

Form **990**

**Return of Organization Exempt From Income Tax**

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

OMB No. 1545-0047

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A For the 2008 calendar year, or tax year beginning JUN 1, 2008 and ending MAY 31, 2009**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization <b>National Science Teachers Association</b> Doing Business As	<b>D</b> Employer identification number <b>52-6055229</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1840 Wilson Boulevard</b>	<b>E</b> Telephone number <b>703-243-7100</b>
	City or town, state or country, and ZIP + 4 <b>Arlington, VA 22201-3092</b>	<b>G</b> Gross receipts \$ <b>34,562,864.</b>
	<b>F</b> Name and address of principal officer: <b>Francis Q. Eberle</b> <b>same as C above</b>	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( 3 ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
<b>J</b> Website: ▶ <b>www.nsta.org</b>		
<b>K</b> Type of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1960</b> <b>M</b> State of legal domicile: <b>DC</b>

**Part I Summary**

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <b>To promote excellence and innovation in science teaching and learning for all.</b>	
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	13
	4	Number of independent voting members of the governing body (Part VI, line 1b)	12
	5	Total number of employees (Part V, line 2a)	130
	6	Total number of volunteers (estimate if necessary)	818
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	1,512,649.
	7b	Net unrelated business taxable income from Form 990-T, line 34	-76,154.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 5,740,433. Current Year: 6,333,789.
	9	Program service revenue (Part VIII, line 2g)	16,896,705. 18,337,890.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,047,993. 174,545.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,634,101. 2,336,406.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	25,319,232. 27,182,630.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,222,624. 926,366.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,542,993. 9,890,595.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>423,674.</b>	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	15,303,628. 15,204,035.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	26,069,245. 26,020,996.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	-750,013. 1,161,634.
	20	Total assets (Part X, line 16)	Beginning of Year: 29,602,295. End of Year: 31,872,123.
	21	Total liabilities (Part X, line 26)	15,488,688. 17,311,768.
	22	Net assets or fund balances. Subtract line 21 from line 20	14,113,607. 14,560,355.

**Part II Signature Block**

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

Sign Here

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_

**Francis Q. Eberle, Executive Director**  
Type or print name and title

Paid Preparer's Use Only

Preparer's signature: **RHA** Date: **1/20/2010** Check if self-employed:  Preparer's identifying number (see instructions): \_\_\_\_\_

Firm's name (or yours if self-employed), address, and ZIP + 4: **RAFFA, P.C.**  
**1899 L Street, NW, Suite 900**  
**Washington, DC 20036**

EIN: \_\_\_\_\_ Phone no.: **(202) 822-5000**

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

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission: See Schedule O for Continuation
The National Science Teachers Association was established to stimulate, improve, and coordinate science teaching at all levels of instruction and to engage in any and all activities in furtherance thereof; to promote the improvement of educational systems 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? Yes No X
If "Yes", describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No X
If "Yes", describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 8,898,807. including grants of \$ 864,066. ) (Revenue \$ 5,063,619. )
Contracts and Grants: Through private corporations and federal agencies, NSTA supports a number of national initiatives relating to science education. NSTA provides advice and technical expertise on various programs undertaken to enhance science teaching and learning.

4b (Code: ) (Expenses \$ 3,908,264. including grants of \$ 0. ) (Revenue \$ 6,414,194. )
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.

4c (Code: ) (Expenses \$ 2,371,189. including grants of \$ 0. ) (Revenue \$ 3,287,312. )
Publishing and Sales: Publishing and sales includes costs incurred for the storage, fulfillment, order processing, marketing, NSTA Recommends, and catalogs for all Association products and books for resale. Also included are the unallocated costs for maintaining a production department and an art and design group, as well as the administrative costs related to the Association's press and publication sales.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 5,796,498. including grants of \$ 62,300. ) (Revenue \$ 6,724,630. )

4e Total program service expenses \$ 20,974,758. (Must equal Part IX, Line 25, column (B).)

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>	X	
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	X	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? <i>If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the U.S.?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>	X	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	X	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? <i>If "Yes," complete Schedule J</i>	X	
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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25</i>		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? <i>If "Yes," complete Schedule L, Part I</i>		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X

**Part IV Checklist of Required Schedules** (continued)

		Yes	No
<b>28</b>	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
<b>a</b>	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b>	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b>	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b>	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b>	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b>	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b>	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b>	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....	X	
<b>34</b>	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....		X
<b>35</b>	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36</b>	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b>	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X

Form 990 (2008)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 575		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 130		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	X	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	X	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
<b>6a</b>	Did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization provide goods or services in exchange for any quid pro quo contribution of more than \$75?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	X	
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	X	
<b>8</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
<b>9</b>	<b>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966? N/A		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter: N/A		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter: N/A		
<b>a</b>	Gross income from members or shareholders		
	11a		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	11b		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year N/A		
	12b		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Table with 11 rows and 3 columns (1a, 1b, and Yes/No). Contains questions about voting members, family relationships, management control, organizational changes, asset diversions, members, and documentation.

Section B. Policies

Table with 12 rows and 3 columns (12a, 12b, 12c, and Yes/No). Contains questions about conflict of interest policies, whistleblower policies, document retention, and compensation review.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed AK, AL, AR, AZ, CA, CT, FL, GA, IL, KS, KY, LA
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection.
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: The Organization - 703-243-7100

COPY

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if the organization did not compensate any officer, director, trustee, or key employee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Page Keeley President	5.00	X		X			56,042.	0.	0.	
P. John Whitsett Retiring President	4.00	X		X			8,216.	0.	0.	
Pat Shane President Elect	4.00	X		X			35,055.	0.	0.	
Elsa Bailey Director	2.00	X					550.	0.	0.	
Susan German Director	2.00	X					1,200.	0.	0.	
Mary Gromko Director	2.00	X					0.	0.	0.	
Julie Luft Director	2.00	X					0.	0.	0.	
Pita Martinez-McDonald Director	2.00	X					550.	0.	0.	
Walter Smith Director	2.00	X					1,050.	0.	0.	
Jean Tushie Director	2.00	X					550.	0.	0.	
Gwendolyn Watson Director	2.00	X					550.	0.	0.	
Vanessa Westbrook Director	2.00	X					2,750.	0.	0.	
David A. Wiley Director	2.00	X					0.	0.	0.	
Francis Q. Eberle Executive Dir./Secretary	37.50			X			62,944.	0.	11,217.	
Moira Fathy Baker Assoc. E.D, COO/CFO	37.50			X			174,741.	0.	30,965.	
Gerry Wheeler Exec Dir/Secr(6/1-9/30)	37.50			X			210,393.	0.	22,720.	
Randall Johnson Treasurer	3.00			X			12,000.	0.	0.	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
David Beacom Assoc. E.D., Publishing	37.50				X			161,087.	0.	22,890.
Al Byers Asst. E.D., E-Learn/Govt	37.50					X		110,752.	0.	13,640.
Frank Owens Assoc. E.D., Prof. Progr	37.50					X		123,977.	0.	12,397.
Edward Rock Assoc. E.D., Mark./Sales	37.50					X		144,822.	0.	18,125.
Howard Walhberg Asst. E.D., Mem Chapter	37.50					X		108,365.	0.	23,325.
Todd Wallace Asst. E.D., Info. Tech.	37.50					X		112,608.	0.	28,135.
<b>1b Total</b>								1,328,202.	0.	183,414.

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 11

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
IPC Print Services, 9122 Eagle Way, Suite 100, Arlington, VA 22201	Printing services	1,261,373.
Tasco, Inc. 9 Jay Gould Court, Wasldorf, MD 20602	Turnkey services on publication sales	684,241.
The Woodlands Resort & Conferences, 2301 North Millbend Drive, The Woodlands, TX	Meeting space and catering	418,851.
GES Exposition Services 7050 Lindell Avenue, Las Vegas, NV 89118	Exhibit Hall Decorator	284,013.
Hyatt Regency Jersey City 2 Exchangew Place, Jersey City, NJ 07032	Meeting space and catering	281,015.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 19

Part VIII		Statement of Revenue		(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	2595654.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	3738135.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		6,333,789.				
	Program Service Revenue	2 a	Conferences/Meetings	Business Code 900004	6,414,194.	3,903,404.	44,764.	2466026.
b		Non-fed. prgm contract	900099	5,063,619.	5,063,619.			
c		Membership dues	900099	3,632,547.	3,632,547.			
d		Publication advert.	541800	1,269,019.		1269019.		
e		Professional develop.	900004	737,818.	631,530.	106,288.		
f		All other program service revenue	900099	1,220,693.	1,220,693.			
g		Total. Add lines 2a-2f		18337890.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		289,290.			289,290.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties		79,216.		36,703.	42,513.	
	6 a		(i) Real	(ii) Personal				
		b	Gross Rents	581,695.				
		c	Less: rental expenses	392,635.				
		d	Net rental income or (loss)	189,060.				
	7 a		(i) Securities	(ii) Other				
		b	Gross amount from sales of assets other than inventory	5788981.				
		c	Less: cost or other basis and sales expenses	5903726.				
		d	Net gain or (loss)	-114745.				
	8 a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		b	Less: direct expenses	b				
		c	Net income or (loss) from fundraising events					
	9 a		Gross income from gaming activities. See Part IV, line 19	a				
		b	Less: direct expenses	b				
		c	Net income or (loss) from gaming activities					
10 a		Gross sales of inventory, less returns and allowances	a	3137307.				
	b	Less: cost of goods sold	b	1083873.				
	c	Net income or (loss) from sales of inventory		2,053,434.	2,037,676.	15,758.		
Miscellaneous Revenue		Business Code						
11 a	Website advertising	900004		14,558.		14,558.		
b	Miscellaneous	900099		138.			138.	
c								
d	All other revenue							
e	Total. Add lines 11a-11d			14,696.				
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e			27182630.	16489469.	1512649.	2846723.	

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**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	747,883.	747,883.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....	170,800.	170,800.		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....	7,683.	7,683.		
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	897,275.	347,079.	542,231.	7,965.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	6,463,213.	4,851,767.	1,391,567.	219,879.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	640,667.	407,755.	214,497.	18,415.
9 Other employee benefits .....	1,337,901.	735,925.	566,910.	35,066.
10 Payroll taxes .....	551,539.	419,172.	115,824.	16,543.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	105,218.	24,200.	81,018.	
c Accounting .....	59,270.		59,270.	
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....				
g Other .....	1,220,864.	1,097,815.	114,354.	8,695.
12 Advertising and promotion .....	766,037.	743,473.	5,228.	17,336.
13 Office expenses .....	3,705,064.	3,538,062.	156,399.	10,603.
14 Information technology .....	366,788.	170,231.	186,055.	10,502.
15 Royalties .....				
16 Occupancy .....	405,409.	393,901.		11,508.
17 Travel .....	1,219,067.	819,507.	367,759.	31,801.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings .....	2,277,409.	2,202,278.	50,253.	24,878.
20 Interest .....	34,626.		34,626.	
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	288,398.	83,549.	204,849.	
23 Insurance .....	109,477.	38,175.	71,302.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) .....				
a <b>Participant support</b> .....	2,483,006.	2,483,006.	0.	0.
b <b>Subcontract</b> .....	1,572,870.	1,366,996.	205,863.	11.
c <b>Miscellaneous</b> .....	188,328.	27,928.	159,668.	732.
d <b>Dues and subscriptions</b> .....	130,202.	124,651.	5,351.	200.
e <b>Bad debt</b> .....	96,951.	96,951.	0.	0.
f All other expenses .....	175,051.	75,971.	89,540.	9,540.
25 <b>Total functional expenses.</b> Add lines 1 through 24f	26,020,996.	20,974,758.	4,622,564.	423,674.
26 <b>Joint Costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

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**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	1	Cash - non-interest-bearing .....	200.	1	200.
	2	Savings and temporary cash investments .....	10,767,227.	2	13,281,674.
	3	Pledges and grants receivable, net .....	4,516,155.	3	4,474,923.
	4	Accounts receivable, net .....	1,068,379.	4	937,695.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L .....		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....	958,502.	8	1,651,143.
	9	Prepaid expenses and deferred charges .....	529,310.	9	365,548.
	10a	Land, buildings, and equipment: cost basis ...	10a 11,394,845.		
	b	Less: accumulated depreciation. Complete Part VI of Schedule D .....	10b 4,604,133.		
			6,114,431.	10c	6,790,712.
	11	Investments - publicly traded securities .....	5,042,340.	11	3,723,024.
	12	Investments - other securities. See Part IV, line 11 .....	469,206.	12	452,284.
	13	Investments - program-related. See Part IV, line 11 .....		13	
	14	Intangible assets .....		14	
15	Other assets. See Part IV, line 11 .....	136,545.	15	194,920.	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	29,602,295.	16	31,872,123.	
<b>Liabilities</b>	17	Accounts payable and accrued expenses .....	1,900,797.	17	1,893,835.
	18	Grants payable .....		18	
	19	Deferred revenue .....	7,139,076.	19	9,176,137.
	20	Tax-exempt bond liabilities .....	2,270,000.	20	2,115,000.
	21	Escrow account liability. Complete Part IV of Schedule D .....		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....	1,410,000.	23	1,325,000.
	24	Unsecured notes and loans payable .....		24	
	25	Other liabilities. Complete Part X of Schedule D .....	2,768,815.	25	2,801,796.
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	15,488,688.	26	17,311,768.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets .....	9,118,334.	27	8,993,884.
	28	Temporarily restricted net assets .....	4,995,273.	28	5,566,471.
	29	Permanently restricted net assets .....		29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
33	<b>Total net assets or fund balances</b> .....	14,113,607.	33	14,560,355.	
34	<b>Total liabilities and net assets/fund balances</b> .....	29,602,295.	34	31,872,123.	

**Part XI Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	2a	X
b Were the organization's financial statements audited by an independent accountant? .....	2b	X
c If "Yes" to lines 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....	2c	X
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....	3a	X
b If "Yes," did the organization undergo the required audit or audits? .....	3b	X

**COPY**

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **National Science Teachers Association** Employer identification number **52-605229**

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

The organization is not a private foundation because it is: (Please check only **one** organization.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H.)
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete the Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III - Functionally integrated
  - d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....	11g(i)	
(ii) A family member of a person described in (i) above? .....	11g(ii)	
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....	11g(iii)	
- h Provide the following information about the organizations the organization supports.

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule A (Form 990 or 990-EZ) 2008

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	9291039.	9552503.	15306567.	5740433.	6332789.	46223331.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 - 3 .....	9291039.	9552503.	15306567.	5740433.	6332789.	46223331.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						8980189.
<b>6 Public Support.</b> Subtract line 5 from line 4.						37243142.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>7</b> Amounts from line 4 .....	9291039.	9552503.	15306567.	5740433.	6332789.	46223331.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	865,912.	968,305.	1038598.	1012527.	809,933.	4695275.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....	10,608.		76,328.	48,234.		135,170.
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....	196,113.	123,125.	3,873.	14,608.	138.	337,857.
<b>11 Total support.</b> Add lines 7 through 10						51391633.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12 75,934,907.	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....	<input type="checkbox"/>					

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	72.47 %
<b>15</b> Public support percentage from 2007 Schedule A, Part IV-A, line 26f .....	<b>15</b>	64.50 %
<b>16a 33 1/3% support test - 2008.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input checked="" type="checkbox"/>	
<b>b 33 1/3% support test - 2007.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>17a 10% -facts-and-circumstances test - 2008.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>b 10% -facts-and-circumstances test - 2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....	<input type="checkbox"/>	
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....	<input type="checkbox"/>	

Schedule A (Form 990 or 990-EZ) 2008

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>6 Total.</b> Add lines 1 - 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2007 Schedule A, Part IV-A, line 27g .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2007 Schedule A, Part IV-A, line 27h .....	<b>18</b>	%

**19a 33 1/3% support tests - 2008.** 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 - 2007.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, and 990-PF.

OMB No. 1545-0047

**2008**

Name of the organization

National Science Teachers Association

Employer identification number

52-6055229

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

**General Rule**

For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ..... ▶ \$ \_\_\_\_\_

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they **must** answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Schedule B (Form 990, 990-EZ, or 990-PF) (2008)

Name of organization

Employer identification number

**National Science Teachers Association**

**52-6055229**

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	_____	\$ <u>1,071,573.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>2</u>	_____	\$ <u>1,087,387.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>3</u>	_____	\$ <u>950,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>4</u>	_____	\$ <u>130,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>5</u>	_____	\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
<u>6</u>	_____	\$ <u>282,993.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**COPY**

<b>Name of organization</b>  National Science Teachers Association	<b>Employer identification number</b>  52-6055229
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/> <hr/>	\$ 153,701.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	<hr/> <hr/> <hr/> <hr/>	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
	<hr/> <hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

**2008**

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

▶ **To be completed by organizations described below.**  
▶ **Attach to Form 990 or Form 990-EZ.**

**If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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), then**

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p align="center"><b>National Science Teachers Association</b></p>	Employer identification number <p align="center"><b>52-6055229</b></p>
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**Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.**

See the instructions for Schedule C for details.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours .....

**Part I-B To be completed by all organizations exempt under section 501(c)(3).**

See the instructions for Schedule C for details.

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).**

See the instructions for Schedule C for details.

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide 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-.

**Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

- A** Check  if the filing organization belongs to an affiliated group.  
**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying)		0.													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		107,924.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		107,924.													
<b>d</b> Other exempt purpose expenditures		24,861,293.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		24,969,217.													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
<b>h</b> Subtract line 1g from line 1a. Enter -0- if line g is more than line a		0.													
<b>i</b> Subtract line 1f from line 1c. Enter -0- if line f is more than line c		0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
<b>2a</b> Lobbying non-taxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
<b>c</b> Total lobbying expenditures	130,182.	147,927.	178,049.	107,924.	564,082.
<b>d</b> Grassroots non-taxable amount		250,000.	250,000.	250,000.	750,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,125,000.
<b>f</b> Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

**Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)).** See the instructions for Schedule C for details.

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? .....			
<b>i</b> Other activities? If "Yes," describe in Part IV .....			
<b>j</b> Total lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).** See the instructions for Schedule C for details.

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? .....	<b>3</b>	

**Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes."** See Schedule C instructions for details.

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4) .....	<b>5</b>	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

National Science Teachers Association

Employer identification number

52-6055229

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

Table with 3 columns: Line number, Description, (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4 show totals for end of year, contributions, grants, and value.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property...
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes...

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.
a Total number of conservation easements
b Total acreage restricted by conservation easements
c Number of conservation easements on a certified historic structure included in (a)
d Number of conservation easements included in (c) acquired after 8/17/06
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?
6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
(i) Revenues included in Form 990, Part VIII, line 1
(ii) Assets included in Form 990, Part X
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:
a Revenues included in Form 990, Part VIII, line 1
b Assets included in Form 990, Part X

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

- 3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange programs
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV and complete the following table:
- |  | Amount    |
|--|-----------|
| <b>c</b> Beginning balance             | <b>1c</b> |
| <b>d</b> Additions during the year     | <b>1d</b> |
| <b>e</b> Distributions during the year | <b>1e</b> |
| <b>f</b> Ending balance                | <b>1f</b> |
- 2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b** If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	2,508,381.				
<b>b</b> Contributions	100,000.				
<b>c</b> Investment earnings or losses	-482,711.				
<b>d</b> Grants or scholarships	36,694.				
<b>e</b> Other expenditures for facilities and programs					
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	2,088,976.				

- 2** Provide the estimated percentage of the year end balance held as:
- a** Board designated or quasi-endowment  100.00 %
  - b** Permanent endowment  \_\_\_\_\_ %
  - c** Term endowment  \_\_\_\_\_ %

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                    | Yes                                 | No                                  |
|------------------------------------|-------------------------------------|-------------------------------------|
| <b>(i)</b> unrelated organizations | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>(ii)</b> related organizations  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
- b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
<b>1a</b> Land		2,131,787.		2,131,787.
<b>b</b> Buildings		6,746,853.	2,650,954.	4,095,899.
<b>c</b> Leasehold improvements		412,232.	412,232.	0.
<b>d</b> Equipment		1,377,511.	1,250,780.	126,731.
<b>e</b> Other		726,462.	290,167.	436,295.
<b>Total.</b> Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				6,790,712.



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	27,182,630.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	26,020,996.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	1,161,634.
4	Net unrealized gains (losses) on investments	4	-1,037,005.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	322,119.
9	Total adjustments (net). Add lines 4-8	9	-714,886.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	446,748.

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

1	Total revenue, gains, and other support per audited financial statements	1	26,145,625.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-1,037,005.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-1,037,005.
3	Subtract line 2e from line 1	3	27,182,630.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	27,182,630.

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

1	Total expenses and losses per audited financial statements	1	26,020,996.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	26,020,996.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	26,020,996.

**Part XIV Supplemental Information**

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

Part V, line 4: Open item

**Part X: In accordance with the Financial Accounting Standards**

Board (FASB) Interpretation No. 48, "Accounting for Uncertainty in Income Taxes", management of the Association has evaluated its tax positions for the year ended May 31, 2009 and has determined that the Association has no material uncertain tax positions and, accordingly it has not recognized any liability for unrecognized tax.

**Part XIV** Supplemental Information (continued)

Part XI, Line 8 - Other Adjustments:

Unrecognized actuarial gain

Multiple horizontal lines for supplemental information.







**Part IV Supplemental Information**

Complete this part to provide the information required by Part I, line 2, and any other additional information.

Schedule F, Part I, Line 2: Canadian savings bonds are purchased for Canadian winners in the Exploravision Awards programs. The winners are subject to the rules and regulations of the Canadian savings bond program.

Multiple horizontal lines for supplemental information.

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the U.S.**

OMB No. 1545-0047

2008

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization **National Science Teachers Association** Employer identification number **52-6055229**

**Part I General Information on Grants and Assistance**

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  **Yes**  **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ...

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
Dr. Albert Einstein Academy 919 No. Broad St. Elizabeth, NJ 07208	22-6001780	501(c)(3)	5,000.	0.			NES Technology Awards
Edward Harris Jr. Middle School 8691 Power Inn Road Elk Grove, CA 95624	94-6002501	501(c)(3)	5,000.	0.			NES Technology Awards
Ellen Ochoa Learning Center 5027 Live Oak Street Cudahy, CA 90201	95-6001908	501(c)(3)	5,000.	0.			NES Technology Awards
Fremont County School Dist. 38 445 Little Wind River Bottom Road Arapahoe, WY 82510	83-6000481	501(c)(3)	5,000.	0.			NES Technology Awards
Harding Middle School 203 East Euclid Avenue Des Moines, IA 50313	42-6001433	501(c)(3)	5,000.	0.			NES Technology Awards
Orleans Elementary School 53 School Street Orleans, VT 05860	03-6000613	501(c)(3)	5,000.	0.			NES Technology Awards

- 2** Enter total number of section 501(c)(3) and government organizations ..... ▶ **73.**
- 3** Enter total number of other organizations ..... ▶ **0.**

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

Schedule I (Form 990) 2008

**Part III** **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22.  
Use Schedule I-1 (Form 990) 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
Wendell G Mohling Outstanding Aerospace Educator	1	5,000.	0.		
Ciba High School Principal Award	1	5,000.	0.		
Ciba Middle School Principal Award	1	5,000.	0.		
Ciba High School Teacher Award	1	5,000.	0.		
Ciba Middle School Teacher Award	2	10,000.	0.		

**Part IV** **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Schedule I, 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

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
Part II and Part III, Schedule I (Form 990).**

OMB No. 1545-0047

2008

**Open to Public  
Inspection**

Name of the organization

**National Science Teachers Association**

Employer identification number

**52-6055229**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Park Creek School 1500 Hale Bowen Drive Dalton, GA 30721	58-6000146	501(c)(3)	5,000.	0.			NES Technology Awards
Vintage Math Science Tech. Mag. 15848 Stare Street North Hills, CA 91343	95-6001908	501(c)(3)	5,000.	0.			NES Technology Awards
Bear Creek Middle School 7415 Herndon Road Fairburn, GA 30213	58-6000246	501(c)(3)	5,000.	0.			NES Technology Awards
Church Point Middle School 340 Martin Luther King Drive Church Point, LA 70525	72-6000009	501(c)(3)	5,000.	0.			NES Technology Awards
Dunbar Middle School Math/ Science Academy - 2010 E. 26th Street - Lubbock, TX 79404	75-6001989	501(c)(3)	5,000.	0.			NES Technology Awards
Flamingo Elementary 701 East 33rd Street Hialeah, FL 33013	59-6000572	501(c)(3)	5,000.	0.			NES Technology Awards
Dr. Hesiquio Rodriguez Elementary 8402 W Wilson Road Harlingen, TX 78552	74-6001053	501(c)(3)	5,000.	0.			NES Technology Awards
Jefferson Community School 1200 West 26th Street Minneapolis, MN 55405	41-0851980	501(c)(3)	5,000.	0.			NES Technology Awards

**2** Enter total number of Section 501(c)(3) and government organizations ..... **32**

**3** Enter total number of other organizations ..... **32**



**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
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OMB No. 1545-0047

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Lebanon Middle School 200 Corporate Drive Campbellsville, KY 42718	61-6001309	501(c)(3)	5,000.	0.			NES Technology Awards
East Oktibbeha County Elementary School - 1884 Sixteenth Section Road - Starkville, MS 39759	64-6000933	501(c)(3)	5,000.	0.			NES Technology Awards
Piedmont Elementary School 203 Bradford St Charleston, WV 25301	55-0697082	501(c)(3)	5,000.	0.			NES Technology Awards
St. Stephen Elementary School 1053 Russellville Road Saint Stephen, SC 29479	57-6000313	501(c)(3)	5,000.	0.			NES Technology Awards
School District of Solon Springs 8993 East Baldwin Avenue Solon Springs, WI 54873	39-6007927	501(c)(3)	5,000.	0.			NES Technology Awards
Roosevelt Middle School 222. E. Acacia Avenue Glendale, CA 91205	95-6001464	501(c)(3)	5,000.	0.			NES Technology Awards
A.L. Holmes Academy 8950 Crane Street Detroit, MI 48213	38-6019629	501(c)(3)	5,000.	0.			NES Technology Awards
Capitol Region Education Council 305 May Road East Hartford, CT 06118	06-0853106	501(c)(3)	5,000.	0.			NES Technology Awards

**2** Enter total number of Section 501(c)(3) and government organizations .....

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

**COPY**

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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OMB No. 1545-0047

2008

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Name of the organization

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Employer identification number

**52-6055229**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Northeast Nodaway Elementary 411 East Allyn Parnell, MO 64475	49-4804422	501(c)(3)	5,000.	0.			NES Technology Awards
San Cayetano Elementary School 514 Mountain View Fillmore, CA 93015	95-2493401	501(c)(3)	5,000.	0.			NES Technology Awards
Richmond Public Schools 3021 Maplewood Avenue Richmond, VA 23221	54-1689909	501(c)(3)	5,000.	0.			NES Technology Awards
Dehesa Charter School 1441 Montiel Rd., Ste. 143 Escondido, CA 92026	68-0483126	501(c)(3)	5,200.	0.			Tapestry Awards
Liberty Christian School 1301 S. Highway 377 Argyle, TX 76226	75-2316143	501(c)(3)	6,100.	0.			Tapestry Awards
St. Luke's Episcopal School 15 St. Luke's Lane San Antonio, TX 78209	74-1166903	501(c)(3)	8,000.	0.			Tapestry Awards
Fouke School District P.O. Box 20 Fouke, AR 71837	71-6020617	501(c)(3)	8,600.	0.			Tapestry Awards
Pinnacle School 2427 E. Second Street Bloomington, IN 47401	31-1007801	501(c)(3)	9,000.	0.			Tapestry Awards

**2** Enter total number of Section 501(c)(3) and government organizations .....

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

**COPY**

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
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OMB No. 1545-0047

2008

**Open to Public  
Inspection**

Name of the organization

**National Science Teachers Association**

Employer identification number

**52-6055229**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Mason County Middle School 420 Chenault Drive Maysville, KY 42056	61-6001323	501(c)(3)	9,100.	0.			Tapestry Awards
Miami Christian School 200 N.W. 109th Ave. Miami, FL 33172	59-0774196	501(c)(3)	9,500.	0.			Tapestry Awards
C.F. Vigor High School 913 N. Wilson Avenue Prichard, AL 36610	63-6000774	501(c)(3)	9,500.	0.			Tapestry Awards
Schodack Central School District 1216 Maple Hill Rd. Castleton, NY 12033	14-6004140	501(c)(3)	9,600.	0.			Tapestry Awards
Highland View Academy 10100 Academy Drive Hagerstown, MD 21740	52-0851123	501(c)(3)	9,700.	0.			Tapestry Awards
Conway School District 19710 State Route 534 Mount Vernon, WA 98274	91-1042906	501(c)(3)	9,700.	0.			Tapestry Awards
Madison West High School 30 Ash Street Madison, WI 53726	39-6003202	501(c)(3)	9,700.	0.			Tapestry Awards
Tapestry Charter School 40 North Street Buffalo, NY 14202	16-1604750	501(c)(3)	9,800.	0.			Tapestry Awards

**2** Enter total number of Section 501(c)(3) and government organizations .....

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

**COPY**

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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OMB No. 1545-0047

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Name of the organization

**National Science Teachers Association**

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**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
West Geauga Local Schools 8615 Cedar Road Chesterland, OH 44026	34-6000595	501(c)(3)	9,900.	0.			Tapestry Awards
St. Wendelin Schools 533 N. Countryline St. Fostoria, OH 44830	34-4441016	501(c)(3)	10,000.	0.			Tapestry Awards
Westerville City Schools 950 County Line Rd. Westerville, OH 43081	31-6401114	501(c)(3)	10,000.	0.			Tapestry Awards
Simsboro High School 1 Tiger Drive Simsboro, LA 71275	72-6000674	501(c)(3)	10,000.	0.			Tapestry Awards
County of Grand-East Grand School District - P.O. Box 125 - Granby, CO 80446	84-6011425	501(c)(3)	10,000.	0.			Tapestry Awards
Sandy Valley Local School 5362 State Route 183 Magnolia, OH 44643	34-6003356	501(c)(3)	10,000.	0.			Tapestry Awards
Las Cruces Public Schools 505 S. Main, Ste. 249 Las Cruces, NM 88001	85-6002445	501(c)(3)	10,000.	0.			Tapestry Awards
Carlisle Area School District 623 Penn St. Carlisle, PA 17013	23-9005321	501(c)(3)	10,000.	0.			Tapestry Awards

**2** Enter total number of Section 501(c)(3) and government organizations .....

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

**COPY**

**SCHEDULE I-1  
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Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
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OMB No. 1545-0047

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(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Indian River Charter High School 6055 College Lane Vero Beach, FL 32966	65-0849190	501(c)(3)	10,000.	0.			Tapestry Awards
Sunridge Middle School 700 SW Runnion Ave. Pendleton, OR 97801	93-6000939	501(c)(3)	10,000.	0.			Tapestry Awards
Williams Middle School 155 Barren Fork Road Huntsville, AL 35824	63-6000613	501(c)(3)	10,000.	0.			Tapestry Awards
St. David's School 3400 White Oak Rd. Raleigh, NC 27609	23-7241145	501(c)(3)	10,000.	0.			Tapestry Awards
Seabury Hall 480 Olinda Road Makawao, HI 96768	99-0110784	501(c)(3)	10,000.	0.			Tapestry Awards
St. Joseph School District 925 Felix Street St. Joseph, MO 64501	44-6001495	501(c)(3)	10,000.	0.			Tapestry Awards
St. Francis Indian School SOAR Program - P.O. Box 222 - Cody, NE 69211	23-7116414	501(c)(3)	10,000.	0.			Tapestry Awards
Browning Public Schools 129 First Avenue, SE Browning, MT 59417	81-6000470	501(c)(3)	10,000.	0.			Tapestry Awards

**2** Enter total number of Section 501(c)(3) and government organizations .....

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

**COPY**

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
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OMB No. 1545-0047

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**Open to Public  
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Name of the organization

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Employer identification number

**52-6055229**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Kihei Charter School 300 Ohukai, #209 Kihei, HI 96753	91-2193016	501(c)(3)	10,000.	0.			Tapestry Awards
West Salem High School 1776 Titan Drive Salem, OR 97304	93-6000763	501(c)(3)	10,000.	0.			Tapestry Awards
Westfield Friends School 2201 Riverton Road Cinnaminson, NJ 08077	22-0994702	501(c)(3)	10,000.	0.			Tapestry Awards
University of Florida 1080 SW 11th Street Gainesville, FL 32601	59-6002052	501(c)(3)	10,000.	0.			Tapestry Awards
Navarre High School 8600 High School Blvd. Navarre, FL 32566	59-6000845	501(c)(3)	10,000.	0.			Tapestry Awards
Troy School District #287 P.O. Box 280 Troy, ID 83871	82-0530483	501(c)(3)	10,000.	0.			Tapestry Awards
Steppingstone Center for Gifted Education - 28555 Middlebelt - Farmington Hills, MI 48334	38-2377598	501(c)(3)	10,000.	0.			Tapestry Awards
South Salem High School 1910 Church Street, S.E. Salem, OR 97302	93-6000763	501(c)(3)	10,000.	0.			Tapestry Awards

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

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

**COPY**

**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
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OMB No. 1545-0047

2008

**Open to Public  
Inspection**

Name of the organization

**National Science Teachers Association**

Employer identification number

**52-6055229**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Poolesville High School 17501 W. Willard Road Poolesville, MD 20837	52-6000989	501(c)(3)	10,000.	0.			Tapestry Awards
Aldine Independent School District 14910 Aldine-Westfield Rd. Houston, TX 77032	74-6001110	501(c)(3)	10,000.	0.			Tapestry Awards
Park Creek School 1500 Hale Bowen Dalton, GA 30721	58-6000146	501(c)(3)	10,000.	0.			Tapestry Awards
Central Campus Marine Biology 1800 Grand Avenue Des Moines, IA 50309	42-6001433	501(c)(3)	10,000.	0.			Tapestry Awards
Wichita Collegiate School 1221 N. Webb Rd. Wichita, KS 67206	48-6091046	501(c)(3)	10,000.	0.			Tapestry Awards
Aledo ISD 12 Vernon Rd. Aledo, TX 76008	75-6003367	501(c)(3)	10,000.	0.			Tapestry Awards
Horace Mann School for the Deaf 40 Arlington Street Boston, MA 02134	22-2514422	501(c)(3)	10,000.	0.			Tapestry Awards
Pine View Green Roof Project 1 Python Path Osprey, FL 34229	59-6000847	501(c)(3)	10,000.	0.			Tapestry Awards

**2** Enter total number of Section 501(c)(3) and government organizations ..... **39**

**3** Enter total number of other organizations ..... **39**



**SCHEDULE I-1  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Schedule I (Form 990)  
▲ Attach to Form 990 to list additional information for  
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OMB No. 1545-0047

**2008**

**Open to Public  
Inspection**

Name of the organization

**National Science Teachers Association**

Employer identification number

**52-6055229**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the U.S. (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
New Haven Public Schools 54 Meadow Street New Haven, CT 06519	66-0001876	501(c)(3)	10,000.	0.			Tapestry Awards
Action-Boxborough Regional School District - 36 Charter Road - Acton, MA 01720	46-0001212	501(c)(3)	10,000.	0.			Tapestry Awards
Mansfield Public Schools 2 Parkrow Mansfield, MA 02048	46-0001209	501(c)(3)	10,000.	0.			Tapestry Awards

**2** Enter total number of Section 501(c)(3) and government organizations ..... **▶** \_\_\_\_\_

**3** Enter total number of other organizations ..... **▶** \_\_\_\_\_



**Part II** Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III.)

(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
Robert H. Carleton Award	1.	5,000.	0.		
Exploravision First Prize	14.	70,000.	0.		
Tapestry Small Awards	1.	500.	0.		
Shugrue Elementary Education Award	1.	1,500.	0.		
Maitland P Simmons Award	13.	13,000.	0.		
Zula Award	2.	2,800.	0.		
Faraday Science Communicator	1.	2,500.	0.		
Exploravision Second Prize	13.	32,500.	0.		
Legacy Award	1.	500.	0.		

**Part II** Continuation of Grants and Other Assistance to Individuals in the U.S. (Schedule I (Form 990), Part III.)

(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
Distinguished Service to Science	3.	1,500.	0.		
Distinguished Informal Science	1.	500.	0.		
Dupont Science Essay Challenge 1st	2.	5,000.	0.		
Dupont Science Essay Challenge 2nd	3.	4,500.	0.		
Dupont Science Essay Challenge 3rd	1.	1,000.	0.		

**Part IV** Supplemental Information

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 J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

**2008**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Name of the organization <b>National Science Teachers Association</b>	Employer identification number <b>52-6055229</b>
--	---

**Part I Questions Regarding Compensation**

**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.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees   |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

**b** If line 1a is 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 .....

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....

**3** Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                     | <input checked="" type="checkbox"/> Written employment contract                     |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment? .....
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....
- c** Participate in, or receive payment from, an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- 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:

- a** The organization? .....
- b** Any related organization? .....
- 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 .....

**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 Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

	Yes	No
<b>1b</b>		
<b>2</b>		
<b>4a</b>		X
<b>4b</b>		X
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>		X
<b>6b</b>		X
<b>7</b>		X
<b>8</b>		X

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

Schedule J (Form 990) 2008

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
Moirra Fathy Baker	(i)	173,967.	0.	774.	19,136.	12,510.	206,387.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Gerry Wheeler	(i)	208,195.	0.	2,198.	19,237.	3,483.	233,113.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
David Beacom	(i)	160,313.	0.	774.	17,634.	5,916.	184,637.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
Edward Rock	(i)	136,297.	8,000.	525.	14,079.	4,976.	163,877.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

The Association paid the following organizations to reimburse them for time spent by their employees in fulfilling their elected office for the Association:

Page Keeley, President, Maine Math & Science, \$41,163

Pat Shane, President Elect, Center for Math & Science, \$34,555

P. John Whitsett, Retiring President, Fond du Lac \$8,216

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization

National Science Teachers Association

Employer identification number

52-6055229

Form 990, Part III, Line 1, Description of Organization Mission:

processes in the schools in any manner to assist such stimulation and coordination of science teaching; to 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 devolving upon the general public through knowledge of such science.

Form 990, Part III, Line 4b, Program Service Accomplishments

As an important addition to the national conference agenda (and selected area conferences), NSTA presents 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 a personalized pathway through the full conference agenda. NSTA national and area conferences may also feature one-day topical research dissemination conferences on focused topics. In plenary sessions and multiple small-group workshops, speakers present findings from their NSF-funded research.

Form 990, Part III, Line 4d, Other Program Services:

Periodicals

Expenses \$ 1602762. including grants of \$ 0. Revenue \$ 1269019.

Professional Development

Expenses \$ 1172785. including grants of \$ 0. Revenue \$ 737818.

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Schedule O (Form 990) 2008

832211  
12-18-08

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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**Membership Services**

Expenses \$ 910334. including grants of \$ 0. Revenue \$ 3647105.

**Journal Advertising**

Expenses \$ 752462. including grants of \$ 0. Revenue \$ 0.

**Other Publications**

Expenses \$ 529745. including grants of \$ 0. Revenue \$ 0.

**Legislative Affairs**

Expenses \$ 257689. including grants of \$ 0. Revenue \$ 0.

**SciLinks**

Expenses \$ 224434. including grants of \$ 0. Revenue \$ 503021.

**Awards**

Expenses \$ 198169. including grants of \$ 62300. Revenue \$ 250567.

**U.S. Registry of Teachers**

Expenses \$ 84419. including grants of \$ 0. Revenue \$ 157100.

**Special Projects**

Expenses \$ 63699. including grants of \$ 0. Revenue \$ 160000.

Form 990, Part VI, Section A, line 6: NSTA has individual, institutional,

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Schedule O (Form 990) 2008

832211  
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Inspection

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52-6055229

and other designated membership 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: Bylaws changes must be approved by the members.

Form 990, Part VI, Section A, line 10: The Assistant Executive Director of Accounting/Controller compiles the necessary data to prepare the Federal Form 990 which is reviewed by the COO/CFO. NSTA then engages a CPA Firm to prepare the 990 in which a draft is provided. The Draft 990 is first reviewed by the Assistant Executive Director of Accounting/Controller and the COO/CFO. The next level of review continues to NSTA's audit committee. Finally, the draft 990 is provided to the Board. Once reviewed and approved, the draft 990 is sent back to the CPA firm in order to be finalized and submitted 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. In the fall each year, human resources (hr) sends out the policy and statement again to each employee requesting

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Schedule O (Form 990) 2008

832211  
12-18-08

**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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OMB No. 1545-0047

**2008**

Open to Public Inspection

Name of the organization

National Science Teachers Association

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52-6055229

that they update their files by listing on the statement any new potential conflicts or to affirm they have no conflicts and also by re-signing 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 the new fiscal year or at the beginning of the fiscal year by mail or e-mail.

Form 990, Part VI, Section B, Line 15: 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 non-profits. These comparisons are produced in spreadsheet form and have been 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

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Schedule O (Form 990) 2008

832211  
12-18-08

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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CFO and other Executive staff. The salary comparisons for the CFO and the other Associate Executive Director positions were provided to the Executive Director in fiscal year 2008 and 2009 for review prior to any compensation revisions.

Form 990, Part VI, Line 17, List of States receiving copy of Form 990:

AK, AL, AR, AZ, CA, CT, FL, GA, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, NC, ND, NH, NJ, NM, NY, OH  
OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Form 990, Part VI, Section C, Line 19: NSTA's bylaws, operating, conflict of interest, and whistleblower policies are available to the public on its main website. As for the Federal Form 990, it can be viewed at [www.guidestar.org](http://www.guidestar.org). NSTA is currently in the process with its webmaster to include the Federal Form 990 on its website.

Form 990, Part XI, Line 2c

NSTA had a committee that assumed responsibility for oversight of the audit of its financial statements and selection of an independent accountant. There were no changes in these processes from the prior year.

**Related Organizations and Unrelated Partnerships**

▶ **Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37.**  
▶ **See separate instructions.**

**Name of the organization** **Employer identification number**  
52-6055229  
**National Science Teachers Association**

**Part I Identification of Disregarded Entities**

(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
1836 Wilson, LLC - 99-9999999 1836 Wilson Boulevard Arlington, VA 22201	Managing the construction of a potential new office building.	Virginia	0.	0.	N/A

**Part II Identification of Related Tax-Exempt Organizations**

(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 501(c)(3))	(F) Direct controlling entity



**Part V Transactions With Related Organizations**

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

**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?

	Yes	No
<b>a</b> Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity .....	<b>1a</b>	
<b>b</b> Gift, grant, or capital contribution to other organization(s) .....	<b>1b</b>	
<b>c</b> Gift, grant, or capital contribution from other organization(s) .....	<b>1c</b>	
<b>d</b> Loans or loan guarantees to or for other organization(s) .....	<b>1d</b>	
<b>e</b> Loans or loan guarantees by other organization(s) .....	<b>1e</b>	
<b>f</b> Sale of assets to other organization(s) .....	<b>1f</b>	
<b>g</b> Purchase of assets from other organization(s) .....	<b>1g</b>	
<b>h</b> Exchange of assets .....	<b>1h</b>	
<b>i</b> Lease of facilities, equipment, or other assets to other organization(s) .....	<b>1i</b>	
<b>j</b> Lease of facilities, equipment, or other assets from other organization(s) .....	<b>1j</b>	
<b>k</b> Performance of services or membership or fundraising solicitations for other organization(s) .....	<b>1k</b>	
<b>l</b> Performance of services or membership or fundraising solicitations by other organization(s) .....	<b>1l</b>	
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets .....	<b>1m</b>	
<b>n</b> Sharing of paid employees .....	<b>1n</b>	
<b>o</b> Reimbursement paid to other organization for expenses .....	<b>1o</b>	
<b>p</b> Reimbursement paid by other organization for expenses .....	<b>1p</b>	
<b>q</b> Other transfer of cash or property to other organization(s) .....	<b>1q</b>	
<b>r</b> Other transfer of cash or property from other organization(s) .....	<b>1r</b>	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(A) Name of other organization(s)	(B) Transaction type (a-r)	(C) Amount involved
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		





Asset No.	Description	Date Acquired	Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	Buildings											
2	Building and Improvements	Varies	SL	40.00	16	6746853.			6746853.	2447310.		112,752.
	* 990 Page 10 Total Buildings					6746853.		0.	6746853.	2447310.	0.	112,752.
	Machinery & Equipment											
3	Computer Equipment	Varies	SL	5.00	16	931,052.			931,052.	779,098.		67,096.
6	Furniture and Equipment	Varies	SL	7.00	16	446,459.			446,459.	388,566.		16,020.
	* 990 Page 10 Total Machinery & Equipment					1377511.		0.	1377511.	1167664.	0.	83,116.
	Land											
1	Land	Varies	L			2131787.			2131787.			0.
	* 990 Page 10 Total Land					2131787.		0.	2131787.	0.	0.	0.
	Other											
4	Software	Varies	SL	3.00	16	726,462.			726,462.	200,195.		89,972.
5	Leasehold Improvements	Varies	SL	40.00	16	412,232.			412,232.	409,674.		2,558.
	* 990 Page 10 Total Other					1138694.		0.	1138694.	609,869.	0.	92,530.
	* Grand Total 990 Page 10 Depr					11394845.		0.	11394845.	4224843.	0.	288,398.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box  **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

<b>Part II</b>		<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).	
Type or print  File by the extended due date for filing the return. See instructions.	Name of Exempt Organization		Employer identification number
	National Science Teachers Association		52-6055229
	Number, street, and room or suite no. If a P.O. box, see instructions. 1840 Wilson Boulevard		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. Arlington, VA 22201-3092		

**Check type of return to be filed** (File a separate application for each return):

Form 990   
  Form 990-EZ   
  Form 990-T (sec. 401(a) or 408(a) trust)   
  Form 1041-A   
  Form 5227   
  Form 8870  
 Form 990-BL   
  Form 990-PF   
  Form 990-T (trust other than above)   
  Form 4720   
  Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**The Organization**

• The books are in the care of  **1840 Wilson Boulevard - Arlington, VA 22201-3092**  
 Telephone No.  **703-243-7100**      FAX No.

- If the organization does not have an office or place of business in the United States, check this box
- *If this is for a Group Return*, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until April 15, 2010.

5 For calendar year \_\_\_\_\_, or other tax year beginning JUN 1, 2008, and ending MAY 31, 2009.

6 If this tax year is for less than 12 months, check reason:  Initial return     Final return     Change in accounting period

7 State in detail why you need the extension  
Additional time is needed to gather information necessary to file a complete and accurate return.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	<b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature        Title  CPA      Date  1/8/2010