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# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

Open to Public Inspection

<u>A</u>	For the	2013 calendar year, or tax year beginning	and	ending	_		
В	Check if applicable	C Name of organization			D Employer	identific	ation number
	Addre:	ss NORTH CAROLINA NURSES	ASSOCIATION				
	Name chang		<u> </u> !	<u> 56-03</u>	341047		
	Initial return	Number and street (or P.O. box if mail is not deli	vered to street address)	Room/suite	E Telephone	number	
	Termir ated	103 ENTERFRISE STREET			!	<u>919-8</u>	321-4250
	Ameno return	Uity or town, state or province, country, and a	ZIP or foreign postal code		G Gross receipts	s <b>\$</b>	1,731,322.
	Applic	RALEIGH, NC 27607			H(a) Is this a	group re	
	pendir	$^{Ig} \mid$ <b>F</b> Name and address of principal officer $^{ITN}$	A C. GORDON		for subo	rdinates?	Yes X No
		103 ENTERPRISE ST, RALE			H(b) Are all subc	ordinates inc	cluded? Yes No
				or 527	If "No," a	attach a l	ist (see instructions)
		te: ► WWW.NCNURSES.ORG		<u> </u>	H(c) Group ex		
	Form of <b>art I</b>	organization: X Corporation Trust Ass	sociation Other	L Year	of formation: 1	902 м	State of legal domicile; NC
Ð	1	Briefly describe the organization's mission or most	significant activities TO S	ERVE 1	THE CHANG	GING	NEEDS OF
Activities & Governance		ITS MEMBERS, ADDRESS NURS	ING ISSUES, AND	ADVO	CATE FOR		
eru	2	Check this box 🕨 📖 if the organization discor	ntinued its operations or dispo	sed of more	e than 25% of it	ts net as:	
Š	3	Number of voting members of the governing body	(Part VI, line 1a)			3	17
~ প্ৰ	4	Number of independent voting members of the gov	verning body (Part VI, line 1b)			4	17
ies	5	Total number of individuals employed in calendar y	ear 2013 (Part V, line 2a)			5	11
Ĭ	1	Total number of volunteers (estimate if necessary)				6	350
Act	1	Total unrelated business revenue from Part VIII, co	• • •			7a	37,555.
	b	Net unrelated business taxable income from Form	990-1, line 34	<del></del>		7b	17,536.
		Contributions and grants (Bort VIII line 1b)		<u> </u>	Prior Year	0.	Current Year 265, 661.
Revenue	1	Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g)			1,101,		1,184,789.
Ver	1	Investment income (Part VIII, column (A), lines 3, 4,	and 7d)			645.	37,940.
æ	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c,	·		198,		195,687.
	1	Total revenue - add lines 8 through 11 (must equal			1,322,		1,684,077.
		Grants and similar amounts paid (Part IX, column //				750.	32,500.
		Benefits paid to or for members (Part IX, column (A				0.	0.
S	1	Salaries, other compensation, employee benefits IF	PartriX=column=(A)=tines=5-10)		531,	479.	594,570.
Expenses	16a	Professional fundraising fees (Part IX, column (A),	11e)APR 2 4 2014	SO-80	•	0.	0.
x	b	Total fundraising expenses (Part IX, column (D), line	(F25) A 2 2 2 2 1 4 1	₩.			
ш	17	Other expenses (Part IX, column (A), lines 11a-11d,		ਲ  _	592,		<u>719,807.</u>
		Total expenses Add lines 13-17 (must equal Part		<u> </u>	1,162,		<u>1,346,877.</u>
	19	Revenue less expenses Subtract line 18 from line	12		160,	326.	337,200.
Net Assets or Fund Balances				Bo	eginning of Curre		End of Year
Sset	20	Total assets (Part X, line 16)			1,759,		2,130,783.
et.	21	Total liabilities (Part X, line 26)		<u> </u>	240,		208,204.
	22	Net assets or fund balances Subtract line 21 from Signature Block	line 20		1,519,	268.	1,922,579.
	art II		realization accompanies achodula	a and states	and to the		chanulades and halief it is
-		lities of perjury, I declare that I have examined this return, it, and complete. Declarati <b>c</b> h of prepare:—(other tha <b>n of</b> iice					knowledge and belief, it is
_		t, and complete. Declaration of prepare content traderince	1) is based on all information of wi	ilicii pi epare	i ilas aliy kilowict	₩ - 1	5-14
် <b>န</b> ်၊g	n	Signature of officer			Date		<del>- / /</del>
ີ້ຈັ <sup>ເອ</sup> ≳Hei	re	TINA C. GORDON, CHIEF	EXECUTIVE OFFIC	ER			
j He		Type or print name and title					
		Print/Type preparer's name	Preparer's signature		Date	Check	PTIN
Pai	d	PAUL MILLER	Parl B. millar, cl	04	4.4.14	self-employe	p00166372
Pre	parer	Firm's name KOONCE, WOOTEN &	HAYWOOD, LLP		Firm's	EIN 🛌	56-0517823
Use	Only	Firm's address P. O. BOX 17806					
		RALEIGH, NC 2761			Phone	e no. 919	9-782-9265
		RS discuss this return with the preparer shown abo		-	<del>-</del>		X Yes No
3320	001 10-2	9-13 LHA For Paperwork Reduction Act Notice	e, see the separate instructi	ons.			Form <b>990</b> (2013)

	1990 (2013) NORTH CAROLINA NORSES ASSOCIATION 56-034104 / Page Z
Pai	Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission  TO SERVE THE CHANGING NEEDS OF ITS MEMBERS, ADDRESS NURSING ISSUES,
	AND ADVOCATE FOR THE HEALTH AND WELL-BEING OF ALL PEOPLE.
	THE TENTON THE MENER THE PERIOD OF THE PROPERTY.
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	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?
	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 are required to report the amount of grants and allocations to others, the total expenses, and
4-	revenue, if any, for each program service reported
4a	(Code) (Expenses \$
	IMPROVE THE SKILLS OF ITS MEMBERS.
	IMPROVE THE BRIDDS OF TIS MEMBERS:
4b	(Code) (Expenses \$
	DISSEMINATION OF INFORMATION TO ITS MEMBERS RELATED TO CHANGES IN THE NURSING PROFESSION AND EDUCATE THE GENERAL PUBLIC ABOUT THE PROFESSION
	AS WELL AS HEALTH ISSUES.
	THE WALL TO HAMMEN TOO DO !
4c	(Code) (Expenses \$
	PROVIDES MEMBERS WITH REPRESENTATION IN VARIOUS PROFESSIONAL NURSES
	ORGANIZATIONS.
	<del></del>
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$ ) (Revenue \$
4e	Total program service expenses ▶

			V	N-
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	<u>No</u>
•	If "Yes," complete Schedule A	1		х
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	х	
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		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
7	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			
Ŭ	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<u> </u>		
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; 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		Х
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		Х
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			1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
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		Х
С	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		X
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		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
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		<u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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 and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u> </u>
14a	, , , ,	14a		<u>X</u>
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			v
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u>x</u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_ <u>X</u> _
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		Х
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
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	40		х
19		18	-	
13	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	10		Х
202	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		- 41
	and the state of t			

Yes No

Form 990 (2013) NORTH CAROLINA NURSES ASSOCIATION
Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 19 If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		<u> </u>
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			7.7
	of any of these persons? If "Yes," complete Schedule L, Part III	27	. بئ	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			A
_	instructions for applicable filing thresholds, conditions, and exceptions)	7.	11. 11	
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	25		
50	contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
•	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	Ŭ.		
	Schedule N, Part II	32		X
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? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		_X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		Form	990	2013)

NORTH CAROLINA NURSES ASSOCIATION

Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V Form 990 (2013)
Part V Sta

	Check if Schedule O Contains a response or note to any line in this Part V			<u>, Ll</u>
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter ·0· if not applicable  10			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	.		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	-		
	(gambling) winnings to prize winners?	1c	Х	ļ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return  2a 11			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	_X_	<del> </del>
•	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		v	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X	$\vdash$
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	Λ	<del></del>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4.		х
_	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	_4a_		
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	30		
Vu	any contributions that were not tax deductible as charitable contributions?	6a		x
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).			
а	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		
	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			
е	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?	7 <u>g</u>		
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		ļ
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		-
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			1
a	Initiation fees and capital contributions included on Part VIII, line 12			
	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  Cross income from ather sources (Pa not not organize due or not do ather source organize)			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
10-	amounts due or received from them)  [11b]  Section 4047(AV4) non-executed by a section filing Form 900 to leave of Form 10412	10-	-	İ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
			İ	
13 a	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a	<u> </u>	
a	Note. See the instructions for additional information the organization must report on Schedule O	100		
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
IJ	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	<u> </u>	Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<del></del>
.,	- 10, provide an expansion in Concedic C		000	(2012)

Form 990 (2013) NORTH CAROLINA NURSES ASSOCIATION 56-0341047 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			$\mathbf{x}$
Sec	tion A. Governing Body and Management			<u> </u>
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1	7		
-	If there are material differences in voting rights among members of the governing body, or if the governing	1.		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1	7		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		,
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Х	
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a				
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	14.50	341	12
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion 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?	10a	_X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b		X
	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		-	<u> </u>
	taxable entity during the year?	16a		X
b	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	Ì		
	exempt status with respect to such arrangements?	16b	L	
	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılab	le	
	for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website X Upon request Other (explain in Schedule O)		_	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, a	nd finar	ncial	
	statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organiz	ation 🕨		
	TINA C. GORDON - 919-821-4250	<del></del>		
	THE ANTERPRISE STREET MALKITCH MIT //MIT/			

Form	990	(2013)	

# NORTH CAROLINA NURSES ASSOCIATION

56-0341047

Page 7

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

Check if Schedule	Dicontains a response	or note to any line 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 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, and 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.

(A) Name and Title	(B) Average hours per week	box	not c , unle	ss pe	ntior more	than is both	h an	( <b>D)</b> Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W·2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MARY FALTUS	1.00									
MOUNTAIN REGION DIRECTOR		X						0.	0.	0.
(2) RYAN LEWIS	1.00	]								
NORTHEAST REGION DIRECTOR		X					_	0.	0.	0.
(3) CATHY GREENE	1.00									
NORTHWEST REGION DIRECTOR		X						0.	0.	0.
(4) TERESA BARNES	1.00									
SOUTH CENTRAL REGION DIREC		X		_				0.	0.	0.
(5) JEANNETTE ORR	1.00									
SOUTHEAST REGION DIRECTOR		X						0.	0.	0.
(6) DONNA OWEN	1.00									
SOUTHWEST REGION DIRECTOR		X						0.	0.	0.
(7) WENDY HICKS	1.00									
TRIAD REGION DIRECTOR		X						0.	0.	0.
(8) MARY GRAFF	1.00		ŀ							
TRIANGLE REGION DIRECTOR		Х					L_	0.	0.	0.
(9) DONA CAINE-FRANCIS	1.00									
COMMISSION CHAIR-ADVANCED		Х				<u> </u>	L	0.	0.	0.
(10) ELAINE SCHERER	1.00									
COMMISSION CHAIR-EDUCATION		Х						0.	0.	0.
(11) JOANN SMITH	1.00									
COMMISSION CHAIR-MEMBERSHI		X						0.	0.	0.
(12) NESSAN SALMON-WILSON	1.00						Ì	_	_	
COMMISSION CHAIR-STANDARDS		X			ļ.,,	ļ		0.	0.	0.
(13) PATRICIA CAMPBELL	1.00						l		_	
PRESIDENT				X				0.	0.	0.
(14) MEGAN WILLIAMS	1.00								_	_
PRESIDENT-ELECT			_	X		_	_	0.	0.	0.
(15) CASSAUNDRA HEFNER	1.00	ļ						_		
VICE PRESIDENT			<u> </u>	X	_	<u> </u>	<u> </u>	0.	0.	0.
(16) CHERYL BATCHELOR	1.00							_		_
SECRETARY		_		X	_	<u> </u>		0.	0.	0.
(17) ANGELINE BERTSCH	1.00			l				_		_
TREASURER			<u> </u>	X	Ц_			0.	0.	0.

Part VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	<u>ees</u>	, an	d Hi	ighe	st C	Compensated Employe	es (continued)		
(A)	(B)			-	C)			(D)	(E)		(F)
Name and title	Average	(do			itior more	1 than	one	Reportable	Reportable	- 1	Estimated
	hours per week					ıs bot or/trus		compensation	compensatio	1	amount of
	(list any	<u> </u>			Π	Ī	ĺ	from the	from related organizations		other compensation
	hours for	Individual trustee or director				-e		organization	(W-2/1099-MIS		from the
	related	10 99	stee			usate		(W-2/1099-MISC)	(** = *********************************	,	organization
	organizations	trust	al fr		) se	E					and related
	below	vidua	Institutional trustee	5	Хеу етріоуее	Highest compensated employee	Former				organizations
	line)	를	할	Officer	ě	물통	휸				
(18) TINA GORDON	40.00			ļ							
CHIEF EXECUTIVE OFFICER	ļ	ļ	<u> </u>	X	-	-		115,586.		0.	8,602.
		-			1						
	<del> </del>		├	-	-	+					
		1		i							
		-	├	<del> </del>	-	+				$\overline{}$	
		1			ĺ						
		┢╌	$\vdash$	$\vdash$	$\vdash$	+	$\vdash$				
		1									
<del></del> -	<u> </u>					+				-	
		1									
				$\vdash$					•		
		1		1							
	<del> </del>		┢		1	1					
		1									
100											
		1									
1b Sub-total	1			•			<b></b>	115,586.		0.	8,602.
c Total from continuation sheets to Part V	II, Section A						<b>•</b>	0.		0.	0.
d Total (add lines 1b and 1c)							<b></b>	115,586.		0.	8,602.
2 Total number of individuals (including but i	not limited to th	nose	liste	ed a	bov	e) wl	ho r	eceived more than \$100	,000 of reportable	e	
compensation from the organization											1
										1	Yes No
3 Did the organization list any former officer	, director, or tri	uste	e, ke	ey e	mplo	oyee	, or	highest compensated e	mployee on		
line 1a? If "Yes," complete Schedule J for	such individual										3 X
4 For any individual listed on line 1a, is the s	•							*	the organization		۔۔ اللہ کست
and related organizations greater than \$15	0,000? If "Yes,	" co	mpl	ete .	Sch	edul	e J i	for such individual			4 X
5 Did any person listed on line 1a receive or	•					-	elat	ted organization or indiv	idual for services		
rendered to the organization? If "Yes," con	nplete Schedul	e J i	for s	uch	per	son					5 X
Section B. Independent Contractors											
1 Complete this table for your five highest co										ipens	ation from
the organization Report compensation for	the calendar y	ear	endi	ng v	with	or w	rithir T		year		
(A) Name and business	addrose	37/	<b>~</b> 3.71	_				( <b>B)</b> Description of s	envices	_	(C) compensation
- Name and Business		14(	INC	<u> </u>			_	Description of C		<u>_</u>	omponounon
										-	
							_	· · · · · · · · · · · · · · · · · · ·	_		
	. <u></u>	-					$\dashv$				
									-		
									j		
2 Total number of independent contractors	including but r	ot li	mıte	d to	the	se lı	stec	d above) who received in	nore than		
\$100,000 of compensation from the organ	_					0					
· · · · <del> · · · · · · · · · · ·</del>						-					

Form 990 (2013) NORTH CAROLINA NURSES ASSOCIATION 56-0341047 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (D)
Revenue excluded from tax under sections 512 - 514 (B) (C) Related or Unrelated Total revenue exempt function business revenue revenue Gifts, Grants ilar Amounts Federated campaigns 1a b Membership dues 1b c Fundraising events 1c 265,661. d Related organizations 1d Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above Noncash contributions included in lines 1a-1f \$ 265,661 h Total. Add lines 1a-1f Business Code Program Service Revenue 2 a MEMBERSHIP DUES 900099 726,683 726,683 **b WORKSHOPS AND COURSES** 900099 266,315 266,315 118,675 c ANNUAL CONVENTION 900099 118,675 900099 73,116. 73,116 d CONTRACT AND GRANT ADM f All other program service revenue 1,184,789. g Total. Add lines 2a-2f ▶ 3 Investment income (including dividends, interest, and 34,412. 34,412 other similar amounts) Income from investment of tax-exempt bond proceeds ▶ 30,401 30,401. Royalties 5 (i) Real (II) Personal 50,446 6 a Gross rents 28,306. b Less rental expenses 22,140. c Rental income or (loss) 22,140 22,140. d Net rental income or (loss) (i) Securities (II) Other 7 a Gross amount from sales of 22,467. assets other than inventory b Less cost or other basis 17,969 970 and sales expenses 4,498. <970 c Gain or (loss) d Net gain or (loss) 3,528 3,528. 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less. direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а b Less. direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code <u> 105,591.</u> 105,591 11 a SALE OF SERVICES 561000 20,270. 20,270 **b** COMMISSIONS 900099

c ADVERTISING d All other revenue

e Total. Add lines 11a-11d

Total revenue See instructions.

68,341.

17,285.

37,555

17,285.

143,146.

684,077.1,312,520

541800

Sect	on 501(c)(3) and 501(c)(4) organizations must com			complete column (A).	
	Check if Schedule O contains a respon			1 (0)	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	32,500.			
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				<u> </u>
5	Compensation of current officers, directors,	404 400			
	trustees, and key employees	124,188.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	227 547			
7	Other salaries and wages	337,547.		-	
8	Pension plan accruals and contributions (include	11 661			
_	section 401(k) and 403(b) employer contributions)	11,661.			
9	Other employee benefits	84,033. 37,141.			
10	Payroll taxes	37,141.			
11	Fees for services (non-employees)				
a	Management	260.		· · · · · · · · · · · · · · · · · · ·	
b	Legal	18,000.			
c d	Lobbying	110,000.		1	
e	Professional fundraising services. See Part IV, line 17	110,000.	·î	17. 从最大,可能激烈。	
f	Investment management fees	3,771.		7. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2. 2.	
g	Other (If line 11g amount exceeds 10% of line 25,		·		
9	column (A) amount, list line 11g expenses on Sch O.)	967.			
12	Advertising and promotion	,,,,,			
13	Office expenses	9,952.			
14	Information technology	5,040.			•
15	Royalties	-,			
16	Occupancy				
17	Travel	21,008.			
18	Payments of travel or entertainment expenses	,			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	174,480.			
20	Interest				
21	Payments to affiliates				····
22	Depreciation, depletion, and amortization	15,335.			
23	Insurance	4,985.			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	UNRELATED BUSINESS INCO	4,004.			
	CDECTAL DRAFFCER FURBUR	118,480.			
С	MEMBERSHIP EXPENSES	87,792.			
d	PRINTING AND PUBLICATIO	30,500.			
е	All other expenses	115,233.			
25	Total functional expenses Add lines 1 through 24e	1,346,877.			
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here I if following SOR 98 2 (ASC 958 720)			1	

Part		Balance Sheet		RSES ASSOCIAT	TON	<u> </u>	0341047 Page 11
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			102.	1_	46
	2	Savings and temporary cash investments	1,109,857.	2	1,377,814		
-	3	Pledges and grants receivable, net				3	
- 1	4	Accounts receivable, net		i	38,892.	4	29,386
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compensa					
	_	Part II of Schedule L	f			5	
	6	Loans and other receivables from other disquali	•	•	•		
		section 4958(f)(1)), persons described in section					
.		employers and sponsoring organizations of sect					
Assets	_	employees' beneficiary organizations (see instr)	Compl	ete Part II of Sch L	· · · · · · · · · · · · · · · · · · ·	6	
SS	7	Notes and loans receivable, net				7	
`	8	Inventories for sale or use			20.051	8	1.6 410
	9	Prepaid expenses and deferred charges			30,051.	9	16,419
]	10a	Land, buildings, and equipment: cost or other		500 400	Ž.		
		basis. Complete Part VI of Schedule D	10a	533,102.	- Landanian de la companya della companya de la companya della com		
	b	Less: accumulated depreciation	10b	350,568.	196,825.		182,534
	11	Investments - publicly traded securities			383,663.	11	524,584
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related See Part IV, line	11			13	
İ	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets, Add lines 1 through 15 (must equ	al line 3	4)	1,759,390.	16	2,130,783
	17	Accounts payable and accrued expenses	121,832.	17	94,851		
	18	Grants payable				18	
	19	Deferred revenue			113,790.	19	108,853
	20	Tax-exempt bond liabilities			<u> </u>	20	
	21	Escrow or custodial account liability Complete	Part IV	of Schedule D		21	
မွ	22	Loans and other payables to current and former	officer	s, directors, trustees,			
abilities		key employees, highest compensated employee	es, and	disqualified persons.			
<u> </u>		Complete Part II of Schedule L				22	
۱ ۲	23	Secured mortgages and notes payable to unrela	ated the	rd parties		23	
	24	Unsecured notes and loans payable to unrelate	d third j	oarties		24	ļ
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		parties, and other liabilities not included on lines	17-24)	Complete Part X of			
		Schedule D			4,500.	25	4,500
	26	Total liabilities. Add lines 17 through 25			240,122.	26_	208,204
		Organizations that follow SFAS 117 (ASC 958	), chec	k here ▶ X and			
es		complete lines 27 through 29, and lines 33 and	id 34.				~
<u>د</u> ا	27	Unrestricted net assets			1,514,518.	27	1,676,104
) aic	28	Temporarily restricted net assets			4,750.	28	246,475
פַ	29	Permanently restricted net assets				29	
Ī		Organizations that do not follow SFAS 117 (A	SC 958	3), check here 🕨 🔙			
ō		and complete lines 30 through 34.			e ~		
ets	30	Capital stock or trust principal, or current funds				30	
155	31	Paid-in or capital surplus, or land, building, or ed	quipmei	nt fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in				32	
Z	33	Total net assets or fund balances			1,519,268.	33	1,922,579
	34	Total liabilities and net assets/fund balances			1,759,390.	34	2,130,783

orm	990 (2013) NORTH CAROLINA NURSES ASSOCIATION	<u> 56-03</u>	41047	Pa	ge 12			
Pa	rt XI Reconciliation of Net Assets				•			
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,68					
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,34					
3	Revenue less expenses Subtract line 2 from line 1	3	33	7,2	00.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,51	9,2	68.			
5								
6								
7	Investment expenses	7						
8	Prior period adjustments	8						
9								
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	1,92	2,5	79.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				<u>∟</u>			
				Yes	No			
1	Accounting method used to prepare the Form 990 Cash Accrual Other		.					
	Ο.			_				
2a		2a		X				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis		_		_			
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basıs,						
	consolidated basis, or both:							
	X Separate basis Consolidated basis Both consolidated and separate basis				İ			
С			<u>.</u>					
	review, or compilation of its financial statements and selection of an independent accountant?		2c		X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O	,;					
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit								
	Act and OMB Circular A-133?		За		X			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit						
	or guides, explain why in Schedule O and describe any stops taken to undergo such audits		36		1			

332012 10-29-13 Form **990** (2013)

# SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below.
 ► Attach to Form 990 or Form 990-EZ.
 ► See separate instructions.
 ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III	.,,								
	ne of organization	mons. Complete Fart III		En	ployer identification number						
	NORTH C	AROLINA NURSES A	SSOCTATION		56-0341047						
Pa	art I-A Complete if the or	ganization is exempt und	der section 501(c	or is a section 527	organization.						
	•			,							
1	Provide a description of the organia	zation's direct and indirect politic	cal campainn activities	un Part IV							
	Political expenditures	cation o anost and manest point	our oumpaign douvides	_	· \$						
	Volunteer hours			. •							
•											
Pa	art I-B Complete if the ore	ganization is exempt und	der section 501(c	)(3).							
1	Enter the amount of any excise tax			<u> </u>	\$						
	Enter the amount of any excise tax	• •			\$						
	If the organization incurred a section				Yes No						
<b>4</b> a	Was a correction made?		•	·	Yes No						
t	If "Yes," describe in Part IV.										
Pa	art I-C Complete if the org	ganization is exempt und	der section 501(c	), except section 50	1(c)(3).						
1	Enter the amount directly expende	d by the filing organization for se	ection 527 exempt fun	ction activities	\$						
2	Enter the amount of the filing organ	nization's funds contributed to o	ther organizations for	section 527							
	exempt function activities										
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here	and on Form 1120-PO	L,							
	line 17b			<b>&gt;</b>	\$						
4	Did the filing organization file Form	1120-POL for this year?			Yes No						
5	Enter the names, addresses and en	mployer identification number (E	IN) of all section 527 p	olitical organizations to w	nich the filing organization						
	made payments For each organiza	ation listed, enter the amount pa	id from the filing organ	ization's funds. Also ente	the amount of political						
	contributions received that were pr	• •	•	•	arate segregated fund or a						
	political action committee (PAC) If	additional space is needed, pro	vide information in Par	t IV							
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from							
				filing organization's funds If none, enter-	contributions received and promptly and directly						
				fullus il florie, efiler s	delivered to a separate						
					political organization						
					If none, enter -0-						
	****										
			-								
			<del>-  </del>								

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013	<u>NORTH</u>	CAROL	INA NURSES	ASSOCIATION	56-0	0341047 Page 2				
Part II-A Complete if the org			npt under sectio	n 501(c)(3) and til	ea Form 5/68					
<del></del>		·	hated group (and list in	Part IV each affiliated	aroup member's par	ne address FIN				
expenses, and share		_	= : :	ir art iv each anniated	group member s har	ne, address, Liiv,				
. —			nd "limited control" pro	wisions annly						
Limi	ts on Lob	bying Expe			(a) Filing organization's	(b) Affiliated group totals				
					totals					
1a Total lobbying expenditures to influ	ence pub	lic opinion (	grass roots lobbying)							
b Total lobbying expenditures to influence	uence a le	gislative boo	ly (dırect lobbyıng)							
c Total lobbying expenditures (add li	nes 1a an	d 1b)								
d Other exempt purpose expenditure										
e Total exempt purpose expenditure			•							
f Lobbying nontaxable amount. Ente	er the amo	unt from the	following table in bot	h columns						
If the amount on line 1e, column (a) o	r (b) is:	The lob	bying nontaxable am	ount is:						
Not over \$500,000		20% of	the amount on line 1e	<del></del>						
Over \$500,000 but not over \$1,000	0,000	\$100,00	0 plus 15% of the exc	ess over \$500,000						
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exc	0% of the excess over \$1,000,000.						
Over \$1,500,000 but not over \$17,	000,000	\$225,00	0 plus 5% of the exce	ss over \$1,500,000		· .				
Over \$17,000,000			,							
g Grassroots nontaxable amount (er	iter 25% o	f line 1f)			<del></del>					
h Subtract line 1g from line 1a If zer	o or less, e	enter -0-	-		<del></del>	<del> </del>				
i Subtract line 1f from line 1c If zero	or less, e	nter -0-			·	<u> </u>				
j If there is an amount other than ze	ro on eithe	er line 1h or	line 1i, did the organiz	ation file Form 4720						
reporting section 4911 tax for this	year?					Yes No				
•		at made a s	, ,	Section 501(h) n do not have to comp es 2a through 2f on pa						
	Lobi	ying Exper	nditures During 4-Yea	ar Averaging Period						
Calendar year (or fiscal year beginning in)	(a)	2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	(e) Total				
2a Lobbying nontaxable amount										
b Lobbying ceiling amount										
(150% of line 2a, column(e))										
c Total lobbying expenditures										
d Grassroots nontaxable amount										
e Grassroots ceiling amount										
(150% of line 2d, column (e))										
f Crassroots Johnwas synanditures		_								

Schedule C (Form 990 or 990 EZ) 2013 NORTH CAROLINA NURSES ASSOCIATION 56-0341047 Page 3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

(election under section 501(h)).

(a) (b) For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity Yes No **Amount** During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? j Total Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). No Were substantially all (90% or more) dues received nondeductible by members? X 1 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? 3 Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 726,683. Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year 2a 110,318. b Carryover from last year 2b 110,318. 2c 139,060. Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 Taxable amount of lobbying and political expenditures (see instructions) Part IV **Supplemental Information** Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

# **SCHEDULE D**

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

**Employer identification number** 56-0341047

Pai	t I Organizations Maintaining Donor Advised		Accounts Complete 4th -							
rai			Accounts. Complete if the							
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts							
	<u></u>	(a) Donor advised funds	(b) Fullus 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 w	-								
	are the organization's property, subject to the organization's	-	Yes No							
6	Did the organization inform all grantees, donors, and donor ad	<del>-</del>	•							
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose conf								
D.i.	impermissible private benefit?		Yes No							
Pai	tili Conservation Easements. Complete if the org		V, line 7							
1	Purpose(s) of conservation easements held by the organization	<del></del>								
	Preservation of land for public use (e.g., recreation or ed	· —								
	Protection of natural habitat  Preservation of a certified historic structure									
	Preservation of open space									
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form of a	conservation easement on the last							
	day of the tax year.									
			Held at the End of the Tax Year							
a Total number of conservation easements 2a										
b	b Total acreage restricted by conservation easements 2b									
С	c Number of conservation easements on a certified historic structure included in (a)  2c									
d	d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure									
	listed in the National Register									
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax									
	year ▶									
4	Number of states where property subject to conservation eas	sement is located >								
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of								
	violations, and enforcement of the conservation easements it	holds?	└── Yes └── No							
6	Staff and volunteer hours devoted to monitoring, inspecting,	-								
7	Amount of expenses incurred in monitoring, inspecting, and e	enforcing conservation easements during the	year ▶ \$							
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)	(B)(ı)							
	and section 170(h)(4)(B)(ii)?		L Yes L No							
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense stat	ement, and balance sheet, and							
	include, if applicable, the text of the footnote to the organization	ion's financial statements that describes the c	organization's accounting for							
_	conservation easements		<u> </u>							
Pai	t III Organizations Maintaining Collections of		r Similar Assets.							
	Complete if the organization answered "Yes" to Form 9									
1a	If the organization elected, as permitted under SFAS 116 (AS									
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherance of	of public service, provide, in Part XIII,							
	the text of the footnote to its financial statements that describ									
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement and	balance sheet works of art, historical							
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of public s	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		<b>▶</b> \$							
2	If the organization received or held works of art, historical trea	asures, or other similar assets for financial gair	n, provide							
	the following amounts required to be reported under SFAS 11	16 (ASC 958) relating to these items								
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$							
b	Assets included in Form 990, Part X		<b>&gt;</b> \$							

$\overline{}$	A	<u>AROLINA NU</u>							<u>41047</u>	
Pa	rt III   Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures, c	or Othe	<u>er Simil</u>	<u>ar Asse</u>	ts(continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	ds, checl	k any of the	following that	it are a s	ignificant	use of its	collection i	tems
	(check all that apply):									
а	Public exhibition	(	: <u> </u>	Loan or exc	hange progra	ams				
b	Scholarly research	•	e	Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organızatı	on's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	r receive donations	of art, hi	storical trea	sures, or oth	er sımılaı	r assets			
	to be sold to raise funds rather than to be ma								Yes	No_
Pa	rt IV Escrow and Custodial Arran		ete if the	organizatio	n answered	"Yes" to	Form 990	), Part IV, I	line 9, or	
	reported an amount on Form 990, Pa			<del></del>						
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	sets not	ıncluded		_	r
	on Form 990, Part X?								」Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	table						
									Amount	
С	c Beginning balance									
	d Additions during the year									
е	e Distributions during the year  1e									
f										
	a Did the organization include an amount on Form 990, Part X, line 21?									
	b if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII  Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.									
Pai	Endowment Funds. Complete	f the organization ai	nswered	"Yes" to Fo	T	Ĭ				
		(a) Current year	(b) P	rior year	(c) Two year	rs back	(d) Three	years back	(e) Four y	ears back
1a	Beginning of year balance								ļ	
b	Contributions		<b>_</b>							
С	Net investment earnings, gains, and losses		ļ							<del></del>
d	Grants or scholarships						-			
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance				ŀ				<u> </u>	
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as.					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
C	Temporarily restricted endowment	%								
	The percentages in lines 2a, 2b, and 2c should	ıld equal 100%								
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	ind administe	ered for t	he organi	zation	_	
	by:									es No
	(i) unrelated organizations								3a(i)	<del></del>
	(ii) related organizations 3a(ii)									
b	If "Yes" to 3a(II), are the related organizations								3b	
4	4 Describe in Part XIII the intended uses of the organization's endowment funds									
Pai	rt VI Land, Buildings, and Equipm									
	Complete if the organization answere							<u> </u>		
	Description of property	(a) Cost or o			or other	, ,	ccumulate		(d) Book	value
		basis (invest	ment)		(other)	de	preciation			
1a	Land		-		1,000.					,000.
b	Buildings			41	8,676.		<u>320,4</u>	<u>59. _</u>	98	<u>,217.</u>
С	Leasehold improvements									
d	Equipment				4,218.		4,8			<u>,327.</u>
	Other				9,208.		25,2	18.		<u>,990.</u>
<u>Total</u>	I. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	t X, colun	nn (B), line 1	10(c))				<u> 182</u>	<u>,534.</u>

Schedule D (Form 990) 2013

NORTH CAROLINA NURSES ASSOCIATION

56-0341047 Page 3

Schedule D (Form 990) 2013

Schedule D (Form 990) 2013

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Par	NORTH CAROLINA NURSES ASSO			<u> 56-l</u>	
	Reconciliation of Revenue per Audited Financial Statem		Revenue per R	eturn	).
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a	<u> </u>			
1	Total revenue, gains, and other support per audited financial statements			1	1,774,723.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.	1 1	66 111		
a	3	2a	66,111.		
b	Donated services and use of facilities	2b			
C	, , ,	2c	20.206		
d		_2d	28,306.		0.4 417
	Add lines 2a through 2d		-	2e	94,417.
3	Subtract line 2e from line 1			3	1,680,306.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	1.1	2 771		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	3,771.	*	
b	Other (Describe in Part XIII )	4b			2 771
_	Add lines 4a and 4b			4c	3,771.
5 Pai	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  EXII Reconciliation of Expenses per Audited Financial Staten	nonto Witl	h Evnancas nar	5 Dotu	1,684,077.
Fai	· · ·		n Expenses per	Hetu	m.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a			. 1	1 271 410
1	Total expenses and losses per audited financial statements			1	1,371,412.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1.1		7	
a	Donated services and use of facilities	2a			
b		2b			
C		2c	28,306.		
d	Other (Describe in Part XIII )	2d	40,300.		20 206
	Add lines 2a through 2d			2e	28,306. 1,343,106.
3	Subtract line 2e from line 1			3	1,343,100.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.	145	3,771.		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII)	4a	3,111.	, *	
b	Add lines 4a and 4b	_4b			2 771
5				4c	$\frac{3,771}{1,346,877}$
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	1,340,077.
	(in appointment intormation)				
Drow	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a, and 4, Par	t IV lines 1h	and 2h Part V line	1 Dart	V line 2: Part VI
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par			1, Part	X, line 2; Part XI,
	ide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Par 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
				1, Part	X, line 2; Part XI,
				1, Part	X, line 2; Part XI,
				1, Part	X, line 2; Part XI,
ines	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
ines				1, Part	X, line 2; Part XI,
nes	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
nes	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
nes	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
nes	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS			1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad			1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,
PAF	2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any ad  RT XI, LINE 2D - OTHER ADJUSTMENTS:  NTAL EXPENSES NETTED WITH GROSS RENTS  RT XII, LINE 2D - OTHER ADJUSTMENTS:	ditional inforr		1, Part	X, line 2; Part XI,

SCHEDULE (Form 990) Internal Revenue Service

Department of the Treasury

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.

OMB No 1545-0047

Open to Public Inspection

► Attach to Form 990.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization MODEL HAN NITE SES	מיווא איואד זכ	NOTEKTOODK DED	MOTH				Employer identification number
Part I General Information on Grants and Assistance	nd Assistance		NT TOTAL				/#OT#00 00
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	o substantiate th	e amount of the grants	s or assistance, the	grantees' eligibility	y for the grants or ass	istance, and the select	
criteria used to award the grants or assistance?	stance?						X Yes No
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	cedures for mon	toring the use of grant	funds in the Unite	d States			
Part II Grants and Other Assistance to Governments and Organization	Governments an	d Organizations in th	e United States. C	Complete if the orga	anization answered "Y	is in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any	IV, line 21, for any
recipient that received more than \$5,000 Part II can be duplicated it additional space is needed  1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (f) and or government cash grant	(b) EIN	(c) IRC 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
NORTH CAROLINA FOUNDATION FOR NURSING, INC 103 ENTERPRISE CARPET - RALFICH NC 27607	56-1651319	601(0)(3)	27 500	c			FADERSHID ACADEMY
	nd government or	rganizations listed in the	ne line 1 table				
3 Enter total number of other organizations listed in the line 1 table LHA For Paperwork Reduction Act Notice, see the Instructions for Form	s listed in the line	1 table tions for Form 990.					Schedule I (Form 990) (2013)

Schedule I (Form 990) (2013)

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332102 10-29-13

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56-0341047

NORTH CAROLINA NURSES ASSOCIATION

Schedule I (Form 990) (2013)

# 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. ► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No 1545-0047 Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NORTH CAROLINA NURSES ASSOCIATION

**Employer identification number** 56-0341047

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE HEALTH AND WELL-BEING OF ALL PEOPLE.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
REPRESENTS THE NURSING PROFESSION WITH REGARD TO LEGISLATION,
GOVERNMENTAL PROGRAMS AND HEALTH POLICY.
PROMOTE STANDARDS OF NURSING PRACTICE, NURSING EDUCATION, NURSING
SERVICES, AND PROMOTE NURSING WORKPLACE DESIGN THAT ENHANCES SAFE
PRACTICES AND NURSE RETENTION.
FORM 990, PART VI, SECTION A, LINE 4:
EXPLANATION: THE ORGANIZATION'S BYLAWS WERE AMENDED IN 2013 IN ORDER TO
REDEFINE THE REGIONS PRESCRIBED BY THE BOARD OF DIRECTORS AND TO UPDATE THE
ORGANIZATION'S RELATIONSHIP WITH THE AMERICAN NURSES ASSOCIATION AS A
CONSTITUENT MEMBER. A COPY OF THE BYLAWS IN EFFECT AS OF DECEMBER 31, 2013
IS ATTACHED TO THIS RETURN.
FORM 990, PART VI, SECTION A, LINE 6:
EXPLANATION: NORTH CAROLINA NURSES ASSOCIATION IS A PROFESSIONAL MEMBERSHIP
ASSOCIATION WHOSE MEMBERS HAVE THE RIGHT TO VOTE FOR ELECTED OFFICIALS OF
THE ORGANIZATION AND TO SEEK ELECTION OR APPOINTMENTS WITHIN THE
ORGANIZATION.
FORM 990, PART VI, SECTION A, LINE 7A:

Schedule O (Form 990 or 990-EZ) (2013) Page 2 Name of the organization **Employer identification number** NORTH CAROLINA NURSES ASSOCIATION 56-0341047 OFFICIALS OF THE ORGANIZATION, VOTE FOR DELEGATES TO A NATIONAL ASSOCIATION (ANA), SEEK ELECTION OR APPOINTMENTS WITHIN THE ORGANIZATION AND ANA, PARTICIPATE IN STRUCTURAL UNITS OF BOTH THE ORGANIZATION AND ANA, AND ATTEND MEETINGS AND CONVENTIONS OF BOTH THE ORGANIZATION AND ANA. NCNA-ONLY MEMBERS ESSENTIALLY HAVE THE SAME RIGHTS AS FULL MEMBERS EXCEPT THAT THEY ARE PRECLUDED FROM ACTIVITIES/APPOINTMENTS RELATED TO THE NATIONAL ASSOCIATION (ANA). FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: PRIOR TO FILING FORM 990, THE CHIEF EXECUTIVE OFFICER AND TREASURER REVIEW A DRAFT OF FORM 990; FORM 990 IS THEN DISTRIBUTED TO THE BOARD OF DIRECTORS FOR THEIR REVIEW AND APPROVAL. SUCH APPROVAL IS FORMALLY DOCUMENTED IN THE BOARD MEETING MINUTES. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: PERSONS COVERED BY THIS POLICY MUST PROVIDE A FORM TO THE ORGANIZATION PRESIDENT AT LEAST ANNUALLY. IN ADDITION, THE CHIEF EXECUTIVE OFFICER MONITORS PROPOSED OR ONGOING TRANSACTIONS AND DISCLOSES ANY SUCH TRANSACTIONS TO THE ORGANIZATION PRESIDENT. FORM 990, PART VI, SECTION B, LINE 15A: EXPLANATION: PROCESS FOR DETERMINING CHIEF EXECUTIVE OFFICER COMPENSATION INCLUDES REVIEW AND APPROVAL BY THE BOARD OF DIRECTORS, USE OF COMPARABLE COMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS

ARRANGEMENT.

DOCUMENTATION OF THE DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION

AT SIMILAR ORGANIZATIONS, AND THE BOARD OF DIRECTORS MAINTAINS

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization NORTH CAROLINA NURSES ASSOCIATION	Employer identification number 56-0341047
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFL	ICT OF INTEREST
POLICY, AND FINANCIAL STATEMENTS ARE NOT AVAILABLE TO THE	PUBLIC.
	_

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

► Attach to Form 990.

▶Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

NORTH CAROLINA NURSES ASSOCIATION

▶ See separate instructions.

2013

OMB No 1545-0047

Employer identification number

56-0341047

Open to Public Inspection ▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

(g) Section 512(b)(13) controlled Schedule R (Form 990) 2013 ŝ × entity? Direct controlling Yes entity 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 Direct controlling entity End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) SCH A, PART LINE 7 Total income Exempt Code ਉ section 501(C)(3) Legal domicile (state or Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33 Legal domicile (state or foreign country) foreign country) NORTH CAROLINA TO RECEIVE AND ADMINISTER UNDS FOR CHARITABLE AND Primary activity DUCATIONAL PURPOSES Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. NORTH CAROLINA FOUNDATION FOR NURSING, INC. Name, address, and EIN (if applicable) 103 ENTERPRISE STREET Name, address, and EIN of related organization of disregarded entity 27607 - 56-1651319 ž RALEIGH Part Part II

332181 09-12-13 LHA

Page 2 56-0341047 Schedule R (Form 990) 2013 NORTH CAROLINA NURSES ASSOCIATION

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 Part III

	<u>a</u> o l	l		ı		1			ì		
3	General or Percentage managing ownership partner?										
	Own					 					
9	General or managing partner? Yes No		_	 _	 						
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	Code V-UBI amount in box 20 of Schedule 4 K-1 (Form 1065)										
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£	Disproportionate allocations?  Yes No							_			
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(6)	Share of end-of-year assets										
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	Name, address, and EIN of related organization										
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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 Part IV

(1) (1) (13) (13) (13)	Yes No								
Sec 512(t contr	Yes								
Percentage Section Section Section Section Section connecting controlled cont									
(g) Share of end-of-year	assets								
(f) Share of total income									
(e) Type of entity (C corp, S corp,	or trust)								
(d) Direct controlling entity									
(c) Legal domicile (state or	country)								
(b) Primary activity									
(a) Name, address, and EIN of related organization									

Schedule R (Form 990) 2013

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Yes

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# Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36 Part V

ete line 1 if any entity is listed in Parts II, III, or IV of this schedule	he tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
ete line 1 if	he tax yea
ote. Comple	1 During th
Z	_

- a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
- - Gift, grant, or capital contribution to related organization(s)
- Gift, grant, or capital contribution from related organization(s)
  - d Loans or loan guarantees to or for related organization(s)
    - Loans or loan guarantees by related organization(s)
- Dividends from related organization(s)
- Sale of assets to related organization(s)
- Purchase of assets from related organization(s)
  - Exchange of assets with related organization(s)
- Lease of facilities, equipment, or other assets to related organization(s)
- k Lease of facilities, equipment, or other assets from related organization(s)
- 1 Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations by related organization(s)

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- n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- Sharing of paid employees with related organization(s)
- Reimbursement paid to related organization(s) for expenses ۵
- Reimbursement paid by related organization(s) for expenses
- r Other transfer of cash or property to related organization(s)
- s Other transfer of cash or property from related organization(s)
- 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

Z II the answer to any of the above is the instructions for information of who must complete this life, including covered relationships and transaction the should	vilo illust collipiete t	ins in e, including covered	elationships and transaction thresholds
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NORTH CAROLINA FOUNDATION FOR NURSING, INC.	В	27,500.	
(2) NORTH CAROLINA FOUNDATION FOR NURSING, INC	П	50,178.	
(3) NORTH CAROLINA FOUNDATION FOR NURSING, INC.	0	4,958.	
(4)			
(5)			
(9)			
332163 09-12-13	33		Schedule R (Form 990) 2013

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Schedule R (Form 990) 2013

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37

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.

(h) (i) (l) (k)  Dispropoi:  Loade V-UBI General or Percentage allocations?  of Schedule K-1 partner?  Ves No (Form 1065) yes No				
(h) Disproportional amout allocations of Street No.			 	
(g) Share of end-of-year assets				
(f) Share of total income				
(e) Are all partners sec 501(c)(3) 0.0gs ?				
Predominant income parties ser (related, unrelated, excluded from tax under section 512-514) yes No				
(c) Legal domicile (state or foreign country)				
(b) Primary activity				
(a)  Name, address, and EIN  of entity  country)  (b)  (c)  (d)  (related, unrelated, unrelated, unrelated, unrelated, unrelated, excluded from tax country)  under section 512-514)				

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34

Part VII	Supplemental Information   S6-0341047 Page !
	Provide additional information for responses to questions on Schedule R (see instructions)
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# NORTH CAROLINA NURSES ASSOCIATION BYLAWS

Last Revision: October 1, 2013

# ARTICLE I. NAME, PURPOSES, AND FUNCTIONS

# Section 1. Name

The name of this association shall be the North Carolina Nurses Association (NCNA)

# Section 2. Purposes

- a The purposes of the North Carolina Nurses Association shall be to
  - Work for the improvement of health standards and the availability of health care services for all people in North Carolina, and
  - 2 Foster high standards of nursing, and
  - 3. Promote the personal and professional development of nurses and support their economic welfare
- b. These purposes shall be unrestricted by consideration as defined by the ANA bylaws

### Section 3. Functions

The functions of NCNA shall be to:

- a Promote through appropriate means standards of nursing practice, nursing education, and nursing services as defined by the American Nurses Association (ANA)
- b Promote adherence to the code of ethical conduct for practitioners established by ANA
- c. Act and speak for the nursing profession in North Carolina in regard to legislation, governmental programs, and health policy.
- d Support the nurse in personal and professional growth and development in the practice setting to promote positive work-related experiences
- e Promote and protect the economic and general welfare of nurses in North Carolina
- f Provide for the continuing professional development of nurses
- g Represent nurses and serve as their state spokesperson with allied professional, community, and governmental groups and with the public.
- h Assume an active role as consumer advocate.
- i. Provide for representation in the ANA Membership Assembly.
- J Promote relationships and collaboration with the North Carolina Association of Nursing Students
- k. Ensure the collection and preservation of documents and other materials which have contributed and continue to contribute to the historical and cultural development of nursing.

# ARTICLE II. NCNA RELATIONSHIP TO ANA

# Section 1. Membership Responsibilities

The North Carolina Nurses Association is a constituent member of the American Nurses Association.

- a NCNA shall pay dues to ANA in accordance with policies adopted by the ANA Membership Assembly.
- b. NCNA is responsible to ANA for the payment of dues in accordance with the ANA Dues Policy until such time that 2/3 of the entire NCNA/ANA membership vote to disaffiliate from ANA. The NCNA/ANA membership for these purposes is defined as members of NCNA who are also members of ANA.

# Section 2. Representation

# a ANA Membership Assembly

- The NCNA is entitled to representation at regular and special meetings of the ANA Membership Assembly according to the ANA bylaws and policy. The NCNA Ballot will provide that, when elected, the NCNA President and President-Elect will serve as NCNA's official voting representatives to the ANA Membership Assembly.
- Representatives and alternates who are members of NCNA/ANA shall be elected by secret ballot by NCNA/ANA
  members to serve for a term of two years or until a successor is elected. At least one alternate shall also be
  elected

# ARTICLE III. MEMBERSHIP AND DUES

# Section 1. Composition

The NCNA shall be composed of registered nurses who meet the qualifications stated in these bylaws. The membership of the NCNA is unrestricted by consideration as defined by the ANA bylaws.

# Section 2. Qualifications

### a A member is one.

- who has been granted a license to practice as a registered nurse in the State of North Carolina, or is licensed in another state, District of Columbia, or territories of the United States, or has been granted retired nurse status by the licensing body, and who does not have a license under suspension or revocation in any state. NCNA may include in its membership the impaired nurse, in recovery, who has surrendered a license to practice, or
- 2. who is otherwise entitled by law to practice, and
- 3 whose application for membership in NCNA has been accepted, and
- 4. whose dues are current, and
- 5. whose membership is not under revocation, and
- 6 who holds concurrent membership in a region.

# Section 3. Categories of Membership

# a NCNA/ANA Full Membership

An individual nurse who is working full or part-time. The annual dues for an NCNA member shall be established by the NCNA Board of Directors and includes the ANA portion of the dues as established by the ANA Membership Assembly.

# b. NCNA/ANA Reduced Membership

An individual nurse who qualifies for one of the following categories may elect to pay 50% of the established dues:

- 1 Under 62 years of age and not employed.
- 2. Enrolled full-time in an accredited nursing education program.
- 3. New graduate from pre-licensure nursing education program for first two years of membership.
- 4. Retired.

# c. NCNA/ANA Special Membership

An individual nurse who qualifies for one of the following categories may elect to pay 25% of the established dues:

- 1. 62 years of age or over and not employed.
- 2. Totally disabled.

# d. NCANS/NSNA New Graduate

A new graduate who has been a member of NCANS/NSNA during school can join NCNA/ANA for a rate equal to the annual dues paid to NCANS/NSNA and escalating in increments for the next three years

# e NCNA-Only Members

An individual nurse who lives or works in North Carolina may join NCNA at the state level only. The annual dues for an NCNA-Only member shall be established by the NCNA Board of Directors and includes an administrative fee to ANA based on a contract between NCNA and ANA.

# Section 4. Membership Rights

- a NCNA/ANA members have the right to
  - 1 Receive an NCNA membership card and the official publications of the NCNA and ANA
  - 2 Vote for elected officials of NCNA and ANA Membership Assembly representatives.
  - 3 Seek election as a representative to ANA in accordance with ANA bylaws and applicable policies
  - 4 Seek election or appointments within NCNA and ANA in accordance with ANA and NCNA bylaws and applicable policies.
  - 5 Participate in structural units of NCNA and ANA
  - 6 Attend conventions and other unrestricted activities of NCNA, ANA, and meetings of the International Council of Nurses
  - 7 Transfer into the membership of another constituent/state nurses association (C/SNA) for the remainder of a paid membership year, provided that the C/SNA's s membership qualifications are met
- b NCNA-Only members have the right to.
  - 1 Receive an NCNA membership card and the official publications of the NCNA.
  - 2 Vote for elected officials of NCNA
  - 3 Seek election or appointments within NCNA
  - 4 Participate in structural units of NCNA.
  - 5 Attend conventions and other NCNA activities at the member rate
  - 6. Participate in the Member Only section of the NCNA website

# Section 5. Membership Obligations

- a The NCNA/ANA member shall have the obligation to
  - 1. Uphold the bylaws of the NCNA and the bylaws of ANA
  - 2. Abide by the Code of Ethics for Nurses as adopted by the ANA
  - 3 Pay dues as required by the NCNA and ANA
  - 4. Fulfill the requirements of an office or committee if elected or appointed.
- b. The NCNA-Only member shall have the obligation to:
  - 1. Uphold the bylaws of NCNA.
  - 2. Abide by the Code of Ethics for Nurses as adopted by the ANA.
  - 3. Pay dues as required by NCNA.
  - 4 Fulfill the requirements of an NCNA office or committee if elected or appointed

# Section 6. Disciplinary Action

- a. Cause for disciplinary action against a member shall be limited to failure to fulfill the obligations as cited in Article III, Section 5, of these bylaws and other actions detrimental to the purposes, goals, and function of NCNA
- b Disciplinary proceedings shall be conducted in accordance with NCNA policies and procedures established by the Board of Directors which shall have final disciplinary authority over members. Policies and procedures shall guarantee due process pursuant to common parliamentary and statutory law.
- c. Depending on the severity of the disciplinary violation, a member may be-
  - 1. reprimanded
  - 2 censured
  - 3 suspended from membership
  - 4. expelled from membership or
  - 5. removed from elected or appointed office or committee
- d A member may appeal any disciplinary action in accordance with procedures adopted by the NCNA Board of Directors.
- e Any disciplinary action taken by another constituent member association against one of its members shall be given full recognition and enforcement, provided such action was taken in accordance with the disciplining C/SNA's bylaws and disciplinary procedure.

f All members of NCNA/ANA have a right to due process at the ANA level

# Section 7. Dues

- The rate of dues for categories of membership shall be established by the NCNA Board of Directors and may be adjusted by the Board of Directors according to Article III, Section 7b of these bylaws. The annual dues for an NCNA/ANA member shall be set forth in dues policy and shall include the present rate of dues paid by NCNA to the ANA. In the event that the rate of dues payable to the ANA by NCNA is increased in the future, any such change shall be automatically added to the annual dues owed by an NCNA/ANA member to NCNA.
- Dues will be reviewed annually by the Board of Directors of the association and may be adjusted to reflect an increase or decrease at a rate not to exceed twenty (20) percent of the NCNA member dues rate. If the Board of Directors wishes to increase or decrease dues by more than twenty (20) percent of the NCNA member dues rate they must 1) provide at least six (6) months' notice of the change to the membership before it is implemented and 2) the adjustment must receive approval of three-fourths of the current members of the Board of Directors. Members shall be notified in writing of any proposal to change the dues by more than twenty (20) percent of the NCNA member dues rate at least thirty (30) days prior to the meeting at which the proposal is to be voted upon
- The dues for a member of NCNA shall be for a membership year of twelve (12) consecutive months and shall be paid in accordance with current policy
- d Additional dues shall not be required from nor refunded to C/SNA members transferring from another C/SNA, if the member has made full payment of dues
- e No money shall be refunded or additional monies collected when a change in dues category occurs within the membership year.
- f Members in all categories shall retain full membership rights within their category

# ARTICLE IV. ORGANIZATIONAL AFFILIATES

### Section 1. Qualifications

An organizational affiliate of NCNA is an association that

- a Is a nursing organization that meets criteria established by the NCNA Board of Directors, and
- b Has been granted organizational affiliate status by the Board of Directors, and
- c. Has a governing body composed of a majority of registered nurses, which is not meant to preclude the participation of associate nurse organizations, and
- d. Has paid an organizational affiliation fee to NCNA in accordance with policies established by the NCNA Board of Directors.

# Section 2. Organizational Affiliate Obligations

Each organizational affiliate shall maintain a mission and purpose harmonious with the purposes and functions of NCNA

# Section 3. Organizational Affiliate Rights

The organizational affiliate shall have the right to

- a Designate one registered nurse participant in the NCNA Membership Forum.
- b. Make informational reports in their area of expertise to the NCNA Membership Forum.
- c Recommend positions to the NCNA Membership Forum
- d Submit for consideration by the NCNA Board of Directors names of registered nurses who are qualified for appointment to NCNA organizational units
- e Submit educational offerings for the NCNA annual convention

# ARTICLE V. REGIONS AND REGIONAL DIRECTORS

### Section 1. Definition

There shall be eight (8) Regions composed of individual NCNA members living or working within regional boundaries prescribed by the Board of Directors

# Section 2. Boundaries

Boundaries of regions shall be defined by the Board of Directors Boundaries may be changed upon request of the region members and approved by a three-fourths vote of the current members of the Board of Directors

### Section 3. Purpose

The purpose of bringing individual members together in a region is to facilitate communications from and to the Board of Directors and other structural units as needed

### Section 4. Dissolution

A region which fails to comply with the requirements of these bylaws, or with NCNA policies and procedures related to regions, may be dissolved by a three-fourths vote of the current members of the Board of Directors

# Section 5. Reinstatement

A region which has been disqualified may be reinstated upon request by the region members and approved by three-fourths vote of the current members of the Board of Directors

# Section 6. Regional Directors

- a One regional director shall be elected to serve as a member of the Board from each of the regions established by the Board of Directors.
- b Regional directors act as a resource to individual members within their region.
- c Regional directors facilitate communication between and among the Board of Directors and structural units
- d Regional directors serve as chair of Regional Membership Forums

# ARTICLE VI. MEMBERSHIP FORUM

# Section 1. Membership Representation

- a The members shall be directly involved in the Association
- b The Membership Forum shall be the primary engagement vehicle that allows and encourages each member to have a direct voice to the association and its Board of Directors. The Membership Forum consists of all members of the association.
- c Each Member shall be entitled to equal representation and participation at the Membership Forum.
- d The members at any meeting of the Membership Forum, may adopt such rules of procedure for discussion, consensus building and the transaction of business at their meeting as they may deem suitable.

# Section 2. Statewide Membership Forum Meetings

a The Association shall conduct an annual meeting of the membership in the form of a statewide Membership Forum at least once per calendar year at the time of the annual convention at such a time and place, utilizing any available member engagement technology including but not limited to virtual participation, and with such registrations fee as shall be determined by the Board of Directors, except where government regulations or condition incident upon war or natural disaster may render this impossible.

- b The Membership Forum shall include updates and member feedback opportunities on the work of the association. The Forum may also include discussions on important issues relating to the profession and continuing education opportunities for members. Membership Forum discussions shall be considered by the Board of Directors when establishing association policies and positions.
- Notice of the meetings of the Membership Forum shall be distributed to all members of the association at least 30 days prior to the meeting. Such notice of the odd numbered year annual meeting shall be accompanied by a report of the Leadership Development Committee regarding nominations and elections. Notice of a special meeting shall be distributed at least 15 days before the first day of the meeting.
- d The agenda for the annual or special statewide Membership Forum meeting shall be set by the Board of Directors with input from the membership and regions and shall be adopted by a majority of members present at the beginning of the meeting
- e Special meetings of the statewide Membership Forum may be called by the Board of Directors and shall be called by the president, upon the written request of a majority of the regions or upon receipt of a written petition signed by 10% of the members of NCNA on the last annual count and approval of the petition by two-thirds of the members of NCNA voting (voting may occur by electronic ballot).
- The statewide Membership Forum may reverse or modify an action of the Board of Directors at a special or annual meeting if the Board of Directors has received a written petition requesting a vote of the membership regarding such action, signed by at least 25% of the members of NCNA on the last annual count. The vote to reverse or modify such action of the board shall be approved by at least two-thirds of the members of NCNA voting (voting may occur by electronic ballot).

# Section 3. Regional Membership Forum Meetings

- a Regional Membership Forum meetings may be called at any time by the President, a Region or the Board of Directors and may be conducted at any location or by using any available member engagement technology, including but not limited to virtual participation. Membership Forums may be offered in any or all regions to inform the Board of directors and contribute items for the annual meeting agenda. Any association member may attend
- b The agenda for a Regional Membership Forum shall be set by the Regional Director or Board of Directors, depending on who called the meeting, with input from the membership and shall be adopted by a majority of members present at the beginning of the meeting.

# ARTICLE VII. BOARD OF DIRECTORS

# Section 1. Authority

The NCNA Board of Directors is the governing body of the association and shall actively promote the objectives of NCNA, operating in accordance with and administering and implementing the programs and policies established by these bylaws and by the NCNA Board of Directors. Except for three members that may be appointed by the Board, members of the NCNA Board of Directors are elected by the membership as provided in Article VIII and accountable to the members of NCNA.

# Section 2. Composition

There shall be twelve elected board members, which shall consist of the following

- a There shall be three officers president, president elect, and secretary/treasurer
- b There shall be one director for each of the eight regions established by the Board of Directors
- c There shall be one commission chair representing advanced practice nursing.

There may be up to 3 Directors At-Large appointed by the incoming board following the election in consultation with the Leadership Development Committee. The appointed positions may only be used to ensure the board, insofar as possible,

is representative of the diversity within the membership to include the necessary knowledge base to address emerging needs of the association

# Section 3. Eligibility

In order to be eligible to serve on the Board of Directors each person must remain a member in good standing with the association throughout the duration of the member's term of service.

# Section 4. Responsibility

The Board of Directors shall

- a Exercise the corporate responsibility and fiduciary duties of the association consistent with applicable provisions of
- b Establish and provide for implementation of association policies and positions with regular input from the membership.
- c Establish policies and procedures for the transaction of business, coordination of association activities, and operation and maintenance of a state headquarters.
- d Establish financial policies and procedures, adopt budget, submit all books annually to a certified public accountant for audit, and present annual financial statement to the NCNA membership and Membership Forum
- e Grant, suspend or revoke organizational affiliate status in accordance with these bylaws
- f Establish fees for organizational affiliates
- g. Establish policies and procedures for approving publications and other printed materials prior to their distribution.
- h Establish policies and procedures for the collection, analysis, and dissemination of information
- Establish policies and procedures for nominations and elections
- Except as otherwise specified in these bylaws, create and dissolve standing, special and ad hoc committees, commissions, councils, and other entities of the Board as deemed necessary to conduct NCNA's business and define the purpose and authority of such entities
- k Approve the initial appointment of committees and those commission members not elected as provided for in these bylaws and fill vacancies not otherwise provided for in these bylaws.
- Approve council viability criteria, establish and dissolve councils in accordance with these bylaws.
- m Define regional boundaries
- n Confer membership on regions meeting qualifications established in these bylaws
- o Establish a policy for setting fees for conventions and conferences, specified activities, and services
- p. Provide for NCNA liaison or representation at meetings of voluntary organizations and of public or governmental agencies
- q Establish relationships and collaboration with North Carolina Association of Nursing Students
- r Control the use of the official NCNA insignia and the procurement and sale of replicas thereof
- s Report to the membership and report at each meeting of the Membership Forum the business transacted by the Board of Directors during the preceding year.
- t Appoint, define the authority and responsibilities of, and annually review the performance of the chief executive
- u Establish such policies and procedures and perform other duties as may be provided for elsewhere in these bylaws.

# Section 5. Terms of Office

- a. Officers, regional directors and the APRN commission chair shall be elected in odd numbered years by the membership to serve for two years or until their successors are elected, except the president elect, who shall serve two years as president elect, then two years as president. Directors at-large, if appointed, shall serve a term of two years or until the next regular election, whichever occurs first.
- b. No officer, regional director or commission chair shall serve more than two consecutive terms in the same office. An officer or director who has served more than half a term shall be considered to have served a full term.

# Section 6. Vacancies

In the event of a vacancy

a In the office of president, the president-elect shall become president for the remainder of the term. If the president-elect fills the unexpired term of a President during the first year of that term, the position of president-elect is vacated.

If the president-elect fills the unexpired term of a President during the second year of that term, the president-elect shall be eligible to complete that term and continue on to serve the additional two-year planned term as President

- b In the office of president elect during the first year of that term, a special election shall be held in the next even numbered year to fill that office
- c In the office of president elect during the second year of that term, the office shall remain vacant until the next election when a president and president elect will be elected.
- d In the office of another officer, regional director or commission chair, the Board of Directors shall fill the vacancy by appointment until the next election

# Section 7. Duties of Officers

- a. The president shall serve as the official representative of the association and as its spokesperson on matters of association policy and positions, as the chairman of the Membership Forum, the Board of Directors, and the Executive Committee of the Board of Directors, as an ex officio member of all committees except the Nominating Committee, and as an official voting representative to the ANA Membership Assembly if an NCNA/ANA member.
- b The president-elect shall assume such duties as designated by the president and the Board of Directors and, in the absence of the president, shall assume the duties of that office. The president-elect shall serve as an official voting representative to the ANA Membership Assembly if an NCNA/ANA member.
- The secretary/treasurer shall be accountable for oversight of recordkeeping and reporting of meetings of the Membership Forum, the Board of Directors, and the Executive Committee of the Board of Directors. The secretary/treasurer shall also be accountable for oversight of the fiscal affairs of NCNA and shall provide reports and interpretation of NCNA's financial condition to the Board of Directors, the Membership Forum, and the membership. The secretary/treasurer shall be chair of the Finance Committee
- d Members of the Board of Directors shall, upon expiration of their terms, surrender to the chief executive officer all properties in their possession belonging to their respective office
- e Officers and directors shall fulfill the responsibilities of the Board of Directors as defined in these bylaws

# Section 8. Chief Executive Officer

- a The Board of Directors shall delegate to the chief executive officer, the authority to manage the association according to policies established by the Board of Directors
- b The chief executive officer shall be accountable to the Board of Directors
- c The chief executive officer shall employ, direct, promote, and terminate staff of the association.
- d The chief executive officer may represent the association and serve as spokesperson on matters of established policy and positions and shall serve as the official NCNA Chief Staff Officer representative at the ANA Assembly as provided for in the ANA Bylaws and serve on other ANA committees and task forces and attend other ANA meetings as needed

# Section 9. Meetings

- a Meetings of the Board of Directors shall be held at least quarterly. Special meetings of the Board of Directors may be called by the president or shall be called by the president upon written request of not less than five regions or five members of the Board of Directors.
- b Absence from two consecutive regular meetings of Board of Directors may be cause for declaring a vacancy in the position Such vacancy shall be determined by majority of Board of Directors
- A majority of the Board, including the president or the president elect shall constitute a quorum at any meeting of the Board.

# ARTICLE VIII. NOMINATION AND ELECTION OF NCNA OFFICERS AND DIRECTORS

# Section 1. Nominations

- a Candidates for office shall meet established qualifications and shall consent to serve if elected.
- b A member of NCNA who meets the established qualifications for an elective office may declare as a candidate by notifying the Leadership Development Committee in writing.
- c Individual members of NCNA shall be considered eligible for only one elective NCNA Board of Directors position at any one time.

# Section 2. Elections

- Elections shall be held in odd numbered years and shall be by secret ballot according to NCNA policies and procedures. Members may vote by electronic ballot.
- b A plurality vote shall constitute an election. In case of a tie, the choice shall be by lot
- c Terms of office shall begin at the close of the Annual Meeting in odd-numbered years, with the outgoing secretary/treasurer remaining in an advisory capacity until the end of the fiscal year
- d All ballots and other records of the election shall be preserved until the next election

# Section 3. Challenge

Any challenge to the election shall be filed with the secretary/treasurer of NCNA not more than 30 days after the election results are announced

### Section 4. Removal of Elected Officials

Any official elected by the membership or appointed board member may be removed from office whenever such action is deemed to be in the best interest of the association or for other just cause by (1) a vote of three-fourths of the current members of the NCNA Board of Directors, or (2) a written petition signed by 25% of the members of NCNA on the last annual count and approval of the petition by two-thirds of the members of NCNA (voting may occur by electronic ballot), or (3) if no longer a member in good standing of NCNA.

### ARTICLE IX. COMMITTEES

### Section 1. Executive Committee

There shall be an Executive Committee of the Board of Directors composed of the officers. This committee shall have all the powers of the Board of Directors to transact business between meetings in accordance with rules established by the Board of Directors. All transactions of this committee shall be reported at the next regular meeting of the Board of Directors.

# Section 2. Finance Committee

There shall be a Finance Committee consisting of at least three persons including the secretary/treasurer. This committee shall prepare the annual budget, review it periodically, and recommend revisions and advise the Board of Directors as to the expenditure and investment of all funds of the association.

# Section 3. Bylaws Committee

There shall be a Bylaws Committee composed of at least five members. Other than the chair who is elected by the membership in odd numbered years, the committee shall include members appointed by the Board of Directors based on recommendations from the Leadership Development Committee Terms shall be for two years. Members may serve no more than two consecutive terms. This committee shall:

- a. Review and interpret the bylaws of NCNA and recommend corrections or amendments as appropriate.
- b. Draft the proposed text of all amendments to the NCNA bylaws, report its recommendations to the Board of Directors, and provide notice to the NCNA members in accordance with the provisions of Article XV

# Section 4. Leadership Development Committee

There shall be a Leadership Development Committee composed of up to ten members. Other than the chair who is elected by the membership in odd numbered years, the committee shall include the immediate past president of the association and one appointed member selected by each Region. Members of the Leadership Development Committee shall serve for staggered two-year terms. Members may serve no more than two consecutive terms. This committee shall:

a. Request names of NCNA/ANA and NCNA-Only members as candidates for statewide elective offices

- b Prepare a slate of at least two nominees for each statewide elective office and publish such slate in the *Tar Heel Nurse* at least 60 days prior to the election. This slate shall be representative, insofar as possible, of the various geographical areas of the state and of the diversity within the membership.
- c Prepare a separate slate for candidates for ANA positions elected by NCNA to assure that NCNA-Only members do not vote for the ANA candidates
- d Implement the policies and procedures for nominations and elections as established by the Board of Directors
- e Contribute to and expand the leadership development of members by identifying and mentoring emerging leaders, populating a database of interested volunteers, and providing candidates to populate volunteer work groups such as committees and task forces
- f Assume other responsibilities for nominations and leadership development as provided for in these bylaws and in policies and procedures as established and assigned by the Board of Directors

# ARTICLE X. COMMISSIONS

# Section 1. Definition

A commission is an organized deliberative body to which these Bylaws and the NCNA Board of Directors assign specific responsibilities related to fulfilling the functions of NCNA. Commissions allow member experts in identified specialty areas to advise the Board of Directors on national and state trends and issues within their area of expertise.

# Section 2. Accountability

Commissions shall be accountable to the Board of Directors and shall provide reports to and seek input and expertise from the Membership Forum

# Section 3. Designation

Commissions may be established by the NCNA Board of Directors as needs and trends emerge in nursing and within the association

# Section 4. Composition

- a. Each commission shall consist of members who have expertise and/or interest in the field related to the commission's functions and who meet criteria and qualifications approved by the Board of Directors.
- b The APRN Commission chair shall be elected by the NCNA membership and serve on the NCNA Board of Directors. The remaining commission positions shall be appointed by the Board of Directors in accordance with NCNA's policies and procedures

# ARTICLE XI. COUNCILS

# Section 1. Definition

A Council is an organizational unit through which members participate in the improvement or advancement of the profession in an area of nursing practice or interest. Councils are accountable to the Board of Directors and may collaborate with the Membership Forum, Commissions and other structural units as necessary.

# Section 2. Designation

The Board of Directors may establish councils upon the recommendation of no less than five NCNA members

# Section 3. Composition

Each member of NCNA may affiliate with one or more councils upon meeting each council's eligibility requirements.

# Section 4. Dissolution

By a two-thirds vote, the Board of Directors may dissolve a Council

- a If the Board of Directors and the respective council mutually agree that there is no reason for the council's continuance, or
- b If the Board of Directors finds that the council has failed to carry out its responsibilities or conform to the policies and positions of NCNA

### ARTICLE XII. FISCAL YEAR

The fiscal year of the association shall be the calendar year.

### ARTICLE XIII. OFFICIAL ORGAN

The Tar Heel Nurse shall be the official organ of this association

# ARTICLE XIV. PARLIAMENTARY AUTHORITY

The rules contained in the current edition of *Robert's Rules of Order* shall govern meetings of this association in all cases to which they are applicable and in which they are not inconsistent with these bylaws

# ARTICLE XV. AMENDMENTS

# Section 1. Amendments with Notice

These bylaws may be amended by a three-fourths vote of the current members of the Board of Directors or by a two-thirds vote of the NCNA membership present and voting at an Annual Meeting. All proposed amendments shall be referred to the Committee on Bylaws for study and recommendation. All proposed amendments approved by the Committee and reported to the Board of Directors shall be in possession of the secretary/treasurer of this association and communicated to the membership at least 60 days before the date of the meeting of the Board of Directors and shall be appended to the call for the meeting.

# Section 2. Amendments without Notice

These bylaws may be amended without previous notice at any meeting of the statewide Membership Forum by ninety nine percent of those present and voting.

# ARTICLE XVI. DISSOLUTION

Dissolution of the association shall require at least two-thirds of the entire NCNA membership vote in favor of dissolving the association in order to be effective. The vote for dissolution may occur by electronic ballot

Adopted October 25, 1986

Amended October 27, 1989

Amended October 27, 1990

Amended October 26, 1991

Amended October 30, 1992

Amended October 20, 1995

Amended October 16, 1998 Amended October 29, 2000 Amended October 5, 2001 Amended October 16, 2002 Amended October 3, 2003 Amended October 22, 2004 Amended October 14, 2005 Amended October 13, 2006 Amended October 12, 2007 Amended October 3, 2008 Amended October 9, 2009 Amended October 8, 2010 Amended October 14, 2011 Amended October 5, 2012 Amended March 4, 2013 (Special Called Session of the House of Delegates) Amended October 1, 2013