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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 2121 CRYSTAL DRIVE NO 350 | Room/suite

City or town, state or country, and ZIP + 4
ARLINGTON, VA 22202

D Employer identification number
46-0282694

E Telephone number
(703) 684-4000

G Gross receipts $ 3,401,454

F Name and address of principal officer
MS BRENDA WELBURN
2121 CRYSTAL DRIVE NO 350
ARLINGTON, VA 22202

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW NASBE ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1965 | M State of legal domicile OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
NASBE PROMOTES, SUPPORTS AND LEADS THE EFFORT OF AND RESPONSIBILITIES FOR INSURING A QUALITY EDUCATION FOR ALL CHILDREN THROUGH VARIOUS ACTIVITIES, WHICH INCLUDE PUBLICATIONS, RESEARCH, TRAINIG AND MEETINGS

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	26
6	Total number of volunteers (estimate if necessary)	6	30
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,643,733	1,665,068
	9	Program service revenue (Part VIII, line 2g)	1,423,781	1,727,239
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	18,260	9,139
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,085,774	3,401,446
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	88,595	139,500
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,849,371	1,929,962
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶12,456		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,126,726	1,326,942
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	3,064,692	3,396,404
	19	Revenue less expenses Subtract line 18 from line 12	21,082	5,042
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	2,099,005	1,480,084
	21	Total liabilities (Part X, line 26)	1,805,353	1,181,390
	22	Net assets or fund balances Subtract line 21 from line 20	293,652	298,694

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ ****** | 2011-03-30
Signature of officer | Date

▶ MS BRENDA WELBURN EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name RICHARD M JONES CPA	Preparer's signature RICHARD M JONES CPA	Date 2011-03-30	Check if self-employed ▶ ☑	PTIN
Firm's name ▶ KENDALL PREBOLA AND JONES CPAS				Firm's EIN ▶
Firm's address ▶ PO BOX 259 BEDFORD, PA 155220259				Phone no ▶ (814) 623-1880

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

NASBE PROMOTES, SUPPORTS AND LEADS THE EFFORT OF AND RESPONSIBILITIES FOR INSURING A QUALITY EDUCATION FOR ALL CHILDREN THROUGH VARIOUS ACTIVITIES, WHICH INCLUDE PUBLICATIONS, RESEARCH, TRAINIG AND MEETINGS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 409,312 including grants of $ 89,500) (Revenue $ 0)

NATIONAL SCHOOL HEALTH - HIV PREVENTIONBACKGROUND NASBE HAS BEEN EXTENSIVELY ENGAGED IN PROMOTING EFFECTIVE SCHOOL-BASED HIV/AIDS EDUCATION AND RELATED SCHOOL HEALTH PROGRAMS IN PARTNERSHIP WITH THE DIVISION OF ADOLESCENT AND SCHOOL HEALTH OF THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) SINCE 1987 THE GOALS OF THE SAFE AND HEALTHY SCHOOLS PROJECT ARE TO * STRENGTHEN THE CAPACITY OF STATE BOARDS OF EDUCATION AND STATE EDUCATION AGENCIES TO ADDRESS AND IMPROVE THE HEALTH STATUS AND ACADEMIC ACHIEVEMENT OF CHILDREN AND YOUTH IN GRADES K-12,*STRENGTHEN THE CAPACITY OF STATE BOARDS OF EDUCATION TO WORKCOLLABORATIVELY WITH OTHER STATE AND LOCAL EDUCATION AND HEALTH POLICYMAKERS IN THEIR EFFORTS TO IMPROVE THE HEALTH AND ACADEMIC STATUS OF CHILDREN AND YOUTH IN GRADES K-12,AND*FOSTER AND STRENGTHEN COLLABORATION AMONG NATIONAL EDUCATION, HEALTH, AND OTHER YOUTH-SERVING ORGANIZATIONS IN THEIR EFFORTS TO BUILD AND SUPPORT THE CAPACITY OF SCHOOLS TO ADDRESS THE HEALTH, EMOTIONAL, AND EDUCATIONAL NEEDS OF CHILDREN AND YOUTH PROJECT DESCRIPTION THE SAFE AND HEALTHY SCHOOLS PROJECT PROVIDES POLICY GUIDANCE, TRAINING, TECHNICAL ASSISTANCE, INFORMATION, AND RESOURCES TO EDUCATION POLICYMAKERS TO ASSIST THEM IN THEIR EFFORTS TO ADDRESS ISSUES RELATED TO A VARIETY OF STUDENT AND SCHOOL HEALTH AND SAFETY ISSUES, INCLUDING * PREVENTION OF HIV/AIDS, STDS, AND TEEN PREGNANCY, * SCHOOL SAFETY AND VIOLENCE PREVENTION, * PHYSICAL ACTIVITY AND NUTRITION, * TOBACCO AND DRUG-USE PREVENTION, * COORDINATED SCHOOL HEALTH PROGRAMS, * HEALTHY YOUTH DEVELOPMENT, AND * OTHER RELATED ISSUES SPECIFIC ACTIVITIES INCLUDE POLICY GUIDANCE NASBE HAS DEVELOPED AN ARRAY OF LANDMARK POLICY GUIDES ON A VARIETY OF ISSUES CONCERNING CHILDREN, YOUTH, AND SCHOOL HEALTH THAT HAVE HELPED INFORM THE DEVELOPMENT OF EDUCATION POLICIES ACROSS THE COUNTRY AMONG THE MANY PUBLICATIONS PRODUCED BY THE PROJECT MOST NOTABLE ARE SOMEONE AT SCHOOL HAS AIDS AN EDUCATION POLICY GUIDE CONCERNING STUDENTS AND STAFF WITH HIV INFECTION AND FIT, HEALTHY, AND READY TO LEARN A SCHOOL HEALTH POLICY GUIDE, WHICH ARE WIDELY USED IN STATES AND SCHOOL DISTRICTS ACROSS THE COUNTRY WE ARE ALSO WORKING TO DEVELOP A DATABASE OF STATE POLICIES RELATED TO SCHOOL HEALTH TRAINING AND TECHNICAL ASSISTANCEPROJECT STAFF ARE AVAILABLE TO ASSIST POLICYMAKERS TO DEVELOP NEW AND/OR REVISE EXISTING POLICIES AND PROGRAMS STAFF CAN FACILITATE ON-SITE RETREATS AND STUDY SESSIONS, LEAD WORKSHOPS, AND MAKE PRESENTATIONS AT MEETINGS OR CONFERENCES ONLINE STATE SCHOOL HEALTH DATABASENASBE SYSTEMATICALLY COLLECTS STATE-LEVEL POLICIES ON A VARIETY OF SCHOOL HEALTH TOPICS AND POSTS SUCCINCT DESCRIPTIONS OF THEM ON ITS WEBSITE, ALONG WITH ACTIVE HYPERLINKS WHERE AVAILABLE POLICIES CAN BE SEARCHED BY STATE OR TOPIC STAFF ALSO PREPARES ISSUE BRIEFS OF ANALYSIS FOR POSTING ON THE WEBSITE NASBE'S HIV PREVENTION AND SCHOOL HEALTH ACTIVITIES ARE PRIMARILY SUPPORTED BY THE DIVISION OF ADOLESCENT AND SCHOOL HEALTH OF THE CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) (COOPERATIVE AGREEMENT #U87/CCU/310215) OTHER ACTIVITIES IN THE AREAS OF SCHOOL SAFETY, VIOLENCE PREVENTION, AND HEALTHY YOUTH DEVELOPMENT ARE CONDUCTED WITH SUPPORT FROM PRIVATE FOUNDATIONS, CORPORATIONS, AND NASBE ITSELF

4b (Code) (Expenses $ 399,191 including grants of $ 0) (Revenue $ 2,500)

COMMON CORE STANDARDSIN 2009 THE COUNCIL OF CHIEF STATE SCHOOL OFFICERS AND THE NATIONAL GOVERNORS ASSOCIATION IN PARTNERSHIP WITH ACHIEVE, ACT AND THE COLLEGE BOARD LAUNCHED THE COMMON CORE STATE STANDARDS INITIATIVE, A STATE-LED PROCESS OF ADOPTING COMMON STANDARDS IN ENGLISH LANGUAGE ARTS AND MATHEMATICS ACROSS THE NATION THIS INITIATIVE WILL PROVIDE STATES WITH FEWER, CLEARER, AND HIGHER STANDARDS THAT ARE RESEARCH-AND-EVIDENCE BASED AND INTERNATIONALLY BENCHMARKED HAVING COMMON STANDARDS IS A SIGNIFICANT AND HISTORIC MOVEMENT AS STUDENTS WILL NOW HAVE CLEARER AND CONSISTENT EXPECTATIONS ACROSS THE NATION, WHICH WILL HELP MINIMIZE ACADEMIC CHALLENGES WHEN MOVING ACROSS STATE OR DISTRICT LINES BY ADOPTING THESE STANDARDS, STATES WILL BE BETTER EQUIPPED TO PREPARE STUDENTS WITH THE KNOWLEDGE AND SKILLS THEY NEED TO SUCCEED IN COLLEGE AND IN A CAREER WORKFORCE IN A GLOBAL ECONOMY IN 2009 48 STATES AND 3 TERRITORIES AGREED TO PARTICIPATE IN THE PROCESS OF CREATING A SET OF COMMON CORE STANDARDS BY AUGUST 31, 2010 THIRTY SIX STATES AND THE DISTRICT OF COLUMBIA HAVE ADOPTED THE STANDARDS AND OVER 40 STATES ARE EXPECTED TO ADOPT THE STANDARDS BY THE END OF 2010 ADOPTION OF THE STANDARDS IS VOLUNTARY BUT SHOULD A STATE CHOSE TO ADOPT, THEY MUST ADOPT 100% OF THE COMMON CORE K-12 STANDARDS IN ENGLISH LANGUAGE ARTS AND MATHEMATICS AND BEGIN ASSESSMENTS ON THE COMMON CORE STATE STANDARDS WITHIN THREE YEARS A STATE WILL HAVE ADOPTED WHEN THE STANDARDS AUTHORIZING BODY WITHIN THE STATE HAS TAKEN FORMAL ACTION TO ADOPT AND IMPLEMENT THE COMMON CORE STANDARDS NASBE IS AN EQUAL PARTNER WITH THE COUNCIL OF CHIEF STATE SCHOOL OFFICERS AND NATIONAL GOVERNORS ASSOCIATION ON THE COMMON CORE STANDARDS INITIATIVE THE THREE ORGANIZATIONS ARE WORKING CLOSELY TOGETHER TO FACILITATE THE DIALOGUE RELATED TO STANDARDS ADOPTION AND IMPLEMENTATION THE FOCUS OF THIS EFFORT IS TO ENGAGE STATE BOARDS OF EDUCATION, OTHER GOVERNING BODIES, AND THE LARGER PUBLIC IN SUPPORTING THE ADOPTION AND IMPLEMENTATION OF A RIGOROUS AND USEABLE SET OF ACADEMIC STANDARDS UPON WHICH A ROBUST AND COHERENT EDUCATIONAL SYSTEM CAN BE BASED NASBE CONDUCTED FOUR REGIONAL CONFERENCES FROM JANUARY-MARCH OF 2010 TO GIVE STATE BOARDS AN OPPORTUNITY TO GAIN AN INFORMATION INFRASTRUCTURE OF MATERIALS AND RESOURCES ON THE COMMON CORE AS WELL AS PREPARE STATE BOARDS FOR THE POLICY AND ADVOCACY WORK THAT WILL BE ESSENTIAL TO A SMOOTH APPROVAL PROCESS OF THE COMMON CORE STANDARDS THE CONFERENCES ARE FUNDED BY THE BILL AND MELINDA GATES FOUNDATION

4c (Code) (Expenses $ 345,437 including grants of $ 0) (Revenue $ 0)

INFORMATION SERVICES -INFORMATION SERVICES SENT OUT REGULAR INFORMATIONAL MAILINGS (9 TIMES PER YEAR) TO THE MEMBERSHIP ON A WIDE RANGE OF EDUCATION THIS DEPARTMENT ALSO PRODUCED THE WEEKLY E-NEWSLETTER, THE HEADLINE REVIEW, TO MEMBERS AND OTHER SUBSCRIBERS, A MONTHLY E-NEWSLETTER (HEALTHLINE REVIEW), TWO ISSUES OF ASSOCIATIONS FLAGSHIP JOURNAL (THE STATE EDUCATION STANDARD), AND A NUMBER OF REPORTS AND ISSUE BRIEFS, ALL DISTRIBUTED TO NASBE MEMBERS AND THE BROADER EDUCATION COMMUNITY

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 2,033,798 including grants of $ 50,000) (Revenue $ 1,724,739)

4e **Total program service expenses**▶$ 3,187,738

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)?	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		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, 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 term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	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, XII, and XIII 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, and program service activities outside the United States? *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 assistance to any organization or entity located outside the U S ? *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 assistance to individuals located outside the U S ? *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 hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," 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 a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
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? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		No
a	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* ☐ **Yes** ☑ **No**			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	12			
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	2a	26			
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		No
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
4a	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		No
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					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	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?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	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		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**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		
10	**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	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**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	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			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 to any question in this Part VI . . . . ☑

Section 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 16			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		5		No
6	Does the organization have members or stockholders?		6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶VA

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 make these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

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

JEFF POLLARD
2121 CRYSTAL DRIVE
SUITE,VA 22202
(703) 684-4000

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

Check if Schedule O contains a response to any question in this Part VII . . . . ☐

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LOWELL JOHNSON PRESIDENT	1 00	X		X				0	0	0
(2) ALLAN TAYLOR PRESIDENT ELECT	1 00	X						0	0	0
(3) KENNETH WILLARD PAST PRESIDENT	1 00	X						0	0	0
(4) GREG HAWS SECRETARY/TREASURER	1 00	X		X				0	0	0
(5) MARY COOKE DIRECTOR	1 00	X						0	0	0
(6) JOE HIGGINS DIRECTOR	1 00	X						0	0	0
(7) STAN ARCHIE DIRECTOR	1 00	X						0	0	0
(8) KAREN FARMER WHITE DIRECTOR	1 00	X						0	0	0
(9) TERRY WHITTAKER DIRECTOR	1 00	X						0	0	0
(10) KIM BURNINGHAM DIRECTOR	1 00	X						0	0	0
(11) JANE GOFF DIRECTOR	1 00	X						0	0	0
(12) JOSE PEREZ DIRECTOR	1 00	X						0	0	0
(13) ROSETTA RICHARD DIRECTOR	1 00	X						0	0	0
(14) KRISTEN MCKINLEY DIRECTOR	1 00	X						0	0	0
(15) AUSTIN MOSS SR DIRECTOR	1 00	X						0	0	0
(16) STEVE MELOY DIRECTOR	1 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(17) JEFF POLLARD DIRECTOR OF FINANCE	40 00			X				94,958	0	12,104
(18) BRENDA WELBURN EXECUTIVE DIRECTOR	40 00				X			216,802	0	27,447
(19) ELIZABETH WALKER PROJECT DIRECTOR	40 00					X		101,156	0	18,337
(20) DAVID KYSILKO DIRECTOR OF PUBLICATIONS	40 00					X		109,317	0	23,808
(21) YEN CHAU DIRECTOR OF RESEARCH	40 00					X		112,282	0	13,152

		(D)	(E)	(F)
1b	Sub-Total ▶			
c	Total from continuation sheets to Part VII, Section A ▶			
d	Total (add lines 1b and 1c) ▶	634,515	0	94,848

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶4

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	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 J for such individual*	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 J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c					
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e	699,442				
	f All other contributions, gifts, grants, and similar amounts not included above 1f	965,626				
	g Noncash contributions included in lines 1a-1f $					
	h **Total.** Add lines 1a-1f . . . . ▶		1,665,068			
Program Service Revenue		Business Code				
	2a MEMBERSHIP DUES	900099	1,019,988	1,019,988		
	b GOVERNMENT CONTRACTS	561499	552,849	552,849		
	c MEETING REGISTRATIONS	900099	103,602	103,602		
	d PUBLICATION SALES	900099	50,800	50,800		
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . ▶		1,727,239			
Other Revenue	3 Investment income (including dividends, interest and other similar amounts) . . . . . ▶		9,147			9,147
	4 Income from investment of tax-exempt bond proceeds . . ▶					
	5 Royalties . . . . ▶					
		(i) Real / (ii) Personal				
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) . . . . ▶					
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory					
	b Less cost or other basis and sales expenses	(ii) 8				
	c Gain or (loss)	(ii) -8				
	d Net gain or (loss) . . . . ▶		-8			-8
	8a Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . . . a					
	b Less direct expenses . . . b					
	c Net income or (loss) from fundraising events . . ▶					
	9a Gross income from gaming activities See Part IV, line 19 . a					
	b Less direct expenses . . . . b					
	c Net income or (loss) from gaming activities . . ▶					
	10a Gross sales of inventory, less returns and allowances . a					
	b Less cost of goods sold . . b					
	c Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e **Total.** Add lines 11a–11d . . . . ▶					
	12 **Total revenue.** See Instructions . . . ▶		3,401,446	1,727,239	0	9,139

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 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 U S See Part IV, line 21	139,500	139,500		
2 Grants and other assistance to individuals in the U S See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	388,749	227,512	160,368	869
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,194,626	964,329	226,615	3,682
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	39,438	30,815	8,505	118
9 Other employee benefits	193,534	151,219	41,739	576
10 Payroll taxes	113,615	88,774	24,503	338
a Fees for services (non-employees) Management				
b Legal				
c Accounting	29,032		29,032	
d Lobbying				
e Professional fundraising services *See Part IV, line 17* . .				
f Investment management fees				
g Other	59,274	57,039	2,000	235
12 Advertising and promotion				
13 Office expenses	67,341	27,155	39,665	521
14 Information technology	3,763	2,440	1,323	
15 Royalties . .				
16 Occupancy	379,833	80,475	299,114	244
17 Travel	294,102	269,402	22,512	2,188
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	237,324	227,503	9,821	
20 Interest	925		925	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	63,695		63,695	
23 Insurance	10,323		10,323	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a PRINTING AND PHOTOCOPYI	76,946	88,183	-11,237	
b TELEPHONE	51,189	40,436	10,629	124
c OFFICE SUPPLIES	33,762	29,598	4,091	73
d POSTAGE	19,433	17,231	2,197	5
e INDIRECT COSTS	0	746,127	-749,610	3,483
f All other expenses				
25 **Total functional expenses.** Add lines 1 through 24f	3,396,404	3,187,738	196,210	12,456
26 **Joint costs.** Check here ► ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			9,944	1	56,512
	2	Savings and temporary cash investments			1,276,308	2	461,879
	3	Pledges and grants receivable, net			115,382	3	61,983
	4	Accounts receivable, net			181,316	4	410,021
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			18,020	8	16,393
	9	Prepaid expenses and deferred charges			66,634	9	98,174
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	520,564			
	b	Less accumulated depreciation	10b	200,424	376,419	10c	320,140
	11	Investments—publicly traded securities				11	
	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			54,982	15	54,982
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			2,099,005	16	1,480,084
Liabilities	17	Accounts payable and accrued expenses			98,537	17	83,569
	18	Grants payable				18	
	19	Deferred revenue			1,581,472	19	960,923
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons *Complete Part II of Schedule L*				22	
	23	Secured mortgages and notes payable to unrelated third parties			21,903	23	7,504
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			103,441	25	129,394
	26	**Total liabilities.** Add lines 17 through 25			1,805,353	26	1,181,390
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			201,366	27	238,089
	28	Temporarily restricted net assets			92,286	28	60,605
	29	Permanently restricted net assets				29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			293,652	33	298,694
	34	Total liabilities and net assets/fund balances			2,099,005	34	1,480,084

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,401,446
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,396,404
3	Revenue less expenses Subtract line 2 from line 1	3	5,042
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	293,652
5	Other changes in net assets or fund balances (explain in Schedule O)	5	
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	298,694

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b		No
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

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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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Employer identification number
46-0282694

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☑ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		
(ii) a family member of a person described in (i) above?	**11g(ii)**		
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? Yes	No	(v) Did you notify the organization in col (i) of your support? Yes	No	(vi) Is the organization in col (i) organized in the U S ? Yes	No	(vii) Amount of support
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts 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, etc (See instructions) | 12 |

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f)) | 14 |

15 Public Support Percentage for 2009 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2009.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2010.** If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	2,166,765	2,814,247	2,473,738	2,746,415	2,685,056	12,886,221
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	414,080	192,339	183,202	321,099	707,251	1,817,971
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	2,580,845	3,006,586	2,656,940	3,067,514	3,392,307	14,704,192
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						0
c Add lines 7a and 7b						0
8 **Public Support** (Subtract line 7c from line 6)						14,704,192

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	2,580,845	3,006,586	2,656,940	3,067,514	3,392,307	14,704,192
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	41,960	54,485	44,983	20,028	9,147	170,603
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	4,550	7,080				11,630
c Add lines 10a and 10b	46,510	61,565	44,983	20,028	9,147	182,233
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 **Total support** (Add lines 9, 10c, 11 and 12)	2,627,355	3,068,151	2,701,923	3,087,542	3,401,454	14,886,425

14 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	98 780 %
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	98 580 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f))	17	1 220 %
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	1 420 %

19a **33 1/3% support tests—2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☑

b **33 1/3% support tests—2009.** 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 ▶☐

20 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶☐

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

Facts And Circumstances Test

Additional Data

Software ID:
Software Version:
EIN: 46-0282694
Name: NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 2,033,798 including grants of $ 50,000) (Revenue $ 1,724,739)

OTHER PROGRAM SERVICES CONSIST OF ORGANIZATIONAL RELATIONS, STUDY GROUPS, MEMBERSHIP, PUBLICATIONS, TECHNICAL ASSISTANCE, NEW STATE BOARD MEMBER INSTITUTE, LEGISLATIVE CONFERENCE, PUBLICATIONS, ANNUAL MEETING, COUNCIL OF STATE EDUCATION ATTORNEY'S, FEDERAL RELATIONS, MEMBERSHIP DEVELOPMENT, WEAVER ROGERS MEMORIAL FUND, CAMPAIGN FOR EXCELLENCE, NATIONAL SCHOOL HEALTH, SEARCHES AND EVALUATIONS, STATE ACTION FOR EDUCATIONAL LEADERSHIP, STRONG FUTURES INVITATIONAL CONFERENCE, ADOLESCENT LITERACY, COMMON CORE STANDARDS, LEADERSHIP FOR HEALTHY COMMUNITIES, EARLY CHILDHOOD EDUCATION SYSTEMS, ROLE IN INSTRUCTIONAL MATERIALS SELECTION, RACE TO TOP LITERACY, MILITARY SECTOR STATE EDUCATIONAL STANDARD, AND FOR THE COMMON GOOD STUDY GROUP

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Employer identification number
46-0282694

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV and complete the following table

			Amount
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance					
b	Contributions					
c	Investment earnings or losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		
	(ii) related organizations	3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		90,696	16,605	74,091
d Equipment		414,868	183,819	231,049
e Other		15,000		15,000
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				320,140

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
DEFERRED RENT ABATEMENT	129,394
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	129,394

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,401,446
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,396,404
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	5,042
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	5,042

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	3,401,446
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	3,401,446
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)			5	3,401,446

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	3,396,404
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	0
3	Subtract line 2e from line 1			3	3,396,404
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	3,396,404

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ISSUED FASB ASC NO 740-10 [FORMERLY INTERPRETATION NO 48 (FIN 48)], ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, WHICH IS AN INTERPRETATION OF ASC 740S (FORMERLY SFAS NO 109), ACCOUNTING FOR INCOME TAXES FASB ASC NO 740-10 CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN THE NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATIONS FINANCIAL STATEMENTS IN ACCORDANCE WITH ASC 740S AND PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN FASB ASC NO 740-10 REQUIRES THE EVALUATION OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN THE COURSE OF PREPARING THE NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATIONS TAX RETURN TO DETERMINE WHETHER THE TAX POSITIONS HAVE A MORE-LIKELY-THAN-NOT PROBABILITY OF BEING SUSTAINED BY THE APPLICABLE TAX AUTHORITY TAX POSITIONS DEEMED TO MEET THE MORE-LIKELY-THAN-NOT THRESHOLD WOULD BE RECORDED AS A TAX BENEFIT OR EXPENSE IN THE CURRENT YEAR FASB ASC NO 740-10 ALSO PROVIDES GUIDANCE ON DE-RECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, ACCOUNTING IN INTERIM PERIODS, DISCLOSURE, AND TRANSITION ANY CUMULATIVE EFFECT FROM THE CHANGE IN ACCOUNTING PRINCIPLE RESULTING FROM THE APPLICATION OF FASB ASC NO 740-10 IS TO BE RECOGNIZED AS AN ADJUSTMENT TO OPENING NET ASSETS THE NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Employer identification number
46-0282694

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed. . . . . ▶ ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) MICHIGAN STATE BOARD OF EDUCATIONPO BOX 30008 LANSING,MI 48909	38-6000134	GOV	2,500				EDUCATION GRANT
(2) PENNSYLVANIA STATE BOARD OF EDUCATION333 MARKET STREET HARRISBURG,PA 17126	23-6003115	GOV	2,500				EDUCATION GRANT
(3) MISSISSIPPI STATE BOARD OF EDUCATIONPO BOX 771 JACKSON,MS 39205	64-6000758	GOV	2,500				EDUCATION GRANT
(4) ARKANSAS STATE BOARD OF EDUCATION4 CAPITAL MALL 305A LITTLE ROCK,AK 72201	46-0582694	GOV	2,500				EDUCATION GRANT
(5) DISTRICT OF COLUMBIA BOARD OF EDUCATION441 4TH STREET NW SUITE 723N WASHIGNTON,DC 20001	53-6001131	GOV	15,000				EDUCATION GRANT
(6) CONNECTICUT BOARD OF EDUCATION165 CAPITAL AVENUE ROOM 301 HARTFORD,CT 06106	06-6000798	GOV	16,500				EDUCATION GRANT
(7) FLORIDA BOARD OF EDUCATION325 WEST GAINES STREET TALLAHASSEE,FL 32399	59-3474751	GOV	16,500				EDUCATION GRANT
(8) NORTH CAROLINA BOARD OF EDUCATION 6302 MAIL SERVICE CENTER RALEIGH,NC 27699	56-1492826	GOV	26,500				EDUCATION GRANT
(9) OREGON BOARD OF EDUCATION255 CAPITAL STREET NE SALEM,OR 97310	93-6001954	GOV	25,000				EDUCATION GRANT
(10) KENTUCKY BOARD OF EDUCATION500 MERO ST CAPITAL PLAZA TOWER FRANKFORT,KY 40601	61-0600439	GOV	10,000				EDUCATION GRANT
(11) ALABAMA BOARD OF EDUCATIONPO BOX 302101 MONTGOMERY,AL 36130	63-6000619	GOV	10,000				EDUCATION GRANT
(12) GEORGIA BOARD OF EDUCATION2053 TWIN TOWERS EAST ATLANTA,GA 30334	58-6002042	GOV	10,000				EDUCATION GRANT

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶

3 Enter total number of other organizations . . . . ▶

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Employer identification number
46-0282694

Part I Questions Regarding Compensation

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

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

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

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line **1a**

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) BRENDA WELBURN	(i) (ii)	208,080 0	5,000 0	3,722 0	10,404 0	17,043 0	244,249 0	0 0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation

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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION

Employer identification number
46-0282694

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION HAVE ELECTED AND APPOINTED MEMBERS FROM ALL 50 STATES AND TERRITORIES

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		THE MEMBERSHIP ELECTS ALL MEMBERS OF THE GOVERNING BODY, INCLUDING JUNIOR AND SENIOR AREA DIRECTORS, PRESIDENT-ELECT, PRESIDENT, AND SECRETARY/TREASURER

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B		ANY CHANGES IN THE BYLAWS OR PUBLIC EDUCATION POSITIONS OF THE ASSOCIATION ARE SUBJECT TO THE APPROVAL OF THE MEMBERSHIP AT THE ANNUAL BUSSINESS MEETING

Identifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE EXECUTIVE DIRECTOR, DEPUTY DIRECTOR, AND DIRECTOR OF FINANCE REVIEW THE 990 TAX RETURN UPON RECEIPT FROM PREPARERS EACH REVIEWS THE RETURN SEPARATELY, AND THEN WE MEET TO REVIEW AND ANSWER ANY QUESTIONS EACH PERSON MAY HAVE THE EXECUTIVE DIRECTOR THEN SIGNS THE RETURN

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE ASSOCIATION ANNUALLY REVIEWS THE CONFLICT OF INTEREST POLICY EACH JANUARY WITH THE BOARD OF DIRECTORS AND KEY EMPLOYEES AND REQUIRES DISCLOSURE OF ANY INTERESTS THAT MAY PRESENT A CONFLICT OF INTEREST

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	A EXECUTIVE DIRECTOR IS REVIEWED ANNUALLY BY THE BOARD OF DIRECTORS AT THEIR OCTOBER MEETING REGARDING COMPENSATION B KEY EMPLOYEES ARE REVIEWED BY THE EXECUTIVE DIRECTOR ANNUALLY REGARDING COMPENSATION, THE BOARD OF DIRECTORS INCLUDES A GENERAL PERCENTAGE INCREASE WITH THE ASSOCIATION'S ANNUAL BUDGET, AND IS USED WITH EXECUTIVE DIRECTOR'S DISCRETION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	THE NATIONAL ASSOCIATION OF STATE BOARDS OF EDUCATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC IMMEDIATELY UP REQUEST BY THE PUBLIC