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Form **990** 

Department of the Treasury Internal Revenue Service

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

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

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A F	or the 2	2013 calendar v	ear, or tax year begin	ning 07-01-2013 , 2013, and end	lina 06-30-2014			
	neck if ap	C Name	e of organization			D Employ	er identifi	cation number
	ldress ch	ASSU	CIATION FOR MIDDLE LEVE	L EDUCATION		31-08	65702	
┌ Na	ame char	Doing	Business As			31-00	03702	
	ıtıal retur			.f	I D / t -			
_	erminated	/1E1	EXECUTIVE PARKWAY NO	ıf maıl ıs not delivered to street address) 300	Room/suite	E Telephoi	ne number	
_	nended r		or town state or province	country, and ZIP or foreign postal code		(614)	895-473	0
_			ERVILLE, OH 43081	country, and zir or foreign postar code				
i W	рисации		NI		T		ceipts \$ 3,0	
			Name and address of   _LIAM D WAIDELICH	principal officer		Is this a group subordinates?	return for	┌ Yes <b>┌</b> No
			51 EXECUTIVE PARK					
			STERVILLE,OH 430	01		Are all subordır ıncluded?	nates	┌ Yes ┌ No
T Ta	ax-exem	pt status 🔽 50	01(c)(3)	◀ (insert no )			a lıst (se	e instructions)
	/ obcito	:► WWWAML						
					H(c)	Group exempti	on numbe	er <b>►</b>
			poration Trust Associ	ation Other 🕨	<b>L</b> Year	r of formation 197	'3 <b>M</b> Sta	te of legal domicile OH
Pa	art I	Summary						
				ssion or most significant activities	5			
a.	<u>'</u>	IIDDLE SCHO	OL PROGRAM DEVEL	OPMENT				
ě	-							
Ē	-							
Governance	2 (	heck this box	If the organization	discontinued its operations or di	sposed of more th	nan 25% of its	net asset	S
	3 1	lumber of votin	a members of the gov	erning body (Part VI, line 1a) .		1	з	17
<b>ም</b> ያሳ ለ				rs of the governing body (Part VI			4	17
Ě				ın calendar year 2013 (Part V, lı		· · · · · · · · · · · · · · · · · · ·	5	25
Activities &	6 7	otal number of	volunteers (estimate	ıf necessary)			6	250
4	7a ⊺	otal unrelated	business revenue fror	n Part VIII, column (C), line 12		[	7a	126,424
	ь	let unrelated b	usıness taxable ıncom	e from Form 990-T, line 34 .			7b	-4,767
						Prior Year		Current Year
_	8	Contributions	and grants (Part VIII	, line 1h)		29,6	43	28,923
Revenue	9	Program serv	ice revenue (Part VII)	(, line 2g)		3,149,9	54	2,590,506
9.6	10	Investment II	ncome (Part VIII, colu	ımn (A), lınes 3, 4, and 7d)		79,9	19	20,713
Т	11			A), lines 5, 6d, 8c, 9c, 10c, and 1	•	406,4	08	188,760
	12			11 (must equal Part VIII, columi		3,665,9	24	2,828,902
-	13			art IX, column (A), lines 1–3)		9,0		3,000
	14			rt IX, column (A), line 4)		·	0	0
	15		er compensation, empl					
Expenses		5-10)				1,405,6		1,436,048
₹	16a			IX, column (A), line 11e)			0	0
X	b	_	expenses (Part IX, column	· · · · · · · · · · · · · · · · · · ·				
	17			(), lines 11a-11d, 11f-24e) .		2,650,3	_	2,196,263
	18			must equal Part IX, column (A), li	· · · · · ·	4,065,0		3,635,311
. 02	19	Revenue less	expenses Subtract II	ne 18 from line 12		-399,0		-806,409
ර්ජි ප්රක්ෂ					Begi	inning of Curren Year	it	End of Year
Not Assets or Fund Balances	20	Total assets	(Part X, line 16) .			2,922,0	56	2,126,269
뿧	21					1,146,6	_	1,085,711
žË	22			act line 21 from line 20		1,775,4	01	1,040,558
Pa	rt II	Signature						
my k	knowled		t is true, correct, and o	examined this return, including a complete Declaration of preparer				
		*****				2015-05-14		
		<u> </u>				Date		
Sia	n	Signature of o	officer			Date		
		Signature of o		CTOR		Date		
		Signature of o	officer AIDELICH EXECUTIVE DIRE name and title	CTOR		Date		
Sig Her —	'e	Signature of o	AIDELICH EXECUTIVE DIRE name and title e preparer's name	CTOR  Preparer's signature	Date 2015-05-14	Check If	PTIN P00000633	

Firm's address ► 300 SPRUCE ST SUITE 250

COLUMBUS, OH 43215

May the IRS discuss this return with the preparer shown above? (see instructions)

Preparer

**Use Only** 

Phone no (614) 488-3126

✓ Yes ☐ No

Form	990 (2013)					Page <b>2</b>
Par		<b>nt of Program Serv</b> chedule O contains a res		<b>plishments</b> to any line in this Part II	I	٦
1	Briefly describe t	he organization's missio	n			
					ING THE EDUCATIONAL EXP TO EDUCATORS AND LEADE	
2	Did the organizati	, 5	cant program s	ervices during the year w	which were not listed on	Γ Yes Γ No
	If "Yes," describe	these new services on S	Schedule O			
3	Did the organizati	on cease conducting, or	make sıgnıfıca	nt changes in how it cond	ducts, any program	┌ Yes ┌ No
	If "Yes," describe	these changes on Sche	dule O			
4	expenses Section		4) organization	s are required to report t	e largest program services, as he amount of grants and alloca	
	(Code	) (Expenses \$	1,757,298	ıncludıng grants of \$	) (Revenue \$	1,038,539 )
	ANNUAL CONFEREN	CE - HOLDS ANNUAL CONFERE	ENCE FOR EDUCAT	ORS INVOLVED IN MIDDLE LEV	/EL EDUCATION	·
4b	(Code	) (Expenses \$	618,145	ıncludıng grants of \$	) (Revenue \$	933,555 )
		CRIPTIONS - OFFER ANNUAL N TO MEMBERS AND SUBSCRIBE			CTIVE MEMBERS IN MIDDLE LEVEL EDU	CATION OFFER JOURNALS
4c	(Code	) (Expenses \$	461,582	ıncludıng grants of \$	3,000 ) (Revenue \$	317,705 )
	PROFESSIONAL DEVI	ELOPMENT - PROVIDES WORK	SHOPS, ONSITE C	LASSES, SCHOOLS ASSESSMEN	T TOOLS AND ONLINE RESOURCES RE	Garding Middle Level
	(Code	) (Expenses \$	213,782	including grants of \$	) (Revenue \$	343,524 )
	PUBLICATIONS - OF	FER NUMEROUS PUBLICATION	S RELATING TO M	IDDLE LEVEL EDUCATION		

) (Revenue \$

4d

4e

(Expenses \$

Other program services (Describe in Schedule O )

Total program service expenses ►

213,782 including grants of \$

3,050,807

343,524)

Part IV Checklist of Required Schedule
--

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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 $I^{\bullet}$	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{2}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule $E$	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
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 foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t 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 1? If "Yes," complete Schedule I, Parts I and II	21		No
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		No
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? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	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		No
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 of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Check if Schedule O contains a response or note to any line in this Part V			
	Check in deficience of contents a response of note to any line in this fact v		Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   66			
)	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
2	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
а	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
)	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
				11
)	If "Yes," enter the name of the foreign country  See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			N
		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
3	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).  Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and converse provided to the payor?	7a		N
	services provided to the payor?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	<b>7</b> c		N
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	]		
	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	ļ		
ı	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h	ı İ	

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

Check if Schedule O contains a response or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Se	ection A. Governing Body and Management			
			Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing 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			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	
_	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	H	103	
	more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
		8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		Yes	No
b 11a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b	Yes	No
b 11a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b	Yes	No
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990	10b		No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a	Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b	Yes	No
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?	10b 11a 12a 12b 12c	Yes Yes Yes	No
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13	Yes Yes	No
b 11a b 12a c 13 14 15	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	10b  11a  12a  12b  12c  13  14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization	10b  11a  12a  12b  12c  13  14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10b  11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	10b  11a  12a  12b  12c  13  14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  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	10b  11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b  11a  12a  12b  12c  13  14  15a  15b	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	10b  11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b  11a  12a  12b  12c  13  14  15a  15b  16a	Yes Yes Yes Yes Yes Yes	

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

State the name, physical address, and telephone number of the person who possesses the books and records of the organization

interest policy, and financial statements available to the public during the tax year  $\frac{1}{2}$ 

►ERIN SHABDUE 4151 EXECUTIVE PARKWAY SUITE 300

WESTERVILLE, OH 43081 (614) 895-4730

# <u>Part VII</u> Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) REGGIE JACKSON	2 00	х						0	0	0
TRUSTEE								Ŭ	0	
(2) STEPHANIE STROW	2 00	х						0	0	0
TRUSTEE (3) KATHLEEN MCCAFFREY	2 00	-		<u> </u>						
TRUSTEE	2 00	х						0	0	0
(4) DOYIN COKER-KOLO	2 00	х						0	0	0
TRUSTEE (5) JANET GRIFFITH	2 00									
TRUSTEE	2 00	х						0	0	0
(6) JAMES BARNES	2 00	х						0	0	0
TRUSTEE		^							U	U
(7) STEVE NORLIN-WEAVER	2 00	х						0	0	0
TRUSTEE (8) PAM MILLIKAN	2 00									
TRUSTEE		X						0	0	0
(9) SHELLEY JOAN WEISS	2 00									
TRUSTEE		X						0	0	0
(10) TARIQ AKMAL	2 00	, , ,							0	
TRUSTEE		X						0	0	0
(11) CAROLE CARLSON	2 00	×						0	0	0
TRUSTEE		<u> </u>						Ů	0	0
(12) HOLLY THORNTON	2 00	x						0	0	0
TRUSTEE		<u> </u>						<u> </u>		
(13) CAROL KENDRICK	2 00	x						0	0	0
TRUSTEE (14) KEN LELACUEUR	2.25									
(14) KEN LELACHEUR	2 00	х						0	0	0
TRUSTEE (15) RITA MANTOOTH	3.00									
	2 00	x						0	0	0
TRUSTEE (16) DEREK TULLY	2 00									
	2 00	×						0	0	0
TRUSTEE (17) JEFF LA ROUX	2 00									
PRESIDENT, PAST PRESIDENT		х		х				0	0	0
TRESIDENT, TAST FRESIDENT		<u> </u>								Form <b>990</b> (2013)

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

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar or/ti	checl c, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estima amount of compen from	ated of other sation the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organiz and rel organiza	ated
(18) NANCY POLISENO	2 00	х		х				0	0		0
PAST PRESIDENT (19) ASHLEY SMITH JR	2.00										
	2 00	x		х				o	0		0
PRESIDENT ELECT (20) MIKE MUIR	2 00										
PRESIDENT		Х		х				0	0		0
(21) WILLIAM D WAIDELICH	40 00			,				157.700			22.056
EXECUTIVE DIRECTOR/SECRETA				Х				157,798	0		33,956
1b Sub-Total						<u> </u>					
c Total from continuation sheets to Part	VII, Section A	· ·				►					
d Total (add lines 1b and 1c)						▶		157,798	0		33,956
Total number of individuals (including b \$100,000 of reportable compensation				d al	bove	e) who	rec	eived more than	·		
										Yes	No
3 Did the organization list any <b>former</b> offi on line 1a? <i>If "Yes," complete Schedule 3</i>					iplo: •	yee, o	r hig	jhest compensate	d employee		No
4 For any individual listed on line 1a, is to organization and related organizations individual									om the		No
5 Did any person listed on line 1a receive services rendered to the organization?		•						-		Yes	NO_
Section B. Independent Contracto									+400000		
Complete this table for your five highes compensation from the organization. Re										tax year	
	(A) ousiness address								(B) on of services	(C) Compen	
_											
2 Total number of independent contractors \$100,000 of compensation from the org		not lim	ited t	o th	ose	listed	dab	ove) who received	more than		

Contributions, Giffs, Grants and Other Similar Amounts	1a
Program Service Revenue	2: t c c
	3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
Other Revenue	88 kg 4 kg
	11a

Form 99								Page <b>9</b>
Part V	<u>/++1</u>	Statement o Check if Schedu	<b>f Revenue</b> ule O contains a respon:	se or note to any lu	ne in this Part VIII			
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
α£	1a	Federated camp	paigns 1a					
Grants mounts	ь	Membership du	es <b>1b</b>					
و ق	С	Fundraising eve	ents <b>1c</b>					
Giffs, iilar A	d	Related organiz	ations <b>1d</b>					
s, G	e	Government grants	s (contributions) <b>1e</b>					
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	28,923				
┋╸	g	Noncash contribution 1a-1f \$	ons included in lines					
Con	h	Total. Add lines	s 1 a - 1 f		28,923			
				Business Code				
enci	2a	ANNUAL CONFEREN	NCE	541900	1,093,377	1,093,377		
Program Serwce Revenue	ь	MEMBERSHIP		541900	843,117	843,117		
	С	PROF DEVELOPME	NT	541900	317,255	317,255		
	d	SUBSCRIPTIONS		541800	197,513	90,439	107,074	
	е	PROGRAM SPONSO		541900	139,244	119,894	19,350	
	f	All other progra	ım service revenue					
	g	Total. Add lines	s 2a – 2f		2,590,506			
	3		ome (including dividend ar amounts)		40,248			40,248
	4		tment of tax-exempt bond p					
	5	Royalties		🕨	19,526			19,526
		C	(ı) Real 18,085	(II) Personal				
	6a b	Gross rents Less rental	18,085					
		expenses Rental income	0					
	С	or (loss)	_		0			
	d	Net rental incor	me or (loss)  (i) Securities	► (II) Other	0			
	7a	Gross amount from sales of assets other	(i) Securities	(ii) o thei				
	ь	than inventory Less cost or						
	"	other basis and sales expenses		19,535				
	c	Gain or (loss)		-19,535				
	d	Net gain or (los	s)	· · · · •	-19,535			-19,535
nue	8a	Gross income fi events (not incl \$						
Other Revenue								
jer Ter	ь	Less direct evi	a penses b					
₹	c		loss) from fundraising e	vents 🛌				
	9a		rom gaming activities					
		See Part IV, lin	e 19 a	944				
	ь	Less direct ex	penses <b>b</b>	951				
	С	Net income or (	loss) from gaming activ	ities	-7			-7
	10a	Gross sales of returns and allo	wances .	240.014				
	 	loca	a	349,811				
	С		oods sold . . <b>b</b> [ loss) from sales of inve	180,570	169,241	169,241		
	Ť	Miscellaneous		Business Code	,	-,		
	11a							
	ь							
	С							
	d	All other revenu	L					
	е	Total. Add lines	s 11a-11d	🕨				
	12	Total revenue.	See Instructions	· · · •	2,828,902	2,633,323	126,424	40,232

	,	
Part IX	Statement of Functional Expenses	
Section 50	1(c)(3) and $501(c)(4)$ organizations must complete all columns	All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this	Part IX		<u> </u>	<u></u>
	ot include amounts reported on lines 6b, b, 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	3,000	3,000		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	211,552	169,242	42,310	
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,004,997	820,939	184,058	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	68,821	58,152	10,669	
9	Other employee benefits	56,232	50,591	5,641	
10	Payroll taxes	94,446	77,674	16,772	
11	Fees for services (non-employees)				
а	Management				
ь	Legal	51,966		51,966	
С	Accounting	21,456		21,456	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	8,771		8,771	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	470.007	405.000	17 701	
	Schedule O)	173,987	126,283	47,704	
12	Advertising and promotion	417,047	412,331	4,716	
13	Office expenses	250,338	199,303	51,035	
14	Information technology	56,657	15,556	41,101	
15	Royalties				
16	Occupancy	199,301		199,301	
17	Travel	265,302	189,388	75,914	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	455,220	451,644	3,576	
20	Interest	214		214	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	159,094	13,793	145,301	
23	Insurance	13,691		13,691	
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 O)				
а	EDITORIAL FEES	89,004	89,004		
b	DUES & SUBSCRIPTIONS	26,665	24,117	2,548	
c	BAD DEBT EXPENSE	547		547	
d	ALLOC OF INDIRECT EXP	0	348,888	-348,888	
e	All other expenses	7,003	902	6,101	
25	Total functional expenses. Add lines 1 through 24e	3,635,311	3,050,807	584,504	0
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 ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			_
		eneck if Schedule & Contains a response of note to any line in this Fare X	(A)		(B)
			Beginning of year		End of year
	1	Cash-non-interest-bearing	390,551	1	336,178
	2	Savings and temporary cash investments	167,424	2	32,551
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	158,160	4	149,838
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
ø.	6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			
<u>क</u>				6	
Assets	7	Notes and loans receivable, net		7	
-	8	Inventories for sale or use	109,272	8	39,836
	9	Prepaid expenses and deferred charges	347,821	9	359,792
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 778,473			
	ь	Less accumulated depreciation 10b 669,642	167,581	<b>10</b> c	108,831
	11	Investments—publicly traded securities	1,514,483	11	1,055,318
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets	10,752	14	9,568
	15	Other assets See Part IV, line 11	56,012	15	34,357
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,922,056	16	2,126,269
	17	Accounts payable and accrued expenses	265,064	17	253,748
	18	Grants payable		18	
	19	Deferred revenue	845,591	19	807,963
	20	Tax-exempt bond liabilities		20	
φ.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
æ		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	36,000	23	24,000
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	1 110 055	25	1 005 711
	26	Total liabilities. Add lines 17 through 25	1,146,655	26	1,085,711
φŞ		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
Ĕ	27	Unrestricted net assets	1,775,401	27	1,040,558
<u> </u>	28	Temporarily restricted net assets		28	
or Fund Balance	29	Permanently restricted net assets		29	
두		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and			
<u> </u>		complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net	33	Total net assets or fund balances	1,775,401	33	1,040,558
Z	34	Total liabilities and net assets/fund balances	2,922,056	34	2,126,269
			l		<u> </u>

Par	Reconcilliation 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		2,8	328,902
2	Total expenses (must equal Part IX, column (A), line 25)	2			35,311
3	Revenue less expenses Subtract line 2 from line 1				
	-	3		-8	306,409
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		1,7	75,401
5	Net unrealized gains (losses) on investments	5		· · ·	
6	Donated services and use of facilities	3			18,247
J	Donated services and use of lacinities	6			53,319
7	Investment expenses	7			
8	Prior period adjustments				
		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		1,0	040,558
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	ved o	n		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separ basis, consolidated basis, or both	rate			_
	Separate basis Consolidated basis Both consolidated and separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	t of th	ne <b>2c</b>		No
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule 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?	<b>!</b>	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

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DLN: 93493135054105

**Employer identification number** 

OMB No 1545-0047

Public Charity Status and Public Support

2013

Open to Public Inspection

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
ASSOCIATION FOR MIDDLE LEVEL EDUCATION

31-0865702

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

	rt I			blic Charity Sta						<u>nstructions</u>	
	organı		•	te foundation becaus	•		- '	•	•		
1	<u> </u>		-	on of churches, or as				ection 170(b	o)(1)(A)(i).		
2	<u>_</u>			in <b>section 170(b)(1</b>			· ·				
3	<u> </u>			perative hospital se	-			. , , ,	. , ,		
4	Г	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state									
5	Г				t of a college	or universi	tv owned or o	perated by a	aovernmen	tal unit desc	ribed in
•	•	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)									
6	Γ	A feder	al, state, or	local government or	government	al unit desc	rıbed ın <b>secti</b>	on 170(b)(1	.)(A)(v).		
7	Γ	_		at normally receives		•	support from	a governme	ntal unit or f	rom the gene	eral public
_	_			n 170(b)(1)(A)(vi).							
8	ļ		-	described in <b>section</b>			-	-			
9		_		at normally receives	` '	•			•	•	, ,
				ities related to its ex							
				oss investment inco						tax) from bu	smesses
	_	•	-	janization after June	-			•	•		
LO L1	<u> </u>	_	•	ganized and operated ganized and operated	•		•			-0 -0 - rry - 0 t - t	ha nurnacas ef
.1	' 	one or the box <b>a</b>	more public that descri Type I	ly supported organiz bes the type of supp <b>b</b> Type II <b>c</b>	ations descri porting organi Type II:	ibed in secti ization and d I - Function	ion 509(a)(1) complete line: ally integrate	or section s 11e throu d <b>d</b>	509(a)(2) S gh 11h Type III - No	ee <b>section 5</b> on-functiona	<b>09(a)(3).</b> Check
e	Γ	other tl section	han foundatı 1 509(a)(2)	ox, I certify that the on managers and otl	her than one	or more pub	olicly supporte	ed organızat	ions describ	ed in section	n 509(a)(1) or
f			rganızatıon this box	received a written de	etermination	from the IR	S that it is a <sup>-</sup>	Type I, Type	e II, or Type	III supporti	ng organization,
g				2006, has the organi	ızatıon accep	ted any gift	or contribution	on from any	of the		ı
•		followir	ng persons?	,	·	, 5		,			
				irectly or indirectly o			_	persons des	scribed in (ii)		Yes No
		and (III	) below, the	governing body of th	ie supported	organızatıor	1?			11g	
		` '	•	er of a person descri	` ,					11g	<del></del>
				lled entity of a perso						11g(	(iii)
h		Provide	the following	ng information about	the supporte	ed organızat	ion(s)				
-	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is t	-he	(v) Did you	notify	(vi) Is	the	(vii) A mount of
	suppoi		(, -1.1	organization	organizati		the organiz		organizat		monetary
O	rganiz	ation		(described on	col (i) list		ın col (i) o	•	col (i) org		support
				lines 1 - 9 above	your gove	_	suppor	t?	in the U	S ?	
				or IRC section (see	docume	HL					
				instructions))	<b>V</b>		<del> </del>	NI-	<b>Y</b>	No.	+
					Yes	No	Yes	No	Yes	No	-
											-
				i l		ı	1	ı	1	1	1

Sch	edule A (Form 990 or 990-EZ) 2013						Page <b>2</b>
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV )						
11	<b>Total support</b> (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is t	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5))			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and <b>stop here.</b> The organization qua <b>33</b> 1/3% <b>support test—2012.</b> If the				and line 15 is 33	8 1/3% or more	
	box and <b>stop here.</b> The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	<b>-2013.</b> If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	<b>-2012</b> . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	<b>▶</b> 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		<b>▶</b> □
18	<b>Private foundation.</b> If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) ►	<b>(a)</b> 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	<b>(e)</b> 2013	3	( <b>f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	252,479	26,256	28,132	29,643	2	3,923	365,433
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	5,384,235	4,862,511	3,896,475	3,436,507	2,81	3,893	20,393,621
3	Gross receipts from activities that are not an unrelated trade or business under section 513		2,076	1,457	1,921		944	6,398
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	<b>Total.</b> Add lines 1 through 5	5,636,714	4,890,843	3,926,064	3,468,071	2,84	3,760	20,765,452
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		245	1,793	2,347	:	1,797	6,182
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the							0
_	amount on line 13 for the year Add lines 7a and 7b		245	1,793	2,347		1,797	6,182
8 8	Public support (Subtract line 7c from line 6)		243	1,793	2,347		1,797	20,759,270
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	.	(f) Total
_	in) ► A mounts from line 6	5,636,714	4,890,843	3,926,064	3,468,071	2,84		20,765,452
9 l0a	Gross income from interest,	3,030,714	4,090,043	3,920,004	3,400,071	2,04.	5,700	20,703,432
loa	dividends, payments received on securities loans, rents, royalties and income from similar sources	8,665	19,316	78,880	98,191	77	7,859	282,911
Ь	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
C	Add lines 10a and 10b	8,665	19,316	78,880	98,191	77	7,859	282,911
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	35,032			151,374			186,406
13	Total support. (Add lines 9, 10c,	5,680,411	4,910,159	4,004,944	3,717,636	2,92	1,619	21,234,769
14	11, and 12)  First five years. If the Form 990 is for check this box and stop here	or the organization	on's first, second	thırd, fourth, or f	ifth tax year as a	501(c)(3)	organı	zation,
Se	ction C. Computation of Publ							
15	Public support percentage for 2013			13, column (f))		15		97 760 %
16	Public support percentage from 201	2 Schedule A, Pa	art III, line 15			16		98 080 %
Se	ction D. Computation of Inve							
17	Investment income percentage for 2	<b>2013</b> (line 10c, co	olumn (f) dıvıded l	oy line 13, colum	n (f))	17		1 330 %
18	Investment income percentage from	<b>2012</b> Schedule <i>A</i>	A, Part III, line 1	7		18		1 060 %
19a	33 1/3% support tests—2013. If the more than 33 1/3%, check this box a						, and I	ine 17 is not ▶✓

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test		
Return Reference	Explanation	
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	MISCELLANEOUS - 2009 AMOUNT \$ 35,032 LAWSUIT SETTLEMENT - 2012 AMOUNT \$ 151,374	

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493135054105

## OMB No 1545-0047

Political Campaign and Lobbying Activities **SCHEDULE C** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

organization answered "Ves" to Form 990 Part IV Line 5 (Proxy Tax) or Form 990 F7 Part V Line 35c (Proxy Tax) then

ASS	me of the organization SOCIATION FOR MIDDLE LEVEL EDUCAT	ION		Employer id	entification number
				31-086570	
Par	t I-A Complete if the or	ganization is exempt under	section 501(	c) or is a section 52	27 organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect polıt	tical campaign act	civities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt under	section 501(	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization u	nder section 495!	5	\$
2	Enter the amount of any excise	e tax incurred by organization mana	gers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 47	20 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under	section 501(	c), except section 5	01(c)(3).
1	Enter the amount directly expe	ended by the filing organization for s	ection 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to c	other organization	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	e and on Form 112	.0-POL, line 17b ►	¢
4	Did the filing organization file <b>I</b>	Form 1120-POL for this year?			↑ — Yes  No
5	organization made payments l amount of political contribution	nd employer identification number ( For each organization listed, enter t ns received that were promptly and political action committee (PAC) I	he amount paid fro directly delivered	om the filing organization to a separate political or	's funds Also enter the ganization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's	(e) A mount of political
				funds If none, enter -(	ontributions received and promptly and directly delivered to a separate political organization If none, enter -0-
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,
				funds If none, enter -(	and promptly and directly delivered to a separate political organization. If none,

Sch	nedule C (Form 990 or 990-EZ) 2013					Page <b>2</b>
Pä	art II-A Complete if the organization	is exempt under	section 501(	c)(3) and file	ed Form 5768	
_	under section 501(h)).		Link in Doub TV an	- h - 66:1: - h - d		a adduces FIN
٠.	Check ► If the filing organization belongs to a expenses, and share of excess lobb		iist in Part IV ea	ch amiliated gro	up members nam	e, address, EIN,
3	Check ► ☐ If the filing organization checked bo		l" provisions app	ly		
	Limits on Lobbying E (The term "expenditures" means ar		l <b>.</b> )		(a) Filing organization's totals	( <b>b)</b> Affiliated group totals
La	Total lobbying expenditures to influence public o	pinion (grass roots lob	bying)			
ь	Total lobbying expenditures to influence a legisl	ative body (direct lobby	yıng)			
c	Total lobbying expenditures (add lines 1a and 1	o)		Γ		
d	O ther exempt purpose expenditures			Γ		
e	Total exempt purpose expenditures (add lines 1	c and 1d)		Γ		
f	Lobbying nontaxable amount Enter the amount is columns	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on lir	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	00		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,0	000		
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter 25% of lir	ue 1f)				
h	Subtract line 1g from line 1a If zero or less, ent	er-0-				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -				
j	If there is an amount other than zero on either li section 4911 tax for this year?	ne 1h or line 1ı, did the	organization file	Form 4720 repo	orting	┌ Yes ┌ No
	(Some organizations that made a columns below. See t	he instructions fo	ection do not r lines 2a thro	havè to con ough 2f on p		ne five
	Lobbying Exp	enditures During	4-Year Avera ⊤	ging Period	1	1
	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))

Grassroots lobbying expenditures

Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	NOT				
For o		(;		(b)		
ror e activ	ach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.	Yes	No	/	mour	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?	Yes		╛		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes				
C	Media advertisements?		Νo	ļ		
d	Mailings to members, legislators, or the public?		Νo			
е	Publications, or published or broadcast statements?		Νo			
f	Grants to other organizations for lobbying purposes?		Νo			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo			
i	O ther activities?	Yes			2	29,067
j	Total Add lines 1c through 1i		•		2	29,067
2a	Did the activities in line 1 cause the organization to be not described in section $501(c)(3)$ ?		Νo	_		
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					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5),	or s	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered line 3, is answered "Yes."	'No" C				
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a	Current year	2a				
b	Carryover from last year	2b				
	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
Pa	art IV Supplemental Information					
Pro	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gro rt II-B, line 1 Also, complete this part for any additional information	up list),	Part I	I-A, I	ine 2,	and

Return Reference	Explanation
PART II-B, LINE 1	CONSULTING, TRAVEL, PRINTING AND POSTAGE FEES TO INFLUENCE NATIONAL, STATE OR LOCAL LEGISLATION

		1 age <del>1</del>
Part IV Supplemental Information	on (continued)	
Return Reference	Explanation	
l		

Schedule D (Form 990) 2013

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DLN: 93493135054105

OMB No 1545-0047

**SCHEDULE D** 

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public

	ne of the organization OCIATION FOR MIDDLE LEVEL EDUCATION			ologer identification number
Pa	rt I Organizations Maintaining Donor Adv	vised Funds or Other Similar F		0865702 <b>or Accounts.</b> Complete if the
	organization answered "Yes" to Form 990	, Part IV, line 6.		
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		nor advi	rsed <b>Yes No</b>
	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit?			
al	t III Conservation Easements. Complete if	the organization answered "Yes"	to Forn	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of a Preservation of a	certifie	d historic structure
	easement on the last day of the tax year			Held at the End of the Year
	Total number of conservation easements		2a	Held at the Elid of the Year
,	Total acreage restricted by conservation easements		2b	
	Number of conservation easements on a certified histo	oric structure included in (a)	2c	
	Number of conservation easements included in (c) acq historic structure listed in the National Register	, ,	2d	
	Number of conservation easements modified, transferrenthe tax year ▶	ed, released, extinguisned, or terminat	ea by tr	ne organization during
	Number of states where property subject to conservat	ion easement is located ►		
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, har	ndling of	violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation ease	ments o	luring the year
	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	ts durin	g the year
	Does each conservation easement reported on line 2(or and section $170(h)(4)(B)(II)$ ?	d) above satisfy the requirements of se	ction 17	70(h)(4)(B)(ι)
	In Part XIII, describe how the organization reports conbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easeme	e footnote to the organization's financia		
li	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ts held for public exhibition, education,	, or rese	arch in furtherance of public
	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide the following amounts relating to thes	ts held for public exhibition, education,		
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$
	(ii) Assets included in Form 990, Part X			<b>►</b> \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS			'
	Revenues included in Form 990, Part VIII, line 1			<b>▶</b> \$
	Assets included in Form 990, Part X			► \$
)	A 33CC3 MCIUGEU III I OIIII 530, Fait A			F ⊅

Part	<b>TIT</b> Organizations Maintaining Col	lections of Art,	, Hist	tori	cal T	<u>reasu</u>	res, or C	)the	<u>r Similar A</u>	sse	ts (co	ntınued)
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	ds, ch	eck	any of	the follo	owing that	are a	significant us	se of	ıts	
а	Public exhibition		d	Γ	Loan	or exch	nange prog	rams				
b	Scholarly research		e	$\sqcap$	Othe	r						
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIII	llections and explai	n how	v the	y furth	er the o	rganızatıo	n's ex	cempt purpose	e in		
5	During the year, did the organization solicit o assets to be sold to raise funds rather than t	be maintained as	part o	fthe	organ	ızatıon':	s collectio	n?		Γ,		┌ No
Par	Escrow and Custodial Arrange Part IV, line 9, or reported an am						n answere	ed "Y	es" to Form	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	an or other interme	dıary	for c	ontribi	utions o	or other as:	setsı	not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	follow	ıng t	able							
							-		Α	mou	nt	
С	Beginning balance							1c				
d	Additions during the year							1d				
е	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?							Γ,	Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	natı	on has	been p	rovided in	Part	XIII			Γ
Pai	rt V Endowment Funds. Complete											
4_	Daniman of warmhalana	(a)Current year	(b)	Prior	year	<b>b (c)</b> Tv	vo years bac	k (d)	Three years back	( (e)	Four ye	ars back
1a 	Beginning of year balance							+				
b	Contributions							+		+		
С	Net investment earnings, gains, and losses											
d	Grants or scholarships											
e	Other expenditures for facilities											
e	and programs							+				
' a	End of year balance							+				
g	·		- //	. 1	1	(- )) !						
2	Provide the estimated percentage of the curr	ent year end balanc	e (IIn	еід	, colun	ın (a)) r	ieia as					
a	Board designated or quasi-endowment 🕨											
b	Permanent endowment ►											
С	Temporarily restricted endowment	11000										
_	The percentages in lines 2a, 2b, and 2c shou	•										
3a	Are there endowment funds not in the posses organization by	sion of the organiza	ition t	nat	are nei	a ana a	aministere	a for	tne	[	Yes	No
	(i) unrelated organizations								3	a(i)		
	(ii) related organizations								3	a(ii)		
b	If "Yes" to 3a(II), are the related organization	•						•		3b		
4	Describe in Part XIII the intended uses of th						1.157				T	
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		ne or	rgar	iizatio	n answ	verea Ye	s' to	Form 990, I	art .	ıv, iir	ie
	Description of property				) Cost o sıs (ınve	or other stment)	(b)Cost or basis (otl		(c) Accumula depreciation		( <b>d</b> ) Bo	ok value
1a	Land											
b I	Buildings											
	Leasehold improvements		•				2	8,586	28	,515		71
	Equipment		•				60	5,561	496	,961		108,600
	Other			1			I 14	4,326	144	,166		160
	I. Add lines 1a through 1e <i>(Column (d) must e</i> d						1			<del>`                                    </del>		108,831

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>F</b>	
Part VIII Investments—Program Related. C	omplete if the organizati	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	<b>F</b>	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
		<u> </u>
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the property of the	anization answered 'Yes'	' to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
		7
		4
		7
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )		†
Total. (Column (b) mast equal rollin 990, Fart A, Col (b) line 25 7		-

Part		evenue per Audited Financial State vered 'Yes' to Form 990, Part IV, line 13		nts With Revenue p	er Re	eturn Complete If
1	_	r support per audited financial statements			1	3,099,123
2	· -	t not on Form 990, Part VIII, line 12			_	- 1 1
a		ments	2a	18,247		
b		acilities	2b	53,319		
С	Recoveries of prior year grants	,	2c	·		
d			2d	198,655		
e	Add lines 2a through 2d .				2e	270,221
3	Subtract line <b>2e</b> from line <b>1</b> .				3	2,828,902
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>				<u> </u>
a	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
c	Add lines 4a and 4b				4c	0
5	Total revenue Add lines 3 and	<b>4c.</b> (This must equal Form 990, Part I, line	12)		5	2,828,902
Part 2		xpenses per Audited Financial Sta			per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line				_
		audited financial statements	•		1	3,833,966
		t not on Form 990, Part IX, line 25		1		
		icilities	2a			
b			2b			
С	Other losses		2c	+		
	•		2d	198,655		
	Add lines <b>2a</b> through <b>2d</b>				2e	198,655
	Subtract line <b>2e</b> from line <b>1</b> .				3	3,635,311
		O, Part IX, line 25, but not on line 1:		1		
		uded on Form 990, Part VIII, line 7b	4a			
	·		4b			
					4c	0
		nd <b>4c.</b> (This must equal Form 990, Part I, line	18)		5	3,635,311
Provid	, line 4, Part X, line 2, Part XI,	Ormation  Part II, lines 3, 5, and 9, Part III, lines 1a a lines 2d and 4b, and Part XII, lines 2d and 4		•		de any additional
	Return Reference	Explanation				
PART X	C, LINE 2	THE ASSOCIATION IS EXEMPT FROM FE 501(C)(3) OF THE INTERNAL REVENUE OF INCOME, IF ANY, ARE PROVIDED AT TH REPORTING PURPOSES NO TAX ON UN FISCAL YEARS ENDING JUNE 30, 2014 AND UNCERTAINTY IN INCOME TAXES USIN ACCOUNTING STANDARDS BOARD (FAST 740, INCOME TAXES USING THAT GUID RECOGNIZED IN THE FINANCIAL STATE POSITIONS WILL BE SUSTAINED UPON JUNE 30, 2014, THE ASSOCIATION HAD EITHER RECOGNITION OR DISCLOSURE ASSOCIATION'S INCOME TAX FILINGS AUTHORITIES THE OPEN AUDIT PERIOTHROUGH THE CURRENT 2014 TAX YEAR ACTIVITIES, MANAGEMENT BELIEVES IN BASED ON CURRENT FACTS AND CIRCUTO INCLUDE IN OPERATING EXPENSE, ITAXING AUTHORITIES INCLUDED IN OPERATIN AND 2013	CODE E API RELA (ND 2 G TH (B) A( D) ANC E IN T ARE DS A R IN TS P MST PENA PENA	E INCOME TAXES ON UPLICABLE RATES ON INTED BUSINESS INCOMED 13 THE ASSOCIATIONS OF THE COUNTING STANDAR E, TAX POSITIONS INTED BY THE TAX POSITIONS INTED BY THE TAX POSITIONS INTED BY THE FINANCIAL STATE SUBJECT TO AUDIT BY RE FOR THE FISCAL YER EVALUATING INCOMED SITION OF TAX-EXENTANCES IT IS THE POLITIES AND INTEREST LITIES OR INTEREST	INRELANCOM E WAS ON AC E FINA LOS CC ITIALL LIKEL MENT VARI EARS E TAX MPT ST ICY OF ASSES ROM T	ATED BUSINESSES E FOR FINANCIAL SINCURRED IN COUNTS FOR NCIAL DDIFICATION (ASC) LY NEED TO BE Y-THAN-NOT THE HORITIES AS OF STHAT REQUIRE S THE OUS TAXING ENDED IN 2011 EXEMPT TATUS IS CURRENT F THE ASSOCIATION ESED BY INCOME
ADJUS	(I, LINE 2D - OTHER TMENTS	COSTS OF GOODS SOLD 180,570 RENT		,		
	(II, LINE 2D - OTHER TMENTS	COST OF GOODS SOLD 180,570 RENTA	LEXI	YENSE 18,085		

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

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DLN: 93493135054105

OMB No 1545-0047

**Compensation Information** 

**Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

For certain Officers, Directors, Trustees, Key Employees, and Highest

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Schedule J (Form 990)

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

Name of the organization **Employer identification number** ASSOCIATION FOR MIDDLE LEVEL EDUCATION 31-0865702

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

### Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990

Schedule J (Form 990) 2013

### Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information

Return Reference	Explanation
COMPENSATION	EDUCATIONAL SERVICE CENTER OF CENTRAL OHIO (AN UNRELATED ORGANIZATION) WHICH PAID COMPENSATION OF \$117,413, PENSION CONTRIBUTIONS OF \$15,562, AND NONTAXABLE BENEFITS OF \$10,511 TO AMLE'S EXECUTIVE DIRECTOR, WILLIAM D WAIDELICH

Schedule J (Form 990) 2013

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**SCHEDULE 0** 

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493135054105

OMB No 1545-0047

2013

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# Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

Attach to Form 990 or 990-EA

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
ASSOCIATION FOR MIDDLE LEVEL EDUCATION

Employer identification number

31-0865702

### 990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	THE ASSOCIATION'S MEMBERS CONSISTS OF MIDDLE SCHOOL PROFESSIONALS
FORM 990, PART VI, SECTION A, LINE 7A	THE MEMBERS OF THE ASSOCIATION VOTE ON THE VOTING BOARD OF TRUSTEES
FORM 990, PART VI, SECTION B, LINE 11	PRIOR TO THE FORM 990 BEING FILED WITH THE IRS, THE EXECUTIVE DIRECTOR/SECRETARY AND THE D IRECTOR OF FINANCIAL SERVICES REVIEW THE TAX RETURN IN ITS ENTIRETY ALTHOUGH NOT REVIEWED IN DETAIL BEFORE FILING, A COPY OF THE FORM 990 IS PROVIDED VIA E-MAIL TO ALL BOARD MEMBE RS BEFORE FILING
FORM 990, PART VI, SECTION B, LINE 12C	OFFICERS AND KEY EMPLOYEES OF THE ASSOCIATION ARE REQUIRED ANNUALLY TO COMPLETE A CONFLICT OF INTEREST FORM THESE FORMS AND ANY CONFLICTS ARE REVIEWED DURING BOARD MEETINGS
FORM 990, PART VI, SECTION B, LINE 15	THE BOARD REVIEWS AND EVALUATES THE EXECUTIVE DIRECTOR'S COMPENSATION ANNUALLY BY ANALYZIN G GOALS SET FOR THE EXECUTIVE DIRECTOR AND COMPENSATION REPORTED ON FORM 990 OF OTHER SIMI LAR ORGANIZATIONS THE EXECUTIVE DIRECTOR THEN REVIEWS THE COMPENSATION FOR ALL EMPLOYEES
FORM 990, PART VI, SECTION C, LINE 19	THE ASSOCIATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE UPON REQUEST