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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

		2013 call applicable	C Name of organization	07-01-2013 , 2013, and ending 06-	-30-2014	D Emplo	yer ider	ntification number				
_		hange	MICHIGAN ASSOCIATION OF SCHOOL	DUAKUS		38-13	323441	L				
Г№	me cha	ange	Doing Business As									
┌ Ind	tıal retu	um		ıl ıs not delivered to street address) Room/	suite	E Telepho	one num	ber				
Г Те	rmınate	ed	1001 CENTENNIAL WAY NO 400			· ·	(517) 327-5900					
☐ Am	ended	return	City or town, state or province, count LANSING, MI 489179279	(517)	327-3	300						
Г Ар	plicatio	n pending	DANSING, MI 409179279			<b>G</b> Gross r	eceıpts \$	4,106,120				
			F Name and address of princ	ipal officer	H(a)	Is this a group	return					
			KATHLEEN HAYES 1001 CENTENNIAL WAY NO	400		subordinates?		Γ Yes <b>Γ</b> No				
			LANSING,MI 489179279		Н(b)	Are all subordi	nates	┌ Yes ┌ No				
	V-AVA	mpt status	F01(a)(2)	sert no )	$\dashv$	included?	a list	(coo instructions)				
				sert no )   4947(a)(1) or   527	-			(see instructions)				
J W	ebsit	e: F WW	/W MASB ORG		H(c)	Group exempt	ion nur	nber 🟲				
		_	Corporation Trust Association	Other ►	<b>L</b> Yea	er of formation 19	49 <b>M</b>	State of legal domicile MI				
Pa	rt I		mary									
			escribe the organization's missior	n or most significant activities DR BOARDS OF EDUCATION, STU	DENTS &	PUBLIC EDUC	ΔΤΙΟΙ	N IN MICHIGAN				
aı		LLADLK	SHIP JADVOCACT SERVICES TO	OR BOARDS OF EDUCATION, STO	DLINIS	FOBLIC LDOC	.A 1101	N IN MICHIGAN				
<u>త</u>												
ऌ												
틌	١,	C h = = 1. +1	h <b>h.</b>									
Š		Check ti	is box   If the organization dis-	continued its operations or disposed	i oi more i	man 25% or its	necas	sets				
Activities & Governance	3	Number	of voting members of the governir	ng body (Part VI, line 1a)			з	19				
<u> </u>	4	Number	of independent voting members of	fthe governing body (Part VI, line 1	b)		4	19				
星	5	Total nu	mber of individuals employed in c	alendar year 2013 (Part V, line 2a)			5	41				
ş	6	Total nu	mber of volunteers (estimate if ne	cessary)			6	90				
	1			rt VIII, column (C), line 12			7a	21,540				
	Ь	Net unre	lated business taxable income fro	om Form 990-T, line 34	<u></u>		7b	7,572				
	١.					Prior Year		Current Year				
<u>o</u>	8		butions and grants (Part VIII, lin		•	15,0		15,000				
Ravenue	9		am service revenue (Part VIII, lin	3,757,2		3,637,530						
Ž	10 11		tment income (Part VIII, column revenue (Part VIII, column (A), l	25,: 407,:		34,321 411,586						
	12		revenue—add lines 8 through 11 (	407,.	130	411,300						
						4,204,	754	4,098,437				
	13			X, column (A), lines 1-3)		88,	190	88,260				
	14			, column (A), line 4)			0	0				
s?	15	Saları 5–10)	es, other compensation, employee		2,268,3	380	2,169,255					
¥.	16a	•		column (A), line 11e)			0	0				
Expenses	Ь		ndraising expenses (Part IX, column (D),	-								
Ш	17		- ' ' '	nes 11a-11d, 11f-24e)	. —	1,806,8	329	1,708,347				
	18			t equal Part IX, column (A), line 25)		4,163,		3,965,862				
	19	Reven	ue less expenses Subtract line 1	8 from line 12		41,	355	132,575				
<u>४</u>					Beg	inning of Curre	nt	End of Year				
Not Assets or Fund Balances	20	T . /	(Doub V. lone 4.5)		<u> </u>	Year	-0.6					
Ass JBs	20		assets (Part X, line 16)		<u> </u>	5,823,		6,140,516				
855 255	21 22					935,9		951,426 5,189,090				
			ature Block			4,007,0	740	3,109,090				
		_		mined this return, including accompa	anvina sch	andulae and eta	tement	ts and to the hest of				
				plete Declaration of preparer (other								
prepa	arer h	as any ki	nowledge									
		Ti										
		**** Signa	** ature of officer			2014-11-11 Date						
Sigr Her		[ ]				Date						
1161	G		ATHLEEN HAYES EXECUTIVE DIRECTOR  ype or print name and title									
			Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN					
Paid	d	E	DWARD L WILLIAMS III CPA	· · · ·		self-employed	P00010					
	a pare		rim's name F MANER COSTERISAN PC			Firm's EIN 🕨 38	8-215764	<del>1</del> 2				
Use	•		rm's address ► 2425 E GRAND RIVER SU	JITE 1		Phone no (517	one no (517) 323-7500					

LANSING, MI 489123291

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

✓ Yes ☐ No

Par			ce Accomplishme onse or note to any line				·
1	Briefly describe the o	rganızatıon's mıssıon					
STU HELI IMPI SCR RELA	ROVIDE QUALITY ED DENT ACHIEVEMENT P SCHOOL BOARD ME LEMENT EMPLOYEE CO EENING AND EMPLOY ATIONS, POLICY, AND IR OBLIGATIONS	AND PUBLIC EDUCA MBERS MEET THEIR ONTRACT EVALUAT ING COMPETENT SO	ATION TO SUPPORT STATUTORY OBLIGA ION AND NEGOTIATI CHOOL ADMINISTRAT	EDUCATIONAL PR TIONS, IMPROVE ON SERVICES, AS TORS, ASSIST LOC	OGRAMS AND RESO EDUCATIONAL PR SSIST LOCAL BOAR CAL BOARDS WITH	OURCES DESIO OGRAMS, DEV RDS IN LOCATI THEIR GOVER	GNED TO /ELOP AND ING, RNMENT
2		990-EZ?	ant program services du		were not listed on	Г Үе	es 🔽 No
3			nake significant change	s in how it conducts	, any program	Г Үе	es 🗸 No
	If "Yes," describe the	se changes on Sched	ule O				
4	expenses Section 50	1(c)(3) and 501(c)(4	e accomplishments for ) organizations are requ each program service r	ured to report the a			
4a	(Code	) (Expenses \$	1,216,394 including	grants of \$	) (Revenue \$	1,245,	863 )
	MICHIGAN THIS INCLUDE NECESSARY TO FULFILL T	ES SERVICES SUCH AS SUI	T ENHANCE LEADERSHIP SKI PERINTENDENT SEARCH, WC ROLE OF ELECTED SCHOOL E DN SERVED 600	RKSHOPS, CONFERENC	ES AND SEMINARS THAT	PROVIDE ACCESS	TO INFORMATION
4b	(Code	) (Expenses \$	589,734 including	grants of \$	) (Revenue \$	895,	474 )
	LEGAL AND POLICY SERVI LEGAL BRIEFS, INFORMAT	CES INCLUDES LEGAL STATION, PUBLICATIONS AND LES SERVICES TO RESEARCE	AFF RESEARCH RELATED TO POLICY AND BYLAW SERVICE CH, DEVELOP AND IMPLEMEN	ISSUES FACING SCHOO S FOR MEMBER BOARDS	BOARD MEMBERS AND F	PUBLIC EDUCATION	N, RESULTING IN
4c	(Code	) (Expenses \$	488,343 including	grants of \$	) (Revenue \$	71,	436 )
	FEDERAL LEVEL AND REPR	RESENTING SCHOOL BOAR	ROGRAMS THAT PRIMARILY ( D VIEWS BEFORE LEGISLATIN JBLIC EDUCATION BOARDS (	/E AND ADMINISTRATIVE	GOVERNMENT, AS WELL		
	(Code	) (Expenses \$	450,615 including	grants of \$	88,260 ) (Revenue \$	129	),559 )
			ITIES THAT SUPPORT COMM MEDIA RELATIONS ACTIVITIE				
	(Code	) (Expenses \$	357,049 including	grants of \$	) (Revenue \$		0)
			E GOVERNING ACTIVITIES OF OUS MEMBERSHIP COMMITT				
	(Code	) (Expenses \$	110,724 including	grants of \$	) (Revenue \$	1,126,	811 )
	•		ARIETY OF PROGRAMS, GRA	,	, ,		•
	(Code LEGAL TRUST FUND ASS: 600	) (Expenses \$ ISTS LOCAL SCHOOL BOAR	20,716 including DS IN SCHOOL DISTRICT LIT	grants of \$ IGATION CASES THAT H	) (Revenue \$ AVE STATEWIDE IMPACT	,	966 ) CATION SERVED
4d	Other program service (Expenses \$	ces (Describe in Sche 939,104 inc	edule O ) luding grants of \$	88,260)	(Revenue \$	1,448,336	)

3,233,575

Total program service expenses ►

Part IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	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	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? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	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 $\sqrt{2}$	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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI 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? If "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? 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? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more 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	Yes	
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? If "Yes," complete Schedule J	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? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? 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
С	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? If "Yes," complete Schedule N, Part II	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? If "Yes," complete Schedule R, Part 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	Yes	<u> </u>
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	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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?	38	Yes	

αГ	Statements Regarding Other 1RS Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   42		1 63	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
3	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	4a	100	N
	account)?			IV
)	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			
	See instructions for ining requirements for Form FB F 50 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		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit 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 services provided to the payor?	7a		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			N
	file Form 8282?	7c		IN
	The rest, indicate the number of Forms 8282 med during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	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	7h		
	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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.	<u> </u>		
	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			
ı	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?	12-		
	Note. 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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 7.20 to report these payments? If "No " provide an explanation in Schedule O	14h		

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 of	r note to any	line in this Part VI							.マ

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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		Νo
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?.	3		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, stockholders, or other persons who had the power to elect or appoint one or			
	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	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	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	eveni	ıe Cod	e.)
Se		evenu	<i>je Cod</i> <b>Yes</b>	e.) <b>No</b>
		evenu 10a		
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R			No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15	Did the organization have local chapters, branches, or affiliates?  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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?  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 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	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed►MI
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►NANETTE PEARSON 1001 CENTENNIAL WAY SUITE 400 LANSING, MI 489179279 (517) 327-5901

## Part VII 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

<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 an 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) MICHAEL J ROCHHOLZ	5 00	х						0	0	0
DIRECTOR (5/16/14-6/30/14)		^_						O	0	0
(2) MATTHEW R SHOWALTER	5 00	х						0	0	0
DIRECTOR (3/1/14-6/30/14)				_	<u> </u>					
(3) PETER SPADAFORE DIRECTOR (3/14/14-6/30/14)	5 00	х						0	0	0
(4) BURL GHASTIN DEC'D JAN 2014	5 00									
DIRECTOR		х						0	0	0
(5) BRENDA J CARTER	5 00									
		x						0	0	0
DIRECTOR (6) FRANK L REID	5 00									
	3 00	х						0	0	0
DIRECTOR (7/1/13-3/1/14) (7) BRAD BALTENSPERGER	5 00									
	3 00	х						0	0	0
DIRECTOR (8) JANICE HOLZ	5 00									
	3 00	х						0	0	0
DIRECTOR (9) TIM DETWILER	5 00									
	3 00	х						2,938	0	0
DIRECTOR (10) LILLIAN FIELDS	5 00									
	3 00	х						0	0	0
DIRECTOR (11) JONATHAN C KINLOCH	5 00				_					
	3 00	x						О	0	0
DIRECTOR (3/1/14-6/30/14) (12) MARY P JASON	5 00				_					
	3 00	х						0	0	0
DIRECTOR (13) GREGORY A PEOPLES	5 00			$\vdash$	$\vdash$		$\vdash$			
	3 00	x						0	0	0
DIRECTOR (14) PAULA SAARI	F 00			_	$\vdash$	-				
	5 00	x						0	0	0
DIRECTOR (15) MARK MCKULSKY	F 00				_	-				
	5 00	x						0	0	0
DIRECTOR (16) RENNY R RANSBOTTOM	F 00			_	$\vdash$	<u> </u>	$\vdash$			
	5 00	×						О	0	0
DIRECTOR  (17) CINDY A CANGEN										
(17) CINDY A GANSEN	5 00	I		l	1	1				_
		Х		l				1,800	0	0

Part VII 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	note booth	check, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	Estim amount comper from	nated of other nsation the
	for related organizations below dotted line)	Individual trustée or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organi and re organiz	lated
(18) LAMAR LEMMONS	5 00	Х						0	(		0
DIRECTOR (7/1/13-3/1/14) (19) BARBARA RUSSELL	5 00										
DIRECTOR (7/1/13-3/1/14)		X						0	(		0
(20) RUTH A COPPENS	10 00	x		x				0	(		0
PRESIDENT				Ĺ							
(21) DONALD R HUBLER	10 00	x		x				О	C		0
PRESIDENT-ELECT (22) DARRYLE J BUCHANAN	10 00	1									
VICE PRESIDENT		X		X				0	C		0
(23) STEVE ZINGER	10 00	х		х				0	(		0
PAST PRESIDENT	50.00	<u> </u>						,			
(24) KATHLEEN HAYES EXECUTIVE DIRECTOR	50 00			х				161,564	C		46,428
(25) NANETTE PEARSON	50 00										
CFO				Х				103,033	(	"	23,680
(26) BRAD BANASIK	50 00					x		103,564			23,004
LEGAL COUNSEL (27) DONALD P WOTRUBA	50 00	1									
DEPUTY DIRECTOR	30 00					х		110,145	C		35,244
1b Sub-Total						<u> </u>					
c Total from continuation sheets to Part	VII, Section A					▶					
d Total (add lines 1b and 1c)						<b>*</b>		483,044	0		128,356
Total number of individuals (including b \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more than			
										Yes	No
3 Did the organization list any <b>former</b> offi							r hıç	jhest compensate	d employee	'	
on line 1a? If "Yes," complete Schedule 3	for such individ	lual .	•	٠	٠				з		No
For any individual listed on line 1a, is to organization and related organizations.									om the		
individual	greater than \$1	• •	• •	•	•	•	•	· · · · ·	4	Yes	
5 Did any person listed on line 1a received services rendered to the organization?									ndividual for		No
Section B. Independent Contractor  Complete this table for your five highes	t compensated										
compensation from the organization Re	(A)	CIOII 101	ше	care	iiud	year	enc		(B)	(0	)
Name and b	ousiness address							Description	on of services	Compe	nsation
2 Total number of independent contractors	(including but i	not lim	ıted t	to th	1056	lister	l ab	ove) who received	more than		
\$100,000 of compensation from the orga				. J (1)	.556			,o received	ciuli		

Contributions, Giffs, Gra	and Other Similar Amo
Program Serwice Revenue	)
nue	
Other Revenue	

Part V	7111	Statement of Revenue										
		Check If Sched	ule O contains a respon	nse or note to any lir		· · · · ·		<u>.</u>				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514				
w 23	1a	Federated cam	paigns 1a									
Contributions, Gifts, Grants and Other Similar Amounts	ь	Membership du	es <b>1b</b>									
9 E	c	Fundraising eve	ents 1c									
Ę,	d	_	zations 1d									
ija Ma		Government grant										
ns, Sin	e	_										
er er	f	All other contribute similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	15,000								
들음	g	Noncash contributi	ons included in lines	į		İ						
o ut	h	Total. Add lines	s 1a-1f		15,000							
ة C		Total: Add line:	314 11	· · · •								
e≘		MEMBER CUID DUE	6	Business Code								
.ven	2a	MEMBERSHIP DUE		900099	2,252,475	2,252,475						
Program Serwoe Revenue	b	SERVICE FEES & R		541900	794,579	794,579						
Š	C .	CONFERENCES & S	SEMINARS	611430	590,476	590,476						
Ř	d											
gran	e	^ II athau muanu										
Ş	f	All other progra	am service revenue									
	g	Total. Add lines	s 2a – 2f	🕨	3,637,530							
	3		ome (including dividend ar amounts)		5,317			5,31				
	4		stment of tax-exempt bond p	<b>.</b>								
	5	Royalties		🕨	290,897			290,89				
			(ı) Real	(II) Personal								
	6a	Gross rents	75,570									
	ь	Less rental expenses	0									
	c	Rental income or (loss)	75,570									
	d	, ,	me or (loss)		75,570			75,570				
			(ı) Securities	(II) Other								
	7a	Gross amount from sales of assets other than inventory	21,487	15,200								
	ь	Less cost or other basis and	0	7,683								
		sales expenses										
	c	Gain or (loss)	21,487	7,517	20.004			30.00				
	d 8a	Gross income f	ss)		29,004			29,004				
Other Revenue	J	events (not inc	ludings reported on line 1c)									
her	ь	Less direct ex	penses <b>b</b>									
5	c		(loss) from fundraising (	events 🛌								
	9a		rom gaming activities ne 19									
	Ь	Less direct ex	penses b									
	c		ا (loss) from gamıng actı)	vities								
	10a	Gross sales of										
		returns and allo	owances . a									
	h	Loss sost of a										
	b c		oods sold . . <b>b</b>	entory 🛌								
	٣	Miscellaneous		Business Code								
	11a	MISCELLANEO		900099	23,579	23,579						
	b	ADVERTISING		541800	18,450		18,450					
	_ ء	MILAF INCOM		525990	3,090		3,090					
	d		ue		,		•					
	e		s 11a-11d	🕨								
	12			. }	45,119							
	**	rocar reve <b>n</b> ue.	See Instructions	· · · · •	4.098.437	3,661,109	21,540	400,788				

	,	
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	88,260	88,260		
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	336,556	248,784	87,772	
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	1,301,154	961,818	339,336	
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	143,557	106,118	37,439	
9	Other employee benefits	270,260	199,777	70,483	
10	Payroll taxes	117,728	84,176	33,552	
11	Fees for services (non-employees)				
а	Management	13,300		13,300	
b	Legal	1,020		1,020	
c	Accounting	9,245		9,245	
d	Lobbying	54,751	54,751		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	35,924	3,004	32,920	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	425,549	392,466	33,083	
12	Advertising and promotion				
13	Office expenses	221,121	142,345	78,776	
14	Information technology	5,639	2,488	3,151	
15	Royalties				
16	Occupancy	75,464	493	74,971	
17	Travel	217,504	195,856	21,648	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	285,836	253,588	32,248	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	108,944		108,944	
23	Insurance	19,508		19,508	
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	UBIT TAXES	2,519		2,519	
b	DUES & FEES	148,523	103,793	44,730	
c	LOSS ON MELG INVESTMENT	48,685		48,685	
d	CONTRIBUTIONS & SUPPORT	20,016	17,516	2,500	
е	All other expenses	14,799	378,342	-363,543	
25	Total functional expenses. Add lines 1 through 24e	3,965,862	3,233,575	732,287	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

1   Cach-non-interest-bearing   Find of year   F	Par	't X	Check if Schedule O contains a response or note to any line in t	hıs Par	rt X			
2   Sevings and temporary cash investments   1,950,461   2   2,047,2   3   Pledges and grants receivable, net   9,000   4   122,9   4   Accounts receivable, net   9,000   4   122,9   5   Loans and other receivables from current and former officers, directors, trustees, key employees, and pipets compensated employees Complete Part II of Schedule   5   6   Loans and other receivables from other disqualified persons (as defined under section 49,86(f)(1)), persons described in section 49,86(f)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employers beneficiary organizations (see instructions) Complete Part II of Schedule   6   7   Notes and loans receivable, net   6   7   8   Inventiones for sale or use   7   7   9   Prepaid expenses and deferred charges   124,157   9   170,3   104   Land, buildings, and equipment cost or other basis Complete   10a   1,384,262   124,157   9   170,3   11   Investments—publicly traded secuntes   10b   1,080,571   275,140   10c   265,6   12   12   12   12   12   12   12   1						(A)		
3   Pledges and grants receivable, net		1	Cash-non-interest-bearing			500	1	500
4		2	Savings and temporary cash investments			1,950,461	2	2,047,249
S   Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L   S		3	Pledges and grants receivable, net				3	
### Employees, and highest compensated employees Complete Part II of Schedule L    Comparison of the Company of Schedule L	4	Accounts receivable, net			86,289	4	132,972	
1		5	employees, and highest compensated employees Complete Pa	art II of			5	
Preparal expenses and deferred charges   124,157   9   178,55	sets	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary en					
Preparal expenses and deferred charges   124,157   9   178,55	Š	7	Notes and loans receivable net					
9	₹		·					
10a						124 157		178,560
11   Investments—publicity traded securities   1,804,364   11   1,973.66   12   1,005.00   13   14   1,0073.66   14   13   1,005.00   13   1,005.00   14   1,005.00   14   1,005.00   15   1,541.8   14   1,005.00   15   1,541.8   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   16   1,005.00   17   1,005.00   18   18   19   10   10   10   10   10   10   10		_	Land, buildings, and equipment cost or other basis Complete			·		
12   Investments—other securities See Part IV, line 11   12   13   17   14   17   17   15   14   17   17   17   17   18   17   18   18		ь	Less accumulated depreciation	10b	1,068,571	275,146	10c	265,691
12   Investments—other securities See Part IV, line 11   13   13   14   14   15   15   15   1.5418   14   15   15   1.5418   15   1.5418   15   1.5418   15   1.5418   15   1.5418   15   1.5418   15   1.5418   15   1.5418   15   1.5418   16   1.5418   16   1.5418   16   1.5418   17   1.5418   18   18   18   19   18   19   19		11	Investments—publicly traded securities			1,804,364	11	1,973,688
13							12	
14					-			
15								
16 Total assets. Add lines 1 through 15 (must equal line 34)						1.582.679	15	1,541,856
17								6,140,516
18 Grants payable								397,378
Pure 1991 Deferred revenue						,,,,,,,,		
20 Tax-exempt bond liabilities						525.856		479,366
21 Escrow or custodial account liability Complete Part IV of Schedule D								
22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	_		·					
24 Unsecured notes and loans payable to unrelated third parties 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	- A15		Loans and other payables to current and former officers, direct	ors, tru				
24 Unsecured notes and loans payable to unrelated third parties 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	졅						22	
24 Unsecured notes and loans payable to unrelated third parties	Ï	23					23	
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		24	Unsecured notes and loans payable to unrelated third parties				24	
26 Total liabilities. Add lines 17 through 25		25				.=		
Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and complete lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets								74,682
lines 27 through 29, and lines 33 and 34.  27 Unrestricted net assets		26				935,948	26	951,426
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	ces			⊽ and ∘	complete			
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	lan	27	Unrestricted net assets			4,348,788	27	4,625,023
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	B	28	Temporarily restricted net assets			538,860	28	564,067
complete lines 30 through 34.  30 Capital stock or trust principal, or current funds	Ξ	29	Permanently restricted net assets				29	
30 Capital stock or trust principal, or current funds				ere ►	and			
33 Total net assets or fund balances		30	Capital stock or trust principal, or current funds				30	
33 Total net assets or fund balances	Ř	31	Paid-in or capital surplus, or land, building or equipment fund				31	
33 Total net assets or fund balances		32	Retained earnings, endowment, accumulated income, or other f	unds			32	
34 Total liabilities and net assets/fund balances	<u>#</u>	33	Total net assets or fund balances			4,887,648	33	5,189,090
	Ž	34	Total liabilities and net assets/fund balances			5,823,596	34	6,140,516

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4,0	098,437
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,9	965,862
3	Revenue less expenses Subtract line 2 from line 1	3		:	132,575
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,8	387,648
5	Net unrealized gains (losses) on investments	5			168,867
6	Donated services and use of facilities	6			
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		5,:	189,090
Par	t XII Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				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		No
	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	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	1			
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?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493315021194

**SCHEDULE A** (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

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

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

OMB No 1545-0047

Open to Public **Inspection** 

Name of	the organiz	zat	ion	
<b>TICHTGAN</b>	ASSOCIATION	I OF	SCHOOL	BOARI

**Employer identification number** 

28-1222441

Pa	rt I	Reas	on for Pu	blic Charity Sta	tus (All or	ganization	ns must com	nlete this	part.) See i			
				e foundation becaus						nou double	<u> </u>	
1	Ē		-	on of churches, or as	·			•	•			
2			-	in <b>section 170(b)(1</b>								
3	Ė			perative hospital se			•	on 170(b)(1	D(A)(iii).			
4	Ĺ.	•		n organization operat	=					(1)(A)(iii).	Enter the	
_	•			ty, and state						(-)()		
5	$\sqcap$	Anorga	ınızatıon op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	a governmer	ntal unit des	cribed in	
		sect ion	170(b)(1)(	<b>A)(iv).</b> (Complete P	iv). (Complete Part II )							
6	$\sqcap$	A feder	al, state, or	local government or	governmen	tal unıt des	cribed in <b>sec</b>	tion 170(b)(	(1)(A)(v).			
7	$\Gamma$	An organization that normally receives a substantial part of its support from a governmental unit or from the general public						ıc				
_	_			n 170(b)(1)(A)(vi).		•						
8	<u> </u>		•	described in <b>section</b>			•	•				
9	굣	=		at normally receives					•	-	-	SS
				ities related to its ex								
			_	oss investment inco				•		tax) from b	usinesses	5
	_			janization after June								
10 11				ganized and operated ganized and operated								
	_	the box <b>a</b> 「	that descri Type I	y supported organiz bes the type of supp <b>b</b> Type II <b>c</b>	orting organ Type II	nization and I - Functio	complete lin nally integrat	es 11e thro ed <b>d</b>	ugh 11h Type III - N	on-function	ally integ	rated
е	Г	other th		ox, I certify that the on managers and otl								
f				received a written de	etermination	from the I	RS that it is a	Type I, Ty	pe II, or Type	III support	ing orgar	ıızatıon,
		check t						_				Γ
g			,	2006, has the organi	zation acce	pted any gi	ft or contribut	tion from an	y of the			
			g persons? erson who di	rectly or indirectly o	ontrols eith	ner alone or	together wit	n nersons de	escribed in (ii	)	Yes	No
				governing body of th	•		_	. po. 50. 15 a.			g(i)	
		, ,	•	er of a person descri		_					y(ii)	+
			•	lled entity of a perso			ahove?				(iii)	+
h				ng information about						119	(,	
••		riovide	the followin	ig illiorillation about	the support	eu organiza	icion(s)					
(	i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	u notify	(vi) Is	the	(vii) A	mount of
	suppoi		(,	organization	organizat		the organ		organiza			netary
O	ganiz	ation		(described on	col (i) lıs	ted in	ın col (i)	of your	col (i) or	-	su	oport
				lines 1 - 9 above	, -	your governing suppo		rt?	in the U	JS?		
				or IRC section <b>(see</b>	docume	ent?						
				(see instructions))		1		1		1	4	
					Yes	No	Yes	No	Yes	No		
								1				
Tota	i					1			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 i	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.)

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	<b>(d)</b> 2012	<b>(e)</b> 2013		<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	191,756	75,896	15,000	15,000	15,	000	312,652
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	3,851,684	3,899,739	3,991,752	3,778,909	3,661,	109	19,183,193
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
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	4,043,440	3,975,635	4,006,752	3,793,909	3,676,	109	19,495,845
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons							0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed							0
_	the greater of \$5,000 or 1% of the amount on line 13 for the year Add lines 7a and 7b							0
8	Public support (Subtract line 7c from line 6)							19,495,845
	ction B. Total Support							
Cale	ndar year (or fiscal year beginning							
		(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013		<b>(f)</b> Total
9	in) ► A mounts from line 6	(a) 2009 4,043,440	<b>(b)</b> 2010	(c) 2011 4,006,752	( <b>d</b> ) 2012	(e) 2013 3,676,	109	<b>(f)</b> Total 19,495,845
	in) > A mounts from line 6 Gross income from interest,						109	
9	in) ► A mounts from line 6				-			
9	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after	4,043,440	3,975,635	4,006,752	3,793,909	3,676,		19,495,845
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	4,043,440	3,975,635	4,006,752	3,793,909	3,676,	784	19,495,845
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	4,043,440 323,857	3,975,635 487,356	4,006,752 426,489	3,793,909 356,788	3,676, 371, 371,	784	19,495,845 1,966,274
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the	323,857 323,857	3,975,635 487,356 487,356	4,006,752 426,489 426,489	3,793,909 356,788 356,788	3,676, 371, 371,	784	19,495,845 1,966,274 1,966,274
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	323,857 323,857	3,975,635 487,356 487,356	4,006,752 426,489 426,489	3,793,909 356,788 356,788	3,676, 371, 371,	784 784 572	19,495,845 1,966,274 1,966,274
9 110a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f	323,857 323,857 11,747 4,379,044	3,975,635 487,356 487,356 22,061 4,485,052	4,006,752 426,489 426,489 13,631	3,793,909 356,788 356,788 15,273 4,165,970	3,676, 371, 371, 7, 4,055,	784 784 572	19,495,845 1,966,274 1,966,274 70,284 21,532,403
9 10a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12)	4,043,440  323,857  323,857  11,747  4,379,044  for the organization	3,975,635 487,356 487,356 22,061 4,485,052 on's first, second,	4,006,752 426,489 426,489 13,631	3,793,909 356,788 356,788 15,273 4,165,970	3,676, 371, 371, 7, 4,055,	784 784 572	19,495,845  1,966,274  1,966,274  70,284  21,532,403
9 110a b c 111 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	4,043,440  323,857  323,857  11,747  4,379,044  for the organization	3,975,635  487,356  487,356  22,061  4,485,052  on's first, second,	4,006,752 426,489 426,489 13,631 4,446,872 third, fourth, or f	3,793,909 356,788 356,788 15,273 4,165,970	3,676, 371, 371, 7, 4,055,	784 784 572	19,495,845  1,966,274  1,966,274  70,284  21,532,403
9 10a b c 111 12 13 14 See 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	4,043,440  323,857  323,857  11,747  4,379,044  for the organization	3,975,635  487,356  487,356  22,061  4,485,052  on's first, second,  ercentage f) divided by line	4,006,752 426,489 426,489 13,631 4,446,872 third, fourth, or f	3,793,909 356,788 356,788 15,273 4,165,970	3,676, 371, 371, 7, 4,055, 501(c)(3) o	784 784 572	19,495,845  1,966,274  1,966,274  70,284  21,532,403
9 10a b c 11 12 13 14 See 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage from 201 section D. Computation of Inve	4,043,440  323,857  323,857  11,747  4,379,044  for the organization  ic Support Pere (line 8, column (12) Schedule A, Parestment Incompared to the column (12) Schedule A, Parestment Incompared to the column (13) Schedule A, Parestment Incompared to the column (14) Schedule A, Parestment Incompar	3,975,635  487,356  487,356  22,061  4,485,052  on's first, second, ercentage f) divided by line art III, line 15  me Percentage	4,006,752 426,489 426,489 13,631 4,446,872 third, fourth, or f	3,793,909 356,788 356,788 15,273 4,165,970 fifth tax year as a	3,676, 371, 371, 7, 4,055, 501(c)(3) o	784 784 572	19,495,845  1,966,274  1,966,274  70,284  21,532,403  ation, 90 540 %
9 10a  b  c 11  12  13 14  See 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage from 201  ection D. Computation of Inve	4,043,440  323,857  323,857  11,747  4,379,044  for the organization  ic Support Pereceipts (line 8, column (12, 2) schedule A, Pate 1, Pate 1	3,975,635  487,356  487,356  22,061  4,485,052  on's first, second, ercentage f) divided by line art III, line 15  me Percentage  flumn (f) divided by	4,006,752 426,489 426,489 13,631 4,446,872 third, fourth, or f	3,793,909 356,788 356,788 15,273 4,165,970 fifth tax year as a	3,676, 371, 371, 7, 4,055, 501(c)(3) o	784 784 572	19,495,845  1,966,274  1,966,274  70,284  21,532,403  ation, 90 540 %
9 10a  b  c 11  12  13 14  See 15 16  See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ection C. Computation of Publ Public support percentage from 201 section D. Computation of Inve	4,043,440  323,857  11,747  4,379,044  for the organization  ic Support Pereceipts (line 8, column (in 2 Schedule A, Pareceipts) (line 10 c, column 2013 (line 10 c, column 2013 (line 10 c, column 2013 (schedule A)	3,975,635  487,356  487,356  22,061  4,485,052  on's first, second, ercentage f) divided by line art III, line 15 me Percentage olumn (f) divided by A, Part III, line 1	4,006,752 426,489 13,631 4,446,872 third, fourth, or f	3,793,909 356,788 356,788 15,273 4,165,970 ifth tax year as a	3,676, 371, 371, 7, 4,055, 501(c)(3) ol 15 16 17 18	784 784 572 465 rganiz	19,495,845  1,966,274  1,966,274  70,284  21,532,403  ation, 90 540 % 90 590 %  9 130 % 9 100 %

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

Part IV		<b>formation.</b> Provide the explanations required by Part II, line 10; Part II, ne 12. Also complete this part for any additional information. (See instru	
		Facts And Circumstances Test	
Retu	ırn Reference	Explanation	
		Schodulo A / Form 0	000 er 000 E7) 201

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493315021194

#### OMB No 1545-0047

## **SCHEDULE C**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

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

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

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

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

	me of the organization HIGAN ASSOCIATION OF SCHOOL BOAR	DS		Employer ide	ntification number
				38-1323441	
ar	I-A Complete if the or	ganization is exempt under s	section 501(	c) or is a section 52	7 organization.
L	Provide a description of the org	ganızatıon's dırect and ındırect politic	al campaıgn act	ıvıtıes ın Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
ar	t I-B Complete if the or	ganization is exempt under s	section 501(	c)(3).	
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955	<b>.</b>	\$
2	Enter the amount of any excise	e tax incurred by organization manage	ers under sectioi	n 4955 🕨	\$
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	O 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 s	section 501(	c), except section 50	D1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing o exempt function activities	rganization's funds contributed to oth	ner organizations	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments f amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	om the filing organization's to a separate political org	funds Also enter the anızatıon, such as a
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
				1	

section 4911 tax for this year?

┌ Yes ┌ No

# Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

Check	<b>▶</b> □	if the filing	organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address,	EIN,
		expenses	and share of excess lobbying expenditures)	

B Check ► If the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	20,000	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	34,751	
c	Total lobbying expenditures (add lines 1a and 1i	o)	54,751	
d	Other exempt purpose expenditures		3,911,111	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	3,965,862	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	348,293	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lin	ne 1f)	87,073	
h	Subtract line 1g from line 1a If zero or less, ent	er-0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lii	ne 1h or line 1i, did the organization file Form 4720	reporting	□ Ves □ No

# 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4	l-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	<b>(e)</b> Total
2a	Lobbying nontaxable amount	361,178	362,587	358,170	348,293	1,430,228
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,145,342
c	Total lobbying expenditures	135,264	78,153	184,425	54,751	452,593
_d	Grassroots nontaxable amount	90,295	90,647	89,543	87,073	357,558
е 	Grassroots ceiling amount (150% of line 2d, column (e))					536,337
f	Grassroots lobbying expenditures	83,264	52,523	25,240	20,000	181,027

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	<b>.</b>	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c	)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201124416 3 (1 31111 333 31 333 12) 2313	1 age -				
Part IV Supplemental Information	on <i>(continued)</i>				
Return Reference	Explanation				
l					

Schedule D (Form 990) 2013

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#### DLN: 93493315021194

## OMB No 1545-0047

Open to Public

#### **SCHEDULE D**

(Form 990)

Department of the Treasury

## **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 www.irs.gov/form990. **Inspection** Internal Revenue Service Name of the organization Employer identification number MICHIGAN ASSOCIATION OF SCHOOL BOARDS 38-1323441 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education)  $\Gamma$  Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located **\(\mathbb{F}\_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet

works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

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

Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Cat No 52283D Schedule D (Form 990) 2013

and section 170(h)(4)(B)(II)?

Part	<b>TIT</b> Organizations Maintaining Co	<u>llections of Art,</u>	, Histo	oric	<u>al Treasi</u>	ures, or Otl	her	<u>Similar As</u>	sets (con	<u>itinued)</u>
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ds, che	cka	ny of the fol	lowing that ar	eas	ignificant use	of its	
а	Public exhibition		d	Г	Loan or exc	change progra	ms			
b	Scholarly research		e	Г	Other					
С	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	ollections and explai	n how t	they	further the	organızatıon's	exe	mpt purpose ı	n	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t	o be maintained as i	part of	the	organızatıor	n's collection?			Yes	□ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an					n answered	"Ye:	s" to Form 9	90,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterme	diary fo	orco	ntributions	or other asse	ts no	ot	Yes	Г No
b	If "Yes," explain the arrangement in Part XII	I and complete the	followir	ng ta	ıble					
							_	An	nount	
С	Beginning balance					1	.с			
d	Additions during the year					1	.d			
е	Distributions during the year					_	е			
f	Ending balance					1	.f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes	∏ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	explan	atio	n has been	provided in Pa	art XI	ш		Γ
Pa	rt V Endowment Funds. Complete									
		(a)Current year	<b>(b)</b> Pi	nor y	ear <b>b (c)</b>	Two years back	<b>(d)</b> Th	iree years back	(e)Four yea	ars back
1a	Beginning of year balance									
Ь	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
_	and programs									
T	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balanc	e (line	1g,	column (a))	held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ►									
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
За	Are there endowment funds not in the posses	ssion of the organiza	ition th	at a	re held and	admınıstered	for th	ne		
	organization by							25/	Yes	No
	<ul><li>(i) unrelated organizations</li><li>(ii) related organizations</li></ul>			•			•	3a(		
ь	If "Yes" to 3a(II), are the related organization							3t	<del></del>	
4	Describe in Part XIII the intended uses of th									
Par	t VI Land, Buildings, and Equipme 11a. See Form 990, Part X, line 1		he org	janı	zation ans	wered 'Yes'	to F	orm 990, Pa	rt IV, lın	e
	Description of property				Cost or other s (investment			(c) Accumulated depreciation	d (d) Boo	ok value
1a	Land									
h	Puldings		. [							
	Buildings		L							
	Leasehold improvements		. [							
c	-					524,0	062	466,1	32	57,930
c   d   e	Leasehold improvements					810,2		466,1 602,4		57,930 207,761

See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		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>▶</b>	
Part VIII Investments—Program Related.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.  (a) Description of investment	(h) Paak value	(a) Mathad of valuation
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)  Part IX Other Assets. Complete if the organization	uon answered 'Ves' to Form 990	Part IV June 11d See Form 990 Part V June 15
	cription	(b) Book value
(1) INVESTMENT IN MELG		1,541,856
Total (Column (h) must equal Form 990, Part X, col (B) line	215)	1 541 856
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the or		
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.	ganızatıon answered 'Yes' to	
Part X Other Liabilities. Complete if the or		•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.	ganızatıon answered 'Yes' to	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	ganızatıon answered 'Yes' to	
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	•
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	
Part X Other Liabilities. Complete if the or Form 990, Part X, line 25.  1 (a) Description of liability  Federal income taxes	(b) Book value	

Par		l <b>evenue per Audited Financial Sta</b> wered 'Yes' to Form 990, Part IV, line :		nts With Revenue	per R	eturn Complete if
1		er support per audited financial statements			1	4,267,304
2	Amounts included on line 1 bi	ut not on Form 990, Part VIII, line 12				
а	Net unrealized gains on inves	tments	2a	168,867		
b	Donated services and use of f	acılıtıes	2b		1	
С	Recoveries of prior year grant	S	2c		1	
d	Other (Describe in Part XIII )		2d		1	
e	Add lines <b>2a</b> through <b>2d</b> .				2e	168,867
3	Subtract line ${f 2e}$ from line ${f 1}$ .				3	4,098,437
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>				
а	Investment expenses not inc	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII )		4b			
c	Add lines <b>4a</b> and <b>4b</b>		·		4c	0
5	Total revenue Add lines <b>3</b> and	d <b>4c.</b> (This must equal Form 990, Part I, line	12)		5	4,098,437
Part		xpenses per Audited Financial Stasswered 'Yes' to Form 990, Part IV, line			s per	Return. Complete
1		raudited financial statements			1	3,965,862
2	A mounts included on line 1 bu	it not on Form 990, Part IX, line 25				
а	Donated services and use of f	acılıtıes	2a			
b	Prior year adjustments		2b		1	
С	Otherlosses		2c		1	
d	Other (Describe in Part XIII )		2d		1	
e	Add lines 2a through 2d				2e	0
3	Subtract line <b>2e</b> from line <b>1</b> .				3	3,965,862
4	A mounts included on Form 99	0, Part IX, line 25, but not on line 1:				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )		4b		1	
c	Add lines 4a and 4b				4c	0
5	Total expenses Add lines <b>3</b> a	nd <b>4c.</b> (This must equal Form 990, Part I, lii	ne 18 )		5	3,965,862
Part	XIII Supplemental In	formation			•	
Part		Part II, lines 3, 5, and 9, Part III, lines 1a , lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
PART	X, LINE 2	IN THE PREPARATION OF TAX RETURN INTERPRETATION OF FEDERAL, STATE PERIODICALLY REVIEWS AND EVALUA AND MAKES ESTIMATES OF AMOUNTS DUE OR OWED NO AMOUNTS HAVE BE POSITIONS FEDERAL, STATE AND LOCEXAMINATION BY THE VARIOUS TAXI YEARS	E AND TES T , INCL EEN ID CAL TA	LOCAL INCOME TAX L HE STATUS OF UNCEF UDING INTEREST AND ENTIFIED, OR RECORI AX RETURNS GENERAL	AWS RTAIN DPENA DED, A LY RE	MANAGEMENT TAX POSITIONS ALTIES, ULTIMATELY AS UNCERTAIN TAX MAIN OPEN FOR

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

Schedule D (Form 990) 2013

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Schedule I (Form 990)

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

DLN: 93493315021194 OMB No 1545-0047

Department of the Treasury

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

Open to Public

Name of the organization		ition about Schedule 1 (	Tomi 990) and its inst	ructions is at <u>www.rrs</u>	<u>s.gov / 101111990</u> .	Employer identifi	cation number
MICHIGAN ASSOCIATION O						38-1323441	
<ol> <li>Does the organization mathematic selection criteria use</li> <li>Describe in Part IV the organization</li> <li>Part II Grants and Otle</li> </ol>	d to award the grants or rganization's procedure ner Assistance to	antiate the amount of the assistance?s for monitoring the use	of grant funds in the U	Jnited States the United States		ganization answered	「Yes 「
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) OAKLAND INTERMEDIATE SCHOOL DISTRICT 2111 PONTIAC LAKE ROAD WATERFORD,MI 48328	38-1713563	501(C)(3)	5,617				TO REIMBURSE FOR ACTIVITIES THAT SUPPORT COUNTY SCHOOL BOARD GROUP ACTIVITIES
(2) WAYNE COUNTY REGIONAL EDUCATION SERVICE AGENCY 33500 VAN BORN ROAD WAYNE,MI 48184	38-1909530	501(C)(3)	5,606				TO REIMBURSE FOR ACTIVITIES THAT SUPPORT COUNTY SCHOOL BOARD GROUP ACTIVITIES
2 Entertetal number of see	tion F01 (a)(2) and gov	ornmont organizations	icted in the line 1 table		•	<u> </u>	2

(a)Type of grant or assistance

(f)Description of non-cash assistance

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line	22.
	Part III can be duplicated if additional space is needed.	

(d)A mount of

(e)Method of valuation

(c)A mount of

(b) Number of

(, , , , ,		recipients	cash grant	non-cash assistance	(book, FMV, appraisal, other)	( ) -
Part IV Supplemen	ntal Informa	<b>tion.</b> Provide the inf	ormation required in Pa	art I, line 2, Part III, col	umn (b), and any other a	dditional information.
Return Reference	Explana	tion				
PART I, LINE 2	THE LEG	GAL TRUST FUND HAS	AN ADVISORY BOARD T	HAT MEETS TO CONSID	ER REQUESTS FOR ASSIST	NCE FROM MEMBER SCHOOL

ART I, LINE 2

THE LEGAL TRUST FUND HAS AN ADVISORY BOARD THAT MEETS TO CONSIDER REQUESTS FOR ASSISTANCE FROM MEMBER SCHOOL DISTRICTS WHO ARE FACING LEGAL ISSUES THAT WOULD HAVE A STATEWIDE IMPACT ON PUBLIC EDUCATION ONCE APPROVED BY THE ADVISORY BOARD, THE DISTRICT CAN SUBMIT DOCUMENTATION TO SUPPORT THE LEGAL EXPENSES UP TO THE AMOUNT APPROVED BY THE ADVISORY BOARD DEMINIMUS AWARDS (\$2,500 EACH) ARE GRANTED TO SCHOOL DISTRICTS THAT MEET THE SPECIFIC CRITERIA OUTLINED IN THE EDUCATION EXCELLENCE AWARDS PROGRAM MASB DOES NOT PLACE ANY RESTRICTIONS ON THE MONEY ONCE AWARDED TO THE SCHOOL DISTRICTS, AND IT IS UP TO THE SCHOOL DISTRICTS TO MONITOR THE USE IN KEEPING WITH ANY REGULATIONS THEY ARE BOUND TO MASB ISSUED GRANTS TO ISD'S THAT SUPPORTED COUNTY AREA SCHOOL BOARD GROUPS MASB DOES NOT HAVE CONTROL OVER THESE GROUPS MASB REQUIRES THE ISD TO SUBMIT INFORMATION TO MASB IN ORDER TO APPLY FOR THE GRANT IF THE ISD MEETS THE CRITERIA OUTLINED BY MASB, A GRANT IS ISSUED TO THE ISD WHERE THE COUNTY AREA SCHOOL BOARD GROUP IS ACTIVE

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DLN: 93493315021194

OMB No 1545-0047

Schedule J (Form 990)

## **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization MICHIGAN ASSOCIATION OF SCHOOL BOARDS

**Employer identification number** 

38-1323441

Pa	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions  Payments for business use of personal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		<u> </u>
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		
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	Yes	
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		No
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		No
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 $5and 67$ 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		

#### 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)(1)-(111) 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  (i) Base compensation	W-2 and/or 1099-MIS (ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported as deferred in prior Form 990
(1)KATHLEEN HAYES EXECUTIVE DIRECTOR	(i) (ii)	156,822 0	0	4,742 0	18,967 0	27,461 0	207,992	0

Schedule J (Form 990) 2013

#### Part IIII 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
·	THE ASSOCIATION SPONSORS A NONQUALIFIED 457(B) DEFERRED COMPENSATION PLAN THE PLAN CURRENTLY INCLUDES ONLY THE POSITION OF KATHLEEN HAYES, EXECUTIVE DIRECTOR THE AMOUNT CONTRIBUTED TO THE PLAN FOR THE YEAR ENDED JUNE 30, 2014 TOTALED \$9,789

Schedule J (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization MICHIGAN ASSOCIATION OF SCHOOL BOARDS

990 Schedule O, Supplemental Information

## 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.

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

OMB No 1545-0047

DLN: 93493315021194

Employer identification number

38-1323441

2013

Open to Public
Inspection

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	MEMBERS INCLUDE MICHIGAN BOARDS OF EDUCATION
FORM 990, PART VI, SECTION A, LINE 7A	MEMBERS OF THE GOVERNING BODY ARE ELECTED BY MEMBER BOARDS SOME BOARD OF DIRECTOR POSITIO  NS ARE REGIONAL AND ARE ELECTED BY MEMBERS IN THAT REGION, AND OTHERS ARE ELECTED BY THE M  EMBERSHIP GROUPS AS DEFINED IN THE BY LAWS
FORM 990, PART VI, SECTION A, LINE 7B	DECISIONS MADE BY THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY MEMBERS IF THESE DECISIONS AFFECT THE BY LAWS
FORM 990, PART VI, SECTION B, LINE 11	THE 990 IS PROVIDED ELECTRONICALLY TO ALL MEMBERS OF THE BOARD QUESTIONS AND COMMENTS ARE SOLICITED PRIOR TO FILING AFTER ANY CONCERNS PRESENTED BY THE BOARD ARE ADDRESSED, THE E XECUTIVE DIRECTOR SIGNS AND FILES THE RETURN A COPY OF THE 990 IS PROVIDED ON BOTH THE PU
FORM 990, PART VI, SECTION B, LINE 12C	BLIC WEBSITE AND THE BOARDS ADMINISTRATIVE DOCUMENT STORAGE SITE  OFFICERS, DIRECTORS AND EMPLOYEES ARE REQUIRED TO UPDATE THE CONFLICT OF INTEREST FORM ANN  UALLY, AND ARE REQUIRED TO INFORM MANAGEMENT OF ANY CHANGES THAT MAY OCCUR  BETWEEN WRITTEN  UPDATES THE FORMS ARE REVIEWED BY THE EXECUTIVE STAFF AND A PROCESS IS IN PLACE TO FOLLO  W UP ON ANY POTENTIAL CONFLICT
FORM 990, PART VI, SECTION B, LINE 15	THE GOVERNING BOARD CONDUCTS AN ANNUAL PERFORMANCE REVIEW OF THE EXECUTIVE DIRECTOR IF CO MPENSATION IS BEING REVIEWED, IT INCLUDES COMPARING TOTAL COMPENSATION TO THREE OUTSIDE SO URCES INCLUDING ONE NATIONAL, ONE STATE AND ONE LOCAL COMPENSATION STUDY COMPENSATION FOR THE EXECUTIVE DIRECTOR IS THEN CONSIDERED, APPROVED AND DOCUMENTED IN THE MINUTES OF THE EXECUTIVE SESSION OF THE BOARD OF DIRECTORS COMPENSATION FOR ALL OTHER STAFF IS BENCHMARK ED TO MARKET STUDIES ON AT LEAST A BIANNUAL BASIS ANY CHANGES TO TOTAL COMPENSATION FOR S TAFF ARE THEN CONSIDERED BY AND APPROVED AS PART OF THE ANNUAL BUDGET PROCESS AND DOCUMENT ED IN THE MINUTES OF THE BOARD OF DIRECTORS
FORM 990, PART VI, SECTION C, LINE 19	ALL INFORMATION IS AVAILABLE UPON REQUEST FORM 990 IS ALSO POSTED ANNUALLY ON GUIDESTAR'S WEBSITE THE 990 IS PUBLIC INFORMATION THROUGH THE MICHIGAN ATTORNEY GENERAL'S OFFICE FI NANCIAL REPORTS ARE INCLUDED IN THE ANNUAL REPORT WHICH IS DISTRIBUTED TO MEMBERS AND AVAI LABLE ON THE WEBSITE READERS ARE INVITED TO CONTACT THE BUSINESS OFFICE TO REQUEST ADDITI ONAL INFORMATION
FORM 990, PART IX, LINE 11G	CONTRACTED SERVICES PROGRAM SERVICE EXPENSES 392,466 MANAGEMENT AND GENERAL EXPENSES 33 ,083 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 425,549
FORM 990, PART XII, LINE 2C	MICHIGAN ASSOCIATION OF SCHOOL BOARDS HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVER SIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR
FORM 4562	EMPLOYER IDENTIFICATION NUMBER 38-1323441 FOR THE YEAR ENDING JUNE 30, 2014 MICHIGAN ASSO CIATION OF SCHOOL BOARDS, HEREBY ELECTS, PURSUANT TO IRC SEC 168(K)(2)(D)(III), NOT TO CL AIM THE ADDITIONAL 50% DEPRECIATION ALLOWABLE UNDER IRC SEC 168(K) FOR THE FOLLOWING QUAL IFYING PROPERTY PLACED IN SERVICE DURING THE TAX YEAR ENDING JUNE 30, 2014 ALL PROPERTY I

N THE 3 AND 5 YEAR CLASS SEE ATTACHED FORM 4562

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493315021194

2013

OMB No 1545-0047

Open to Public Inspection

(f)

## **SCHEDULE R** (Form 990)

**Related Organizations and Unrelated Partnerships** 

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

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

(c)

Department of the Treasury Internal Revenue Service Νa

Name of the organization MICHIGAN ASSOCIATION OF SCHOOL BOARDS	Employer identification number
	38-1323441
Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV	, line 33.

(b)

Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income End	-of-year assets	D	rect controlling entity		
Part II Identification of Related Tax-Exempt Or or more related tax-exempt organizations du	rganizations Complete if iring the tax year.	the organization an	swered "Yes" on	Form 990, Pa	art IV,	line 34 because it	had or	ne
<b>(a)</b> Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity (if section 501	status (c)(3))	<b>(f)</b> Direct controlling entity	Section (13) co	<b>g)</b> n 512(  ontrolle tity?
44 MANAGARA EDIGATION LEADERAND COOLIN	DD OUTDES BUYER TO						Yes	No
(1) MICHIGAN EDUCATION LEADERSHIP GROUP	PROVIDES BUILDING TO CONSORTIUM OF NON-	MI	501(C)(2)					No
1001 CENTENNIAL WAY SUITE 400 LANSING, MI 48917 38-3318753	PROFITS					N/A		
For Paperwork Reduction Act Notice, see the Instructions for For	rm 990.	Cat No 5013	35 Y	•		Schedule R (For	n 990) 2	013

<b>(a)</b> Name, address, and EIN of related organization	Name, address, and EIN of Primary activity Legal Direct		controlling entity	Predominant income(related, unrelated, excluded from tax under sections 512-	unrelated, unrelated, excluded from tax under sections 512-	Predominant income(related, unrelated, excluded from tax under sections 512-	Predominant income(related, unrelated, excluded from tax under	<b>(f)</b> Share of total income	(g) Share of end-of-year assets		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	<b>j)</b> eral or aging ener?	(k) Percentag ownersh
					J14)			Yes	No	]	Yes	No			
V Identification of Related Org								swere	d "Yes	" on Form	990,	Part	IV,		
(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)		<b>(d)</b> Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of to	total Share	(g) e of end -year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!		
						<u> </u>					Yes		No		
									_				+		

Yes No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No				
<b>1</b> D	uring the tax year, did the orgranization engage in any of the following transactions with one or more r	elated organizations li	sted in Parts II-IV?								
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No				
b	<b>b</b> Gift, grant, or capital contribution to related organization(s)										
C	Gift, grant, or capital contribution from related organization(s)				<b>1</b> c		No				
d	Loans or loan guarantees to or for related organization(s)				1d		No				
е	Loans or loan guarantees by related organization(s)				1e		No				
f	Dividends from related organization(s)				1f		No				
g	Sale of assets to related organization(s)				1g		No				
h	Purchase of assets from related organization(s)				1h		No				
i	Exchange of assets with related organization(s)				<b>1</b> i		No				
j	j Lease of facilities, equipment, or other assets to related organization(s)										
k	k Lease of facilities, equipment, or other assets from related organization(s)										
I	Performance of services or membership or fundraising solicitations for related organization(s)										
m	m Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes					
0	Sharing of paid employees with related organization(s)				10		No				
р	Reimbursement paid to related organization(s) for expenses				1p		No				
q	Reimbursement paid by related organization(s) for expenses				1q		No				
r	Other transfer of cash or property to related organization(s)				1r		No				
s	Other transfer of cash or property from related organization(s)				1s		No				
_	If the answer to any of the above is "Yes," see the instructions for information on who must complete	a this line including so	wared relationships	and transaction throsholds							
	(a)	(b)	(c)	(d)							
	Name of related organization	Transaction type (a-s)	Amount involved	Method of determining amo	ount II	nvolved					
<b>1)</b> M	ICHIGAN EDUCATION LEADERSHIP GROUP	N	94,542	OWNERSHIP PERCENT							

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

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	( <b>h)</b> Disproprtiona allocations <sup>7</sup>	_	(i) Code V <sup>2</sup> UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	<b>(k)</b> Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

#### Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference Explanation

Schedule R (Form 990) 2013