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Short Form Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)
Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).
All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.
The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2012 calendar year, or tax year beginning _____, 2012, and ending _____, 20

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **PASADENA MANAGEMENT ASSOCIATION**
 Number and street (or P O box, if mail is not delivered to street address): **P O BOX 2168**
 Room/suite: _____
 City or town, state or country, and ZIP + 4: **PASADENA CA 91102-2168**

D Employer identification number: **95-4692805-4092805**

E Telephone number: **626-744-4782**

F Group Exemption Number: _____

G Accounting Method: Cash Accrual Other (specify) _____

I Website: **pasadena-management.org**

J Tax-exempt status (check only one) - 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

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

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
 Check if the organization used Schedule O to respond to any question in this Part I

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	86,500
	4	Investment income	4	630
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6	Gaming and fundraising events		
	6a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	
	6b	Gross income from fundraising events (not including \$ _____ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
	6c	Less: direct expenses from gaming and fundraising events	6c	
	6d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a	Gross sales of inventory, less returns and allowances	7a	
	7b	Less: cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8	Other revenue (describe in Schedule O)	8	51,600
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	138,730
	10	Grants and similar amounts paid (list in Schedule O)	10	
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	160,900
14	Occupancy, rent, utilities, and maintenance	14		
15	Printing, publications, postage, and shipping	15	460	
16	Other expenses (describe in Schedule O)	16	21,770	
17	Total expenses. Add lines 10 through 16	17	183,130	
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(44,400)	
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	162,777	
20	Other changes in net assets or fund balances (explain in Schedule O)	20		
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	118,377	

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Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	162 777	22 118 377
23 Land and buildings		23
24 Other assets (describe in Schedule O)		24
25 Total assets	162 777	25 118 377
26 Total liabilities (describe in Schedule O)		26
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	162 777	27 118 377

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? _____

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses
(Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others.)

28	Labor organization representing management employees of the City of Pasadena, C.A. Approximately 385 members and 30 fee service papers (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29	_____ (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30	_____ (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31	Other program services (describe in Schedule O) (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32	Total program service expenses (add lines 28a through 31a)	32

Part IV List of Officers, Directors, Trustees, and Key Employees List each one even if not compensated (see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Richard Thompson PO Box 2168 Pasadena 91102	President As needed	0	-	-
Steven Wright PO Box 2168 Pasadena 91102	Vice President As Needed	0	-	-
Robert Garstka PO B 2168 Pas. 91102	Treasurer As Needed	0	-	-
Darya Baras PO B 2168 Pas 91102	Secretary same	0	-	-
Dale Covington same	Director same	0	-	-
Paul Lee same	Director same	0	-	-
Jane Raftis same	Director same	0	-	-
Phyllis Hollowell same	Director same	0	-	-

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

		Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		✓
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
35c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		
b	Did the organization file Form 1120-POL for this year?		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9 39a		
b	Gross receipts, included on line 9, for public use of club facilities 39b		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
40b			
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		✓
40e			
41	List the states with which a copy of this return is filed ▶		
42a	The organization's books are in care of ▶ <u>Robert Gorski</u> Telephone no. ▶ <u>626 744 4787</u> Located at ▶ <u>POB 2168 Pasadena CA</u> ZIP + 4 ▶ <u>91102</u>		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.	Yes	No
42b			✓
c	At any time during the calendar year, did the organization maintain an office outside the U.S.? If "Yes," enter the name of the foreign country: ▶		✓
42c			
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43		<input type="checkbox"/>
		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
44b			
c	Did the organization receive any payments for indoor tanning services during the year?		✓
44c			
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		✓
44d			
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
45b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		✓

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Table with Yes/No columns and a row for line 46.

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51

Check if the organization used Schedule O to respond to any question in this Part VI

47 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

Table with Yes/No columns and a row for line 47.

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

Table with Yes/No columns and a row for line 48.

49a Did the organization make any transfers to an exempt non-charitable related organization?

Table with Yes/No columns and a row for line 49a.

b If "Yes," was the related organization a section 527 organization?

Table with Yes/No columns and a row for line 49b.

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 5 columns: (a) Name and title of each employee paid more than \$100,000, (b) Average hours per week devoted to position, (c) Reportable compensation (Forms W-2/1099-MISC), (d) Health benefits, contributions to employee benefit plans, and deferred compensation, (e) Estimated amount of other compensation.

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

Table with 3 columns: (a) Name and address of each independent contractor paid more than \$100,000, (b) Type of service, (c) Compensation.

d Total number of other independent contractors each receiving over \$100,000

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A

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 (Robert Gorski), Date (5/13/13), Type or print name and title (Robert Gorski, Treasurer)

Paid Preparer Use Only: Print/Type preparer's name, Preparer's signature, Date, Check if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

May the IRS discuss this return with the preparer shown above? See instructions

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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public
Inspection

Name of the organization

PASADENA MANAGEMENT ASSOCIATION

Employer identification number

95-5692981

Form 990-EZ, Part I

Question # 8: Other revenue is funds
transferred from Association Certificates
of Deposit.

Question #16: Other Expenses.

BANK FEES 130

BOARD & COMMITTEE MEETINGS 3470

~~REPRESENTATION~~

ELECTIONS 1930

~~EMPLOYEE REPRESENTATION~~

INSURANCE 3000

LEGAL SERVICES

MEMBERSHIP MEETINGS 5950

MISCELLANEOUS 300

OFFICE SUPPLIES 50

POLITICAL ACTION COMMITTEE 4000

WEBSITE 2940

PMA BUDGET - 2012 BUDGET/ACTUALS

	2010		2011		PROPOSED 2012		2012		%
	ACTUALS	ACTUALS	BUDGET	BUDGET	BUDGET	ACTUALS	BALANCE	(OVER)	
I. INCOME									
MEMBERSHIP DUES	113,578	111,000	100,000	86,500	13,500	13%			
INTEREST	1,016	1,000	600	630	-30	-1%			
SOCIAL EVENTS	0	0	0	0	0	0%			
CERTIFICATE OF DEPOSIT CASHED	9,975	0	50,000	51,600	-1,600	-3%			
OTHER	0	100	0	0	0	0%			
II. TOTAL INCOME	124,569	112,100	150,600	138,730	11,870				
III. EXPENSES									
AWARDS AND RECOGNITIONS	1,000	100	100	0	100	100%			
BANK FEES			50	130	-80	-160			
BOARD & COMMITTEE MEETINGS	6,806	13,000	3,000	3,470	-470	-15%			
CONSULTING SERVICES	1,780	1,500	10,000	13,500	-3,500	-35%			
ELECTIONS	0	600	2,000	1,930	70	3%			
EMPLOYEE REPRESENTATION	65,535	75,000	90,000	114,300	-24,300	-27%			
INSURANCE			0	3,000	-3,000	-3000%			
LEGAL SERVICES	2,598	3,500	30,000	33,100	-3,100	-10%			
MAILING AND POSTAGE	389	200	100	0	100	100%			
MEMBERSHIP MEETINGS	6,500	5,700	5,000	5,950	-950	-20%			
MISCELLANEOUS			100	300	-200	-200%			
OFFICE SUPPLIES	1,281	1,000	50	50	0	100%			
POLITICAL ACTION COMMITTEE	15,000	5,500	4,000	4,000	0	-4000%			
PRINTING AND COPYING	653	1,000	300	460	-160	-60%			
SOCIAL EVENTS	3,127	1,000	1,000	0	1,000	100%			
TRANSFER TO RESERVE FUND	0	0	0	0	0	0%			
WEBSITE	2,745	4,000	3,000	2,940	60	2%			
VI. TOTAL EXPENSES	107,414	112,100	148,700	183,130	34,430				
VII. NET INCOME (LOSS)	17,155	0	2,600	-44,400					

PMA BUDGET - 2012 BUDGET/ACTUALS - page 2

2012

BUDGET
ACTUALS

	Member Dues	Interest	Total Income	Professional Fees	Printing, Postage Mailing	Other	Total Expense
I. INCOME							
MEMBERSHIP DUES	86,500		86,500				
INTEREST	630	630	630				
CERTIFICATE OF DEPOSIT CASHED	51,600		51,600				
II. TOTAL INCOME	138,730		138,730				
III. EXPENSES							
AWARDS AND RECOGNITIONS	0					0	0
BANK FEES	130					130	130
BOARD & COMMITTEE MEETINGS	3,470					3,470	3,470
CLERICAL SERVICES	0					0	0
CONSULTING SERVICES	13,500			13,500			13,500
ELECTIONS	1,930					1,930	1,930
EMPLOYEE REPRESENTATION	114,300			114,300			114,300
INSURANCE	3,000					3,000	3,000
LEGAL SERVICES	33,100			33,100			33,100
MAILING AND POSTAGE	0				0		0
MEMBERSHIP MEETINGS	5,950					5,950	5,950
MISCELLANEOUS	300					300	300
OFFICE SUPPLIES	50					50	50
POLITICAL ACTION COMMITTEE	4,000					4,000	4,000
PRINTING AND COPYING	460				460		460
SOCIAL EVENTS	0					0	0
TRANSFER TO RESERVE FUND	0					0	0
WEBSITE	2,940					2,940	2,940
IV. TOTAL EXPENSES	183,130			160,900	460	21,770	183,130

TOTAL: 86,500 630 138,730

Income: 138,730
 Net: -44,400
 Beg. Bal.: 162,777
 Plus Net: -44,400
 End. Bal.: 118,377

Pasadena Management Association Treasurer Report
December 25, 2012

CHECKING ACCOUNT 090

Balance Per Credit Union Web Site	26,733.94	
Checks Outstanding	130.00	
Total Cash Available		----- 26,603.94

CERTIFICATES OF DEPOSIT

#074 36-month, matures 03/27/15 @ 0.80%	52,778.25	
#073 24-month, matures 08/22/13 @ 0.85%	13,194.68	
Total Certificates Value		----- 65,832.57 -----

TOTAL FUNDS AVAILABLE DECEMBER 25	92,436.51
GAIN OR (LOSS) SINCE BEGINNING OF 2012	(65,843.87)