MARYLAND STATE EDUCATION ASSOCIATION	Employer identification number 52-0607919
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Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	OUR MEMBERS ARE TEACHERS, EDUCATION SUPPORT PROFESSIONALS, ADMINISTRATORS, CERTIFICATED SPECIALISTS, HIGHER EDUCATION FACULTY , AND STUDENT AND RETIRED MEMBERS WHOSE MISSION IS TO CREATE GREAT PUBLIC SCHOOLS FOR EVERY CHILD IN MARYLAND

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	MSEA OFFICERS AND THE BOARD OF DIRECTORS ARE ELECTED BY THE MEMBERSHIP THE PRESIDENT, VICE PRESENT AND TREASURER ARE ELECTED FOR THREE-YEAR TERMS THE OFFICERS ARE LIMITED TO NO MORE THAN TWO TERMS IN THE OFFICE TO WHICH THEY WERE ELECTED THERE ARE EIGHT MEMBER- AT-LARGE DIRECTORS FOUR ARE ELECTED EACH YEAR FOR THREE-YEAR TERMS AFTER TWO FULL TERMS, BOARD MEMBERS SHALL NOT BE ELIGIBLE AGAIN UNTIL A PERIOD EQUIVALENT TO ONE TERM HAS PASSED THE BOARD ALSO INCLUDES FOUR STATE DIRECTORS OF THE NATIONAL EDUCATION ASSOCIATION (NEA) THEIR TERMS SHALL BE IN COMPLIANCE WITH GUIDANCE ESTABLISHED BY THE NEA

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	THE MSTA REPRESENTATIVE ASSEMBLY , WHICH INCLUDES MEMBERS FROM EVERY LOCAL AFFILIATE IN PROPORTION TO MEMBERSHIP, IS MSTA'S PRIMARY POLICY-MAKING BODY THE REPRESENTATIVE ASSEMBLY MEETS ANNUALLY TO APPROVE MSTA'S LEGISLATIVE PROGRAM AND ESTABLISH MSTA POLICY THROUGH RESOLUTIONS THE BODY ALSO HAS THE POWER TO AMEND MSTA BYLAWS

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 11	THE FORM 990 IS PREPARED BY THE INDEPENDENT ACCOUNTING FIRM (TAX ACCOUNTANTS) ENGAGED BY THE ASSOCIATION. THE PREPARATION IS BASED ON INFORMATION PROVIDED BY THE ASSOCIATION'S FINANCIAL STAFF. THE INFORMATION IS OBTAINED FROM THE ASSOCIATION'S DOCUMENTS, RECORDS AND AUDITED FINANCIAL STATEMENTS. THE COMPLETED FORM 990 IS REVIEWED BY BOTH THE MSTA STAFF ACCOUNTANT AND ASSISTANT EXECUTIVE DIRECTOR PRIOR TO FILING.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EMPLOYEES A THE MSEA ASSISTANT EXECUTIVE DIRECTOR FOR BUSINESS AND POLICY OPERATIONS SHALL L SERVE AS THE CONFLICT OF INTEREST OFFICER (CI OFFICER), AND SHALL IN THAT CAPACITY BE RE SPONSIBLE FOR THE IMPLEMENTATION OF THE CI POLICY THE CI OFFICER SHALL MONITOR THE IMPLEM ENTATION OF THE CI POLICY , AND RECOMMEND TO THE MSEA EXECUTIVE DIRECTOR CODIFICATIONS IN T HE POLICY THE MSEA BOARD OF DIRECTORS SHALL MAKE SUCH MODIFICATIONS IN THE POLICY AS IT MAY FROM TIME TO TIME DEEM APPROPRIATE B (1) IF AN MSEA EMPLOYEE BELIEVES THAT HE/SHE MAY BE ENGAGED OR ABOUT TO BECOME ENGAGED IN AN ACTIVITY THAT IS PROHIBITED BY THE CI POLICY , HE/SHE SHALL CONSULT WITH THE CI OFFICER THE MSEA EMPLOYEE AND THE CI OFFICER SHALL ATTE MPT TO DEAL WITH THE MATTER INFORMALLY IF THEY ARE UNABLE TO DO SO, THE CI OFFICER SHALL SUBMIT TO THE MSEA EMPLOYEE A WRITTEN OPINION INDICATING WHETHER THE ACTIVITY IN QUESTION IS PROHIBITED BY THE CI POLICY AND, IF SO, WHAT SHOULD BE DONE TO CORRECT THE SITUATION (2) IF THE MSEA EMPLOYEE DISAGREES, IN WHOLE OR IN PART, WITH THE CONCLUSIONS OF THE CI OFF ICER, HE OR SHE MAY APPEAL TO THE MSEA EXECUTIVE DIRECTOR BY FILING A WRITTEN NOTICE OF AP PEAL WITH THE EXECUTIVE DIRECTOR WITHIN THIRTY (30) CALENDAR DAYS AFTER RECEIVING THE OPIN ION OF THE CI OFFICER THE EXECUTIVE DIRECTOR SHALL DECIDE THE APPEAL AS EXPEDITIOUSLY AS POSSIBLE, AND THE DECISION OF THE EXECUTIVE DIRECTOR SHALL BE FINAL AND BINDING, SUBJECT T O WHATEVER CONTRACTUAL RIGHTS THE MSEA EMPLOYEE MAY HAVE TO CHALLENGE THE MSEA EXECUTIVE D IRECTOR'S DECISION, INCLUDING, WITHOUT LIMITATION, HIS/HER RIGHT TO CHALLENGE SAID DECISIO N THROUGH THE GRIEVANCE PROCEDURE IN A COLLECTIVE BARGAINING AGREEMENT WITH MSEA IF THE M SEA EMPLOYEE DOES NOT FILE A TIMELY APPEAL, HE/SHE SHALL COMPLY WITH THE OPINION OF THE CI OFFICER IF THE MSEA EMPLOYEE IS A MEMBER OF A BARGAINING UNIT, HE/SHE MAY , AT HIS/HER OP TION, HAVE A UNION REPRESENTATIVE PARTICIPATE IN THE CONSULTATION AND APPEAL C (1) IF AN MSEA MEMBER OR EMPLOYEE BELIEVES THAT AN MSEA EMPLOYEE IS ENGAGED OR IS ABOUT TO BECOME E NGAGED IN AN ACTIVITY THAT IS PROHIBITED BY THE CI POLICY , THE MEMBER OR EMPLOYEE MAY FILE A WRITTEN COMPLAINT WITH THE CI OFFICER THE COMPLAINANT SHALL IDENTIFY HIM/HERSELF TO TH E CI OFFICER, BUT THE CI OFFICER SHALL, IF REQUESTED TO DO SO BY THE COMPLAINANT, TREAT TH E COMPLAINT AS CONFIDENTIAL AND NOT REVEAL THE COMPLAINANT'S NAME (2) UPON RECEIVING A CO MPLAINT, THE CI OFFICER SHALL CONSULT WITH THE COMPLAINANT AND THE MSEA EMPLOYEE IN QUESTI ON BASED ON THE INFORMATION RECEIVED FROM THE COMPLAINANT AND THE MSEA EMPLOYEE, AND/OR O THER RELEVANT INFORMATION, THE CI OFFICER SHALL DECIDE WHETHER THE MSEA EMPLOYEE IS ENGAGE D OR IS ABOUT TO BECOME ENGAGED IN AN ACTIVITY THAT IS PROHIBITED BY THE CI POLICY , AND, I F SO, WHAT SHOULD BE DONE TO CORRECT THE SITUATION THE CI OFFICER SHALL SUBMIT TO THE MSE A EMPLOYEE AND THE COMPLAINANT A WRITTEN OPINION SETTING FORTH HIS/HER CONCLUSIONS (3) IF THE MSEA EMPLOYEE DISAGREES, IN WHOLE OR IN PART, WITH THE CONCLUSIONS OF THE CI OFFICER, HE/SHE MAY APPEAL TO THE MSEA EXECUTIVE DIRECTOR BY FILING A WRITTEN NOTICE OF APPEAL WIT H HIM/HER WITHIN THIRTY (30) CALENDAR DAYS AFTER RECEIVING THE OPINION OF THE CI OFFICER THE MSEA EXECUTIVE DIRECTOR SHALL DECIDE THE APPEAL AS EXPEDITIOUSLY AS POSSIBLE, AND THE DECISION OF THE EXECUTIVE DIRECTOR SHALL BE FINAL AND BINDING, SUBJECT TO WHATEVER CONTRAC TUAL RIGHTS THE MSEA EMPLOYEE MAY HAVE TO CHALLENGE THE MSEA EXECUTIVE DIRECTOR'S DECISION , INCLUDING, WITHOUT LIMITATION, HIS/HER RIGHT TO CHALLENGE SAID DECISION THROUGH THE GRIE VANCE PROCEDURE IN A COLLECTIVE BARGAINING AGREEMENT WITH MSEA IF THE MSEA EMPLOYEE FILES A TIMELY APPEAL, HE/SHE NEED NOT COMPLY WITH THE OPINION OF THE CI OFFICER PENDING THE OU TCOME OF THE APPEAL IF THE MSEA EMPLOYEE DOES NOT FILE A TIMELY APPEAL, HE/SHE SHALL COMPLY WITH THE OPINION OF THE CI OFFICER IF THE MSEA EMPLOYEE IS A MEMBER OF A BARGAINING UN IT, HE/SHE MAY , AT HIS/HER OPTION, HAVE A UNION REPRESENTATIVE PARTICIPATE IN THE CONSULTA TION AND APPEAL D IN IMPLEMENTING THE CI POLICY , THE CI OFFICER AND THE MSEA EXECUTIVE D IRECTOR SHALL CONSIDER ALL RELEVANT FACTORS, INCLUDING THE SPECIFIC MSEA RESPONSIBILITIES OF THE MSEA EMPLOYEE AND THE NATURE OF THE ALLEGEDLY PROHIBITED ACTIVITY , AND SHALL INTERP RET AND APPLY THE CI POLICY IN A MANNER THAT FURTHERS ITS INTENDED PURPOSE OFFICERS A THE MSEA VICE PRESIDENT SHALL SERVE AS THE CONFLICT OF INTEREST OFFICER (CI OFFICER), AND SHA LL, IN THAT CAPACITY, BE RESPONSIBLE FOR THE IMPLEMENTATION OF THE CI POLICY THE CI OFFIC ER SHALL MONITOR THE IMPLEMENTATION OF THE CI POLICY , AND RECOMMEND TO THE MSEA BOARD OF D IRECTORS MODIFICATIONS IN THE POLICY THE MSEA BOARD OF DIRECTORS SHALL MAKE SUCH MODIFICA TIONS IN THE POLICY AS IT MAY FROM TIME TO TIME DEEM APPROPRIATE B (1) IF AN MSEA OFFICI AL BELIEVES THAT HE/SHE MAY BE ENGAGED OR ABOUT TO BECOME ENGAGED IN AN ACTIVITY THAT IS P ROHIBITED BY THE CI POLICY , HE/SHE SHALL CONSULT W

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	WITH THE CI OFFICER. THE MSEA OFFICIAL AND THE CI OFFICER SHALL ATTEMPT TO DEAL WITH THE MATTER INFORMALLY. IF THEY ARE UNABLE TO DO SO, THE CI OFFICER SHALL SUBMIT TO THE MSEA OFFICIAL A WRITTEN OPINION INDICATING WHETHER THE ACTIVITY IN QUESTION IS PROHIBITED BY THE CI POLICY AND, IF SO, WHAT SHOULD BE DONE TO CORRECT THE SITUATION. (2) IF THE MSEA OFFICIAL DISAGREES, IN WHOLE OR IN PART, WITH THE CONCLUSIONS OF THE CI OFFICER, HE OR SHE MAY APPEAL TO THE MSEA BOARD OF DIRECTORS BY FILING A WRITTEN NOTICE OF APPEAL WITH THE MSEA PRESIDENT WITHIN THIRTY (30) CALENDAR DAYS AFTER RECEIVING THE OPINION OF THE CI OFFICER. THE MSEA BOARD OF DIRECTORS SHALL DECIDE THE APPEAL AS EXPEDITIOUSLY AS POSSIBLE, AND THE DECISION OF THE MSEA BOARD OF DIRECTORS SHALL BE FINAL AND BINDING. IF THE MSEA OFFICIAL FILES A TIMELY APPEAL, HE OR SHE NEED NOT COMPLY WITH THE OPINION OF THE CI OFFICER PENDING THE OUTCOME OF THE APPEAL. IF THE MSEA OFFICIAL DOES NOT FILE A TIMELY APPEAL, HE/SHE SHALL COMPLY WITH THE OPINION OF THE CI OFFICER. C (1) IF AN MSEA MEMBER OR EMPLOYEE BELIEVES THAT AN MSEA OFFICIAL IS ENGAGED OR IS ABOUT TO BECOME ENGAGED IN AN ACTIVITY THAT IS PROHIBITED BY THE CI POLICY, THE MEMBER OR EMPLOYEE MAY FILE A WRITTEN COMPLAINT WITH THE CI OFFICER. THE COMPLAINANT SHALL IDENTIFY HIM/HERSELF TO THE CI OFFICER, BUT THE CI OFFICER SHALL, IF REQUESTED TO DO SO BY THE COMPLAINANT, TREAT THE COMPLAINT AS CONFIDENTIAL AND NOT REVEAL THE COMPLAINANT'S NAME. (2) UPON RECEIVING A COMPLAINT, THE CI OFFICER SHALL CONSULT WITH THE COMPLAINANT AND THE MSEA OFFICIAL IN QUESTION. BASED ON THE INFORMATION RECEIVED FROM THE COMPLAINANT AND THE MSEA OFFICIAL, AND/OR OTHER RELEVANT INFORMATION, THE CI OFFICER SHALL DECIDE WHETHER THE MSEA OFFICIAL IS ENGAGED OR IS ABOUT TO BECOME ENGAGED IN AN ACTIVITY THAT IS PROHIBITED BY THE CI POLICY, AND, IF SO, WHAT SHOULD BE DONE TO CORRECT THE SITUATION. THE CI OFFICER SHALL SUBMIT TO THE MSEA OFFICIAL AND THE COMPLAINANT A WRITTEN OPINION SETTING FORTH HIS/HER CONCLUSIONS. (3) IF THE MSEA OFFICIAL DISAGREES, IN WHOLE OR IN PART, WITH THE CONCLUSIONS OF THE CI OFFICER, HE/SHE MAY APPEAL TO THE MSEA BOARD OF DIRECTORS BY FILING A WRITTEN NOTICE OF APPEAL WITH THE MSEA PRESIDENT WITHIN THIRTY (30) CALENDAR DAYS AFTER RECEIVING THE OPINION OF THE CI OFFICER. THE MSEA BOARD OF DIRECTORS SHALL DECIDE THE APPEAL AS EXPEDITIOUSLY AS POSSIBLE, AND THE DECISION OF THE MSEA BOARD OF DIRECTORS SHALL BE FINAL AND BINDING. IF THE MSEA OFFICIAL FILES A TIMELY APPEAL, HE/SHE NEED NOT COMPLY WITH THE OPINION OF THE CI OFFICER PENDING THE OUTCOME OF THE APPEAL. IF THE MSEA OFFICIAL DOES NOT FILE A TIMELY APPEAL, HE OR SHE SHALL COMPLY WITH THE OPINION OF THE CI OFFICER. D. IN IMPLEMENTING THE CI POLICY, THE CI OFFICER AND THE MSEA BOARD OF DIRECTORS SHALL CONSIDER ALL RELEVANT FACTORS, INCLUDING THE SPECIFIC MSEA RESPONSIBILITIES OF THE MSEA OFFICIAL AND THE NATURE OF THE ALLEGEDLY PROHIBITED ACTIVITY, AND SHALL INTERPRET AND APPLY THE CI POLICY IN A MANNER THAT FURTHERS ITS INTENDED PURPOSE.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION IS REVIEWED EVERY THREE YEARS ACCORDING TO MSEA POLICY THE COMPENSATION IS FORMULA DRIVEN THE COMPENSATION COMMITTEE MEMBERS ARE BOD MEMBERS AND EVERY THREE YEARS THIS COMMITTEE REVIEWS THE FORMULA AND DOES COMPARISONS IN THE PROCESS, THE ASSOCIATION'S CONSIDERS THE FINANCIAL CONDITION, BUDGET AND STAFF CONTRACTS THE BOARD OF DIRECTORS THROUGH THE PRESIDENT CONSIDERS RECOMMENDATION FROM APPROPRIATE STAFF IN ADDITION, COMPENSATION IS COMPARED TO OFFICERS IN OTHER STATES COMPENSATION FORMULA AND AMOUNTS ARE REVIEWED AND APPROVED BY THE BOARD

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND FINANCIAL INFORMATION AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 216,562 ASC 715-PENSION ADJUSTMENTS -3,549,733 TOTAL TO FORM 990, PART XI, LINE 5 -3,333,171

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
MARYLAND STATE EDUCATION ASSOCIATION

Employer identification number
52-0607919

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) MSTAFUND FOR CHILDREN AND PUBLIC EDUCATION 140 MAIN STREET ANNAPOLIS, MD 21401 52-1369000	RECEIVE AND DISTRIBUTE FUNDS	MD	527		MARYLAND STATE EDUCATION ASSOCIATION		No

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1

During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a

Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Sale of assets to related organization(s)

g

Purchase of assets from related organization(s)

h

Exchange of assets with related organization(s)

i

Lease of facilities, equipment, or other assets to related organization(s)

j

Lease of facilities, equipment, or other assets from related organization(s)

k

Performance of services or membership or fundraising solicitations for related organization(s)

l

Performance of services or membership or fundraising solicitations by related organization(s)

m

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

n

Sharing of paid employees with related organization(s)

o

Reimbursement paid to related organization(s) for expenses

p

Reimbursement paid by related organization(s) for expenses

q

Other transfer of cash or property to related organization(s)

r

Other transfer of cash or property from related organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

No

No

No

No

No

No

No

No

No

No

No

No

Yes

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

Schedule R (Form 990) 2011

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII

Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation	
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