** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047 Open to Public

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service

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

Inspection

<u> </u>	רטו נווי	2014 calendar year, or tax year beginning 001\ 1, 2014 and	ending M	AI 31, 2013						
В	Check if applicable	C Name of organization		D Employer identifi	cation number					
	Addre	NATIONAL SCIENCE TEACHERS ASSOCIATION								
	Name chang	Doing business as		52-6055229						
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	er					
	Final return	1840 WILSON BOULEVARD			243-7100					
_	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	32,282,250.					
L	Amen	ARBINGION, VA ZZZOI-309Z		H(a) Is this a group r						
	Application pendi			for subordinates						
		SAME AS C ABOVE		H(b) Are all subordinates i						
		empt status: X 501(c)(3) 501(c) ()	or 527	⊣ ′	list. (see instructions)					
		e: WWW.NSTA.ORG	1	H(c) Group exemption						
		organization: X Corporation	L Year	of formation: 1960	M State of legal domicile: DC					
P	art I	Summary	ОМОПЕ	PVORTIRMOR	7 7 7 7					
e	1	Briefly describe the organization's mission or most significant activities: ${\hbox{{\tt TO}}\ {\hbox{{\tt PI}}}\over\hbox{{\tt INNOVATION}}}$ IN SCIENCE TEACHING AND LEARN	TMC EC	P YII	AND					
Activities & Governance										
Veri		Check this box if the organization discontinued its operations or dispose		1	ssets.					
Ĝ				3	11					
≪		Number of independent voting members of the governing body (Part VI, line 1b)			119					
ţį		Total number of individuals employed in calendar year 2014 (Part V, line 2a)			700					
ξį		Total number of volunteers (estimate if necessary)			956,231.					
Å		Total unrelated business revenue from Part VIII, column (C), line 12			52,784.					
	6	Net unrelated business taxable income from Form 990-T, line 34	·····	Prior Year	Current Year					
	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	9,048,555.	10,673,954.					
Revenue				12,415,334.						
Ş.		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		772,092.						
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,059,845.	2,815,483.					
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		25,295,826.	25,924,846.					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,174,946.	2,327,979.					
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.					
s		Colorino ethan appropriation appropriation benefits (Dout IV columns (A) lines 5.10)		9,841,017.	9,914,286.					
Se	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.					
Expenses	b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25)	80.							
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,275,690.	13,042,299.					
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		26,291,653.						
		Revenue less expenses. Subtract line 18 from line 12		-995,827.						
Net Assets or Fund Balances	3			ginning of Current Year	End of Year					
sets	20	Total assets (Part X, line 16)		29,543,520.	29,912,154.					
ASS	21	Total liabilities (Part X, line 26)		14,035,801.	13,490,994.					
	22	Net assets or fund balances. Subtract line 21 from line 20		15,507,719.	16,421,160.					
P	art II	Signature Block								
Unc	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules	s and statem	ents, and to the best of m	y knowledge and belief, it is					
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	iich preparer	has any knowledge.						
		8								
Sig	ın	Signature of officer		Date						
He	re	DAVID L. EVANS, EXECUTIVE DIRECTOR								
		Type or print name and title		Oato I	II DTIN					
		Print/Type preparer's name Preparer's signature		Date Check C	PTIN					
Pai		TERRI MCKNIGHT, CPA		self-employ						
	parer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008					
USE	Only	Firm's address 4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930		Disc. / 3	01 \ 051 0000					
_	41			Phone no. (3	01) 951-9090					
Ma	y the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No					

Form	1990 (2014) NATIONAL SCIENCE TEACHERS ASSOCIATION 52-6055229 Page (2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	=
•	THE NATIONAL SCIENCE TEACHERS ASSOCIATION'S (NSTA) MISSION IS TO	
	PROMOTE EXCELLENCE AND INNOVATION IN SCIENCE TEACHING AND LEARNING FOR	_
		_
	ALL. NSTA WAS ESTABLISHED TO STIMULATE, IMPROVE, AND COORDINATE	
	SCIENCE TEACHING AT ALL LEVELS OF INSTRUCTION AND TO ENGAGE IN ANY AND	
2	Did the organization undertake any significant program services during the year which were not listed on	
	the prior Form 990 or 990-EZ?	0
	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?	0
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
7	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	revenue, if any, for each program service reported.	
4a		_)
	CONTRACTS AND GRANTS: NATIONAL INITIATIVES RELATED TO SCIENCE	
	EDUCATION:	
	PROFESSIONAL DEVELOPMENT (PD) PROGRAMS - NSTA DEVELOPED AND/OR	
	ADMINISTERED PD OPPORTUNITIES FOR SCIENCE EDUCATORS. THE INITIATIVES	
	UNDERTAKEN INCLUDE AN INTENSE FIVE-DAY PROGRAM FOR ELEMENTARY SCHOOL	_
	TEACHERS, A YEAR-LONG PROGRAM PROVIDING PD AND MENTORING SUPPORT TO	_
	EARLY CAREER SCIENCE TEACHERS, MADE AVAILABLE FOR NSTA LEARNING CENTER	_
	(NLC) SELECTED SUPPORT MATERIALS WHICH ARE ALIGNED WITH NASA EARTH AND	
		_
	SPACE SCIENCE CURRICULA, DESIGNED AND MAINTAINED NASA EXPLORER SCHOOL	
	(NES) DATABASES, NCL HELP DESK FOR TEACHER PARTICIPANTS, PROVIDED	
	STUDENT SYMPOSIA, SCIENCE ADVISORY TO OBJECTIVELY ANALYZE THE QUALITY	
	OF EXISTING SCIENCE PROGRAMS IDENTIFYING AREAS OF IMPROVEMENT AND	
4b	(Code:) (Expenses \$ 3,563,219 • including grants of \$) (Revenue \$ 5,024,267 •	
	CONFERENCES AND MEETINGS OPEN TO MEMBER AND NONMEMBER SCIENCE	-
	EDUCATORS, NSTA CONFERENCES OFFER THE LATEST IN SCIENCE CONTENT,	
	TEACHING STRATEGY, AND RESEARCH TO ENHANCE AND EXPAND THE INDIVIDUAL'S	_
	PROFESSIONAL GROWTH. EACH YEAR NSTA HOSTS A NATIONAL CONFERENCE ON	_
	SCIENCE EDUCATION AND THREE AREA CONFERENCES ON SCIENCE EDUCATION. NSTA	_
	CONFERENCES ARE DESIGNED WITH INNOVATIVE PRESENTATIONS AND HANDS-ON	-
	WORKSHOPS AS WELL AS SPECIAL INVITED SPEAKERS, EDUCATIONAL FIELD TRIPS,	_
	SHORT COURSES, NSTA SYMPOSIA (WHICH PROVIDE ONLINE FOLLOW-UP AFTER THE	_
	CONFERENCE ONLINE), AND THE EXHIBITION OF SCIENCE EDUCATION MATERIALS	
	IS THE LARGEST EXHIBITION OF ITS KIND AND IS AN INVALUABLE SOURCE OF	
	CURRICULUM AND OTHER PRODUCTS. AS AN IMPORTANT ADDITION TO THE NATIONAL	_
	CONFERENCE AGENDA (AND SELECTED AREA CONFERENCES), NSTA PRESENTS	
4c	(Code:) (Expenses \$3,001,514. including grants of \$	_)
	PUBLISHING AND SALES: THE NSTA PUBLICATIONS GROUP (PUBLICATIONS)	
	PRODUCES FOUR PEER-REVIEWED MEMBER JOURNALS - ONE FOR EACH MAJOR GRADE	
	BAND FROM PRE-KINDERGARTEN THROUGH COLLEGE - BOTH IN PRINT AND ONLINE.	
	IT HAS BUILT AN ONLINE JOURNAL ARCHIVE THAT INCLUDES ALL PUBLISHED	
	CONTENT FROM 2000 TO THE PRESENT. EACH YEAR, THAT ARCHIVE IS ACCESSED	_
	BY NSTA MEMBERS, AS WELL AS BY TENS OF THOUSANDS OF ADDITIONAL	_
	EDUCATORS ACROSS THE UNITED STATES AND, INCREASINGLY, WORLDWIDE.	_
	EDUCATORS ACROSS THE UNITED STATES AND, INCREASINGET, WORLDWIDE.	
	DIDI TOMBONG ENGONDAGGEG NOBA DDEGG MITTOU DDODUGEG NODE BUAN 10 NEW	
	PUBLICATIONS ENCOMPASSES NSTA PRESS, WHICH PRODUCES MORE THAN 20 NEW	
	BOOKS ANNUALLY, IN BOTH PRINT AND ELECTRONIC FORM PROVIDING RESOURCES	
	USED BY THE SCIENCE EDUCATION COMMUNITY. THE PRESS DEVELOPS	
	AWARD-WINNING CONTENT ACROSS ALL SCIENCE DISCIPLINES, FOR EVERY GRADE.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 4,254,515 • including grants of \$ 88,476 •) (Revenue \$ 4,766,319 •)	
_	Total program service expenses 19,892,250.	_

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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
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		Х
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	X	
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		X
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	Х	
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
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		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	and the control of th			
	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	Х	
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		Х
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	Х	
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	17		Х
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		Х
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		Х
20a		20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	(004.4)

Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		37	
	Schedule J	23	Х	
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	04-		X
	Schedule K. If "No", go to line 25a	24a		
	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	24c		
А	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	240		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
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		х
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 "Yes,"			
	complete Schedule L, Part II	26		Х
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		X
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 current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	Х	77
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,		Х	
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Λ	Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Α_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		x
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30		
31	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	51		
0 _	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u>-</u> -
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V					Ш
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	123			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r				37	
	(gambling) winnings to prize winners?	 I	 	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		110			
	filed for the calendar year ending with or within the year covered by this return		119		v	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu			2b	X	
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions				х	
	-			3a	X	
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b	$\stackrel{\Delta}{\vdash}$	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other financial		•	4a		x
h	If "Yes," enter the name of the foreign country:	accou	nu)?	4a		21
b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accour	te (FRAR)			
52	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year.			5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	\Box	
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to				\vdash	
-	any contributions that were not tax deductible as charitable contributions?	_		6a		х
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
	were not tax deductible?		-	6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a		Х
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?			7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of	contrac	t?	7e	igsquare	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont	ract?		7f	igsquare	X
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		37 / 3	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	e N/A	_		
_	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.		N/A			
	Did the sponsoring organization make any taxable distributions under section 4966?		N/A	9a	\vdash	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		N/ A	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 N/A	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a				
11	Section 501(c)(12) organizations. Enter:					
	Gross income from members or shareholders N/A	11a				
	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		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?		N/A	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.					
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				
	Enter the amount of reserves on hand	13c				
				14a	igsqcup	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul	le O		14b	لييا	
				Form	1 990 1	(2014)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.							
b	Enter the number of voting members included in line 1a, above, who are independent 1b 1b							
2	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?							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х				
6	Did the organization have members or stockholders?	6	Х					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a	Х					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b	Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:							
а	The governing body?	8a	Х					
b	Each committee with authority to act on behalf of the governing body?	8b	Х					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
			Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?	10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,							
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe							
	in Schedule O how this was done	12c	Х					
13	Did the organization have a written whistleblower policy?	13	Х					
14	Did the organization have a written document retention and destruction policy?	14	Х					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	X					
b	Other officers or key employees of the organization	15b		X				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
_	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed ► SEE SCHEDULE O							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	ole					
	for public inspection. Indicate how you made these available. Check all that apply.							
	Own website							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial					
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's books and records:							
	MOIRA FATHY BAKER - 703-243-7100							
	1840 WILSON BOULEVARD, ARLINGTON, VA 22201-3092							

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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

X

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average			Pos				(D) Reportable	(E) Reportable	(F) Estimated
Name and Title	hours per	box	, unle	ss pe	rson	than is bot or/trus	th an	compensation	compensation	amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer p		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) JULIANA TEXLEY	5.00			,,				2 562	0	0
PRESIDENT (SEE SCH. O)	4 00	Х		Х				3,562.	0.	0.
(2) BILL BADDERS	4.00	₩.		٠.				22 220	0	0
RETIRING PRESIDENT (SEE SCH. O)	4.00	Х		Х				32,239.	0.	0.
(3) CAROLYN HAYES	4.00	x		x				14 500	0.	0
PRESIDENT ELECT (SEE SCH. O)	2.00	^		^				14,598.	0.	0.
(4) PEGGY CARLISLE	2.00	x						1,050.	0.	0.
DIRECTOR (SEE SCH. O) (5) PATTY MCGINNIS	2.00	^				\vdash		1,030.	0.	<u> </u>
DIRECTOR (SEE SCH. O)	2.00	X						500.	0.	0.
(6) BEVERLY DEVORE-WEDDING	2.00	^					-	300.	0.	<u> </u>
DIRECTOR (SEE SCH. O)	2.00	x						300.	0.	0.
(7) SALLY HARMS	2.00						┢	300.	0.	
DIRECTOR	2.00	x						0.	0.	0.
(8) KELLY PRICE	2.00	 								
DIRECTOR		X						0.	0.	0.
(9) CANDACE LUTZOW-FELLING	2.00									
DIRECTOR		X						0.	0.	0.
(10) STEVE RICH	2.00									
DIRECTOR (SEE SCH. O)		Х						3,830.	0.	0.
(11) JOHN TILLOTSON	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JERRY VALADEZ	2.00									_
DIRECTOR (SEE SCH. O)		Х						500.	0.	0.
(13) ERIC PYLE	2.00									
DIRECTOR		Х						0.	0.	0.
(14) LEROY LEE	3.00									
TREASURER (SEE SCH. O)				Х				12,000.	0.	0.
(15) DAVID EVANS	37.50									
EXECUTIVE DIRECTOR	1 25 52	<u> </u>		Х		<u> </u>	<u> </u>	238,627.	0.	33,712.
(16) MOIRA FATHY BAKER	37.50	1						100 450	_	20 222
CFO & COO	25.50	<u> </u>		Х		_	_	192,459.	0.	32,288.
(17) DAVID BEACOM	37.50							150 050	_	04 500
PUBLISHER & ASSOCIATE EXEC. DIR.					X			178,076.	0.	24,799. Form 990 (2014)

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A)	(B)		(C)					(D)	(E)	((F)	
Name and title	Average	(do	not c	Pos check	ition) than	one	Reportable	Reportable	Estir	mate	d
	hours per	box	, unle	ess pe	rson	is bot	h an	compensation	compensation		ount c	of
	week	-	cer ar	nd a d	irecto	or/trus	tee)	from	from related	ot	ther	
	(list any	ecto						the	organizations	compe		
	hours for	or di	يو			ated		organization	(W-2/1099-MISC)		m the	
	related organizations	stee	truste		a.	bens		(W-2/1099-MISC)		orgar		
	below	lal tru	onal		oloye	e com				and i		
	line)	Individual trustee or director	Institutional trustee	Officer	key employee	Highest compensated employee	Former			organ	izatio	ms
(18) AL BYERS	37.50	드	드	5	₹ e	포 등	요					
ASSOCIATE EXECUTIVE DIRECTOR	37.30	ł				x		142,193.	0.	34	56	64.
(19) TODD WALLACE	37.50			\vdash		 		112/1330	•	<u> </u>	, , ,	
ASSOCIATE EXECUTIVE DIRECTOR	- 37733	1				x		127,681.	0.	33	. 0.8	89.
(20) JODI PETERSON	37.50					 					,,,,	
ASSOCIATE EXECUTIVE DIRECTOR		1				X		126,741.	0.	32	, 21	15.
(21) DELORES HOWARD	37.50			T								
ASSOCIATE EXECUTIVE DIRECTOR						Х		117,597.	0.	27	,78	88.
(22) CLAIRE REINBERG	37.50											
ASSOCIATE EXECUTIVE DIRECTOR						X		105,887.	0.	30	, 32	21.
		1										
				╙						<u> </u>		
		4								ĺ		
				⊢						 		
		1										
1b Sub-total		l			l	<u> </u>	<u> </u>	1,297,840.	0.	248	,75	76.
c Total from continuation sheets to Part VI								0.	0.			0.
d Total (add lines 1b and 1c)							_	1,297,840.	0.	248	,75	76.
2 Total number of individuals (including but n								eceived more than \$100	,000 of reportable			
compensation from the organization						-						10
										Y	es	No
3 Did the organization list any former officer,	director, or tru	uste	e, ke	ey er	nplo	yee	, or	highest compensated e	mployee on			
line 1a? If "Yes," complete Schedule J for s	uch individual									3		Х
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150										4	Х	
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes," com	plete Schedul	e J f	or s	uch	pers	son .				5		X
Section B. Independent Contractors												
1 Complete this table for your five highest co										ation fro	m	
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
WALSWORTH PUBLISHING COMPANY	PUBLISHING &	
2180 MAIDEN LN, ST. JOSEPH, MI 49085	PRINTING SERVICES	774,215.
PBD, INC.	WAREHOUSE & PUB.	
P.O. BOX 930108, ATLANTA, GA 30004	FULFILLMENT	642,451.
MARRIOTT INTERNATIONAL	HOTEL SERVICES -	
P.O. BOX 402841, ATLANTA, GA 30384	MEETING & CATERING	635,765.
PRODUCTION RESOURCE GROUP LLC	CONFERENCE/EXHIBITS	
539 TEMPLE HILL RD, NEW WINDSOR, NY 12553	SERVICES	375,589.
HARGROVE, INC.	CONFERENCE/EXHIBITS	
1 HARGROVE DR, LANHAM, MD 20706	SERVICES	367,297.
2 Total number of independent contractors (including but not limited to those list	ed above) who received more than	
\$100,000 of compensation from the organization > 29		

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (**D)** Revenue excluded Related or Unrelated Total revenue from tax under exempt function business sections 512 - 514 revenue revenue Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns **b** Membership dues 1b c Fundraising events d Related organizations 1d 3,066,685 e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above 7,607,269 g Noncash contributions included in lines 1a-1f: \$ 10,673,954 h Total. Add lines 1a-1f Business Code 2 a CONFERENCES/MEETINGS Program Service Revenue 900099 6,963,003 4,895,619 128,648 1,938,736. b MEMBERSHIP DUES 900099 3,191,496 3,191,496 c ADVERTISING 900099 1,082,342 296,958 785,384 d PROF. DEVELOPMENT 900099 379,981 379,981 SCILINKS 900099 112,500. 112,500 f All other program service revenue g Total. Add lines 2a-2f 11,729,322 Investment income (including dividends, interest, and 272,359 272,359. other similar amounts) Income from investment of tax-exempt bond proceeds 79,136. 93,836. 14,700. 5 Royalties (i) Real (ii) Personal 611,944 6 a Gross rents 428,179 **b** Less: rental expenses 183,765. c Rental income or (loss) 27,499 156,266. 183,765 **d** Net rental income or (loss) . (i) Securities (ii) Other 7 a Gross amount from sales of 4,315,339 assets other than inventory b Less: cost or other basis 3,881,611 and sales expenses 433,728. c Gain or (loss) 433,728 433,728. d Net gain or (loss) 8 a Gross income from fundraising events (not Revenue including \$ contributions reported on line 1c). See Part IV, line 18 a Other **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a **b** Less: direct expenses **c** Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns and allowances 4,585,465 2,047,614. **b** Less: cost of goods sold 2,537,851 2,517,027 20,824. c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a MISCELLANEOUS 900099 31 31. b d All other revenue 31 e Total. Add lines 11a-11d

956,231.

25,924,846

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Total revenue. See instructions.

11,393,581

Part IX | Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must com		ner organizations must co	amplete column (A)				
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 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 domestic organizations	005 006	005 006					
	and domestic governments. See Part IV, line 21	285,326.	285,326.					
2	Grants and other assistance to domestic	0 000 150	0 000 150					
	individuals. See Part IV, line 22	2,032,153.	2,032,153.					
3	Grants and other assistance to foreign							
	organizations, foreign governments, and foreign	10 500	10 500					
	individuals. See Part IV, lines 15 and 16	10,500.	10,500.					
4	Benefits paid to or for members							
5	Compensation of current officers, directors,	797,660.	201,340.	590,510.	5,810.			
•	trustees, and key employees	131,000.	201,340.	390,310.	3,010.			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and							
	navaga dagarihad in agatian 4000(a)(0)(D)							
7	Other salaries and wages	6,464,954.	4,814,337.	1,558,672.	91,945.			
8	Pension plan accruals and contributions (include	0,101,001	1,011,001	1,000,0124	71,713.			
J	section 401(k) and 403(b) employer contributions	609,324.	450,684.	149,872.	8,768.			
9	Other employee benefits	1,497,532.	877,205.	603,191.	17,136.			
10	Payroll taxes	544,816.	379,601.	157,749.	7,466.			
11	Fees for services (non-employees):) = = / 0 = 3 0	2.2,000	,,	.,			
	Management							
	Legal	42,455.	11,107.	31,348.				
	Accounting	87,008.	658.	86,350.				
	Lobbying	-		-				
	Professional fundraising services. See Part IV, line 17							
f	Investment management fees	52,454.		52,454.				
g								
	column (A) amount, list line 11g expenses on Sch O.)	2,840,338.	2,392,589.	447,749.				
12	Advertising and promotion	860,832.	849,442.	11,390.				
13	Office expenses	1,500,543.		145,051.	1,491.			
14	Information technology	477,401.	215,821.	259,380.	2,200.			
15	Royalties							
16	Occupancy	256,685.	421,553.	-170,099.	5,231.			
17	Travel	1,374,270.	891,061.	476,076.	7,133.			
18	Payments of travel or entertainment expenses							
	for any federal, state, or local public officials	2 520 000	2 501 565	21 274	C 0F0			
19	Conferences, conventions, and meetings	2,539,889.	2,501,565.	31,374.	6,950.			
20	Interest	27,905.		27,905.				
21	Payments to affiliates	231,994.	12,121.	219,873.				
22	Depreciation, depletion, and amortization	109,820.	38,537.	71,283.				
23	Insurance Other expenses. Itemize expenses not covered	109,020.	30,337.	11,203.				
24	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	PRINTING & PUBLICATIONS	993,292.	982,857.	10,435.				
a b	EQUIP. RENTAL & MAINT.	959,175.	901,821.	37,004.	20,350.			
C	MERCHANT FEES	254,238.	623.	253,615.				
d	REAL ESTATE TAXES	122,093.	3,868.	113,525.	4,700.			
-	All other expenses	311,907.	263,480.	46,427.	2,000.			
25	Total functional expenses. Add lines 1 through 24e	25,284,564.	19,892,250.	5,211,134.	181,180.			
26	Joint costs. Complete this line only if the organization	-	-	-	<u> </u>			
	reported in column (B) joint costs from a combined							
	educational campaign and fundraising solicitation.							
	Check here if following SOP 98-2 (ASC 958-720)							
					- 000			

Form 990 (2014) Part X Balance Sheet

Pa	rt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	6,232,161.	1	5,805,473.
	2	Savings and temporary cash investments	3,418,834.	2	3,712,146.
	3	Pledges and grants receivable, net	1,367,883.	3	1,587,946.
	4	Accounts receivable, net	1,165,315.	4	1,144,746.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
ĕ	8	Inventories for sale or use	1,711,583.	8	1,723,971.
	9	Prepaid expenses and deferred charges	211,157.	9	243,080.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 11,446,145.			
	b	Less: accumulated depreciation 10b 4,980,929.	6,620,744.	10c	6,465,216.
	11	Investments - publicly traded securities	8,746,647.	11	9,171,604.
	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	69,196.	15	57,972.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	29,543,520.	16	29,912,154.
	17	Accounts payable and accrued expenses	2,083,912.	17	1,687,209.
	18	Grants payable		18	
	19	Deferred revenue	5,836,154.	19	6,178,767.
	20	Tax-exempt bond liabilities	1,240,000.	20	1,050,000.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
≣		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L	005 000	22	705 000
_	23	Secured mortgages and notes payable to unrelated third parties	825,000.	23	705,000.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	4 050 725		2 070 010
		Schedule D	4,050,735.	25	3,870,018. 13,490,994.
	26	Total liabilities. Add lines 17 through 25	14,035,801.	26	13,490,994.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
ses		complete lines 27 through 29, and lines 33 and 34.	10,088,140.		11 400 006
<u>a</u>	27	Unrestricted net assets	5,419,579.	27	11,480,986. 4,940,174.
Fund Balances	28	Temporarily restricted net assets	3,413,373.	28	4,340,174.
pur	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here			
Net Assets or		and complete lines 30 through 34.		00	
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds	15,507,719.	32	16,421,160.
_	33	Total net assets or fund balances	29,543,520.	33	29,912,154.
	34	Total liabilities and net assets/fund balances	47,543,540.	34	Corm 990 (2014)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1				46.
2	Total expenses (must equal Part IX, column (A), line 25)	2	25			64.
3	Revenue less expenses. Subtract line 2 from line 1	3				82.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4				19.
5	Net unrealized gains (losses) on investments	5		-20	6,2	99.
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		47	9,4	59.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	16	,42	1,1	61.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	,			
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dit			
	Act and OMB Circular A-133?			За	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired aud	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	X	

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

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.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

NATIONAL SCIENCE TEACHERS ASSOCIATION

Employer identification number 52-6055229

Pa	rt I	Reason for Public	Charity Status (All organizations must co	omplete th	is part.) Se	ee instructions.	
The	organ	ization is not a private found	lation because it is: ((For lines 1 through 11, o	check only	one box.)		
1		A church, convention of ch)(A)(i).	
2		A school described in sect						
3		A hospital or a cooperative		•	ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiz					-	the hospital's name
		city, and state:	a operatea ee					and noophan o name,
5		An organization operated for	or the benefit of a co	allege or university owne	d or opera	ted by a gr	overnmental unit describ	ned in
5		section 170(b)(1)(A)(iv). (C		mege of difficulty owne	a or opera	ica by a go	overnmental unit descrit	JCG II1
6			· · · · · ·	nantal unit described in	cootion 1	70/6\/4\/ A \/	(v)	
	X	A federal, state, or local go	-				•	nublic described in
7	21	An organization that norma	•	initial part of its support	iroin a gov	emmentai	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)						
8	H							
9		An organization that norma	*	-	-			•
		activities related to its exen	•	•			· · · · · · · · · · · · · · · · · · ·	•
		income and unrelated busin		(less section 511 tax) fr	om busine	sses acqu	ired by the organization	aπer June 30, 1975.
40		See section 509(a)(2). (Con		:	datu Caa	ti FC	00(a)(4)	
10	H	An organization organized	·		•			
11	ш	An organization organized	·	•	-		· · · · · · · · · · · · · · · · · · ·	
		more publicly supported or	~					neck the box in
_		lines 11a through 11d that	* *			•		. mission m
а		Type I. A supporting orga	· · · · · · · · · · · · · · · · · · ·	· ·	•			
		the supported organization		• • • •	a majority	or the alrec	ctors or trustees of the s	supporting
		organization. You must o	- ·				- d	
b		☐ Type II. A supporting org	-					-
		control or management o			same perso	ons that co	ntroi or manage the sup	pported
_		organization(s). You mus			in connoc	tion with a	and functionally integrat	ad with
C		☐ Type III functionally inte	- :				· ·	ea with,
-1		its supported organizatio		•				:ti(-)
d								• •
		that is not functionally int	-		•			iveriess
_		requirement (see instruct	•	-				
е		 Check this box if the orga functionally integrated, or 					гтурет, турет, туретт	
	Ento	er the number of supported of	* *					
,		ride the following information						
9		i) Name of supported	(ii) EIN		(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of
	•	organization		(described on lines 1-9	listed i	n your	support (see	other support (see
				above or IRC section (see instructions))	Yes	No	Instructions)	Instructions)
				(see instructions))				
Гotа	ıl							l

LHA For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

Schedule A (Form 990 or 990-EZ) 2014 NATIONAL SCIENCE TEACHERS ASSOCIATION 52-6055229 Page 2

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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3,341,289.	14,877,495.	8,036,688.	9,048,555.	10,673,954.	45,977,981.
2	Tax revenues levied for the organ-						
	ization'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	3,341,289.	14,877,495.	8,036,688.	9,048,555.	10,673,954.	45,977,981.
	The portion of total contributions	, ,	, ,	, ,	<u> </u>		
_	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)						20,521,195.
6	Public support. Subtract line 5 from line 4.						25,456,786.
	etion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
	Amounts from line 4	3,341,289.	14,877,495.	8,036,688.	9,048,555.	10,673,954.	45,977,981.
	Gross income from interest,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			. , , , _ , , , , , ,	, , , , , , , , , , , , , , , , , ,	
Ŭ	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	877.833.	905,786.	2,717,085.	2 661 926.	867,777.	8,030,407.
9	Net income from unrelated business	,	20077000		_,,	001,111	
3	activities, whether or not the						
	business is regularly carried on	154,749.	39,850.		13,095.	52.784.	260,478.
10	Other income. Do not include gain		02,000			0 = 7 / 0 = 0	
	or loss from the sale of capital						
	assets (Explain in Part VI.)	12,369.	16,457.	9,272.	1,373.	31.	39,502.
11	Total support. Add lines 7 through 10			5 / 2 / 2 /		4	54,308,368.
	Gross receipts from related activities,	etc (see instruction	nne)			12 72	,154,346.
	First five years. If the Form 990 is for	•	,				, ,
	organization, check this box and stor	•			-		ightharpoonup
Sec	ction C. Computation of Publ						
14	Public support percentage for 2014 (I	ine 6. column (f) di	vided by line 11, c	olumn (f))		14	46.87 %
15	Public support percentage from 2013					15	44.42 %
16a	33 1/3% support test - 2014. If the o						x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2013. If the						
	and stop here. The organization qual	-					
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			-	•	_	
b	b 10% -facts-and-circumstances test - 2013. 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	ū				•	
	organization meets the "facts-and-circ		•				. .
18	Private foundation. If the organization		•	•			
				, , , 5	,		

Schedule A (Form 990 or 990-EZ) 2014

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.)

Celledar year (or fiscal year hespinning (i)) Gilto, grants, contributions, and membeship fees received. (Do not include any "unusual grants.") Gross receipts from activities. Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 4 Tax revenues leved for the organization or the organization is traveled in any activity that is related to the organization's tax exempl purpose Gross receipts from activities that are not an unrelated trade or bus- iness under section 513 4 Tax revenues leved for the organization or the organization without charge 5 The value of sevuices of facilities furnished by a governmental unit to the organization without charge 6 Totals. Add lines 1 through 5 7 A Amounts included on lines 1, 2, and 3 received from disqualified persons. by reconstructed or lines 2 as it received by accounts included on lines 1, 2, and 3 received from disqualified persons. by reconstructive for the organization without charge 6 Totals. Add lines 1 through 5 7 A a mounts included on lines 1, 2, and 3 received from disqualified persons. by reconstructive for the organization without charge 7 A mounts included on lines 1, 2, and 8 Public support injuries (reminist) Gelledar year (or fiscal year beginning iii) by 9 Amounts from line 6 10a Gross income from interest, dividending, symments received on securities loans, rants, royalties and riccome from similar sources by Lines with a come of the capital 11 Net Income from unrelated businesse and income from similar sources by Lines with a capital 12 First five years, if the Form 900 is for the organization is first, second, third, fourth, or fifth tax year as a section 501(ci)(3) organization, chock this box and stop here. 14 First five years, if the Form 900 is for the organization is first, second, third, fourth, or fifth tax year as a section 501(ci)(3) organization, chock this box and stop here. 15 Public support percentage for 2014 (line 8, octumn (f) divided by line 13, column (f)) 16 Public support degraced f	Sec	ction A. Public Support	low, please com	piete Part II.)				
1 Giffs, grants, contributions, and membership feet received. (Do not include any "unusual grants.") 2 Gross eneights from activities, that are not an unrelated trade of the organization's tix-exempt purpose 3. Gross neceipts from activities that are not an unrelated trade of business under section 513. 4 Tax revenues levide for the organization's benefit and either paid to or expended on its obhalf 5. The value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. The value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. To value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. To value of services or facilities furnished by a governmental unit to the organization without charge 6. Total. Add lines 1 through 5. To value of services or facilities for the value of the value of services or facilities for the value of the va	Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
membership fees received. (Do not include any trustal grants?) 2 Gross receipts from admissions, membrandis sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from admissions and the organization's tax-exempt purpose 3 Gross receipts from admission that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization organization is benefit and either paid to or expanded on its behalf 5 The value of services or scalibles furnished by a governmental unit to the organization without charge the organization of the organization without charge the organization without charge the organization without charge the organization without charge the organization of the organization without charge the organization of the organization without charge the organization of the organization or		· ` ` · · · · · · · · · · · · · · · · ·			` '			,
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16 Public support percentage from 2013 Schedule A, Part III, line 15 Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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 In the support of		·			column (f))		15	%
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17 Investment income percentage for 2014 (line 10c, column (f) divided by line 13, column (f)) 18 Investment income percentage from 2013 Schedule A, Part III, line 17 19a 33 1/3% support tests - 2014. 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 - 2013. 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							1 .0 1	,,,
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line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	L							
	i.	• • • • • • • • • • • • • • • • • • • •	•			•	•	
	20							

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No" describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI. including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	2		
	За		
	3b		
	JD		
	3с		
	4-		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	0.		
	9b		
	9с		
	10a		
	.54		
-	10b		
n 90	90 or 99	U-EZ)	2014

Par	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ction B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	ction D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
	ction E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instruction)	ons):		
а				
b				
С		instructions,		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	20		
h	that these activities constituted substantially all of its activities.	2a		
D	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
2	· · · · · · · · · · · · · · · · · · ·	Z D		
3	Parent of Supported Organizations. <i>Answer (a) and (b) below.</i>			
d	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <i>Part VI</i> .	3a		
h	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		

Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations	Ĭ
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust o	n Nov. 20, 1970. See instru	ictions. All
	other Type III non-functionally integrated supporting organizations must cor	mplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally	v-integra	ated Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2014

instructions).

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)				
Sect	on D - Distributions		,	Current Year	
1	Amounts paid to supported organizations to accomplish exe				
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported			
	organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	ns		
4	Amounts paid to acquire exempt-use assets				
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.				
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to which t	the organization is responsive	e		
	(provide details in Part VI). See instructions.				
9	Distributable amount for 2014 from Section C, line 6				
10	Line 8 amount divided by Line 9 amount				
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014	
1	Distributable amount for 2014 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2014				
	(reasonable cause required-see instructions)				
3	Excess distributions carryover, if any, to 2014:				
а					
b					
С					
d					
е	From 2013				
f	Total of lines 3a through e				
g	Applied to underdistributions of prior years				
h	Applied to 2014 distributable amount				
i	Carryover from 2009 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2014 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2014 distributable amount				
С	Remainder. Subtract lines 4a and 4b from 4.				
5	Remaining underdistributions for years prior to 2014, if				
	any. Subtract lines 3g and 4a from line 2 (if amount				
	greater than zero, see instructions).				
6	Remaining underdistributions for 2014. Subtract lines 3h and 4b from line 1 (if amount greater than zero, see				

Schedule A (Form 990 or 990-EZ) 2014

instructions).

d Excess from 2013e Excess from 2014

and 4c.

8 Breakdown of line 7:

a b

7 Excess distributions carryover to 2015. Add lines 3j

Asso Completes this part for any adoutorial information, (See manufactoria).	rt VI	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).

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors**

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No. 1545-0047

Name of the organization

Employer identification number

NATIONAL SCIENCE TEACHERS ASSOCIATION

Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Note. Only a section 501(c) General Rule For an organization	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. In filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rules					
sections 509(a)(1) any one contribute	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1. Complete Parts I and II.				
year, total contribu	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for cruelty to children or animals. Complete Parts I, II, and III.				
year, contributions is checked, enter l purpose. Do not c	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the seculusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year				
but it must answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), a Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

NATIONAL SCIENCE TEACHERS ASSOCIATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 4,107,953.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 2,802,231.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ 675,610.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, audiess, and Zir + +	\$ 600,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 519,198.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

NATIONAL SCIENCE TEACHERS ASSOCIATION

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ <u>273,760</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ 243,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

NATIONAL SCIENCE TEACHERS ASSOCIATION

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	990. 990-EZ. or 990-PF) (201

Name of organization Employer identification number NATIONAL SCIENCE TEACHERS ASSOCIATION 52-6055229 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (<u>a)</u> No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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.

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

OMB No. 1545-0047
2014

Open to Public Inspection

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

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

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

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

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

_	Section F01(a)(4) (F) or (6) organiza	tions: Complete Dort III			
	Section 501(c)(4), (5), or (6) organiza ne of organization	tions. Complete Part III.		Emp	loyer identification number
	NATIONA	L SCIENCE TEACHE	RS ASSOCIATI	ION	52-6055229
Pa	art I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 o	organization.
2	Provide a description of the organize Political expenditures Volunteer hours	·		▶\$	S
Pa	art I-B Complete if the org	ganization is exempt und	er section 501(c)(3).	
	Enter the amount of any excise tax	•		•	3
2	Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶ \$	<u> </u>
	If the organization incurred a section				
	Was a correction made?				
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	ganization is exempt und	er section 501(c),	except section 501	(c)(3).
1	Enter the amount directly expended	d by the filing organization for sec	ction 527 exempt funct	ion activities	<u> </u>
	Enter the amount of the filing organ				
	exempt function activities		-	▶ \$	3
3	Total exempt function expenditures				
	line 17b		,	▶ 9	3
4	Did the filing organization file Form				
	Enter the names, addresses and er				
	made payments. For each organiza	• •	•	-	
	contributions received that were pr	omptly and directly delivered to a	a separate political orga	anization, such as a separa	ate segregated fund or a
	political action committee (PAC). If	additional space is needed, prov	ide information in Part	IV.	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2014

LHA 432041 10-21-14

	(Form 990 or 990-EZ) 2014	NATIO	NAL SC	IENCE TEACH	ERS ASSOCIA	TION 52-6	055229 Page 2
Part II-A	'	ganizatio	n is exe	npt under sectio	n 501(c)(3) and fil	led Form 5768 (e	lection under
	section 501(h)).				5		
A Check		-			Part IV each affiliated	I group member's nam	e, address, EIN,
D. Obseste b	expenses, and sha			• /	udatana anak		
B Check	if the filing organiza	ation check	ed box A ar	nd "limited control" pro	visions apply.	(-) Fili	(I-) Assis-tl
	Limi (The term "expen	(a) Filing organization's totals	(b) Affiliated group totals				
1a Total	lobbying expenditures to infl	uence publ	ic opinion (grass roots lobbying)		0.	
b Total	lobbying expenditures to infl	uence a leg	islative boo	dy (direct lobbying)		53,820.	
c Total	lobbying expenditures (add l	lines 1a and	d 1b)			53,820.	
d Other	exempt purpose expenditur	es				25,034,408.	
e Total	exempt purpose expenditure	es (add line	s 1c and 1c	l)		25,088,228.	
f Lobby	ing nontaxable amount. Ent	er the amo	unt from the	e following table in bot	h columns.	1,000,000.	
If the a	amount on line 1e, column (a)	or (b) is:	The lob	bying nontaxable am	ount is:		
Not o	ver \$500,000		20% of	the amount on line 1e.			
Over 9	\$500,000 but not over \$1,00	0,000	\$100,00	0 plus 15% of the exc	ess over \$500,000.		
Over 9	\$1,000,000 but not over \$1,5	500,000	\$175,00	0 plus 10% of the exc	ess over \$1,000,000.		
Over 9	\$1,500,000 but not over \$17	,000,000	\$225,00	0 plus 5% of the exce	ss over \$1,500,000.		
Over 9	\$17,000,000		\$1,000,0	000.			
g Grass	roots nontaxable amount (er	nter 25% of	f line 1f)			250,000.	
h Subtra	act line 1g from line 1a. If zei	ro or less, e	nter -0			0.	
	act line 1f from line 1c. If zer					0.	
	e is an amount other than ze		r line 1h or	line 1i, did the organiz	ation file Form 4720	_	
report	ting section 4911 tax for this					L	Yes No
	(Some organizations t	hat made a See	a section 5 the separa	ate instructions for li	have to complete all nes 2a through 2f.)	of the five columns b	elow.
		Lobb	ying Exper	nditures During 4-Yea	ar Averaging Period		
(or fis	Calendar year scal year beginning in)	(a) 2	2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
	ying nontaxable amount	1,000	0,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
•	ying ceiling amount 6 of line 2a, column(e))						6,000,000.
c Total	lobbying expenditures	138	8,881.	123,191.	51,775.	53,820.	367,667.
d Grass	roots nontaxable amount	250	0,000.	250,000.	250,000.	250,000.	1,000,000.
	roots ceiling amount 6 of line 2d, column (e))						1,500,000.

Schedule C (Form 990 or 990-EZ) 2014

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2014 NATIONAL SCIENCE TEACHERS ASSOCIATION 52-6055229 Page 3

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

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(k)
of the	e lobbying activity.	Yes	No	Amo	ount
1 a	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public? Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
	Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	on 501(c)	(5). or se	ection	
	501(c)(6).		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No
1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			103	
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."				ne 3, is
1 2	Dues, assessments and similar amounts from members		1		
	expenses for which the section 527(f) tax was paid).				
	Current year				
	Carryover from last year				
	Total				
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3.		3		
4	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par			•		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information.	o list); Part I	I-A, lines 1 a	and 2 (see	

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NATIONAL SCIENCE TEACHERS ASSOCIATION

Employer identification number 52-6055229

Pai		ed Funds or Other Similar Funds or	r Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	*
	<u> </u>	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	1	
2	Aggregate value of contributions to (during year)	1,821.	
3	Aggregate value of grants from (during year)	2,404.	
4	Aggregate value at end of year	32,527.	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	
	are the organization's property, subject to the organization's	exclusive legal control?	X Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	ed only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose cor	
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990, Part	IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historic	ally important land area
	Protection of natural habitat	Preservation of a certified	d historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quality	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а			
b	, , , , , , , , , , , , , , , , , , , ,		" — — — — — — — — — — — — — — — — — — —
С	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired		
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the org	ganization during the tax
4	year	annount in Innetted N	
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the per		Yes No
6	violations, and enforcement of the conservation easements i Staff and volunteer hours devoted to monitoring, inspecting,		
6 7	Amount of expenses incurred in monitoring, inspecting, and		· · · · · · · · · · · · · · · · · · ·
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)?	• • • • • • • • • • • • • • • • • • • •	
9	In Part XIII, describe how the organization reports conservati		
·	include, if applicable, the text of the footnote to the organization		
	conservation easements.	tion o imanetal otatomonto triat decembes trie	organization o accounting for
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or Othe	er 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 (AS	SC 958), not to report in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statement an	d balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:		
	(i) Revenue 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 tre		
	the following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these items:	
а	Revenue included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2014

	t III Organizations Maintaining C	Collections of A	rt, Hist	orical Tr	easures, o	r Other	Similar	Asset	S (continu	ed)
3	Using the organization's acquisition, access	on, and other record	ds, check	any of the	following that	t are a sig	nificant use	of its c	ollection	items
	(check all that apply):									
а	Public exhibition	d	ı 🔲 ı	_oan or exc	hange progra	ms				
b	Scholarly research	е		Other						
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explai	n how th	ey further t	he organizatio	on's exem	pt purpose	in Part	XIII.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m								Yes	☐ No
Pai	t IV Escrow and Custodial Arran								ne 9, or	
	reported an amount on Form 990, Pa	rt X, line 21.								
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contribution	s or other as:	sets not ir	ncluded			
	on Form 990, Part X?							🔲	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII									
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on F								Yes	No
b	If "Yes," explain the arrangement in Part XIII.	. Check here if the ex	xplanatio	n has been	provided in F	Part XIII				
Pai	t V Endowment Funds. Complete i	f the organization ar	swered	"Yes" to Fo	rm 990, Part	IV, line 10				
		(a) Current year	(b) P	rior year	(c) Two years	s back (c	i) Three year	s back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	e (line 1	g, column (a	a)) held as:	•				
а	Board designated or quasi-endowment	,	%		,,					
b	Permanent endowment	%								
С	Temporarily restricted endowment ▶	 %								
	The percentages in lines 2a, 2b, and 2c show									
За	Are there endowment funds not in the posse		ation tha	t are held a	nd administe	red for the	e organizati	on		
	by:						J		Γ¥	es No
	(i) unrelated organizations								3a(i)	110
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:								3b	
4	Describe in Part XIII the intended uses of the									
Pai	t VI Land, Buildings, and Equipm									
	Complete if the organization answere	d "Yes" to Form 990	, Part IV	, line 11a. S	ee Form 990,	Part X, lir	ne 10.			
	Description of property	(a) Cost or o	1		or other		cumulated		(d) Book	value
	,	basis (investr			(other)		eciation		. ,	
1a	Land			1,88	9,697.			1	L,889	,697.
	Buildings			7,49	0,955.	3,7	56,101	3	3,734	,854.
	Leasehold improvements									
d	Equipment			1,21	4,121.	1,0	90,791	. •	123	,330.
	Other			85	1,372.	1	34,037	' •		,335.
	. Add lines 1a through 1e. (Column (d) must e		X, colun	nn (B), line 1	Oc.)			• (,465	,216.
		,					Scl	hedule	D (Form 9	990) 2014

Sche	ed	ul	e D	(For	m 990)	2014	1/
_	_	_	1				

Complete if the organization answered "Yes"	to Form 990 Part IV	line 11b. See Form 990 I	Part X. line 12	
(a) Description of security or category (including name of security)	(b) Book value			d-of-year market value
(1) Financial derivatives	. ,	.,		<u> </u>
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.		•		
Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11c. See Form 990, I	Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of v	aluation: Cost or end	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets.		•		
Complete if the organization answered "Yes"	to Form 990, Part IV,	line 11d. See Form 990, I	Part X, line 15.	
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		>	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	to Form 990, Part IV,		990, Part X, line 25	
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) POSTRETIREMENT BENEFIT OB	LIGATION	3,581,878.		
(3) DEPOSITS		288,140.		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.) ►	3,870,018.		

2. Liability for uncertain tax positions. In Part XIII, 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 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2014

Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ents Wit	h Revenue per R	etur	n.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.		_		
1	Total revenue, gains, and other support per audited financial statements			1	25,666,093.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-206,299.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	-206,299.
3	Subtract line 2e from line 1			3	25,872,392.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	52,454.		
b	Other (Describe in Part XIII.)	. 4b			
С	Add lines 4a and 4b			4c	52,454.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	25,924,846.
Pai	t XII Reconciliation of Expenses per Audited Financial Statem	nents Wi	th Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	25,232,111.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	25,232,111.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	52,454.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	52,454.
5				5	25,284,565.
Pai	t XIII Supplemental Information.				
Provi	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part	t IV, lines 1	b and 2b; Part V, line	4; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional info	rmation.		
PAI	RT X, LINE 2:				
FOI	R THE YEAR ENDED MAY 31, 2015, THE ASSOCIA	TION I	HAS DOCUMEN	TED	ITS
003	IGTDEDAMION OF EAGD AGG 740 10 INCOME MAY	, m.c	UAM DDOUTE		IIIDANGE EOD

CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS AFTER IT IS FILED.

Schedule D	(Form 990) 2014	NATIONAL	SCIENCE	TEACHERS	ASSOCIATION	52-6055229 Page 5
Part XIII	(Form 990) 2014 Supplemental Info	rmation (continue	ed)			
_						

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service **Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

2014
Open to Public Inspection

Name of the organization

Employer identification number

NATIONAL SCIENC	E TEACHE	RS ASSOC	IATION	52-605522	29
Part I General Info	rmation on A	ctivities Ou	tside the United States. Comple	ete if the organization answered "	Yes" on
Form 990, Part IV	/, line 14b.				
			ds to substantiate the amount of its gra		
the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or assistance? X	Yes No
2 For grantmakers. Desc	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and other assistance out	tside the
United States.					
3 Activities per Region. (T	he following Part	I, line 3 table ca	an be duplicated if additional space is i	needed.)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		10,500.
• • • • • • • • • • • • • • • • • • • •					10.500
3 a Sub-total	0	0			10,500.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			10 500

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2014

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.									
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	

2	Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by	
	the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter	
3	Enter total number of other organizations or entities	

Schedule F (Form 990) 2014

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (f) Amount of (e) Manner of (g) Description of (b) Region (a) Type of grant or assistance recipients cash disbursement non-cash assistance cash grant non-cash assistance SHELL SCIENCE LAB CHALLENGE 0.SAVINGS BOND AWARDS NORTH AMERICA 3 7,500. PURCHASE AMOUNT

Schedule F (Form 990) 2014 Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	X Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No

Schedule F (Form 990) 2014

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

Schedule F (Form 990) 2014

NSTA GRANTEES ARE SELECTED BASED ON A VARIETY OF CRITERION DEPENDING ON INDIVIDUAL PROGRAM REQUIREMENTS. ALL RECIPIENTS OF NSTA GRANT FUNDS MUST SUBMIT A PROPOSAL AND/OR BUDGET TO SUPPORT AND EXPLAIN THE NEED AND USE OF FUNDS. GRANTEE SUBMISSIONS ARE REVIEWED AND EVALUATED BY THE APPROPRIATE PROGRAM DIRECTOR, DESIGNEE OR COMMITTEE. FOR THOSE PROGRAMS THAT OFFER AWARDS, EACH PROGRAM HAS A SET OF CRITERIA FOR DETERMINING THE AWARD WINNER APPROPRIATE TO THEIR AWARD PROGRAM. NSTA BUSINESS OFFICE STAFF IS RESPONSIBLE FOR MONITORING THE FOLLOWING GRANTEE ACTIVITIES

-VERIFY THE DEVELOPMENT OF THE SUBGRANT DOCUMENTS TO ENSURE INCLUSION OF ALL APPROPRIATE REGULATIONS, REQUIREMENTS, AND DISCLOSURES

- REVIEW ALL CERTIFICATIONS, REPORTS AND CORRESPONDENCE CONCERNING AUDIT COMPLIANCE
- MONITOR PERIODIC PROGRESS REPORTS AND INVOICES (IF APPLICABLE) FROM SUBGRANTEES FOR COMPLIANCE WITH THE TERMS OF THE AGREEMENT
- DISSATISFACTION WITH SUBGRANTEE PROGRESS OR INVOICING METHODS IS REPORTED TO APPROPRIATE NSTA ASSOCIATE DIRECTOR FOR DISCIPLINARY ACTION
- MONITORING SUBGRANTEE BUDGETS, WHICH INCLUDES REQUESTING SUPPORTING DOCUMENTATION TO DETERMINE WHETHER EXPENSES ARE ALLOWABLE AND WITHIN THE SCOPE OF THE PROJECT.

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.

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

OMB No. 1545-0047
2014

Open to Public Inspection

Name of the organization NATIONAL	Employer identification number 52-6055229						
Part I General Information on Grants a	and Assistance						
 Does the organization maintain records criteria used to award the grants or assi Describe in Part IV the organization's pr 	istance?						
Part II Grants and Other Assistance to					anization answered "	Yes" to Form 990, Part	IV, line 21, for any
recipient that received more than	\$5,000. Part II car	n be duplicated if addi	tional space is need	ded.			
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CROMP INC							
SECME, INC 756 WEST PEACHTREE STREET, NW	58-1375512	E01/C)/2)	41 501	0.			ECYBERMISSION SCHOOL GRANT
ATLANTA, GA 30332	30-1373312	501(0)(3)	41,591.	0.			GRANI
SCOTCH PLAINS - FANWOOD PUBLIC EVERGREEN AVE & CEDAR STREET SCOTCH PLAINS, NJ 07076	22-6002291	GOVERNMENT	10,352.	0.			ECYBERMISSION SCHOOL
•			1				
FORT WORTH ISD 100 N. UNIVERSITY DRIVE FORT WORTH, TX 76107	75-6001613	GOVERNMENT	6,808.	0.			ECYBERMISSION SCHOOL
Toki wokin, in 70107	73 0001013		,,,,,,	•			
UNION ELEMENTARY SCHOOL DIST.# 3834 S. 91ST AVENUE TOLLESON, AZ 85353	86-6000506	GOVERNMENT	6,456.	0.			ECYBERMISSION SCHOOL GRANT
SCHOOL BOARD OF BROWARD COUNTY 7720 WEST OAKLAND PARK BLVD SUNRISE, FL 33351	59-6000530	GOVERNMENT	5,416.	0.			ECYBERMISSION SCHOOL
CAPISTRANO UNIFIED SCHOOL DIST 33122 VALLE ROAD SAN JUAN CAPISTRANO, CA 92675	95-2321055	GOVERNMENT	5,256.	0.			ECYBERMISSION SCHOOL
2 Enter total number of section 501(c)(3) a		<u> </u>			l	L	
3 Enter total number of other organization							······

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ALLIANCE ENVIRONMENTAL SCIENCE AND									
TECHNOLOGY HIGH SCHOOL - 2930									
FLETCHER DRIVE - LOS ANGELES, CA							SHELL SCIENCE LAB		
90065	94-3476918	GOVERNMENT	0.	8,000.	FACE VALUE	GIFT CERTIFICATE	CHALLENGE AWARDEE		
					1	1			

Part III Grants and Other Assistance to Domestic Individuals. 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) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
OUPONT WINNERS	28	0.	11,200.	PURCHASE AMOUNT	SAVINGS BOND
ANGELA AWARD WINNER	1	0.	1,000.	PURCHASE AMOUNT	SAVINGS BOND
ARTICIPANT SUPPORT	520	0.	1,365,763.	PURCHASE AMOUNT	TRAVEL EXPENSES
CYBERMISSION WINNERS	838	0.	437,745.	PURCHASE AMOUNT	SAVINGS BOND
EXPLORAVISION WINNERS	121	0.	118,033.	PURCHASE AMOUNT	SAVINGS BOND, EQUIPMENT

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

PART I, LINE 2:

NSTA GRANTEES ARE SELECTED BASED ON A VARIETY OF CRITERION DEPENDING ON

INDIVIDUAL PROGRAM REQUIREMENTS. ALL RECIPIENTS OF NSTA GRANT FUNDS MUST

SUBMIT A PROPOSAL AND/OR BUDGET TO SUPPORT AND EXPLAIN THE NEED AND USE OF

FUNDS. GRANTEE SUBMISSIONS ARE REVIEWED AND EVALUATED BY THE APPROPRIATE

PROGRAM DIRECTOR, DESIGNEE OR COMMITTEE. FOR THOSE PROGRAMS THAT OFFER

AWARDS, EACH PROGRAM HAS A SET OF CRITERIA FOR DETERMINING THE AWARD WINNER

APPROPRIATE TO THEIR AWARD PROGRAM. NSTA BUSINESS OFFICE STAFF IS

RESPONSIBLE FOR MONITORING THE FOLLOWING GRANTEE ACTIVITIES

Part III Continuation of Grants and Other Assistance to Indivi	duals in the Unit	ed States (Schedule	e I (Form 990), Part II	I.)	, age
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
ECYBERMISSION GRANT	4.	21,912.	0.		
SHUGRUE AWARDS	1.	1,500.	0.		
TEACHER AWARDS	24.	50,000.	0.		
MAITLAND P. SIMMONS AWARDS	25.	25,000.	0.		

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

NATIONAL SCIENCE TEACHERS ASSOCIATION

Employer identification number 52-6055229

Pa	art 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.			
	X First-class or charter travel X Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification 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 on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	Х	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2	Х	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			- V
a	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		<u> </u>
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only anation 504(a)(2) 504(a)(4) and 504(a)(00) arranizations may be appropriate lines 5.0			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
5	contingent on the revenues of:			
9		5a		х
h	The organization? Any related organization?	5b		X
J	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
•	contingent on the net earnings of:			
а	The organization?	6a		х
b	Any related organization?	6b		X
_	If "Yes" to line 6a or 6b, describe in Part III.			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
-	not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
-	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2014

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.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base	(ii) Bonus &	(iii) Other	other deferred compensation	benefits	(B)(i)-(D)	in column (B) reported as deferred
		compensation	incentive	reportable	Compondation			in prior Form 990
			compensation	compensation				
(1) DAVID EVANS	(i)	238,627.	0.	0.	23,549.	10,163.	272,339.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MOIRA FATHY BAKER	(i)	192,459.	0.	0.	21,400.	10,888.	224,747.	0.
CFO & COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DAVID BEACOM	(i)	178,076.	0.	0.	19,686.	5,113.	202,875.	0.
PUBLISHER & ASSOCIATE EXEC. DIR.	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) AL BYERS	(i)	142,193.	0.	0.	15,941.	18,623.	176,757.	0.
ASSOCIATE EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) TODD WALLACE	(i)	127,681.	0.	0.	14,345.	18,744.	160,770.	0.
ASSOCIATE EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) JODI PETERSON	(i)	126,741.	0.	0.	13,903.	18,312.	158,956.	0.
ASSOCIATE EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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.
PART I, LINE 1A:
NSTA PROVIDES FIRST-CLASS/BUSINESS-CLASS TRAVEL FOR THE EXECUTIVE DIRECTOR
ON INTERNATIONAL TRAVEL.
NSTA PROVIDES LOCAL HOUSING FOR THE ACTING ASSOCIATE EXECUTIVE DIRECTOR,
THIS IS INCLUDED IN W-2 COMPENSATION.

SCHEDULE L

(Form 990 or 990-EZ)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

► Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

OMB No. 1545-0047

Open To Public Inspection

Name of the organization

NATIONAL SCIENCE TEACHERS ASSOCIATION

Employer identification number

				SCIENCE									552	29		
Part I Exc	ess Bene	fit Trans	sacti	ons (section 50	01(c)(3	3), sect	ion 501	(c)(4), and 50)1(c))(29) organizatior	ns only	/).				
Con	plete if the o	organization	n ansv	vered "Yes" on I	Form 9	990, Pa	art IV, lir	ne 25a or 25k	o, or	Form 990-EZ, P	art V,	line 40	Db.			
(a) Name of disqualified person						lified						(d) Corrected?				
(a) Name of	disqualified p	erson		person and or	ganiz	ation		(0	;) De	escription of tran	isactic	n		Y	es	No
2 Enter the an	nount of tax i	ncurred by	the o	rganization man	agers	or disc	qualified	d persons du	ring	the year under						
section 495	3											> \$				
3 Enter the an	nount of tax,	if any, on li	ne 2, a	above, reimburs	ed by	the or	ganizat	ion				> \$				
Part II Loa	ins to and	d/or Fror	n Int	erested Per	sons	.										
Con	plete if the o	organization	n ansv	vered "Yes" on I	Form 9	990-EZ	, Part V	, line 38a or I	orn	n 990, Part IV, lir	ne 26;	or if th	ne orga	anizati	on	
repo	rted an amo			, Part X, line 5, 6									W 1 A			
(a) Nam		(b) Relatio		(c) Purpose		oan to or		Original	(f) Balance due	(g)		(h) Ap	proved ard or	(i) W	ritten
interested	oerson	with organi	zation	of loan		ization?	princi	pal amount	amount default?				cómn	nittee? agreemen		ment?
					То	From					Yes	No	Yes	No	Yes	No
Total				Citi		-1 D -		> \$								
				nefiting Inter												
			n ansv	vered "Yes" on I	Form 9	990, Pa	art IV, lir	ne 27.								
(a) Name o	f interested p	person	(b) Relationship				Amount of		(d) Type) Purp		f
				interested pers		ıd	4	assistance		assistan	ce		•	assista	ance	
			_		2011											
			+									_				
			+													
			+													
			-									_				
			-									_				

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

Schedule L (Form 990 or 990-EZ) 2014

Schedule L (Form 990 or 990-EZ) 2014

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 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

NATIONAL SCIENCE TEACHERS ASSOCIATION

DEVOLVING UPON THE GENERAL PUBLIC THROUGH KNOWLEDGE OF SUCH SCIENCE.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990 **Employer identification number** 52-6055229

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: ALL ACTIVITIES IN FURTHERANCE THEREOF, TO PROMOTE THE IMPROVEMENT OF EDUCATIONAL SYSTEMS AND PROCESSES IN THE SCHOOLS IN ANY MANNER TO ASSIST SUCH STIMULATION AND COORDINATION OF SCIENCE TEACHING, APPRISE THE GENERAL PUBLIC OF POSSIBLE MEANS OF IMPROVING SCIENCE TEACHING WITH THE SCHOOLS, AND GENERALLY TO DO ANY AND ALL ACTS AND THINGS WHICH MAY INCREASE, THROUGH EDUCATION, THE KNOWLEDGE OF SCIENCE

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: ON-LINE E-P.D. OPPORTUNITIES. PARTICIPATING SCHOOL DISTRICTS COMPETITIONS - HOSTED AND ADMINISTERED 8 LARGE-SCALE, NATIONALLY-KNOWN COMPETITIONS AND GRANT PROGRAMS FOR SCIENCE EDUCATORS AND STUDENTS INCLUDING STUDENT TEAMS THAT DESIGNED AND COMMUNICATED INNOVATIVE TECHNOLOGIES THAT COULD EXIST IN 20 YEARS, INNOVATED PROJECTS DEVELOPED BY SCIENCE TEACHERS THAT ENHANCE SCIENCE EDUCATION IN THEIR SCHOOLS OR SCHOOL DISTRICTS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: PROFESSIONAL DEVELOPMENT INSTITUTES-FOCUSED, CONTENT-BASED, PARTNERED PROGRAMS THAT EXPLORE KEY TOPICS IN SIGNIFICANT DEPTH. THESE DAY-LONG PROGRAMS OFFER PARTICIPANTS A UNIQUE LEARNING OPPORTUNITY THAT INCLUDES PERSONALIZED PATHWAY THROUGH THE FULL CONFERENCE AGENDA.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PERIODICALS

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

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization NATIONAL SCIENCE TEACHERS ASSOCIATION	Employer identification number 52-6055229
EXPENSES \$ 1,498,737. INCLUDING GRANTS OF \$ 0. REVENU	JE \$ 672,570.
PROFESSIONAL DEVELOPMENT	
EXPENSES \$ 516,179. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 379,981.
MEMBERSHIP SERVICES	
EXPENSES \$ 625,041. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 3,220,192.
JOURNAL ADVERTISING	
EXPENSES \$ 533,691. INCLUDING GRANTS OF \$ 976. REVENU	JE \$ 84,118.
OTHER PUBLICATIONS	
EXPENSES \$ 504,051. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 296,958.
AWARDS	
EXPENSES \$ 223,621. INCLUDING GRANTS OF \$ 87,500. REV	ENUE \$ 0.
LEGISLATIVE AFFAIRS	
EXPENSES \$ 253,973. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 0.
SCILINKS	
EXPENSES \$ 31,352. INCLUDING GRANTS OF \$ 0. REVENUE \$	112,500.
U.S. REGISTRY OF TEACHERS	
EXPENSES \$ 67,870. INCLUDING GRANTS OF \$ 0. REVENUE \$	
FORM 990, PART VI, SECTION A, LINE 6:	
NSTA HAS INDIVIDUAL, INSTITUTIONAL, AND OTHER DESIGNATED 432212 08-27-14 Schee	MEMBERSHIP dule O (Form 990 or 990-EZ) (2014)

Name of the organization
NATIONAL SCIENCE TEACHERS ASSOCIATION

Employer identification number 52-6055229

CATEGORIES. ALL INDIVIDUAL MEMBERS IN GOOD STANDING IN ANY ESTABLISHED CATEGORY ARE ELIGIBLE TO VOTE.

FORM 990, PART VI, SECTION A, LINE 7A:

DIRECTORS ARE ELECTED BY ELECTRONIC BALLOTS. BALLOTS ARE EMAILED TO EACH

VOTING MEMBER OF NSTA AT LEAST THIRTY DAYS PRIOR TO THE LAST DATE FOR

RETURN OF BALLOTS.

FORM 990, PART VI, SECTION A, LINE 7B:

BYLAW CHANGES MUST BE APPROVED BY THE MEMBERS.

FORM 990, PART VI, SECTION B, LINE 11:

THE DIRECTOR OF ACCOUNTING/CONTROLLER COMPILED THE NECESSARY DATA TO PREPARE THE FEDERAL FORM 990 WHICH WAS REVIEWED BY THE COO/CFO. NSTA THEN ENGAGED AN INDEPENDENT CPA FIRM TO PREPARE THE 990. THE DRAFT FORM 990 WAS FIRST REVIEWED BY THE DIRECTOR OF ACCOUNTING/CONTROLLER AND THE COO/CFO. THE NEXT LEVEL OF REVIEW CONTINUED TO NSTA'S AUDIT COMMITTEE. FINALLY, THE 990 WAS PROVIDED TO THE BOARD. ONCE REVIEWED AND APPROVED, THE 990 WAS SENT BACK TO THE CPA FIRM IN ORDER TO BE FINALIZED AND SUBMITTED TO TO THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

FOR NSTA EMPLOYEES ALL NEW EMPLOYEES AND EXISTING EMPLOYEES ARE ASKED TO
READ THE POLICY AND SIGN AN ACKNOWLEDGMENT THAT THEY HAVE READ THE POLICY
AND AGREE TO ABIDE BY ITS TERMS, AND TO FILL OUT A DISCLOSURE STATEMENT
EITHER AFFIRMING NO CONFLICTS OR LISTING CONFLICTS OF INTEREST. THESE TASKS
ARE COMPLETED BY EACH EMPLOYEE INITIALLY AT THE TIME OF HIRE. WHEN OTHER
DOCUMENTS ARE COMPLETED IN THE FALL EACH YEAR, HUMAN RESOURCES (HR) SENDS

OUT THE POLICY AND STATEMENT AGAIN TO EACH EMPLOYEE REQUESTING THAT THEY

Schedule O (Form 990 or 990-EZ) (2014)

Name of the organization

NATIONAL SCIENCE TEACHERS ASSOCIATION

Employer identification number 52-6055229

UPDATE THEIR FILES BY LISTING ON THE STATEMENT ANY NEW POTENTIAL CONFLICTS
OR TO AFFIRM THEY HAVE NO CONFLICTS AND ALSO BY RESIGNING THE

ACKNOWLEDGMENT AND RETURNING TO HR. HR FORWARDS ANY COMPLETED DISCLOSURE
STATEMENTS WHICH LIST CONFLICTS TO THE EXECUTIVE DIRECTOR FOR HIS REVIEW
AND APPROPRIATE ACTION. FOR NSTA BOARD AND RELEVANT COMMITTEE MEMBERS, THE
BOARD MEMBERS ARE GIVEN THE CONFLICT OF INTEREST POLICY DURING THE SUMMER
BOARD MEETING. THEY ARE ASKED TO READ AND PRINT THE SIGNATURE PAGE AND
RETURN THE FORM DURING THE MEETING. THIS MEETING IS THE FIRST OPPORTUNITY
FOR THE ENTIRE GROUP TO VIEW, SIGN AND THEN RETURN IT. THE SIGNED FORMS ARE
FILED IN THE EXECUTIVE OFFICE. COMMITTEES ARE PROVIDED THE POLICY AT THEIR
FIRST MEETING OF EACH FISCAL YEAR OR AT THE BEGINNING OF THE FISCAL YEAR BY
MAIL OR E-MAIL.

FORM 990, PART VI, SECTION B, LINE 15A:

FOR EQUITABLE SALARY ADJUSTMENTS AT HIGHER TIER LEVELS OF MANAGEMENT, THE HR DIRECTOR PROVIDES SALARY COMPARISONS OF SIMILAR POSITIONS, USUALLY DRAWN FROM THE MOST RECENTLY PUBLISHED NON-PROFIT SURVEYS, AND/OR COMPARISONS WITH SIMILAR EXECUTIVE POSITIONS' COMPENSATION INFORMATION AS DRAWN FROM PUBLICLY ACCESSIBLE 990 FORMS FILED BY SIMILAR NONPROFITS. THESE COMPARISONS ARE PRODUCED IN SPREADSHEET FORM AND ARE PROVIDED TO THE EXECUTIVE DIRECTOR AND EXECUTIVE STAFF AT NSTA FOR INTERNAL SALARY DECISIONS AND TO THE BOARD FOR EXECUTIVE DIRECTOR SALARY DECISIONS.

CURRENTLY THE BOARD ONLY APPROVES THE EXECUTIVE DIRECTOR SALARY, IN CLOSED SESSION. THE PRESIDENT THEN PROVIDES THE HR DIRECTOR WITH A LETTER AUTHORIZING ANY CHANGE TO THE EXECUTIVE DIRECTOR SALARY. THE EXECUTIVE DIRECTOR HAS APPROVED THE SALARIES OF THE CFO AND OTHER EXECUTIVE STAFF.

THE SALARY COMPARISONS FOR THE CFO AND THE OTHER ASSOCIATE EXECUTIVE DIRECTOR POSITIONS ARE PROVIDED TO THE EXECUTIVE DIRECTOR FOR REVIEW PRIOR

Schedule O (Form 990 or 990-EZ) (2014)

Schedule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization NATIONAL SCIENCE TEACHERS ASSOCIATION	Employer identification number 52-6055229
TO ANY COMPENSATION REVISIONS OTHER THAN ORGANIZATION-WIL	DE COST OF LIVING
ADJUSTMENTS. THE LAST SALARY REVIEW TOOK PLACE IN FEBRUAR	RY 2015.
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY	Y OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS,	,MO,NH,NJ,NM,NY,NC
ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI	
FORM 990, PART VI, SECTION C, LINE 19:	
NSTA'S BYLAWS, OPERATING CONFLICT OF INTEREST, AND WHISTI	LEBLOWER POLICIES
ARE AVAILABLE TO THE PUBLIC ON ITS MAIN WEBSITE. ALL GOVE	ERNING DOCUMENTS
AND POLICIES ARE AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTANTS:	
PROGRAM SERVICE EXPENSES	1,937,178.
MANAGEMENT AND GENERAL EXPENSES	223,785.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	2,160,963.
SUBCONTRACT:	
PROGRAM SERVICE EXPENSES	319,869.
MANAGEMENT AND GENERAL EXPENSES	143,870.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	463,739.
CONTRACT SERVICES:	
PROGRAM SERVICE EXPENSES	135,542.
MANAGEMENT AND GENERAL EXPENSES	80,094.
432212 08-27-14 Sche	edule O (Form 990 or 990-EZ) (2014)

Name of the organization NATIONAL SCIENCE TEACHERS ASSOCIATION	Employer identification number 52-6055229
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	215,636.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	2,840,338.
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
ACTUARIAL GAIN ON POSTRETIREMENT BENEFITS	479,459.
FORM 990, PART VII, SECTION A:	
SOME BOARD MEMBERS RECEIVE STIPENDS FROM NSTA FOR THEIR V	ORK RELATED TO
STUDENT COMPETITIONS. THIS COMPENSATION IS NOT RELATED TO	EITHER
INDIVIDUAL'S POSITION ON THE BOARD. THE PRESIDENT, PRESI	DENT-ELECT, AND
RETIRING PRESIDENT, HOWEVER, DOES RECEIVE COMPENSATION RE	ELATED TO
HIS/HER POSITION ON THE BOARD. THIS COMPENSATION HAS BEEN	N REFLECTED ON
PART VII, SECTION A.	

SCHEDULE R (Form 990)

Part I

Related Organizations and Unrelated Partnerships

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

➤ Attach to Form 990.

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

(c)

(d)

(e)

2014 Open to Public

Inspection

OMB No. 1545-0047

Name of the organization

(a)

Department of the Treasury Internal Revenue Service

NATIONAL SCIENCE TEACHERS ASSOCIATION

(b)

Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Employer identification number 52-6055229

(f)

Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea		controlling entity	g
1836 WILSON LLC - 52-6055229	MANAGING THE CONSTRUCTION						
1836 WILSON BLVD	OF A POTENTIAL NEW OFFICE						
ARLINGTON, VA 22201	BUILDING	VIRGINIA		0.	0.NSTA		
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ganizations Complete if the organization a	nswered "Yes" on Form 990), Part IV, line 34 b	ecause it had one	or more related tax-ex	<u> </u>	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	conti	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No

	THE STATE OF THE BUILDING THE STATE OF THE S
Dort III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related
Part III	organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(l	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?	Code V-UBI amount in box 20 of Schedule	managir partner	Percentage ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	D
											<u> </u>

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	enti	b)(13) rolled ity?
		country)						Yes	No

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities	s, (iii) royalties, or (iv) rent from a controlled entity	<i>/</i>			1a				
	to related organization(s)								
c Gift, grant, or capital contribution	from related organization(s)				1c				
	r related organization(s)								
f Dividends from related organization	on(s)				1f				
h Purchase of assets from related of	organization(s)				1h				
i Exchange of assets with related of	organization(s)				1i				
j Lease of facilities, equipment, or o	other assets to related organization(s)				1j				
k Lease of facilities, equipment, or o	other assets from related organization(s)				1k				
m Performance of services or memb	ership or fundraising solicitations by related orga	nization(s)			1m				
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)									
o Sharing of paid employees with related organization(s)									
p Reimbursement paid to related organization(s) for expenses									
r Other transfer of cash or property	to related organization(s)				1r				
be Loans or loan guarantees by related organization(s) f Dividends from related organization(s) g Sale of assets to related organization(s) i Exchange of assets more related organization(s) i Exchange of assets with related organization(s) j Lease of facilities, equipment, or other assets to related organization(s) k Lease of facilities, equipment, or other assets from related organization(s) i Performance of services or membership or fundraising solicitations for related organization(s) m Performance of services or membership or fundraising solicitations for related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) sharing of paid employees with related organization(s) p Reimbursement paid to related organization(s) for expenses q Reimbursement paid to related organization(s) for expenses p Reimbursement paid by related organization(s) for expenses c Other transfer of cash or property to related organization(s) 2 If the answer to any of the above is "Ves," see the instructions for information on who must complete this line, including covered relationships and transaction thresh type (a·s) Method of determining type (a·s)		ationships and transaction thresholds.							
Name of r	(a) elated organization	Transaction		(d) Method of determining amount	nvolved				
(1)									
(2)									
(3)									
(4)									
\''									
(5)									
(~)									
(6)									
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Schedule R (Form 990) 2014

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

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

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

(a)	(b)	(c)	(d)	(e) Are a partners 501(c) orgs.)	(f)	(g)	(h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	partners	S Sec.	Share of	Share of	Disp	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera	or Percentage
of entity		(state or foreign	excluded from tax under	orgs.)(3) .?	total	end-of-year	alloca	tions?	of Schedule K-1	partne	ownership
		country)	sections 512-514)	Yes I		income	assets	Yes	No	(Form 1065)	Yes N	О
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