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DLN: 93493135033575

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

Finformation about Form 990 and its instructions is at www.IRS.gov/form990

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	r the	2013 cal	endar year, or tax year beginning	9 07-01-2013 , 2013, and ending 06	-30-2014					
3 Ch	eck ıf a	pplicable	C Name of organization NATIONAL ASSOCIATION OF SECONI	DADY		D Emplo	yer ide	ntification number		
- Ad	dress ch	nange	SCHOOL PRINCIPALS	ZAKT		52-60	0693	7		
— _{Na}	me cha	inge	Doing Business As NASSP							
— _{Inr}	tıal retu	ım	Number and street (or P.O. boy if m	ail is not delivered to street address) Room/	cuito					
– _{Те}	rmınate	ьd	1904 ASSOCIATION DRIVE	all is not delivered to street address) Room/	suite	E Telepho	one num	nber		
_	nended		City or town state or province	and ZID or foreign neetal sade		(703)	860-0	0200		
_			City or town, state or province, cour RESTON, VA 201911537	itry, and 21P of foreign postar code						
Ap	plication	n pending			_	G Gross r	eceipts	\$ 25,385,505		
			F Name and address of prir JOANN BARTOLETTI	icipal officer		Is this a group	returr	n for		
			1904 ASSOCIATION DRIV	E	1	subordinates?		┌ Yes ┌ No		
			RESTON, VA 201911537		Н(b)	Are all subordı	nates	┌ Yes ┌ No		
						ncluded?				
[Ta	ıx-exem	npt status	✓ 501(c)(3) 501(c)() ◀(nsert no) 4947(a)(1) or 527	」 '	If "No," attach	a lıst	(see instructions)		
J W	ebsite	e: ► WW	VW NASSP ORG		H(c)	Group exempt	ion nu	mber ►		
€ For	m of or	ranization	Corporation Trust Associatio	n Other 🍽	I Year	r of formation 19	16 N	State of legal domicile VA		
	rt I		imary	odiei P	L real	or formation 13	10	State of legal dofficile. VA		
			escribe the organization's mission	un or most significant activities						
				LEADERS THROUGH ADVOCACY, I	RESEARCH	H, EDUCATIO	N, AN	D STUDENT		
aı] !	<u>PRO GR</u>	AMS							
Governance	-									
Ē										
<u>e</u>	2	Check th	his box 🛏 if the organization di	scontinued its operations or disposed	d of more th	nan 25% of its	net as	ssets		
			,							
Activities &	3	Number	of voting members of the govern	ing body (Part VI, line 1a)			3	21		
<u>≅</u>	4	Number	of independent voting members	of the governing body (Part VI, line 1	b)		4	21		
Ř	5	Total nu	mber of individuals employed in	calendar year 2013 (Part V, line 2a)			5	104		
ă.	6	Total nu	mber of volunteers (estimate if n	ecessary)			6	200		
	1			art VIII, column (C), line 12			7a	188,523		
	Ь	Net unre	elated business taxable income f	rom Form 990-T, line 34			7b	-10,543		
						Prior Year 2,870,0		Current Year		
gı.	8	Contributions and grants (Part VIII, line 1h)						1,572,754		
Revenue	9			ne 2g)			10,155,673 10,32			
Жel	10		tment income (Part VIII, columr		367,297 527,0					
_	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		8,376,4	159	8,552,599		
	12			(must equal Part VIII, column (A), l	ne	21,769,	528	20,981,981		
	13			IX, column (A), lines 1-3)	.	483,5	_	473,000		
	14		its paid to or for members (Part I		0					
	15		es, other compensation, employe							
Expenses		5-10)	, , , , , , ,		9,459,8	364	9,746,333		
Ť	16a	Profes	ssional fundraising fees (Part IX,	column (A), line 11e)			0	0		
ਡੌ	Ь	Total fu	ındraısıng expenses (Part IX, column (D), line 25) 📭 361,387						
_	17	Other	expenses (Part IX, column (A),	ınes 11a-11d, 11f-24e)		10,350,6	566	10,324,208		
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 25)		20,294,0	030	20,543,541		
	19	Reven	ue less expenses Subtract line	18 from line 12		1,475,4		438,440		
<u>%</u> 8					Begi	nning of Curre	nt	End of Year		
Net Assets or Fund Balances	20	Total	accete (Part V line 16)			10 331 T	700	21 261 245		
A B.	20		assets (Part X, line 16)		·	19,331,7		21,261,245		
5 E	22		ssets or fund balances Subtract		·	9,940,8		10,511,050		
	100		nature Block	mie 21 nom mie 20	'	3,540,0	777	10,311,030		
				amined this return, including accompa	anvina sch	edules and sta	temer	ats and to the hest of		
				pplete Declaration of preparer (other						
orepa	arer ha	as any k	nowledge							
		Ti.				1				
- -	_	**** Signa	*** ature of officer			2015-05-14 Date				
Sigr Her		'				Succ				
	-	Type	SHIFFLETT CFO or print name and title							
		17	Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN			
Paid	d		DAVID TRIMNER	self-employed	P0044					
			Firm's name	ШР		Firm's EIN 🕨 4:	1-07467	49		
	pare On		Firm's address ► 4250 N FAIRFAX DRIVE	SUITE 1020		Phone no (571	ne no (571) 227-9500			
J-5-F	- 111	.v l								

ARLINGTON, VA 22203

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

✓ Yes No

Form	990 (2013)				Page 2
Par	HIII	Statement of Program Check if Schedule O conta	n Service Accomp	lishments to any line in this Part	III	
1	Briefl	ly describe the organization's	mission			
		ON OF NASSP IS TO CONP PROGRAMS	VECT AND ENGAGE SO	CHOOL LEADERS TH	ROUGH ADVOCACY, RESEA	RCH, EDUCATION, AND
2		ne organization undertake an rior Form 990 or 990-EZ?				
	If"Ye	es," describe these new serv	ces on Schedule O			
3	servi	ne organization cease conductes?			onducts, any program	
	If "Ye	es," describe these changes	on Schedule O			
4	exper		501(c)(4) organizations	s are required to repo	nree largest program services rt the amount of grants and al	
4a	(Code	e) (Expens	ses \$ 7,931,608	ıncludıng grants of \$	61,000) (Revenue \$	7,593,052)
	PROF	ESSIONAL GROWTH AND ENRICHM	ENT THROUGH AWARD-WIN	INING PUBLICATIONS, MEE	ASPIRING SCHOOL LEADERS WITH T TINGS, CONVENTIONS, AND COMMI TO CONTRIBUTE BACK TO THE PRO	TTEES, THE ASSOCIATION
4b	(Code	e) (Expens	es \$ 6,219,698	including grants of \$	252,000) (Revenue \$	10,570,027)
	LEADI AND I HONC	ERS AND THE ACADEMIC SUCCESS ELEMENTARY SCHOOL STUDENTS	OF ALL STUDENTS THE ASSITS MAJOR PROGRAMS ARE TOTALL COUNCES	OCIATION OFFERS LEADER THE NATIONAL HONOR SOC CILS THROUGH THESE PRO	OUNCILSNASSP IS COMMITTED TO T ISHIP & RECOGNITION PROGRAMS F CIETY, NATIONAL JUNIOR HONOR SO DGRAMS, THE ASSOCIATION SPONSO CATIONS, AND SCHOLARSHIPS	OR HIGH SCHOOL, MIDDLE LEVEL CIETY, NATIONAL ELEMENTARY
	(Code	e) (Expens	es \$ 1 738 823	including grants of \$	160,000) (Revenue \$	650,661)
- C	RESE RECO EDUC	ARCH AND RECOGNITIONTHE ASSO DGNIZE EXCELLENCE IN SECONDAR CATIONAL LEADERSHIP, TRAINING F	DCIATION, IN COOPERATION Y EDUCATION AND EDUCATION PROGRAMS IN EDUCATIONAL	WITH OTHER ORGANIZATI ONAL LEADERSHIP THROU LEADERSHIP, IDENTIFYING	ONS, PROVIDES PROGRAMS AND RE IGH RESEARCH PROJECTS TO IDENT G AND RECOGNIZING HIGH PERFORI RIVES TO IMPROVE SECONDARY-SCI	SEARCH TO ENHANCE AND TO IFY BEST PRACTICES IN MING SECONDARY SCHOOLS, AND
	Othe	er program services (Describ	 oe in Schedule O)			
		penses \$	including grants o	f\$) (Revenue \$)
	Tota	al program service expenses l		· · · · · · · · · · · · · · · · · · ·		

art 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)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
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		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> 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? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
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		No
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		No
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
_		28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		Νo
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		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Check if Schedule O contains a response or note to any line in this Part V	- •	Yes	N
La	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 101			
b	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return			
b	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	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	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	
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
b	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			
	Man the community of a marky to a marky that a marky at allow the man at the control of the cont	-		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		- 1\
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
ā	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 7b		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?			
	file Form 8282?	7c		Ν
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Ν
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Ν
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.	_		
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
)	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
L	Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	-		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	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			
r	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Ν
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>	14a 14b		

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

Check if Schedule O contains a response or note to any line in this Part VI							<u>.</u> ア

36	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	1a	21			
	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	1b	21			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		Νo
3	Did the organization delegate control over management duties customarily performed supervision of officers, directors or trustees, or key employees to a management cor	d by d		3		Νο
4	Did the organization make any significant changes to its governing documents since filed?	-	·	4		No
5	Did the organization become aware during the year of a significant diversion of the or	rganız	ation'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 more members of the governing body?		elect or appoint one or	7a	Yes	
h	Are any governance decisions of the organization reserved to (or subject to approval		nemhers stockholders	7b	Yes	
	or persons other than the governing body?				163	
	Did the organization contemporaneously document the meetings held or written action year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	,,,,,,,,			8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule</i>	0.		9		Νo
Se	ection B. Policies (This Section B requests information about policies not i	requ	ired by the Internal R	even	ie Cod	e.)
						NI -
					Yes	No_
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	tivitie	s of such chapters,	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act	tivitie on's e	s of such chapters, xempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	tivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing 	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	tivitie on's e s gov • •	s of such chapters, xempt purposes? erning body before filing 	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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	tivitie on's e s gov orm 9	s of such chapters, xempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	tivitie on's e s gov form 9	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	tivitie on's e s gov form 9	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy?	tivitie on's e s gov Form 9	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revi	tivitie on's e s gov form s ly inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revisindependent persons, comparability data, and contemporaneous substantiation of the	tivitie on's ess gov Form 9 Iy inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revisited persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	tivitie on's e s gov form 9 ily inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	tivitie on's e s gov form 9 ily inte the p	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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)	tivitie on's e s gov form 9 the p iew ariee deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year?	tivitie on's e s gov form 9 ty inte the p iew arie deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of	tivitie on's essential service deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization Of the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization point venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's essential service deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b 16a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F 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 annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with 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 revindependent persons, comparability data, and contemporaneous substantiation of the 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 of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organication in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	tivitie on's essential service deli	s of such chapters, xempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes	No

- 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
 - Own website 🔽 Another's website 🔽 Upon request 🗍 Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MICHAEL K SHIFFLETT CPA 1904 ASSOCIATION DRIVE RESTON, VA 20191 (703) 860-7225

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

Check if Schedule O contains a response or note to any line in this Part VII $\,\cdot\,\,$. $\,\cdot\,\,$

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

- 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

For related organization below dotted line) For related organization below dotted line) For related organization below dotted line) For related organization and related organization and related organizations For related organization and related organizations For related	(A) 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	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
(1) BARBARA-JANE PARIS PRESIDENT X X X X X X X X X X X X X		organizations below	Individual trustee or director	Truste	Officei	Key employee	Highest compensated employee	Former			organization and related
Canal Cana		20 00	х		х				0	0	0
DIRECTOR						_					
(3) RODNEY LOGAN DIRECTOR (4) MICHAEL E ALLISON DIRECTOR (5) TROY KILZER 4 00		4 00	x						o	0	0
DIRECTOR		4 00									
(4) MICHAELE ALLISON			×						0	0	0
DIRECTOR		4 00									
(S) TROY KILZER DIRECTOR (6) BRUCE LOCKLEAR DIRECTOR (7) STEVE QUINTUS DIRECTOR (8) MIKE SCHOLZ DIRECTOR (9) GA BUIE DIRECTOR (10) RICHARD BROWN DIRECTOR (11) JAYNE ELLSPERMANN DIRECTOR (12) CURTIS JOHNSON-ATEN DIRECTOR (13) BONNIE JOHNSON-ATEN DIRECTOR (14) DANIEL SHANE AZURE DIRECTOR (15) SUZI M JENSEN DIRECTOR (16) DANIEL P KELLEY DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (18) DONIEL P KELLEY DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DONIEL P KELLEY DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DIRECTOR (17) CHRIS JOHNSTON DONIEL P KELLEY DONIE	DIRECTOR		X						0	0	0
DIRECTOR		4 00									
GO BRUCE LOCKLEAR	DIRECTOR		Х						0	0	0
DIRECTOR		4 00									
CT STEVE QUINTUS			x						0	0	0
DIRECTOR		4 00									
(8) MIKE SCHOLZ DIRECTOR (9) GA BUIE 10 00 X 0 DIRECTOR (10) RICHARD BROWN 10 0 DIRECTOR (11) JAYNE ELLSPERMANN DIRECTOR (12) CURTIS JOHNSON 14 00 X DIRECTOR (13) BONNIE JOHNSON-ATEN DIRECTOR (14) DANIEL SHANE AZURE DIRECTOR (15) SUZI M JENSEN DIRECTOR (16) DANIEL P KELLEY DIRECTOR (17) CHRIS JOHNSTON 4 00 X DIRECTOR (17) CHRIS JOHNSTON A 0 0 DIRECTOR (17) CHRIS JOHNSTON A 0 0 DO 0 DIRECTOR (17) CHRIS JOHNSTON A 0 0 DO 0			х						0	0	0
DIRECTOR (9) GA BUIE 10 00		4.00									
10 00		4 00	х						0	0	0
DIRECTOR X		10.00									
COLUMN C		10 00	х						0	0	0
DIRECTOR		4.00									
Color		4 00	х						0	0	0
DIRECTOR X		4.00									
Countis Johnson		4 00	×						0	0	0
DIRECTOR											
(13) BONNIE JOHNSON-ATEN 4 00 X 0 0 DIRECTOR 4 00 X 0 0 (14) DANIEL SHANE AZURE 4 00 X 0 0 DIRECTOR 4 00 X 0 0 (15) SUZI M JENSEN 4 00 X 0 0 DIRECTOR 4 00 X 0 0 (16) DANIEL P KELLEY 4 00 X 0 0 DIRECTOR 0 0 0 (17) CHRIS JOHNSTON 4 00 X 0 0	(12) CORTIS JOHNSON	4 00	x						0	0	0
DIRECTOR X					_	_					
DIRECTOR (14) DANIEL SHANE AZURE DIRECTOR (15) SUZI M JENSEN DIRECTOR (16) DANIEL P KELLEY DIRECTOR (17) CHRIS JOHNSTON 4 00 X 0 0 0 0 0 0 0 0 0 0 0	(13) BONNIE JOHNSON-ALEN	4 00	x						0	0	0
DIRECTOR											
DIRECTOR 4 00 X 0 0 DIRECTOR X 0 0 0 (16) DANIEL P KELLEY 4 00 X 0 0 DIRECTOR X 0 0 0 (17) CHRIS JOHNSTON 4 00 X 0 0	(14) DANIEL SHANE AZURE	4 00	×						0	0	0
DIRECTOR (16) DANIEL P KELLEY DIRECTOR (17) CHRIS JOHNSTON X 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0											
DIRECTOR 4 00 X 0 0 DIRECTOR X 0 0 0 (17) CHRIS JOHNSTON 4 00 X 0 0 0	(15) SUZI M JENSEN	4 00	x						0	0	0
X						<u> </u>					_
DIRECTOR	(16) DANIEL P KELLEY	4 00	l x						0	0.	0
									Ĭ		
	(17) CHRIS JOHNSTON	4 00	_x							n	0
DIRECTOR	DIRECTOR								<u> </u>		

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar	chec (, unle n offic rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
(18) SUSAN BOSSIE MADDOX	4 00	х						0	0	0
DIRECTOR		^						0	0	0
(19) TRICIA PENA	4 00	х						0	0	0
DIRECTOR										
(20) KRIS OLSEN	4 00	х						0	0	0
DIRECTOR (21) DEBRA THOMAS	4 00			_						
DIRECTOR	4 00	х						0	0	0
(22) JOANN BARTOLETTI	37 50									
EXECUTIVE DIRECTOR				Х				407,669	0	65,194
(23) JOHN N DRIPPS	37 50			х				212,365	0	25,401
DIRECTOR, BUSINESS ADMINISTRATION										
(24) RICHARD FLANARY	37 50				x			192,624	0	21,381
DEPUTY DIRECTOR, PROGRAMS										
(25) BEVERLY HUTTON	37 50				х			179,625	0	9,388
INTERIM DEPUTY EXEC DIRECTOR (26) NANCY RIVIERE	37 50									
DIRECTOR, EVENTS & TRAVEL MANAGEMENT	37 30					х		158,876	0	20,403
(27) JOHN NORI	37 50									
ASSOCIATE DIRECTOR, PROGRAM DEVELOPMENT						Х		145,358	0	10,687
(28) PETER D REED	37 50					х		136,018	0	18,834
ASSOCIATE DIRECTOR, PROGRAM SERVICES										
(29) SANDRA FULGHAM	37 50					x		127,241	0	16,616
ASSOCIATE DIRECTOR, FINANCE					_					
(30) ANN POSTLEWAITE	37 50					x		145,709	0	16,296
DIRECTOR, STUDENT PROGRAMS						<u> </u>				
1b Sub-Total			•	•		.•				
c Total from continuation sheets to Par	·									
d Total (add lines 1b and 1c)		•				•		1,705,485	0	204,200
2 Total number of individuals (including	but not limited to	those	liste	d ab	oove	e) who	rec	eived more than		

\$100,000 of reportable compensation from the organization 19

			res	NO
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule I for such individual		.,	
	marviada	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
ABDI INC BUNCHER COMMERCE PARK 16 AVENUE A LEETSDALE PA 15056	PRODUCT FULFILLMENT & WAREHOUSE SERVICES	1,239,550
INTERNATIONAL SCHOLARSHIP & TUITION SERV 1321 MURFREESBORO SUITE 800 NASHVILLE TN 37217	SCHOLARSHIP APPLICATION PROCESSING	296,750
PUBLIC PRIVATE SECTOR CONSULTANTS LLC 245 WASHINGTON STREET SUITE 3444 SARATOGA SPRINGS NY 12866	CONSULTING/REORGANIZATION	201,563
R2INTEGRATED HOLDINGS LLC 400 EAST PRATT STREET 11TH FLOOR BALTIMORE MD 21202	WEBSITE CONSULTING SERVICES & SUPPORT	198,221
PERSONIFY INC 1919 GALLOWS ROAD SUITE 400 VIENNA VA 221823964	AMS SOFTWARE SUPPORT & SERVICE	172,822
Total number of independent contractors (including but not limited to those listed above	\ who received more than	

Program Serwice Revenue and Othe		
nue Program Service Revenue	Contributions, Gifts, Grants and Other Similar Amounts	14
4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	Program Service Revenue	2
11	Other Revenue	3 4 5 5 6 1 7 7 1 8 8 8 9 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Form 99		<u> </u>						Page 9
Part V	/##1	Statement o	f Revenue ule O contains a respon	se or note to any lu	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 22	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	es 1b					
Ę,	С	Fundraising eve	ents 1c					
Giffs, iilar A	d	Related organiz	zations 1d					
B.E	e	Government grants	s (contributions) 1e					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and 1f ot included above	1,572,754				
를	g	Noncash contribute 1a-1f \$	ons included in lines					
Son	h	Total. Add lines	s 1 a - 1 f		1,572,754			
				Business Code				
Program Serwoe Revenue	2a	MEMBERSHIP DUE	S & SUBSCRIPTIONS	900099	7,899,276	7,899,276		
85 ≥	b	CONFERENCE & M	EETINGS	900099	1,583,122	1,397,872		185,250
95	С	OTHER FEES		900099	696,937	696,937		
Ser v	d	ASSESSMENT CENT	TER FEES	900099	150,259	150,259		
Ē	е							
2 2 2 3	f	All other progra	am service revenue					
<u>~</u>	g	Total. Add lines	s 2a – 2f		10,329,594			
	3		ome (including dividend ar amounts)		185,910			185,910
	4		stment of tax-exempt bond p					
	5	Royalties	<u> </u>	🔸	558,704			558,704
			(ı) Real	(11) Personal				
	6a	Gross rents Less rental						
	Ь	expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)	·				
	7a	Gross amount	(ı) Securities	(II) O ther				
		from sales of assets other than inventory	2,659,917					
	b	Less cost or other basis and	2,318,793					
	c	sales expenses Gain or (loss)	341,124					
	d	Net gain or (los	s)		341,124			341,124
e ne	8a	Gross income f						
Other Revenue		\$of contributions See Part IV , lin						
ē	Ь	Lace direction	a penses b					
₹	c		(loss) from fundraising e	vents				
	9a		rom gaming activities	-				
	_	1000 4	a noncos h					
	b c		penses b [(loss) from gaming activ	rities				
		Gross sales of returns and allo	inventory, less					
	.		a	9,440,148				
	b c		oods sold . . b (loss) from sales of inve	2,084,731	7,355,417	7,355,417		
	_	Miscellaneous		Business Code	,,555,117	,,555,11,		
	11a	HONORARIA		900099	231,189			231,189
	ь	ADVERTISING	;	541800	188,523		188,523	
	С	TRAVEL REBA		900099	157,913			157,913
	d	All other reven	ue		60,853			60,853
	е	Total. Add lines	s 11a-11d	🕨	638,478			
	12	Total revenue.	See Instructions	•	20,981,981	17,499,761	188,523	1,720,943

	Check if Schedule O contains a response or note to any line in this	Part IX		<u> </u>	√
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
2	Grants and other assistance to individuals in the United States See Part IV, line 22	473,000	473,000		
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	1,151,160	567,753	554,042	29,365
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	6,147,388	3,407,840	2,623,052	116,496
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	987,555	537,931	429,888	19,736
9	Other employee benefits	983,635	609,536	353,537	20,562
10	Payroll taxes	476,595	259,606	207,464	9,525
11	Fees for services (non-employees)				
а	Management				
b	Legal	146,723		146,723	
С	Accounting	94,997		94,997	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,437,653	2,520,426	854,062	63,165
12	Advertising and promotion				
13	Office expenses	349,468	18,097	327,616	3,75
14	Information technology	1,100,827	432,408	667,163	1,250
15	Royalties				
16	Occupancy	244,135	13,639	230,496	
17	Travel	1,140,814	842,436	289,782	8,59
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,120,063	948,314	171,749	
20	Interest	81,774		81,774	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	413,513		413,513	
23	Insurance	455,521	395,469	60,052	
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	PROGRAM DELIVERY & FULF	1,738,714	900,229	838,307	178
b	PROGRAM OVERHEAD	6	3,963,445	-4,052,192	88,753
c					
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	20,543,541	15,890,129	4,292,025	361,387
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)	20,513,511	13,030,123	1,232,023	301,307

Part X Balance Sheet

Par	τχ	Check if Schedule O contains a response or note to any line in	this Pa	art X			
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			3,573,778	1	5,132,702
	2	Savings and temporary cash investments			1,510,112	2	1,510,255
	3	Pledges and grants receivable, net			216,060	3	0
	4	Accounts receivable, net			1,788,420	4	1,506,611
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete Paschedule L	art II (of		5	
Assets	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule		6			
	7	Notes and loans receivable, net		7			
⋖	8	Inventories for sale or use			724,683		502,744
	9	Prepaid expenses and deferred charges			343,264		309,809
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		10,281,559			<u> </u>
	ь	Less accumulated depreciation	10b	7,459,835	3,048,564	10c	2,821,724
	11	Investments—publicly traded securities	<u> </u>		8,053,601	11	9,320,418
	12	Investments—other securities See Part IV, line 11		12	_		
	13	Investments—program-related See Part IV, line 11				13	_
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			73,317	15	156,982
	16	Total assets. Add lines 1 through 15 (must equal line 34) .			19,331,799	16	21,261,245
	17	Accounts payable and accrued expenses			2,515,698	17	2,615,390
	18	Grants payable			_,,	18	
	19	Deferred revenue			3,284,440		4,025,553
	20	Tax-exempt bond liabilities			3,23 1, 113	20	.,,,,,,,,,
	21	Escrow or custodial account liability Complete Part IV of Scho				21	
lities	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	ors, tr			21	
Liabiliti		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie	s .		2,016,646	23	1,954,065
	24	Unsecured notes and loans payable to unrelated third parties				24	_
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa					
		D			1,574,170		2,155,187
	26	Total liabilities. Add lines 17 through 25			9,390,954	26	10,750,195
ф У		Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.	⊽ and	complete			
Ë	27	Unrestricted net assets			8,677,187	27	10,222,020
Fund Balance	28	Temporarily restricted net assets		• •	1,263,658	28	289,030
<u> </u>	29	Permanently restricted net assets			1,200,000	29	200,000
Ĭ	29	Organizations that do not follow SFAS 117 (ASC 958), check h				29	
		complete lines 30 through 34.	CIC F	and			
0.	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
455	32	Retained earnings, endowment, accumulated income, or other				32	
Net /	33	Total net assets or fund balances			9,940,845	33	10,511,050
ž	34	Total liabilities and net assets/fund balances			19,331,799	34	21,261,245
		rotal habilities and net assets/land balances	• •	• •	19,551,799	J-4	21,201,240

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		20,9	81,981
2	Total expenses (must equal Part IX, column (A), line 25)	_			
3	Revenue less expenses Subtract line 2 from line 1	2		20,3	543,541
•	Revenue less expenses subtract line 2 non-line 1	3		4	38,440
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9 0	940,845
5	Net unrealized gains (losses) on investments	-			710,013
	g v	5		7	01,572
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		- 5	69,807
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		10.5	511,050
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				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		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	n		
	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 oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	1e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
За	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: 93493135033575

1: 93493135033575

OMB No 1545-0047

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.

2013

Open to Public Inspection

Name of the organization
NATIONAL ASSOCIATION OF SECONDARY
SCHOOL PRINCIPALS

Employer identification number

52-6006937

Par	+ T	Reas	on for Pu	blic Charity Sta	tus (All or	nanizatior	ns must con	nlete this	nart) See i		<u> </u>	
				te foundation becaus						nou actions	<i>-</i> .	
1	Г		· ·	ion of churches, or a	· ·		= -	•	-			
2			-	in section 170(b)(1					(-)(-)(-)			
3	<u></u>			perative hospital se			•	ion 170(b)(1)(A)(iii).			
4	,			h organization operat	=					(1)(A)(iii).	Enter the	
•	'			ity, and state			a			(-)()()-		
5	\sqcap	An orga	anızatıon op	erated for the benefi	t of a college	e or univers	ity owned or	operated by	/ a governmer	ıtal unıt des	cribed in	
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)							
6	\sqcap	A feder	al, state, or	· local government or	governmen	tal unit des	cribed in sec	tion 170(b)	(1)(A)(v).			
7	Γ	Anorga	anization th	at normally receives	a substanti	al part of its	s support from	m a governn	nental unit or	from the ger	neral publi	с
_	_			on 170(b)(1)(A)(vi).	•	•						
8	_		•	described in section			•	•				
9	굣	_		at normally receives	-				•	· ·	_	SS
				rities related to its ex								
		•		oss investment inco				•		tax) from b	usinesses	1
	_			ganızatıon after June								
LO L1	<u>_</u>			ganized and operated ganized and operated								
e	Γ	a [Type I	ibes the type of supp Type II c ox, I certify that the	┌ Type II	I - Functio	nally integrat	ted d	Type III - N			
		other tl		on managers and ot								
f		If the o	rganization	received a written de	etermination	from the I	RS that it is a	a Type I, Ty	pe II, or Type	: III suppor	tıng organ	ızatıo <u>n,</u>
			this box	2006, has the organi	antion neces	ntad any ai	ft or contribu	tion from an	u of the			ı
g			rugust 17, 2 ig persons?		ization acce	pted any gi	it of Contribu	LIOII II OIII aii	y of the			
				rectly or indirectly o	ontrols, eith	ner alone or	together wit	h persons d	escribed in (ii)	Yes	No
		and (III) below, the	governing body of th	e supported	organizati	on?			110	g(i)	\top
		(ii) A fa	amily memb	er of a person descr	bed in (i) ab	ove?				110	g(ii)	$\overline{}$
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)) above?			110	y(iii)	$\overline{}$
h		Provide	the followi	ng ınformatıon about	the support	ed organiza	ition(s)				<u>, </u>	
) Nam	oo of	(ii) EIN	(iii) Type of	(iv) Is	the	(v) Did yo	vu potify	(vi) Is	the	(vii) A	mount o
	uppoi		(11) [11]	organization	organizat		the organ		organiza			etary
		ation		(described on	coľ (i) lis		ın col (i)		col (i) or			port
				lines 1 - 9 above	your gove	_	suppo	ort?	in the U	IS?		
				or IRC section (see	docume	ent?						
				instructions))		1		1			4	
					Yes	No	Yes	No	Yes	No		
						<u> </u>						
Total				ĺ		1	1	1	1			

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
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) 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	Public support. 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) 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	Total support (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 stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. 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-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ □
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. 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	T	1				1
Cale	ndar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
_	membership fees received (Do	11,210,54!	11,264,682	10,614,156	2,870,099	1,572,7	'54 37,532,236
	not include any "unusual	11,210,31	11,201,002	10,011,130	2,0,0,055	1,3,2,	37,332,230
_	grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished						
	in any activity that is related to	9,845,972	10,719,714	10,917,145	10,155,673	10,329,5	51,968,098
	the organization's tax-exempt						
	purpose						
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		2.00.00.00.00.00.00.00.00.00.00.00.00.00	24 524 224	10.005.770		
6	Total. Add lines 1 through 5	21,056,517	21,984,396	21,531,301	13,025,772	11,902,3	89,500,334
7a	A mounts included on lines 1, 2,						0
	and 3 received from disqualified persons						\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
h	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed	201,89	1,185,640	269,539	521,794	214,2	2,393,097
	the greater of $$5,000$ or 1% of						
	the amount on line 13 for the year						
С	Add lines 7a and 7b	201,89	1,185,640	269,539	521,794	214,2	2,393,097
8	Public support (Subtract line 7c						87,107,237
50	rom line 6) ction B. Total Support						
	ndar year (or fiscal year						
	beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	21,056,517	21,984,396	21,531,301	13,025,772	11,902,3	48 89,500,334
.0a	Gross income from interest,						
	dividends, payments received						
	on securities loans, rents,	1,009,421	936,194	864,858	769,694	744,6	14 4,324,781
	royalties and income from						
b	Similar sources Unrelated business taxable						
	income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
C	Add lines 10a and 10b	1,009,421	936,194	864,858	769,694	744,6	14 4,324,781
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include						
12	gain or loss from the sale of	240.262	252.042	220.250	255 200	440.0	1 026 710
	capital assets (Explain in Part	349,363	353,942	328,250	355,209	449,9	55 1,836,719
	IV)						
13	Total support. (Add lines 9,	22,415,301	23,274,532	22,724,409	14,150,675	13,096,9	95,661,834
	10c, 11, and 12)						
14	First five years. If the Form 990 is	for the organizat	ion's first, second	, third, fourth, or f	ifth tax year as a	501(c)(3) or	janization, ►
Se	check this box and stop here ction C. Computation of Pub	olic Support P	ercentage				<u> </u>
	Public support percentage for 2013			13, column (f))		15	91 060 %
<u> </u>		•		, , , , , , ,		16	93 770 %
15		12 Schedule A P	art III line 15				
15 16	Public support percentage from 20			16		16	93 7 7 0 70
15 16 Se	Public support percentage from 20 ction D. Computation of Inv	estment Inco	me Percentag		ı (f))		
15 16 Se 17	Public support percentage from 20 ction D. Computation of Inv Investment income percentage for	estment Inco 2013 (line 10c, c	ome Percentago olumn (f) divided l	oy line 13, columi	n (f))	17	4 520 %
15 16 Se 17 18	Public support percentage from 20 ction D. Computation of Inv	2013 (line 10c, c m 2012 Schedule	ome Percentago olumn (f) divided l A, Part III, line 1	oy line 13, columi 7		17 18	4 520 % 4 330 %

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

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

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

	Facts And Circumstances Test
Return Reference	Explanation
SCHEDULE A, PART III, LINE 12, EXPLANATION OF OTHER INCOME	TRAVEL REBATE HONORARIA OTHER MAILING LIST

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493135033575

OMB No 1545-0047

Open to Public Inspection

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.

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

f th		s" to Form 990, Part IV, Line 5 (Pro anizations, Complete Part III						
N a	me of the organization TIONAL ASSOCIATION OF SECONDARY HOOL PRINCIPALS				-		ition numb	er
		ganization is exempt under	section 501/		06937		anizatio	n
				-)II JZ	, org	ainzano	111.
1		ganızatıon's dırect and ındırect politic	al campaign act	ivities in Part IV				
2	Political expenditures				•	\$ <u> </u>		(
3	Volunteer hours					_		(
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).				
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955		►	\$		(
2	Enter the amount of any excise	e tax incurred by organization manag	ers under sectior	n 4955	•	\$		(
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?				┌ Yes	┌ No
4a	Was a correction made?						┌ Yes	┌ No
Ь	If "Yes," describe in Part IV							
Par		ganization is exempt under	section 501(c), except sect	ion 50	01(c)	(3).	
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activitie	s 🕨	\$		
2	Enter the amount of the filing o exempt function activities	organization's funds contributed to ot	her 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 F			·		→ —	☐ Yes	□ No
5	organization made payments f amount of political contribution	nd employer identification number (E) For each organization listed, enter the ns received that were promptly and d political action committee (PAC) If	e amount paid fro rectly delivered	m the filing organiz to a separate politi	atıon's cal org	funds anızat	Also ente	rthe
	(a) Name	(b) Address	(c) EIN	(d) A mount pai filing organizat funds If none, er	ion's	cor dir	Amount on tributions and prompt dectly delivers parate programme anization enter-	received tly and ered to a olitical If none,

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)).

- A Check ► 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) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	96,121	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	251,687	
c	Total lobbying expenditures (add lines 1a and 1b	o)	347,808	
d	O ther exempt purpose expenditures		19,834,340	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	20,182,148	
f	Lobbying nontaxable amount Enter the amount f	rom the following table in both	1,000,000	
	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		
	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
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 lir	ne 1h or line 1i, did the organization file Form 472	0 reporting	

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 Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total		
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000		
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000		
c	Total lobbying expenditures	426,718	503,470	367,097	347,808	1,645,093		
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000		
е —	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000		
f	Grassroots lobbying expenditures	79,708	131,224	77,387	96,121	384,440		

	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	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	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	i age -i	
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	
l		

Schedule D (Form 990) 2013

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DLN: 93493135033575

OMB No 1545-0047

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) Open to Public

temal Re	evenue Service	and its instruct	ions is at <u>www.irs.gov/form990</u> .		Inspection
	of the organi			Emp	loyer identification number
NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS				52-	6006937
Part	Organi	izations Maintaining Donor Adv	vised Funds or Other Similar Fu		
		zation answered "Yes" to Form 990	, Part IV, line 6.		·
			(a) Donor advised funds		(b) Funds and other accounts
	otal number a				
		cributions to (during year)			
		nts from (during year)			
		e at end of year			
f	unds are the o	rganızatıon's property, subject to the or			☐ Yes ☐ No
u C	used only for clonferring impe	haritable purposes and not for the benef ermissible private benefit?	onor advisors in writing that grant funds fit of the donor or donor advisor, or for an	y othe	r purpose Yes No
			the organization answered "Yes" to	Forn	n 990, Part IV, line 7.
Γ	Preservation Protection	conservation easements held by the org on of land for public use (e g , recreation of natural habitat on of open space	or education) Γ Preservation of an		ically important land area d historic structure
2 (Complete lines		a qualified conservation contribution in th	ne forn	n of a conservation
		io iast aa, oi tiio tax , cai	Γ		Held at the End of the Year
a T	otal number o	f conservation easements		2a	
b T	otal acreage i	restricted by conservation easements		2b	
c N	Number of cons	servation easements on a certified histo	oric structure included in (a)	2c	
		servation easements included in (c) acc ure listed in the National Register	uired after 8/17/06, and not on a	2d	
3 1	Number of cons	servation easements modified, transferr	red, released, extinguished, or terminated	d by th	ne organization during
t	he tax year ►_				
1 N	Number of stat	es where property subject to conservat	ion easement is located ►	_	
		nization have a written policy regarding t the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of	violations, and Yes No
5 S	Staff and volun	teer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents d	during the year
·	\mount of expe ►\$	enses incurred in monitoring, inspecting	g, and enforcing conservation easements	durin	g the year
3 [Does each con	servation easement reported on line 2(o 0(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	tion 17	7 0 (h)(4)(B)(ı)
b	alance sheet,		nservation easements in its revenue and e footnote to the organization's financial ents		
art		izations Maintaining Collection etc. If the organization answered "Y	s of Art, Historical Treasures, of es" to Form 990, Part IV, line 8.	or Ot	her Similar Assets.
ν	vorks of art, his	storical treasures, or other similar asse	.16 (ASC 958), not to report in its reven its held for public exhibition, education, c to its financial statements that describes	rrese	arch in furtherance of public
v	vorks of art, hi		16 (ASC 958), to report in its revenue s its held for public exhibition, education, o e items		
(i) Revenues II	ncluded in Form 990, Part VIII, line 1			- \$
(ii) Assets incl	luded in Form 990, Part X			▶ \$
<u> </u>	f the organizat	tion received or held works of art, histor	rical treasures, or other similar assets fo 116 (ASC 958) relating to these items	r finan	cial gain, provide the
a R	Revenues inclu	ıded ın Form 990, Part VIII, line 1			► \$

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	lections of Art,	<u> Histo</u>	<u>rical</u>	Treasu	ires, or Oti	<u>ner</u>	Similar Asse	ets (co	<u>ntınued)</u>
3	Using the organization's acquisition, accessi collection items (check all that apply)	on, and other record	s, chec	k any	of the foll	owing that are	eas	ignificant use o	fıts	
а	Public exhibition		d [Lo	an or exc	hange progra	ms			
b	Scholarly research		е Г	_ Ot	her					
c	Preservation for future generations									
4	Provide a description of the organization's co Part XIII	llections and explair	n how th	ney fui	ther the o	organization's	exe	mpt purpose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than to						sımıl		Yes	□ No
Par	t IV Escrow and Custodial Arrange Part IV, line 9, or reported an am	ements. Complet	te if th	e org	anızatıoı		"Ye	<u> </u>		110
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					or other asset	ts no		Yes	 Г No
b	If "Yes," explain the arrangement in Part XII	I and complete the f	ollowing	g table	<u>:</u>			,		,
								Amo	unt	
C	Beginning balance					1	с			
d	Additions during the year					1	d			
e	Distributions during the year					1	e			
f	Ending balance					1	f			
2a	Did the organization include an amount on Fo	rm 990, Part X, line	21?					Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	explana	ition h	as been p	rovided in Pa	rt X	III		Γ
Pai	rt V Endowment Funds. Complete i									
		(a)Current year	(b) Prio	or year	b (c) Tv	wo years back ((d) Th	ree years back (e) Four ye	ars back
1a	Beginning of year balance									39,481
b	Contributions									
C	Net investment earnings, gains, and losses									40
d	Grants or scholarships									
e	Other expenditures for facilities and programs									39,521
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curr	ent year end balance	e (lıne 1	.g, col	umn (a))	held as				
а	Board designated or quasi-endowment ►									
b	Permanent endowment ►									
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	ıld equal 100%								
3a	Are there endowment funds not in the posses organization by	sion of the organizat	tion tha	t are l	neld and a	idministered 1	for tl	ne	Yes	No
	425							3a(i)	1 1	_
	(i) unrelated organizations						•		+	
	(ii) related organizations						٠.	3a(ii)		
_	(ii) related organizations	ns listed as required					· .			
4	(ii) related organizations	ns listed as required e organization's end	owment	funds	5			3a(ii)		
4	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment	funds	5		to F	3a(ii)		ne
4	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment ne orga	funds anızat (a) Cos	5		er	3a(ii)	IV, lır	ne ok value
4 Par	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment ne orga	funds anızat (a) Cos	tion ansv	wered 'Yes'	er	3a(ii) 3b orm 990, Part	IV, lır	
Par	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment ne orga	funds anızat (a) Cos	tion ansv	vered 'Yes' (b)Cost or oth basis (other)	er 58	3a(ii) 3b orm 990, Part	: IV, lır	ok value
Par	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment ne orga	funds anızat (a) Cos	tion ansv	(b)Cost or oth basis (other)	er 58 60	3a(ii) 3b form 990, Part (c) Accumulated depreciation	: IV, lır	ok value 153,958
1a l b f	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment ne orga	funds anızat (a) Cos	tion ansv	(b)Cost or oth basis (other) 153,9 5,160,7	58 60 83	3a(ii) 3b form 990, Part (c) Accumulated depreciation 3,531,567	: IV, lır	153,958 1,629,193
1a l b E c l d E	(ii) related organizations	ns listed as required e organization's end nt. Complete if th	owment ne orga	funds anızat (a) Cos	tion ansv	(b)Cost or oth basis (other) 153,9 5,160,7	er 58 60 83 60	3a(ii) 3b form 990, Part (c) Accumulated depreciation 3,531,567	: IV, lır	153,958 1,629,193 31,902

Part VII Investments—Other Securities. Co	omplete if the organization	answered 'Yes' to Form 990, Part IV, line 11b.
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)	F	
Part VIII Investments—Program Related. (
See Form 990, Part X, line 13.	complete if the organization	manamered res to form 550, rare 14, mile 11e
(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)	F	
		0, Part IV, line 11d See Form 990, Part X, line 15
(a) Desc	cription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line	15.)	
Part X Other Liabilities. Complete if the org	janization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
Form 990, Part X, line 25.	(I-) Death of	T
1 (a) Description of liability	(b) Book value	
Federal income taxes		
RETIREMENT BENEFITS	2,155,187	
		1
	+	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	> 2,155,187	
2 Liphility for uncertain tay positions In Dart VIII	do the toyt of the feetnests to the	ha arganization's financial statements that

Scheu	ule D (Form 990) 2013							Page 4
Part		evenue per Audited Financial Stat ered 'Yes' to Form 990, Part IV, line 1		nts W	ith R	evenue p	er R	eturn Complete ıf
1	Total revenue, gains, and other	support per audited financial statements					1	22,539,678
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12						
а	Net unrealized gains on investr	ments	2a					
b	Donated services and use of fa	cilities	2b					
C	Recoveries of prior year grants		2c					
d	Other (Describe in Part XIII)		2d		:	2,084,731		
e	Add lines 2a through 2d .						2e	2,084,731
3	Subtract line ${f 2e}$ from line ${f 1}$.						3	20,454,947
4	Amounts included on Form 990), Part VIII, line 12, but not on line 1						
а	Investment expenses not inclu	ided on Form 990, Part VIII, line 7b .	4a					
b	Other (Describe in Part XIII)		4b			527,034		
c	Add lines 4a and 4b						4c	527,034
5	Total revenue Add lines 3 and	4c. (This must equal Form 990, Part I, line	12)				5	20,981,981
Part		cpenses per Audited Financial Sta		nts V	Vith I	xpenses	per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line						
1	·	audited financial statements		•			1	22,628,272
2		not on Form 990, Part IX, line 25	l _	ı				
a		cilities	2a				-	
Ь			2b				1	
с			2c			2 2 2 4 7 2 4	-	
d	,		2d			2,084,731	1	2 2 2 4 7 2 4
e	-				•		2e	2,084,731
3					•		3	20,543,541
4), Part IX, line 25, but not on line 1:	۱.	ı				
a	•	ded on Form 990, Part VIII, line 7b		-			-	
Ь			4b				} _	
_ C	Add lines 4a and 4b				•		4c	0
5		d 4c. (This must equal Form 990, Part I, line	18)		•		5	20,543,541
	Supplemental Info		1.4	D 1 11	, ,	41 131		
Part	ide the descriptions required for V , line 4 , Part XI , nation	Part II, lines 3, 5, and 9, Part III, lines 1a a lines 2d and 4b, and Part XII, lines 2d and	and 4, 4b Al:	so com	/, line: iplete	s 1b and 2t this part to	provic	de any additional
	Return Reference	Explanation						
PART	V, LINE 4	PROVIDE FOR SPEAKER EXPENSES, HOLLEVEL PRE-CONFERENCE AT THE NASS					STS, A	T THE MIDDLE
PART	X, LINE 2	THE ASSOCIATION IS AN EXEMPT ORG	ANIZA	NOITA	UND	ER SECTIO	N 501	L(C)(3) OF THE

Return Reference	Explanation
PART V, LINE 4	PROVIDE FOR SPEAKER EXPENSES, HONORIA AND/OR TRAVEL COSTS, AT THE MIDDLE LEVEL PRE-CONFERENCE AT THE NASSP ANNUAL CONVENTION
PART X, LINE 2	THE ASSOCIATION IS AN EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE IN ADDITION, THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE ASSOCIATION IS NOT A PRIVATE FOUNDATION HOWEVER, THE ASSOCIATION IS REQUIRED TO REPORT UNRELATED BUSINESS INCOME TO THE INTERNAL REVENUE SERVICE AND THE COMMONWEALTH OF VIRGINIA, AS WELL AS PAY CERTAIN OTHER TAXES TO LOCAL JURISDICTIONS THERE IS NO UNRELATED BUSINESS INCOME TAX LIABILITY FOR THE YEARS ENDED JUNE 30, 2014 AND 2013 THE ASSOCIATION HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THE ADOPTION OF THIS STANDARD HAD NO IMPACT ON THE ASSOCIATION'S FINANCIAL STATEMENTS THE ASSOCIATION FILES AS A TAX-EXEMPT ORGANIZATION SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, THE ASSOCIATION'S 2011, 2012 AND 2013 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS
PART XI, LINE 2D - OTHER ADJUSTMENTS	COST OF GOOD SOLD 2,084,731
PART XI, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT INCOME 527,034
PART XII, LINE 2D - OTHER ADJUSTMENTS	COST OF GOODS SOLD 2,084,731

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

Schedule D (Form 990) 2013

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2013

OMB No 1545-0047

Schedule I (Form 990)

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

Department of the Treasury Internal Revenue Service	_	-	Attach to Form 990 prm 990) and its instruct			0	pen to Public Inspection
Name of the organization NATIONALASSOCIATION OF SEC	~ O N D A R V					Employer identificati	on number
SCHOOL PRINCIPALS						52-6006937	
Part I General Information	on on Grants and	l Assistance					
Does the organization maintain the selection criteria used to a Describe in Part IV the organiz	iward the grants or as zation's procedures fo	sistance? r monitoring the use o	f grant funds in the Unite	d States			√Yes Γι
			r ganizations in the more than \$5,000. Pa				es to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount 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 gra or assistance
2 Enter total number of section 5	501(c)(3) and govern	nent organizations list	ed in the line 1 table .			🕨 _	
3 Enter total number of other org	janizations listed in th	e line 1 table				•	

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.

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) PRUDENTIAL SPIRIT OF THE COMMUNITY	112	152,000		N/A	N/A
(2) NATIONAL HONOR SOCIETY SCHOLARSHIPS	200	250,000		N/A	N/A
(3) A WARDS BREAK THROUGH HIGH SCHOOLS	9	45,000		N/A	N/A
(4) AWARDS PRINCIPAL OF THE YEAR	6	16,000		N/A	N/A
(5) AWARDS ASS'T PRINCIPAL OF THE YEAR	3	8,000		N/A	N/A
(6) SHULL AWARD	3	1,500		N/A	N/A
(7) NATIONAL ASSOCIATION OF STUDENT COUNCIL AWARD	1	500			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	JUDGING PROCESSES FOR THE NATIONAL HONOR SOCIETY SCHOLARSHIP PROGRAM THE NATIONAL HONOR SOCIETY SCHOLARSHIP
	PROGRAM ARE ADMINISTERED BY THE NASSP STUDENT ACTIVITIES OFFICE UNDER DIRECTION OF THE ASSOCIATE DIRECTOR, DAVID
	CORTS THE SCHOLARSHIP PROGRAM HAS A FOUR-PAGE NOMINATION (APPLICATION) FORM HIGH SCHOOLS ACROSS THE COUNTRY
	ARE MAILED COPIES OF THE NOMINATION FORMS WITH INSTRUCTIONS THIS INFORMATION IS ALSO POSTED ON THE NASSP WEB
	SITES NATIONAL HONOR SOCIETIES MAY NOMINATE TWO SENIORS MEMBERS OF THE NATIONAL HONOR SOCIETY TO COMPETE
	WINNERS ARE CHOSEN USING A THREE STEP PROCESS THE FIRST PHASE SCORES THE NOMINATION FORMS USING AN ESTABLISHED
	ALGORITHM DEVELOPED BY NASSP DATA FROM EACH NOMINATION FORM RECEIVED IS INPUT INTO THE COMPUTER THE ALGORITHM IS
	APPLIED AND THE TOP APPLICANTS ARE SELECTED THE TOP 1,000-1,200 NOMINATION FORMS ARE SELECTED USING THE ALGORITHM
	TO ADVANCE TO THE SECOND ROUND OF SCORING, THAT BY THE EIGHT MEMBER NATIONAL SELECTION COMMITTEE THE NATIONAL
	SELECTION COMMITTEE MEMBERS ARE INVITED BY NASSP TO SERVE ON THE SELECTION COMMITTEE MEMBERS REPRESENT EACH OF
	THE EIGHT REGIONS DEFINED BY NASSP ALL MEMBERS OF THE COMMITTEE ARE HIGH SCHOOL PRINCIPALS THE SELECTION
	COMMITTEE MEMBERS READ THE 1,000-1,200 NOMINATION FORMS TO DETERMINE THE STATE FINALISTS TO RECEIVE A \$1,000
	SCHOLARSHIP FROM THE STATE FINALISTS THE COMMITTEE WILL SELECT 53 STATE WINNERS TO RECEIVE AN ADDITIONAL \$500
	SCHOLARSHIP ONCE THE STATE WINNERS ARE SELECTED THE COMMITTEE WILL DETERMINE THE NINE REGIONAL WINNERS THAT
	RECEIVE AN ADDITIONAL \$1,500 SCHOLARSHIP, FROM THE NINE REGIONAL WINNERS ONE NATIONAL WINNER WILL BE IDENTIFIED TO
	RECEIVE AN ADDITIONAL \$10,000 SCHOLARSHIP AWARD, MAKING THEIR SCHOLARSHIP AWARD FROM THE STATE, REGIONAL AND
	WINNER CATEGORIES TOTALING A \$13,000 SCHOLARSHIP

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OMB No 1545-0047

Inspection

Open to Public

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

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

Compensation Information

► 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.

Name of the organization NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS

Employer identification number

52-6006937

Pai	t I Questions Regarding Compensation	1				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	\sqcap	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u> </u>	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement or provision of all of the expenses de			1b	Yes	
2	Did the organization require substantiation prior to redirectors, trustees, officers, including the CEO/Exec			2	V	
			nector, regarding the recine effected in the 14		Yes	
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all th used by a related organization to establish compens	at apply	y Do not check any boxes for methods			
	✓ Compensation committee	\vdash	Written employment contract			
	Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, For a related organization	Part VII	, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control	paymen	t?	4a		Νo
b	Participate in, or receive payment from, a supplement	ntal non	qualified retirement plan?	4b	Yes	
С	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	olete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a	, did the organization pay or accrue any			
а	The organization?			5a		No
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
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, payments not described in lines 5 and 6? If "Yes," d			7		No
8	Were any amounts reported in Form 990, Part VII, p	aid or a	ccured pursuant to a contract that was			
	subject to the initial contract exception described in	Regula	tions section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III			8		No
9	If "Yes" to line 8, did the organization also follow the section 53 $4958-6(c)$?	rebutta	able presumption procedure described in Regulations	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)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)JOANN BARTOLETTI EXECUTIVE DIRECTOR	(i) (ii)	351,021 0	0	56,648 0	64,148 0	1,046 0	472,863 0	0
(2)JOHN N DRIPPS DIRECTOR, BUSINESS ADMINISTRATION	(i) (ii)	212,365 0	0	0	9,066 0	16,335 0	237,766 0	o 0
(3)RICHARD FLANARY DEPUTY DIRECTOR, PROGRAMS	(i) (ii)	192,624 0	0	0	8,656 0	12,725 0	214,005	0
(4)BEVERLY HUTTON INTERIM DEPUTY EXEC DIRECTOR	(i) (ii)	179,625 0	0	0	4,714 0	4,674 0	189,013 0	0 0
(5)NANCY RIVIERE DIRECTOR, EVENTS & TRAVEL MANAGEMENT	(i) (ii)	158,876 0	0	0	7,487 0	12,916 0	179,279 0	0
(6)JOHN NORI ASSOCIATE DIRECTOR, PROGRAM DEVELOPM	(i) (ii)	145,358 0	0	0	6,371 0	4,316 0	156,045 0	0
(7)PETER D REED ASSOCIATE DIRECTOR, PROGRAM SERVICES	(i) (ii)	136,018 0	0	0	6,247 0	12,587 0	154,852 0	0
(8)ANN POSTLEWAITE DIRECTOR, STUDENT PROGRAMS	(i) (ii)	145,709 0	0	0	3,604 0	12,692	162,005	0

Part III Supplemental Information

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

Also complete this part for any additional information

Return Reference	Explanation
PART I, LINE 1A	JOHN N DRIPPS - HEALTH CLUB - NOT INCLUDED IN INCOME NANCY RIVIERE - HEALTH CLUB - NOT INCLUDED IN INCOME
PART I, LINE 4B	JOANN BARTOLETTI, EXECUTIVE DIRECTOR, PARTICIPATED IN A NONQUALIFIED RETIREMENT PLAN THE CONTRIBUTION TO THE PLAN
	DURING THE FISCAL YEAR ENDED JUNE 30, 2014 IS \$31,785

Schedule J (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493135033575

OMB No 1545-0047

2013

Open to Public Inspection

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.

Employer identification number Name of the organization NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS 52-6006937

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 1	THE STEERING COMMITTEE SHALL ASSIST THE BOARD OF DIRECTORS IN ITS OVERSIGHT RESPONSIBILITIES BY EXERCISING THE FULL POWERS AND AUTHORITY OF THE BOARD IN THE MANAGEMENT OF THE BUSINESS OF THE ASSOCIATION IN BETWEEN REGULAR BOARD MEETINGS AND IN REVIEWING AND MAKING RECOMMENDATIONS TO THE FULL BOARD AS TO FAIR AND REASONABLE EXECUTIVE COMPENSATION LEVELS. THE STEERING COMMITTEE SHALL NOT HAVE THE POWER OR AUTHORITY TO - FILL VACANCIES ON THE BOARD OF DIRECTORS - ADOPT, AMEND, OR REPEAL THE BY LAWS - ACT ON MATTERS COMMITTED BY THE BY LAWS OR RESOLUTION OF THE BOARD OF DIRECTORS TO ANOTHER COMMITTEE OF THE BOARD - ACT ON MATTERS PERTAINING TO THE ACQUISITION, SALE, MORTGAGE, OR PLEDGE OF REAL PROPERTY THE STEERING COMMITTEE SHALL CONSIST OF THE PRESIDENT, PRESIDENT-ELECT, AND THE FIVE ELECTED COMMITTEE CHAIRS BY THE BOARD ALL ACTIONS OF THE STEERING COMMITTEE SHALL BE SUBJECT TO RATIFICATION BY THE FULL BOARD THE STEERING COMMITTEE MAY MEET IN ANY MANNER NECESSARY TO CONDUCT ITS BUSINESS AND SHALL KEEP REGULAR MINUTES OF ITS PROCEEDINGS AND REPORT THE SAME TO THE BOARD AT THE NEXT MEETING OF THE BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ACTIVE ACTIVE MEMBERS SHALL CONSIST OF THOSE INDIVIDUALS ENGAGED IN THE PRACTICE OR SUPERVISION OF SECONDARY (MIDDLE LEVEL AND/OR HIGH SCHOOL) ADMINISTRATION WITHIN ONE OF THE EIGHT REGIONS AS DEFINED IN ARTICLE II OF THE BY LAWS ASSOCIATE ASSOCIATE MEMBERS SHALL CONSIST OF PERSONS, INSTITUTIONS, OR OTHER ENTITIES THAT DO NOT MEET THE CRITERIA FOR ACTIVE MEMBERSHIP LIFE MEMBERS LIFE MEMBERSHIP MAY BE CONFERRED BY THE BOARD OF DIRECTORS AND PROVIDES AN INDIVIDUAL WITH ALL OF THE PRIVILEGES OF AN ACTIVE MEMBER, EXCEPT THE ABILITY TO BECOME AN OFFICER, DIRECTOR, OR STATE COORDINATOR OF THE ASSOCIATION

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	EACH ACTIVE MEMBER IN GOOD STANDING SHALL HAVE ONE VOTE AT ANY MEETING OF THE MEMBERS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THERE SHALL BE AN ANNUAL BUSINESS MEETING OF THE MEMBERS DURING THE ASSOCIATION'S ANNUAL CONVENTION OR UPON SUCH DATE, TIME AND PLACE AS THE BOARD SHALL DETERMINE WRITTEN NOTICE OF THE ANNUAL BUSINESS MEETING SHALL BE GIVEN AT LEAST 30 DAYS PRIOR TO THE MEETING DURING THE ANNUAL BUSINESS MEETING, VOTING MEMBERS SHALL HAVE THE RIGHT TO VOTE ON THE FOLLOWING MATTERS ONLY I ELECTION OF THE BOARD OF DIRECTORS AND OFFICERS II APPROVAL OF AMENDMENTS TO THE ARTICLES OF INCORPORATION OR BY LAWS III APPROVAL OF ANNUAL MEMBERSHIP DUES INCREASES IV APPROVAL OF ANY PLAN OF MERGER OR CONSOLIDATION V SALE, LEASE, EXCHANGE, MORTGAGE, PLEDGE, OR OTHER DISPOSITION OF ALL OR SUBSTANTIALLY ALL OF THE PROPERTY AND ASSETS OF THE ASSOCIATION VOTING ON ALL OTHER MATTERS IS EXPRESSLY RESERVED FOR THE BOARD OF DIRECTORS

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE RETURN IS PREPARED BY THE ORGANIZATION'S ACCOUNTANT AND REVIEWED BY MANAGEMENT PRIOR TO FILING, THE AUDIT COMMITTEE IS PROVIDED A PERIOD OF REVIEW AND APPROVAL

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THIS CONFLICT OF INTEREST POLICY IS DESIGNED TO HELP DIRECTORS, OFFICERS, AND EMPLOYEES OF THE NATIONAL ASSOCIATION OF SECONDARY SCHOOL PRINCIPALS (NASSP) IDENTIFY SITUATIONS THAT PRESENT POTENTIAL CONFLICTS OF INTEREST AND TO PROVIDE NASSP WITH A PROCEDURE THAT, IF OBSERVED, WILL ALLOW A TRANSACTION TO BE TREATED AS VALID AND BINDING EVEN THOUGH A DIRECTOR, OFFICER, OR EMPLOYEE HAS OR MAY HAVE A CONFLICT OF INTEREST WITH RESPECT TO THE TRANSACTION IN THE EVENIT THERE IS AN INCONSISTENCY BETWEEN THE REQUIREMENTS AND PROCEDURES PRESCRIBED HEREIN AND THOSE IN FEDERAL OR STATE LAW, THE LAW SHALL CONTROL ALL CAPITALIZED TERMS ARE DEFINED IN PART 2 OF THIS POLICY ADDITIONALLY, ANY PERSON WHO HAS SERVED OR IS SERVING AS AN OFFICER OR DIRECTOR SHALL NOT SOLICIT BUSINESS FROM OR BITER INTO ANY AGREEMENT OR CONTRACT WITH NASSP FOR A PERIOD OF ONE YEAR AFTER THE CONCLUSION OF HIS OR HER SERVICE AS AN OFFICER OR DIRECTOR OF THE ASSOCIATION BEACH RESPONSIBLE PERSON SHALL ANNUALLY COMPLETE A DISCLOSURE FORM IDENTIFYING ANY RELATIONSHIPS, POSITIONS, OR CIRCUMSTANCES IN WHICH THE RESPONSIBLE PERSON IS INVOLVED THAT HE OR SHE BELIEVES COULD CONTRIBUTE TO A CONFLICT OF INTEREST ARISING SUCH RELATIONSHIPS, POSITIONS, OR CIRCUMSTANCES MIGHT INCLUDE SERVICE AS A DIRECTOR OF OR CONSULTANT TO A NOT-FOR-PROFIT ORGANIZATION, OR OWNERSHIP OF A BUSINESS THAT MIGHT PROVIDE GOODS OR SERVICES TO NASSP ANY SUCH INFORMATION REGARDING BUSINESS INTERESTS OF A RESPONSIBLE PERSON OR A FAMILY MEMBER SHALL BE TREATED AS CONFIDENTIAL AND SHALL GENERALLY BE MADE AVAILABLE ONLY TO THE CHAIR, THE EXECUTIVE DIRECTOR, AND ANY COMMITTEE APPOINTED TO ADDRESS CONFLICTS OF INTEREST, EXCEPT TO THE EXTENT ADDITIONAL DISCLOSURE IS NECESSARY IN CONNECTION WITH THE IMPLEMENTATION OF THIS POLICY A PERSON WHO HAS A CONFLICT OF INTEREST HAS NOT OR PERSON WHO HAS A CONFLICT OF INTEREST WITH RESPECT TO THE MET THE AT OR OUTSIDE THE MEETING A PERSON WHO HAS A CONFLICT OF INTEREST WITH RESPECT TO THE MET THE AT OR OUTSIDE THE MEETING SHALL NOT BE PRESON IN HAVING A CON

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Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE BOARD OF DIRECTORS WILL CONDUCT AN ANNUAL EVALUATION OF THE EXECUTIVE DIRECTOR SUCH EVALUATION WILL BE BASED ON THE EXTENT TO WHICH THE EXECUTIVE DIRECTOR HAS ADDRESSED THE BOARD'S STATED GOALS AND OBJECTIVES AS SPECIFIED IN ITS STRATEGIC PLAN IN THIS PROCESS, THE BOARD WILL ALSO REVIEW THE STAFF'S WORKPLAN AS RELATED TO EACH GOAL AND OBJECTIVE WHICH INCLUDES SPECIFIC TIMELINES AND MEASURABLE OUTCOMES THE PROCESS LAST INCLUDED COMPARABILITY DATA AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECISION IN 2014 KEY STAFF PERFORMANCE IS REVIEWED BY THE EXECUTIVE DIRECTOR IN ACCORDANCE WITH STANDARD STAFF PERFORMANCE APPRAISAL PROCEDURES COMPENSATION DECISIONS ARE MADE BY THE EXECUTIVE DIRECTOR PERIODIC SALARY COMPARISONS ARE PERFORMED TO ENSURE STAFF COMPENSATION IS IN LINE WITH OTHER ASSOCIATIONS OF SIMILAR SIZE AND SCOPE

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	OTHER SERVICES PROGRAM SERVICE EXPENSES 2,520,426 MANAGEMENT AND GENERAL EXPENSES 854,062 FUNDRAISING EXPENSES 63,165 TOTAL EXPENSES 3,437,653

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN LONG TERM PENSION LIABILITY -569,807