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Form 990-EZ

Department of the Treasury

Short Form Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-1150 2012

Open to Public Inspection

> 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

Internal Revenue Service For the 2012 calendar year, or tax year beginning 06/01/12, and ending 05/31/13 C Name of organization D Employer identification number Check if applicable Address change ASSOCIATION FOR DOCUMENTARY EDITING 52-1227864 Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number Initial return 1405 PROSPECT STREET Note that this address has 517-484-1281 Terminated City or town state or country, and ZIP + 4 F Group Exemption Amended return changed: all LANSING MI Number > Application pending correspondence should be X Cash Accounting Method. Accrual Other (specify) ▶ eck > X if the organization is not addressed to Ondine Website: ▶ WWW.DOCUMENTARYEDITING.ORG uired to attach Schedule B X 501(c)(3) 501(c)() ((insert LeBlanc, 1154 Boylston rm 990, 990-EZ, or 990-PF) Tax-exempt status (check only one) ---If the organization is not a section 509(a)(3) supporting organ St., Boston MA 02215 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 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 36,882 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 1,541 Contributions, gifts, grants, and similar amounts received 20,459 2 2 Program service revenue including government fees and contracts 14,740 SEE STATEMENT 3 Membership dues and assessments 3 4 Investment income 4 Gross amount from sale of assets ofther than inventory Less cost or other basis and sales expenses 5ĥ Gain or (loss) from sale of assets other than inventory (Subtractiline 5b from line 5a) 5c Gaming and fundraising events enuese ANNED APR 1 3 2015 Gross income from gaming (attach Schedule G if greater than S15.000) 6a Gross income from fundraising events (not ind This is a copy of the of contributions from fundraising events reported on line 1) (at 990EZ submitted on sum of such gross income and contributions e 6ь 1 July 2013 Less, direct expenses from gaming and fundra 6c Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 6d Gross sales of inventory, less returns and allowances 7a 7a 7b Less cost of goods sold Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 100 Other revenue (describe in Schedule O) 8 36,882 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 10 Grants and similar amounts paid (list in Schedule O) 10 11 11 Benefits paid to or for members 12 Salanes, other compensation, and employee benefits 12 342 13 13 Professional fees and other payments to independent contractors 14 Occupancy, rent, utilities, and maintenance 14 9.022 15 15 Printing, publications, postage, and shipping 25,481 16 Other expenses (describe in Schedule O) 16 34,845 17 Total expenses. Add lines 10 through 16 17 2,037 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on pnor year's return) 84,830 19 Other changes in net assets or fund balances (explain in Schedule O) 20 86,867 21 Net assets or fund balances at end of year. Combine lines 18 through 20

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2012)

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

| Check if the organization used Schedule O | to respond to any | / question i | | | г — | |
|---|--|-------------------|-------------|---------------------------------------|---------|--------------------------|
| | | | (A) Be | ginning of year | | (B) End of year |
| Cash savings, and investments | | | <u> </u> | 84,830 | 22 | 86,867 |
| Land and buildings | | | <u> </u> | 0 | 23 | |
| 24 Other assets (describe in Schedule O) | | | | 0 | 24 | 06.069 |
| 25 Total assets | | | | 84,830 | 25 | 86,867 |
| 26 Total liabilities(describe in Schedule O) | | | | 0 | 26 | 0 |
| 27 Net assets or fund balances (line 27 of column (B) must agree | | · | | 84,830 | 27 | 86,867 |
| Part III Statement of Program Service Accom | | | | 77 | | Expenses |
| Check if the organization used Schedule O t | o respond to any | question in | n this Part | <u>III X</u> | (Re | quired for section |
| What is the organization's primary exempt purpose? | | | | | 501 | (c)(3) and 501(c)(4) |
| SEE SCHEDULE O | | | | | orga | anizations and section |
| Describe the organization's program service accomplishments for ea | ich of its three large | st program s | ervices. | | 494 | 7(a)(1) trusts, optional |
| as measured by expenses. In a clear and concise manner, describe | the services provide | ed, the numb | er of | | for c | others) |
| persons benefited, and other relevant information for each program to | title | | | | | |
| 28 SEE OTHER | - | | | | | |
| | | | | | 1 | |
| | | | | | 1 | |
| (Grants S) If this amount includes f | oreign grants, check | k here | | > | 28a | |
| 29 | <u> </u> | | | | | |
| | | | | | | |
| T | his is a copy | of the |] | | | |
| (Grants \$) If this amount include 9 | , • | | | • | 29a | |
| 20 | | ueu on | | | | |
| | July 2013 | |] | | | |
| _ | | | _ | | | |
| (Grants S) If this amount includes f | oreion grants, checl | k here | | b | 30a | |
| 71 Other program services (describe in Schedule O) | CA II TO | 19-A | F | 7 9 | + | |
| (Grants S) If this amount includes f | oreign grants check | k here | Di kar | CHICAGO STATE | 31a | 34,845 |
| 32 Total program service expenses (add innes 28a through 31a) | | | 9 1 | 12 | 32 | 34,845 |
| Part IV List of Officers, Directors, Trustees, and Key E | | | not compens | aled (see the ins | | |
| Check if the organization used Schedule O to respon | <u>"T</u> | | | · · · · · · · · · · · · · · · · · · · | | · · |
| (a) Name and title | (b) Average hours per week | (c) Rep comper | nsation | (d) Heath ben contributions to e | mployee | (e) Estimated amount of |
| (5) 115.115 2115 | devoted to position | (Forms W-2/ | | benefit plans, deferred comper | | other compensation |
| PHILANDER D. CHASE | | (11110) | , | | | |
| PRESIDENT | 2.00 | | 0 | | 0 | o |
| R. DARRELL MEADOWS | 2.00 | | ···· | | | |
| SECRETARY | 2.00 | | 0 | | 0 | 0 |
| JOHN FIERST | 2.00 | | <u>~</u> | | | |
| TREASURER | 2.00 | | 0 | | 0 | 0 |
| TREADURER | 2.00 | | | | | <u> </u> |
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Other Information (Note the Schedule A and personal benefit contract statement requirements in the Part V instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V Yes No Did the organization engage in any significant activity not previously reported to the IRS? If "Yes." provide a Х 33 detailed description of each activity in Schedule O Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed 34 copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the X 34 change on Schedule O (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year from business X 35a activities (such as those reported on lines 2, 6a, and 7a, among others)? 35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, X 35c reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets 36 X 36 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 37b X Did the organization file Form 1120-POL for this year? b Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were 38a Х any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? 38a 38b If "Yes," complete Schedule L, Part II and enter the total amount involved b Section 501(c)(7) organizations Enter 39 39a Initiation fees and capital contributions included on line 9 а 39b Gross receipts, included on line 9, for public use of club facilities b Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under 40a , section 4912 ► section 4911 ▶ 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 40b X reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 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 4912.4
4955, and 4958
This is a conv This is a copy of the d Section 501(c)(3) and 501(c)(4) organizations Enter amount of 1990EZ submitted on reimbursed by the organization 1 July 2013 All organizations. At any time during the tax year, was the organizations. X 40e transaction? If "Yes," complete Form 8886-T List the states with which a copy of this return is filed NONE 41 517-484-1281 JOHN FIERST Telephone no The organization's books are in care of 42a 1405 PROSPECT STREET 48912 ZIP + 4Located at LANSING Yes No b At any time during the calendar year, did the organization have an interest in or a signature or other authority over X a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b 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. X 42c 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 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here 43 43 and enter the amount of tax-exempt interest received or accrued dunng the tax year Yes No Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be X 44a completed instead of Form 990-EZ Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be X 44h completed instead of Form 990-EZ X 44c Did the organization receive any payments for indoor tanning services during the year? If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an 44d explanation in Schedule O X 45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? -45a 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 45h Form 990-EZ (see instructions) Form 990-EZ (2012)

| Form | 990-EZ (2012) | ASSOCIATION | FOR DOCU | JMENTARY EI | DITING 5 | 2-12278 | 864 | | P | age 4 |
|--------------|--|--|---------------------------------------|--|--|---------------------------------------|--|------------------------|---------|-------------|
| | • | | | - - | | | | | Yes | No |
| 46 | • | tion engage, directly or ind r public office? If "Yes," con | • . | | n behalf of or in o | pposition | | 46 | | х |
| а | rt VI Sect All se 50 ar | ion 501(c)(3) organi ection 501(c)(3) organiz | zations only ations must an | swer questions 47 | | • | e the tables for li | | | |
| | | | | | _· | | · | | Yes | No |
| 47 | _ | tion engage in lobbying act omplete Schedule C, Part I | | section 501(h) electio | n in effect during t | he tax | | 47 | | X |
| 48 | Is the organization | on a school as described in | section 170(b)(1 |)(A)(II)? If "Yes," com | plete Schedule E | | | 48 | | X |
| 49a | Did the organiza | tion make any transfers to | an exempt non-cl | naritable related orga | nızatıon? | | | 49a | | _X_ |
| b | If "Yes," was the | related organization a sec | tion 527 organiza | lion? | | | | 49b | | |
| 50 | Complete this tal | ble for the organization's fiv | ve highest compe | nsaled employees (o | ther than officers, | directors, trus | tees and key | | | |
| | employees) who | each received more than S | 3100,000 of comp | ensation from the org | ganization If there | is none, ente | r "None " | | | |
| | (a) N | ame and litle of each employed paid more than \$100,000 | ee | (b) Average hours per week devoted to position | (c) Reportab compensatio (Forms W-2/1099 | n contri -MISC) b |) Health benefits, butions to employee enefit plans, and erred compensation | (e) Estimate other com | | |
| NC | ONE | | | | | | | | | |
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| | | | | | submitted o | 1 1 | | | _ | |
| | | | | 1 July 2 | | '']] | | | | |
| f -4. | Complete this tab | other employees paid over ble for the organization's fiv pensation from the organiz | e highest compe | nsated independent one " | ontractors who ea | ich received n | nore than | | | |
| | | ddress of each independent c | | | 7 4 | (b) Type of se | rvice | (c) Comper | sation | |
| ЮИ | NE | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
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| | Total number of | other independent contract | ors each receive | n over \$100 000 | <u>_</u> | | J | | | |
| 52 | Oid the organizat | ion complete Schedule A? | Note: All section | 501(c)(3) organization | |) | | X Yes | | |
| | penalties of perjury. | able trusts must attach a c t declare that I have examine Declaration of preparer (oth | d this return, includ | ing accompanying sche | | | | | <u></u> | No |
| | | | | , | | | | | | |
| Sign Here | ` ~ | ture of officer OHN FIERST | | | BOARI | Date MEMBE | R | | | _ |
| | —————————————————————————————————————— | or print name and title | | | | | | | | |
| Paid | | reparer's name TONS / BARON TONS | P | reparer's signature | | | Date Check Self-em | PTIN | 3923 | 4 |
| rep | | | NS, LLC | | | h | Firm's EIN | | | |
| | Only Firm's addre | 700 700 | OTT ROAD | 48823-31 | 01 | | | 17-351 | -92 | 00 |
| .vlav t | he IRS discuss th | is return with the preparer | | | | | 17 HOLEHO O | ▶ X Ye | | No |
| · 1 | C 0.00003 (II | o . C.C | | | •• | | • | Form 990 | | <u> </u> |

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury rnal Revenue Service ne of the organization

ASSOCIATION FOR DOCUMENTARY EDITING

Employer identification number 52-1227864

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv).(Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).(Complete Part II) A community trust described in section 170(b)(1)(A)(vi).(Complete Part II) ${f X}$ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type III-Functionally integrated Type III-Non-functionally integrated Type I By checking this box, I certify that the organization is not controlled directly or indirectly by/one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it orting This is a copy of the organization, check this box 990EZ submitted on Since August 17, 2006 has the organization accepted any gift or contr 1 July 2013 following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes 11g(ı) (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? 11g(ii) 11g(in) (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s) (vi) Is the (iv) is the organization (v) Did you notify (ii) EIN (iii) Type of organization (vii) Amount of monetary (i) Name of supported the organization in organization in col (described on lines 1-9 in col (i) listed in your organization col (i) of your (r) organized in the above or IRC section governing document? support? US? (see instructions) Yes Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2012

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

| | ction,A. Public Support | | | • | | · | |
|------|---|---------------------------------------|----------------------|--|---------------------------------------|---|---------------------------------|
| elه۔ | ndar year (or fiscal year beginning in) 🕨 | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") | | | | | | |
| 2 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 | Total Add lines 1 through 3 | | | | | | |
| 5 | The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | : | |
| 6 | Public support. Subtract line 5 from line 4 | | <u> </u> | | | | |
| | tion B. Total Support | | .L. <u>—</u> | ! | <u> </u> | · · · · · · · · · · · · · · · · · · · | |
| | ndar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
| 7 | Amounts from line 4 | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | (1) (1) (1) (1) (1) (1) (1) (1) |
| 8 | Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | his is a copy 90EZ submi July 2013 | | | |
| 9 | Net income from unrelated business activities, whether or not the business is regularly carried on | | | | P | , | |
| 10 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | 4 49 11 | | Mt 11 | | |
| 11 | Total support. Add lines 7 through 10 | | l | | | | |
| 12 | Gross receipts from related activities, etc. (s | | | | | 12 | |
| 13 | First five years. If the Form 990 is for the c | organization's first, | second, third, fourt | h, or fifth tax year a | s a section 501(c)(3 | 5) | |
| | organization, check this box and stop here | | | | | | <u></u> |
| | tion C. Computation of Public Su | · · · · · · · · · · · · · · · · · · · | | | | | |
| 14 | Public support percentage for 2012 (line 6, | | | f)) | • | 14 | %_ |
| 15 | Public support percentage from 2011 Scheo | | | : | | 15 | <u></u> |
| 16a | 33 1/3% support test—2012. If the organize box and stop here. The organization qualifi | | | | 1/3% or more, chect | this | • |
| ь | 33 1/3% support test—2011. If the organiz | • | | | s 33 1/3% or more, | | |
| | check this box and stop here. The organiza | ation qualifies as a | publicly supported | organization | | | > |
| 17a | 10%-facts-and-circumstances test—201 | 2. If the organization | on did not check a b | ox on line 13, 16a, | or 16b, and line 14 | ıs | |
| | 10% or more, and if the organization meets Part IV how the organization meets the "fact organization | | | | • | | > |
| b | 10%-facts-and-circumstances test—201 15 is 10% or more, and if the organization or Explain in Part IV how the organization mee | neets the "facts-and | d-arcumstances" te | st, check this box a | and stop here. | | |
| 18 | supported organization Private foundation. If the organization did | not check a box or | | 17a, or 17b, check | this box and see | •••• | • _ |
| - | Instructions | | 13, 133, 100, | 2, 2, 1, 2, 0,000 | | | • |
| | | | • • | ····· | • | • | |
| _ | | | | | Sche | edule A (Form 990 | or 990-EZ) 2012 |

52-1227864

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

If the organization fails to qualify under the tests listed below, please complete Part II.)

| A continue A c | | ction A. Public Support | quality drider tri | e tests fisted b | elow, please co | implete Part II.) | | |
|---|-----|---|--|----------------------|------------------------|---|-------------|---------------------------------------|
| 1 Gits, grants, contributions, and membership fees received (D not clinide any invitigal grants) 12,982 | _ | | (a) 2008 | (b) 2009 | (c) 2010 | (4) 2011 | (a) 2012 | /fi Total |
| 12,982 2,482 2,626 2,045 1,541 21,419 | | Gifts, grants, contributions, and membership | (8) 2000 | (6) 2009 | (6) 2010 | (0) 2011 | (e) 2012 | (f) Total |
| Solid of services performed, of scaletes funnels of my actively but is professed to the sum active but is professed to the services of the second purpose | | | 12,982 | 2,425 | 2,626 | 2,045 | 1,541 | 21,619 |
| unrelated trade or business under section 513 4 Tax revenues leved for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization willout change 1 Total. Add lines 1 flivough 5 29,957 30,788 36,205 33,572 36,892 167,404 7a Amounts mucked on lines 1 2, and 3 received from disqualified persons 1 Amounts included on lines 1 2, and 3 received from disqualified persons 1 Amounts included on lines 1 2, and 3 received from disqualified persons 1 Amounts included on lines 1 2, and 3 received from disqualified persons 1 Amounts included on lines 1 2, and 3 received from disqualified persons 1 Amounts included on lines 1 2, and 3 received from disqualified persons 1 Amounts lines and a 2, and 3 received from disqualified persons 1 Amounts from line 1 5 8 Public support (Subtract line 7 c from line 6 1 Amounts from line 6 1 Amoun | 2 | sold or services performed, or facilities furnished in any activity that is related to the | 16,975 | 28,363 | 33,579 | 31,527 | 35,341 | 145,785 |
| arganization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization willout change of the comparization of th | 3 | | | | | | | _ |
| Total Add lines 1 through 5 29,957 30,788 36,205 33,572 36,882 167,404 | 4 | organization's benefit and either paid | | | | | | |
| 7a Amounts included on lines 1 2, and 3 received from disqualified persons b. Amounts included on lines 1 2, and 3 received from other than disqualified persons in late acceed the greater of \$5,000 or 1% of the amount on line 13 for the year c. Add lines 7a and 7b. 8 Public support(Subtract line 7c from line 6). 90EZ submitted on 1 1 July 2013 3, 034 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. Section B. Total Support 1 July 2013 164, 370. 2 July 2013 164, 370. 2 July 2013 164, 370. 3 July 2013 164, 37 | 5 | furnished by a governmental unit to the | | | | | | |
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Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; . Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information (See instructions).

This is a copy of the 990EZ submitted on 1 July 2013

CLIENT COPY

SCHEDULE O

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2012

Open to Public Inspection

rnal Revenue Service

Employer identification number

ASSOCIATION FOR DOCUMENTARY EDITING 52-1227864 FORM 990-EZ, PART I, LINE 8 - OTHER REVENUE DESCRIPTION TIUUOMA BOYD AND BOYDSTON FUND Ŝ 100 100 TOTAL \$ FORM 990-EZ, PART I, LINE 16 - OTHER EXPENSES DESCRIPTION AMOUNT **EXPENSES** This is a copy of the 990EZ submitted on CONVENTION SERVICES 20,189 July 2013 AWARD PLAQUES 865 BANK FEES 427 **EDITING** TOTAL 25,481 FORM 990-EZ, PART III - PRIMARY EXEMPT PURPOSE THE ASSOCIATION FOR DOCUMENTARY EDITING WAS CREATED IN 1978 TO PROMOTE DOCUMENTARY EDITING THROUGH THE COOPERATION AND EXCHANGE OF IDEAS AMONG THE COMMUNITY OF EDITORS FORM 990-EZ, PART III, LINE 31 - ALL OTHER ACCOMPLISHMENT THE ASSOCIATION FOR DOCUMENTARY EDITING WAS CREATED IN 1978 TO PROMOTE DOCUMENTARY EDITING THROUGH THE COOPERATION AND EXCHANGE OF IDEAS AMONG THE COMMUNITY OF **EDITORS**

52-1227864

Federal Statements

Form 990-EZ, Part I, Line 3 - Membership Dues and Assessments

| , | Amount | | | |
|------------|------------|--------------|--|--|
| MEMBERSHIP | DUES | \$ 14,740 | | |
| TOTAL | | \$ 14,740 | | |



THE ASSOCIATION FOR DOCUMENTARY EDITING



IRS

Attn: E.O Account P.O. Box 9941 Ogden UT 84409

March 31, 2015

Re: request of abatement for notice #CP141L

Dear Exempt Organization Account Officer:

I am writing this letter in my capacity as the Treasurer for the Association for Documentary Editing (52-1227864). The organization recently received notice from the IRS advising that the ADE has incurred a penalty of \$1,844.10 for late filing of its FY2013 990EZ forms. The treasurer of the ADE who was serving in FY2013 confirms that our records show that a 990 for that year was filed on July 1, 2013, long before our filing deadline of October 15, 2013.

As you can see here, and on the enclosed copy of the complete form, Mr. Fierst worked with CPA Barry L. Tons, who recorded the filing date as July 1, 2013.

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 inform. Sign JOHN FIERST BOARD MEMBER Here Type or print name and title PTIN self employed Paid BARRY L. TONS / BARON TONS Preparer BARON TONS, LLC Firm's name Use Only 700 ABBOTT ROAD Firm's address 48823-3101 517-351-9200 EAST LANSING, MI X Yes May the IRS discuss this return with the preparer shown above? See instructions Form 990-EZ (2012)

Nonetheless, in my conversation with IRS agent #1000143690 (Mr. Gibson or Gibbons) on March 5, 2015, I learned that the receipt date in the IRS record is December 29, 2014. Mr. Gibson recommended, based on the ADE's status and other mitigating factors, that we request that the penalty be waived.

The ADE is a small exempt organization with revenues well below \$50,000 per year. It is a professional organization comprised of editors dedicated to making accessible to the public documents important to the history of the nation. It is supported by its membership, and its officers are all unpaid volunteers who serve for a set number of years.

When I became the ADE treasurer in the fall of 2013, neither Mr. Fierst nor I had any reason to believe that there was anything amiss with that year's filing. It was not until late in the winter that I learned the IRS did not have a record of receiving the FY2013 990.

Consequently, I sent a note to the agency in December 2014. With that note, dated December 23, 2014, I also sent a **copy** of the 990EZ for 2013; I believe that this copy was then recorded as the initial receipt of the filing. The discrepancy between our July 2013 record of the filing and your December 2014 record of the filing must have resulted from that.

I hope that the penalty can be waived in light of the ADE's sincere belief that the form had been filed in July 2013, as indicated above and on enclosed copy of the original form.

Please direct future correspondence regarding this matter and any others to me at this address:

Association for Documentary Editing c/o Ondine Le Blanc Massachusetts Historical Society 1154 Boylston Street Boston MA 02215

Thank you,

Ondine Le Blanc

Treasurer, Association for Documentary Editing