COMMITTEE ON NATURAL RESOURCES 113th Congress Disclosure Form As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Legislative hearing on H.R. 596 (Gosar), "Public Lands Renewable Energy Development Act of 2013", H.R. 1363 (Labrador),. "Exploring for Geothermal Energy on Federal Lands Act"; and H.R. 2004 (Simpson), "Geothermal Production Expansion Act of 2013" / July 29, 2014

For Individuals:

1. Name:

- 2. Address:
- 3. Email Address:
- 4. Phone Number:

* * * * *

For Witnesses Representing Organizations:

- 1. Name: Donald L. "D.L." Wilson
- 2. Name of Organization(s) You are Representing at the Hearing:
 - i. La Paz County, Arizona
 - ii. National Association of Counties (NACo)
- 3. Business Address:
- 4. Business Email Address:
- 5. Business Phone Number:

For all Witnesses

Name/Organization: Donald L. "D.L." Wilson, La Paz County, Arizona

Title/Date of Hearing: Legislative hearing on **H.R. 596 (Gosar)**, "Public Lands Renewable Energy Development Act of 2013", **H.R. 1363 (Labrador)**, "Exploring for Geothermal Energy on Federal Lands Act"; and **H.R. 2004 (Simpson)**, "Geothermal Production Expansion Act of 2013" / July 29, 2014

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

University of Redlands, BA degree in Business Management, 1980

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

La Paz County Supervisor, Chairman of the Board of Supervisors Arizona Commerce Authority, Rural Business Development Advisory Council, Member Arizona Association for Economic Development, Member QuadStates Local Government Authority, Member

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

Arizona Public Service Company (Electric Utility), Retired 2010, 20+ years as Parker Area Manager La Paz Economic Development Corporation, former Board Chairman, former President/CEO, currently Board Treasurer

d. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

NONE

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

NONE

f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

NONE

g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

Witnesses Representing Organizations

Name/Organization: Donald L. "D.L." Wilson, La Paz County, Arizona / National Association of Counties Title/Date of Hearing: Legislative hearing on H.R. 596 (Gosar), "Public Lands Renewable Energy Development Act of 2013", H.R. 1363 (Labrador),. "Exploring for Geothermal Energy on Federal Lands Act"; and H.R. 2004 (Simpson), "Geothermal Production Expansion Act of 2013" / July 29, 2014

h. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

None

i. Any federal grants or contracts (including subgrants or subcontracts) from the <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

No grants or contracts were received by NACo or it's supporting foundation; however, the Dept. of Interior was the cognizant agency for Federal grants awarded to the NACo Research Foundation.

j. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

None

k. A list of all federal lawsuits filed against the organization(s) you represent at the hearing by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

None

1. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

PDF's attached for years 2011, 2012 and 2013

Attached

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

▶ Do not enter Social Security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/form990.



Department of the Treasury Internal Revenue Service

A F	or the	2013 calendar year, or tax year beginning ar	nd ending		
Bc	heck if pplicable:	C Name of organization		D Employer identific	ation number
<u> </u>	Address change	NATIONAL ASSOCIATION OF COUNTIES			
	Name change	Doing Business As		53-01	90321
]Initial return Termin-	Number and street (or P.O. box if mail is not delivered to street address) 25 MASSACHUSETTS AVENUE, N.W.	Room/su 500	ite E Telephone number (202)	942-4206
	⊣ated]Amende Jreturn]Applica-	d City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	16,900,963.
L	Lion pending	WABIIINGION, DC 20001		H(a) Is this a group ref	
		F Name and address of principal officer:MATTHEW CHASE SAME AS C ABOVE		for subordinates H(b) Are all subordinates inc	
			1) or 5		ist. (see instructions)
		npt status:501(c)(3)		H(c) Group exemption	-
		rganization: X Corporation Trust Association Other ►	L. Ye	ar of formation: 1946 M	
		Summary			
		riefly describe the organization's mission or most significant activities: SEE	SCHEI	DULE O	······································
& Governance	' '				
nai	2 0	heck this box 🕨 🛄 if the organization discontinued its operations or dis	posed of m	ore than 25% of its net as	sets.
Sel		umber of voting members of the governing body (Part VI, line 1a)			125
ğ		lumber of independent voting members of the governing body (Part VI, line 1)			125
م ې ن		otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	100
itie				6	1279
Activities	7 a T	otal unrelated business revenue from Part VIII. column (C) Jic 2		7a	0.
۲	b N	otal number of volunteers (estimate if necessary) otal unrelated business revenue from Part VIII, column (C), Jin 92, a let unrelated business taxable income from Form 990-T are 34		7b	0.
		otal unrelated business revenue from Part VIII, column (C) Jin Part VIII, column (C) Jin Part VIII, column (C) Jin Part VIII, line 1 h Contributions and grants (Part VIII, line 1 h) Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		Prior Year	Current Year
6)	8 0	Contributions and grants (Part VIII, line 1h)	,	0.	0.
Revenue	9 F	Program service revenue (Part VIII, line 2g)		7,970,801.	8,125,396.
eve	10	nvestment income (Part VIII, column (A), lines 3, 7, and 7d)		518,893.	714,928.
č	11 0)ther revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		5,636,655.	5,632,313.
	12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		14,126,349.	14,472,637.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		2,700,000.	2,828,397.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
Ņ		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		5,875,275.	5,190,587.
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ē	ЬТ	otal fundraising expenses (Part IX, column (D), line 25)	0.		
ŵ	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		5,358,583.	5,034,520.
	18 1	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		13,933,858.	13,053,504.
	19 F	Revenue less expenses. Subtract line 18 from line 12		192,491.	1,419,133.
Net Assets or Fund Balances				Beginning of Current Year	End of Year
sets	20 1	otal assets (Part X, line 16)		37,751,601.	39,704,581.
As	21 1	otal liabilities (Part X, line 26)		7,296,833.	5,624,335.
Fin	22	let assets or fund balances. Subtract line 21 from line 20		30,454,768.	34,080,246.
P	art II	Signature Block			
Unc	ler penal	ies of perjury, I declare that I have examined this return, including accompanying sche	dules and sta	tements, and to the best of m	y knowledge and belief, it is
true	, correct	, and complete. Declaration of preparer (other than officer) is based on all information o	f which prep	arer has any knowledge.	· · · · · · · · · · · · · · · · · · ·
		1) la			[1]
Sig	in	Signature of officer		Date	
He	re	DAVID KEEN, CHIEF FINANCIAL OFFICER			·······
		Type or print name and title		Date Check	PTIN
		Print/Type preparer's name Preparer's signature	DELA BATT		
Pai		DEBORAH G. KOSNETT	<u>Y WN</u>	Self-employ	52-1855942
	· -	Firm's name TATE AND TRYON		/ Firm's EIN	52-1055942
Use	Only	Firm's address 2021 L STREET, NW SUITE 400		Phone no. (2	02) 293-2200
		WASHINGTON, DC 20036			X Yes No
Ma	y the IF	S discuss this return with the preparer shown above? (see instructions)			Form 990 (2013)
332	001 10-29	LHA For Paperwork Reduction Act Notice, see the separate instru	ictions.		FORM 330 (2013)

III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III Image: Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission: Image: Check if Schedule O contains a response or note to any line in this Part III
Srietly describe the organization's mission:
TO STIMULATE AND CONTRIBUTE TO THE IMPROVEMENT OF COUNTY GOVERNMENT
THROUGHOUT THE UNITED STATES.
Did the organization undertake any significant program services during the year which were not listed on Yes X
f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O.
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
revenue, if any, for each program service reported.
(code:) (Expenses \$ 2,744,597. including grants of \$ 2,742,097.) (Revenue \$
CONTRIBUTIONS AND OTHER MISC PROGRAMS- FUNDING TO PROVIDE FOR OPERATIN
COSTS OF RELATED ORGANIZATION, THE NATIONAL ASSOCIATION OF COUNTIES
RESEARCH FOUNDATION (NACORF). NACORF'S CHARITABLE MISSION IS TO
ASCERTAIN, DEVELOP AND DISTRIBUTE KNOWLEDGE ABOUT COUNTY GOVERNMENT FO THE EDUCATION OF THE PUBLIC IN GENERAL, AND FOR THE SPECIFIC EDUCATION
AND TRAINING OF PUBLIC OFFICIALS AND PROSPECTIVE PUBLIC OFFICIALS.
AND TRAINING OF FOBLIC OFFICIALD AND INCOMENTATION FOBLIC OFFICIAL
(Code:) (Expenses \$2,632,251. including grants of \$86,300.) (Revenue \$208,853
LEGISLATIVE - THROUGH NACO'S MEMBER MEETINGS AND COMMITTEES, THIS
DEPARTMENT DEVELOPS NATIONAL LEGISLATIVE POLICY IN SUPPORT OF AMERICA'
COUNTIES AND FOR REPRESENTATION TO CONTRACT NACO DEPERTMENTE COUNT
AGENCIES. TO CONGRESS AND THE ADMINISTRATION, NACO PRESENTS THE COUNT GOVERNMENT VIEW ON ALL LEGISLATIVE AND PROPOSED REGULATIONS AFFECTING
COUNTIES.
cooniiid.
(Code:) (Expenses \$ 1,906,991. including grants of \$) (Revenue \$ 2,195,263
(Code:) (Expenses \$1,900,991. including grants of \$) (Hevenue \$) (Hevenue \$) (Hevenue \$) (Expenses \$)
YEAR: LEGISLATIVE, ANNUAL, AND WESTERN INTERSTATE REGION. CONFERENCES
AND MEETINGS AFFORD COUNTY OFFICIALS THE OPPORTUNITY TO LEARN AND
GATHER INFORMATION TO HELP IMPROVE THE EFFECTIVENESS AND EFFICIENCY OF
THEIR COUNTY'S OPERATIONS AND PROGRAMS.
Other program services (Describe in Schedule O.)
(Expenses \$ 1,094,885. including grants of \$) (Revenue \$ 9,543,280.)
Total program service expenses ► 8,378,724.

-	~~~		
Form	990	(2013)	1

Par	t IV Checklist of Required Schedules				
			Yes	No	
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?				
	If "Yes," complete Schedule A	1		X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for				
•	public office? If "Yes," complete Schedule C, Part I	3		Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect				
-	during the tax year? If "Yes," complete Schedule C, Part II	4	N/	А	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or				
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to				
Ŭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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? If "Yes," complete Schedule D, Part II	7		X	
•	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			<u> </u>	
8		8		X	
•	Schedule D, Part III	–		<u> </u>	
9					
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	9		x	
	If "Yes," complete Schedule D, Part IV	–		<u> </u> _	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	10	ļ	x	
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V				
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X				
	as applicable.	00000000	6 0.000000		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	x		
	Part VI			1	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	116		x	
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII				
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x	
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		<u> </u>	†	
d	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e			
			<u> </u>	1	
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X		
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			<u> </u>	
12a		12a		X	
	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?		+	1	
b	Was the organization included in consolidated, independent addited infancial statements for the tax year.	12b	X		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	13		X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a	-	X	
14a		144		+	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1		1	
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	14b		X	
	or more? If "Yes," complete Schedule F, Parts I and IV	140	+	+	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	15		X	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV				
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		x	
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	- 10	+		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		x	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I		1	+	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18		x	
	1c and 8a? If "Yes," complete Schedule G, Part II	10	+	+	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19		x	
	complete Schedule G, Part III		-		
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		+	
b	IT Yes to line 20a, did the organization attach a copy of its audited inancial statements to this return attach				

Form 990 (2013)

NATIONAL ASSOCIATION OF COUNTIES Form 990 (2013) NATIONAL ASSOCIATI

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		103	110
21	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	ĺ
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX,			
~~	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	picture is the second and the second at the second second at any time during the year to defease			
Ŭ	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
204	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
-	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,		1	
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ļ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
2 9	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32	+	<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		⊢ ^
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and		v	
	Part V, line 1	34	X X	
35a		<u>35a</u>	^	
t	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity		x	
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	<u>35</u> b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		N	/A
	If "Yes," complete Schedule R, Part V, line 2	36	+ <u>IN</u>	<u>'</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	07		x
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	+	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X	
	Note. All Form 990 filers are required to complete Schedule O	30		

Form 990 (2013)

	990 (2013) NATIONAL ASSOCIATION OF COUNTIES 53-0190	321	Pa	age 5
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
	Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable $1a$ 59		Yes	No
		- 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990 - 1990		
b	Enter the number of Forms w-2G included in line ta. Enter of in not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1c	X	3.335555
•	(gambling) winnings to prize winners?			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,)		
	filed for the calendar year ending with or within the year covered by this return 2a 1000 If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
0-	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
3a ⊾	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
40	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
h	If "Yes," enter the name of the foreign country:			
D	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a	X	
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			[.
-	were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c). N/A			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<u>7e</u>		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		1	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	<u>N/</u>	<u> </u>
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting ${ m N/A}$.
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			\$
а	Did the organization make any taxable distributions under section 4966?	<u>9a</u>		
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	<u>9b</u>		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a	-		
b	441			
	amounts due or received from them.)	 12a	8888888	493633
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	120		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	-		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. N/A	13a	800000	<u> 3600000</u>
а	•			
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.			
C 14a	Enter the amount of reserves on hand	14a		X
148	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	-	
0	II 163, has trilled a roth 120 to report these paymenter in the provide an orphanator in concerne e			

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

If there are mail body delegated Enter the nur Did any office officer, direct Did the orgar of officers, di Did the orgar Did the orgar Did the orgar Did the organ a Did the organ of Are any gove persons othe Did the organ a The governin Each commit Is there any of organization? Ction B. Pol Did the organ of "Yes," did and branche Has the organ Did the organ Did the organ Did the organ Did the organ Did the organ Did the organ Did	mber of voting members of the governing body at the end of the tax year	ne direct supervision	52	Yes	N
If there are mail body delegated Enter the nur Did any office officer, direct Did the orgar of officers, di Did the orgar Did the orgar Did the orgar Did the organ a Did the organ of Are any gove persons othe Did the organ a The governin Each commit Is there any of organization? Ction B. Pol Did the organ of "Yes," did and branche Has the organ Did the organ Did the organ Did the organ Did the organ Did the organ Did the organ Did	terial differences in voting rights among members of the governing body, or if the governing d broad authority to an executive committee or similar committee, explain in Schedule O. mber of voting members included in line 1a, above, who are independent er, director, trustee, or key employee have a family relationship or a business relationshi tor, trustee, or key employee? mization delegate control over management duties customarily performed by or under th irectors, or trustees, or key employees to a management company or other person? mization make any significant changes to its governing documents since the prior Form 9 mization become aware during the year of a significant diversion of the organization's as inization have members or stockholders?	1b 12 ip with any other ne direct supervision	52		
body delegated Enter the nur Did any office officer, direct Did the organ of officers, di Did the organ Did the organ Did the organ Did the organ of Are any gove persons othe Did the organiz The governin Each commit Is there any coorganization' ction B. Pol Did the organ dif "Yes," did and branche Has the organ Did the organ Did the organ Did the organ Did the o	d broad authority to an executive committee or similar committee, explain in Schedule 0. mber of voting members included in line 1a, above, who are independent er, director, trustee, or key employee have a family relationship or a business relationshi tor, trustee, or key employee? nization delegate control over management duties customarily performed by or under th irectors, or trustees, or key employees to a management company or other person? nization make any significant changes to its governing documents since the prior Form 9 nization become aware during the year of a significant diversion of the organization's as nization have members or stockholders?	ip with any other ne direct supervision	2		
 Enter the nur Did any office officer, direct Did the orgar of officers, di Did the orgar Did the orgar Did the orgar Did the organ Did the organ of the organ of the organ Did the organ of the organ Did the organ of th	mber of voting members included in line 1a, above, who are independent er, director, trustee, or key employee have a family relationship or a business relationshi tor, trustee, or key employee? nization delegate control over management duties customarily performed by or under th irectors, or trustees, or key employees to a management company or other person? nization make any significant changes to its governing documents since the prior Form S nization become aware during the year of a significant diversion of the organization's as nization have members or stockholders?	ip with any other ne direct supervision	2		999 C
Did any office officer, direct Did the organ of officers, di Did the organ Did the organ Did the organ Did the organ Did the organ of Did the organ Did the organ Did the organ Did the organ Each commit Is there any of organization Ction B. Pol Did the organ Did the organ of "Yes," did and branche Did the organ Did the or	er, director, trustee, or key employee have a family relationship or a business relationshi tor, trustee, or key employee? nization delegate control over management duties customarily performed by or under th irectors, or trustees, or key employees to a management company or other person? nization make any significant changes to its governing documents since the prior Form S nization become aware during the year of a significant diversion of the organization's as nization have members or stockholders?	ip with any other ne direct supervision	2		
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of officers, di Did the organ Did the organ Did the organ Did the organ Did the organ Did the organ of the organ Did the organ Did the organ Did the organ Did the organ D	irectors, or trustees, or key employees to a management company or other person? nization make any significant changes to its governing documents since the prior Form 9 nization become aware during the year of a significant diversion of the organization's as nization have members or stockholders?				_
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more member Are any gover persons other Did the organization' Each commit Is there any or organization' ction B. Pol Did the organ of "Yes," did and brancher Has the organ Did the or	nization have members, stockholders, or other persons who had the power to elect or a			^	┢
 Are any gover persons other Did the organization? The governing Each commit Is there any organization? Ction B. Pol Did the organization? Ction B. Pol Did the organization of the organization? Did the organization? Other officer of the organization? Did the organization?<td></td><td>ppoint one or</td><td>_</td><td></td><td>Ĺ</td>		ppoint one or	_		Ĺ
persons other Did the organization' Each commit Is there any organization' ction B. Pol Did the organ of "Yes," did and brancher Has the organ Did the org	ers of the governing body?		7a	X	┢
Did the organization' The governin Each commit Is there any organization' ction B. Pol Did the organ If "Yes," did and branche Has the organ Did	ernance decisions of the organization reserved to (or subject to approval by) members, s	stockholders, or		v	
 The governing Each commit Is there any organization? ction B. Pol Did the organ If "Yes," did and branche Has the organ Did the organ Extension C. Dis List the state Section 610 for public ins Own v 	er than the governing body?		7b	X	
 Each commit Is there any organization? Ction B. Pol Did the organization? If "Yes," did and branche and branche Has the organization? Did the organization? <l< td=""><td>zation contemporaneously document the meetings held or written actions undertaken during the ye</td><td></td><td>-</td><td></td><td>Ŕ</td></l<>	zation contemporaneously document the meetings held or written actions undertaken during the ye		-		Ŕ
Is there any organization' ction B. Pol Did the organ off "Yes," did and branche Has the organ Describe in S Did the organ Did the organ taxable entit If "Yes," did in joint ventu exempt statu Ction C. Dis List the state Section 610 for public ins	ng body?		8a	X	┞
organization' ction B. Pol Did the organ If "Yes," did and branche Has the organ Describe in S Did the organ Were officers, Did the organ in Schedule Did the organ Did the organ Exist state Section C. Dis List the state Section 610- for public ins	ttee with authority to act on behalf of the governing body?		8b	X	┞
 ction B. Pol Did the organ If "Yes," did and branche Has the organ Describe in S Did the organ Were officers, Did the organ Mere officers, Did the organ Extra Did the organ The organization Did the organ Did the organ Did the organ Extra Did the organ <l< td=""><td>officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea</td><td></td><td></td><td>1</td><td></td></l<>	officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea			1	
 Did the organ If "Yes," did and branche Has the organ Describe in S Did the organ Were officers, Did the organ Example the organ List the state Section 610 for public ins Own w 	's mailing address? If "Yes," provide the names and addresses in Schedule O		. 9	L!	L
 If "Yes," did and branche and branche and branche and branche bescribe in Sa Did the organ in Schedule Did the organ Did the procept states of the organ stable entities and be the organ taxable entities of the state section 610 for public insolutions of the state sections of	licies (This Section B requests information about policies not required by the Internal R	levenue Code.)			Т
 If "Yes," did and branche and branche and branche and branche bescribe in Sa Did the organ in Schedule Did the organ Did the procept states of the organ stable entities and be the organ taxable entities of the state section 610 for public insolutions of the state sections of			····	Yes	-
and branche Has the orga Describe in S Did the organ Were officers, Did the organ <i>in Schedule</i> Did the organ Did the organ Did the organ Did the proc persons, cor The organiza Other officer If "Yes" to lir Did the organ taxable entit If "Yes," did in joint ventu <u>exempt statu</u> Ction C. Dis List the state Section 610- for public ins Own y	nization have local chapters, branches, or affiliates?		<u>10a</u>		╞
 Has the organ Describe in S Did the organ Were officers, Did the organ in Schedule Did the organ Example to the organ List the organ List the state Section 610- for public ins Own v 	the organization have written policies and procedures governing the activities of such c				
 Describe in S Did the organ Were officers, Did the organ in Schedule Did the organ Did the organization Other officer If "Yes" to line Did the organ taxable entities If "Yes," did in joint ventue exempt statue Ction C. Diss List the state Section 610- for public ins 	es to ensure their operations are consistent with the organization's exempt purposes?			 -	╞
 Did the organ Were officers, Did the organ in Schedule Did the organ Did the organization Other officer If "Yes" to lir Did the organ taxable entition If "Yes," did in joint ventue exempt statue Ction C. Dis List the state Section 6100 for public ins 	anization provided a complete copy of this Form 990 to all members of its governing boo	dy before filing the form?	11a	X	ļ
 Were officers, Did the organin Schedule Did the organid the organid the organid the organid the processors, correst of the organidation of	Schedule O the process, if any, used by the organization to review this Form 990.				
 Did the organin Schedule Did the organid Did the organid Did the organid Did the procepersons, corganide Other officer The organization Other officer If "Yes" to lire Did the organidation Did the organidation The organization Other officer If "Yes" to lire Did the organidation Did the organidation				X	+
in Schedule Did the organ Did the organ Did the proc persons, cor The organiza Other officer If "Yes" to lir Did the organ taxable entit Did the organ taxable entit If "Yes," did in joint ventures exempt statu Ction C. Diss List the state Section 610- for public ins Own v	directors, or trustees, and key employees required to disclose annually interests that could give rise	e to conflicts?	. <u>12b</u>	X	╞
in Schedule Did the organ Did the organ Did the proc persons, cor The organiza Other officer If "Yes" to lir Did the organ taxable entit Did the organ taxable entit If "Yes," did in joint ventures exempt statu Ction C. Diss List the state Section 610- for public ins Own v	nization regularly and consistently monitor and enforce compliance with the policy? If ")	Yes," describe			
Did the organ Did the proc persons, cor The organiza O Other officer If "Yes" to lir Did the organ taxable entit Did the organ taxable entit If "Yes," did in joint venturex exempt stature Ction C. Dis List the state Section 610 for public ins Own v	O how this was done		. <u>12c</u>	X	∔
Did the organ Did the proc persons, cor The organiza O Other officer If "Yes" to lir Did the organ taxable entit Did the organ taxable entit If "Yes," did in joint venturex exempt stature Ction C. Dis List the state Section 610 for public ins Own v	nization have a written whistleblower policy?		13	X	Ļ
Did the proc persons, cor The organiza O Other officer If "Yes" to lir Did the orga taxable entit Did the orga taxable entit If "Yes," did in joint ventu exempt statu Ction C. Dis List the state Section 610 for public ins Own v	nization have a written document retention and destruction policy?			X	
persons, cor The organiza Other officer If "Yes" to lir Did the orga taxable entit If "Yes," did in joint ventu- <u>exempt statu</u> <u>ction C. Dis</u> List the state Section 610 for public ins Own v	ess for determining compensation of the following persons include a review and approv				1
 The organization Other officer If "Yes" to line Did the organization taxable entition If "Yes," diding joint venture exempt statution ction C. Disting List the state Section 6100 for public instance Own weight 	mparability data, and contemporaneous substantiation of the deliberation and decision				
 Other officer If "Yes" to lir Did the orga taxable entit If "Yes," did in joint ventu exempt statu ction C. Dis List the state Section 610- for public ins Own v 	ation's CEO, Executive Director, or top management official		15a	X	
If "Yes" to lir Did the orga taxable entit If "Yes," did in joint ventu exempt statu ction C. Dis List the state Section 610 for public ins Own v	rs or key employees of the organization				
 a Did the orga taxable entit b If "Yes," did in joint ventu exempt statu ction C. Dis List the state Section 610- for public ins Own v 	ne 15a or 15b, describe the process in Schedule O (see instructions).				
taxable entit b If "Yes," did in joint ventu- exempt state ction C. Dis List the state Section 610 for public ins Own v	inization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement with a			
 If "Yes," did in joint ventures exempt statures ction C. Dis List the state Section 610- for public ins Own v 	ty during the year?		16a		
in joint ventu exempt statu ction C. Dis List the state Section 610 for public ins	the organization follow a written policy or procedure requiring the organization to evaluate			-	
exempt state ction C. Dis List the state Section 610 for public ins Own v	ure arrangements under applicable federal tax law, and take steps to safeguard the orga	anization's			
ction C. Dis List the state Section 610 for public ins	us with respect to such arrangements?		16b		
List the state Section 610 for public ins					
Section 610 for public ins	es with which a copy of this Form 990 is required to be filed NONE				
for public ins	4 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (Section 501(c)(3)s only	/) availat	ole	
Own v	spection. Indicate how you made these available. Check all that apply				
		in in Schedule O)			
Describe in v	Schedule O whether (and if so, how), the organization made its governing documents, c	•	and fina	ncial	
	available to the public during the tax year.			/	
Statements a	available to the public during the tax year. ame, physical address, and telephone number of the person who possesses the books a	and records of the organi	zation:	►	
State the na	ane, physical address, and telephone number of the person who possesses the books of	206			-
	KEEN CHIEF FINANCIAL OFFICER - (202) 942-4				-
25 PIA5	KEEN, CHIEF FINANCIAL OFFICER - (202) 942-42 SACHUSETTS AVE, NW, STE. 500, WASHINGTON, DO		For	n 990	<u>,</u>

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

Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VI

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

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

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

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

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

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

(A)	(B)			(0				(D)	(E)	(F)
Name and Title	Average	(do		Posi		than (one	Reportable	Reportable	Estimated
	hours per	box	, unle:	ss pe	rson i	is bot	h an	compensation	compensation	amount of
	week		cer an	dad	recto	or/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation from the
	hours for	ord	影			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	organization
	related organizations	ruster	I trus		8	mpen		(44-2/1033-10130)		and related
	below	dual t	ltiona	_	uplo,	St CO	5			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			_
(1) ALLAN ANGEL	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(2) ELIZABETH ARCHULETA	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(3) BROWNYN ASPLUND-WALSH	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(4) ORRIN BAILEY	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(5) PETER BALDACCI	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(6) LU BARRON	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(7) STANLEY BATEMON	1.00]								0
BOARD MEMBER	1.00	X			<u> </u>			0.	0.	0.
(8) JOHN BECKER	1.00									
BOARD MEMBER	1.00	Х		ļ			<u> </u>	0.	0.	0.
(9) LARRY BLACKSTAD	1.00								0	0
BOARD MEMBER	1.00	X	<u> </u>	<u> </u>				0.	0.	0.
(10) HAROLD L. BLATTIE	1.00							0	0.	0.
BOARD MEMBER	1.00	X	-	<u> </u>	<u> </u>			0.	0.	<u> </u>
(11) CINDY BOBBITT	1.00								0.	0.
BOARD MEMBER	1.00	X			┢			0.	0.	<u> </u>
(12) MARY ANN BORGESON	1.00							0.	0.	0.
BOARD MEMBER	1.00	X						<u> </u>		<u> </u>
(13) ROY BROOKS	1.00							0.	0.	0.
BOARD MEMBER	1.00	X	+	-	-			<u> </u>	<u>_</u>	
(14) JOE BRYAN	1.00							0.	0.	0.
BOARD MEMBER	1.00	X	_		_	-		0.	<u>_</u>	
(15) KEITH CARSON	1.00							0.	0.	0.
BOARD MEMBER	1.00		+		+ -	+	+	<u></u>	U.	· · · ·
(16) KATIE CASHION	1.00							0.	0.	0.
BOARD MEMBER	1.00		+				+	·	·	<u>v</u> .
(17) GREG CASTANO	1.00							0.	0.	0.
BOARD MEMBER	1.00	X	_	I				0.	<u> </u>	Form 990 (2013)
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7

Form 990 (2013)

NATIONAL ASSOCIATION OF COUNTIES

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Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, an	d Hi	ighe	st C	ompensated Employe	es (continued)		<u></u>
(A)	(B)			(0	C)			(D)	(E)		(F)
Name and title	Average	(do		Pos heck		1 than	one	Reportable	Reportable		Estimated
	hours per	box	, unle	ss pe	rson	is bot or/trus	h an	compensation	compensation		amount of
	week (list any	-						from	from related organizations		other compensation
	hours for	director				5		the organization	(W·2/1099-MIS		from the
	related	58	55 EGE			nsate		(W-2/1099-MISC)		,	organization
	organizations	trust	altru		88	aduuc		(and related
	below	Individual trustee or	Institutional trustee	G.	Key employee	loyee	Ē				organizations
	line)	Indiv	Insti	Officer	Keye	Highest compensated employee	Former				
(18) STANLEY CHANG	1.00										0
BOARD MEMBER	1.00	X						0.		0.	0.
(19) GEORGE COLE	1.00							0.		0.	0.
BOARD MEMBER	1.00	X			-	-		· · ·		<u>.</u>	0.
(20) WILLIAM COX	1.00	x						0.		0.	0.
BOARD MEMBER	1.00									<u> </u>	
(21) FRED CROSBY	1.00	x						0.		0.	0.
BOARD MEMBER	1.00			+	-	+			· · · · ·		
(22) KENNETH DAHLSTEDT BOARD MEMBER	1.00	x		1				0.		0.	Ο.
(23) MARY BETH DAVIDSON	1.00		-	-	+				,		
BOARD MEMBER	1.00	x			1			0.		0.	0.
(24) DON DAVIS	1.00			1							
BOARD MEMBER	1.00	X			1			0.		0.	0.
(25) REID DEMMAN	1.00										
BOARD MEMBER	1.00	X						0.		0.	0.
(26) BRYAN DESLOGE	1.00		1								
BOARD MEMBER	1.00	X						0.		0.	0.
1b Sub-total					· <i>· ·</i> · · · ·			0.	0.47.00	0.	0.
c Total from continuation sheets to Part V	II, Section A				•••••			1,810,237.			
d Total (add lines 1b and 1c)	<u></u>	<u></u> .	<u>.</u>	· · · · · ·	<u></u>	<u></u>		1,810,237.			415,792.
2 Total number of individuals (including but r	not limited to t	hose	e list	ed a	abov	/e) w	ho r	received more than \$100	0,000 of reportable	e	13
compensation from the organization	. <u></u>					_					Yes No
			- 1-					highest componented a			
3 Did the organization list any former officer										2	3 X
line 1a? If "Yes," complete Schedule J for sFor any individual listed on line 1a, is the s											
4 For any individual listed on line 1a, is the s and related organizations greater than \$15		- " ~	000p	lete	Sch	n an Nedu	le J	for such individual	ino organization	ĥ	4 X
5 Did any person listed on line 1a receive or	accrue compe	, co nsa	tion	fron	n an	v un	rela	ted organization or indiv	idual for services		
rendered to the organization? If "Yes," con											5 X
Section B. Independent Contractors											
1 Complete this table for your five highest co	ompensated in	dep	end	ent	con	tract	ors	that received more than	\$100,000 of com	pensa	ation from
the organization. Report compensation for	the calendar	year	end	ling	with	n or v	vithi	in the organization's tax	year		······
(A)								(B)		~	(C)
Name and business								Description of			ompensation
INVNT, 138 SPRING STREET	, FLOOR	4	1	NE	W			CONVENTION M	IEDIA		440 700
YORK, NY 10012								PRODUCTION			440,700.
HITT CONTRACTING		<u></u>		17 7	ົ	20	12	OFFICE DEDEG	TCN		251,505.
2900 FAIRVIEW DRIVE, FAL	LS CHUR	Сн	1	VA	. 2	20	<u>4 Z</u>	OFFICE REDEC	51GW		251,505.
PRG DENVER	00 00	21	1					AV EQUIPMENT	n		136,758.
2100 CLAY STREET, DENVER CLEARPATH SOLUTIONS, LLC	2465	<u>ረ፲</u> ሮፑ		ਸ਼ੁਰ	VT	T.T.	_	AV BQUIIIBRI			1001100
RD. J17-722, HERNDON, VA			T.A T	111	• 1		-	SERVER MAINT	ENANCE		121,748.
RD. 017 = 722, $MERNDON$, VA	20171										
2 Total number of independent contractors	(includina but	not	limit	ed t	o th	ose	liste	d above) who received i	more than		
\$100.000 of compensation from the organ	ization 🕨					4					
SEE PART VII, SECTIO	N A CON	ΤI	NU	ΓA	IC	N	SH	IEETS			Form 990 (2013)
332008 10-29-13											

Form	990	

53-0190321

Form 990	<u>NATIONAL</u>									53-019	0.52.1
Part VII Section A	A. Officers, Directors, Tru	stees, Key En	nplo	yee	s, a	nd H	ligh	est	Compensated Employ	rees (continued)	
	(A)	(B)			(0				(D)	(E)	(F)
Nam	e and title	Average				ition			Reportable	Reportable	Estimated
		hours	(cl	neck	all	that	арр	ly)	compensation	compensation	amount of
		per					9		from	from related organizations	other compensation
		week (list any	ğ				ploye		the organization	(W-2/1099-MISC)	from the
		hours for	director				d em		(W-2/1099-MISC)		organization
		related	5	Istee			ansate		()		and related
		organizations	l trustee	al fr		oyee	ompe				organizations
		below	Individual 1	Institutional trustee	g	Key employee	Highest compensated employee	Former			
		line)	Indi	Inst	Officer	Key	Hig	For			
(27) WILLIAM DO	HERTY	1.00									
BOARD MEMBER		1.00	X						0.	0.	0.
(28) LENNY ELIA	SON	1.00									
BOARD MEMBER		1.00	Х						0.	0.	0.
(29) PHYLLIS ER	RICO	1.00									
BOARD MEMBER		1.00	X						0.	0.	0.
(30) BERNARD FA	ZZINI	1.00									
BOARD MEMBER			X						0.	0.	0.
(31) RICHARD FC	RSTER	1.00	ļ	1							
BOARD MEMBER		1.00	X						0.	0.	0.
(32) KEITH GOOD	WIN	1.00									
BOARD MEMBER		1.00	Х						0.	0.	0
(33) GREGG GOSL	IN	1.00									
BOARD MEMBER		1.00	X						0.	0.	0.
(34) DOUGLAS GR	AUPE	1.00									
BOARD MEMBER		1.00	X						0.	0.	0.
(35) LOREN GROS	SKOPF	1.00			1						
BOARD MEMBER		1.00	Х						0.	0.	0
(36) JANE HAGUE		1.00									
BOARD MEMBER		1.00	X						0.	0.	0
(37) JAMES HAM		1.00								_	
BOARD MEMBER		1.00	X						0.	0.	0
(38) MARC HAMLI	N	1.00									_
BOARD MEMBER		1.00	X						0.	0.	0
(39) ROGER HANE	Y	1.00									
BOARD MEMBER		1.00	X						0.	0.	0
(40) NANCY HANS	SEN	1.00									
BOARD MEMBER		1.00	Х						0.	. 0.	0
(41) GEORGE HAR	TWICK	1.00			Τ						
BOARD MEMBER		1.00	Х						0.	. 0.	0
(42) MELVIN HAY	MON	1.00									
BOARD MEMBER		1.00	X						0.	. 0.	0
(43) SALLY HEYN	IAN	1.00									
BOARD MEMBER		1.00	X						0	. 0.	0
(44) RON HICKM	AN	1.00									-
BOARD MEMBER		1.00						_	0.	0.	0
(45) JANIE HOF	MAN	1.00								_	-
BOARD MEMBER		1.00				1		\perp	0.	. 0.	0
(46) STEPHEN HO	OLT	1.00								_	
BOARD MEMBER		1.00	X						0	. 0.	0
									ł	1	1

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Part VII Section A. Officers, Directo (A)	(B)		100	<u>, a</u>				(D)	(E)	(F)
				v Posi				Reportable	Reportable	Estimated
Name and title	Average hours	(c)		rosi all t			ly)	compensation	compensation	amount of
	per					-	.,,	from	from related	other
	week) AGE		the	organizations	compensatior
	(list any	ector				emplo		organization	(W-2/1099-MISC)	from the
	hours for	or di	88			ated		(W-2/1099-MISC)		organization
	related	ustee	trust		8	upens				and related organizations
	organizations below	lual tr	tional		Nold	st con				organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
47) HELEN HOLTON	1.00	-	-		-					
OARD MEMBER	1.00	Х						0.	0.	0
48) GARY HOOSER	1.00									0
OARD MEMBER	1.00	X						0.	0.	0
49) RONALD HOUSEMAN	1.00					1				0
OARD MEMBER	1.00	X	ļ					0.	0.	0
50) MELVYN HOUSER	1.00					l		0.	0.	0
OARD MEMBER	1.00	X					_	0.	0.	
51) ANTHONY HYDE	1.00	x						0.	0.	0
SOARD MEMBER	1.00	^	<u> </u>							
52) GERALD HYLAND COARD MEMBER	1.00	x						0.	0.	0
53) MIKE JACOBS	1.00		<u> </u> -	-		-				
SOARD MEMBER	1.00	x						0.	0.	C
54) MICHAEL JEANES	1.00	ł								
BOARD MEMBER	1.00	X						0.	0.	0
55) RAY JEFFERS	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(56) RANDY JOHNSON	1.00									
BOARD MEMBER	1.00	X			ļ			0.	0.	C
(57) TIM JOSI	1.00									
BOARD MEMBER	1.00	X					 	0.	0.	C
(58) AARON KENNARD	1.00							0	0	0
BOARD MEMBER		X					┣	0.	0.	
(59) WILLIAM KENNEDY	1.00	- .,	1				1	0.	0.	c
BOARD MEMBER	1.00	X	+				-	<u>_</u>		<u>_</u>
(60) EVELYN KOLBE	1.00	v						0.	0.	c
BOARD MEMBER	1.00			-	-					
(61) DONALD LARSON	1.00	1 x						0.	0.	0
BOARD MEMBER (62) DAVID LASHER	1.00			+		+				
BOARD MEMBER	1.00	1 x						0.	0.	0
(63) GARY LEE	1.00	+	1-	1			+			
BOARD MEMBER	1.00	1x					1	0.	0.	(
(64) CHRISTIAN LEINBACH	1.00						1			
BOARD MEMBER	1.00	X		1				0.	0.	(
(65) MARK LUTTRELL	1.00									
BOARD MEMBER	1.00							0.	0.	(
(66) LEE MAY	1.00							_	_	
BOARD MEMBER	1.00	X						0.	. 0.	. (

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Part VII Section A. Officers, Directors, (A)			<u>, ,</u>	(C			cat	(D)	(E)	(F)
(A) Name and title	(B)			ربر Posi				Reportable	(=) Reportable	Estimated
Name and title	Average hours	(0		rosi (all t			ι.	compensation	compensation	amount of
	per				nai	app	(ע	from	from related	other
	week					83		the	organizations	compensation
	(list any	ctor				loldu		organization	(W-2/1099-MISC)	from the
	hours for	dig				tede		(W-2/1099-MISC)		organization
	related	trustee or director	LISTER			Sensa				and related
	organizations	altru	onal t		loyee	Comp				organizations
	below	Individual 1	Institutional trustee	Officer	key employ ce	Highest compensated employee	Former			
	line)	Ĕ	Ĕ	8	ş	Ŧ	Fo			
(67) BEN MCADAMS	1.00									
OARD MEMBER	1.00	X						0.	0.	0
68) TIMOTHY MCCORMICK	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0
69) JIM MCDONOUGH	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(70) TODD MCGEE	1.00									
SOARD MEMBER	1.00	X						0.	0.	0
71) MICHAEL MCGINLEY	1.00									
BOARD MEMBER	1.00	X				ļ		0.	0.	0
72) EDWARD MICHAEL	1.00	-								
BOARD MEMBER	1.00	x						0.	0.	0
73) KAREN MILLER	1.00									
BOARD MEMBER	1.00	х		1				0.	0.	0
74) CAROL MOERHLE	1.00									
SOARD MEMBER	1.00	x	i i					0.	0.	0
	1.00	<u> </u>		+		<u> </u>				
(75) HARRISON MOODY	1.00	x						0.	0.	0
BOARD MEMBER	1.00		\vdash				-			
(76) WAYMON MUMFORD	1.00	x						0.	0.	0
BOARD MEMBER	1.00	Λ			\vdash		<u> </u>			
(77) O.D. NETTER		v	1					0.	0.	0
BOARD MEMBER	1.00	X	+	_─				.		`
(78) DAVID NICHOLSON	1.00	.,						0.	0.	0
BOARD MEMBER		X					-	0.	· · · · ·	
(79) PATTY O'CONNOR	1.00	l							0	0
BOARD MEMBER		X			ļ	<u> </u>	<u> </u>	0.	0.	
(80) DENNIS O'LOUGHIN	1.00						i i		0	
BOARD MEMBER	1.00	X	1	<u> </u>		-	ļ	0.	0.	0
(81) GLENN OSBORNE	1.00									
BOARD MEMBER	1.00	X	1					0.	0.	0
(82) TONI PAPPAS	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(83) DUANE PATRICK	1.00								_	
BOARD MEMBER	1.00	Х						0.	0.	C
(84) SHELLY PINKELMAN	1.00								·	
BOARD MEMBER	1.00	X						0.	0.	C
(85) CHESTER PINTARELLI	1.00									
BOARD MEMBER	1.00	X [0.	0.	C
	1.00	1		1						
		X	1					0.	0.	C
(86) TONI PRECKWINKLE BOARD MEMBER								0.	0.	

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Part VII Section A. Officers, Director		npic	yee			iign	est			(F)
(A)	(B)			(C				(D)	(E)	
Name and title	Average	(-1		Posi			6.0	Reportable	Reportable	Estimated amount of
	hours	(CI	песк	all t	nat	app	y)	compensation from	compensation from related	other
	per week				1	8		the	organizations	compensation
	(list any	þ				voldr		organization	(W-2/1099-MISC)	from the
	hours for	direc				ed en	ļ	(W-2/1099-MISC)	, , ,	organization
	related	teeo	ustee			ensat				and related
	organizations	al trus	anal tr		loyee	comp				organizations
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
	line)	<u> </u>	ц.	£	Ke	Ξ	<u>6</u>			
87) JOHN PRINKI	1.00	v						0.	0.	0
BOARD MEMBER	1.00	X						0.		
(88) CHERRYL RAMIREZ	1.00	x						0.	0.	0
BOARD MEMBER	1.00	^	-							
(89) MEL RAPOZO	1.00	x						0.	ο.	0
BOARD MEMBER	1.00	^							.	
(90) RHONE RHONDEL	1.00	x						0.	Ο.	0
BOARD MEMBER	1.00	^				-				
(91) MANUEL RUIZ BOARD MEMBER	1.00	x						0.	0.	0
(92) JOHN RUSSELL	1.00		1							
BOARD MEMBER	1.00	x	ł					0.	0.	0
(93) HARVEY RUVIN	1.00			1						
BOARD MEMBER	1.00	x						0.	0.	0
(94) DENNIS SANDQUIST	1.00		<u> </u>							
BOARD MEMBER	1.00	X						0.	0.	0
(95) CHARLOTTE SANDVIK	1.00		1							
BOARD MEMBER	1.00	X						0.	0.	0
(96) JOEL SCHELL	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(97) NANCY SCHOUWEILER	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(98) CHARLES SELMON	1.00				1					
BOARD MEMBER	1.00	X						0.	0.	0
(99) JUDITH SHIPRACK	1.00									
BOARD MEMBER	1.00	X					<u> </u> .	0.	0.	0
(100) HAL SMALLEY	1.00	┨								0
BOARD MEMBER	1.00				ļ	 	-	0.	0.	0
(101) EUGENE SMITH	1.00	_				1			0.	0
BOARD MEMBER	1.00					+		0.		0
(102) JAMES SNYDER	1.00				Ì			0.	0.	0
BOARD MEMBER	1.00							0.	U	
(103) ERWIN SONNENBERG	1.00							0.	0.	0
BOARD MEMBER	1.00						-		· · · · · · · · · · · · · · · · · · ·	0
(104) ELIZABETH STEFANICS	1.00				1			0.	0.	0
BOARD MEMBER	1.00			+	+	+	+		,	
(105) JERRIE TIPTON	1.00		ĺ					0.	0.	0
BOARD MEMBER	1.00		+	+-		+	+			
(106) GORDON TOPHAM	1.00							0.	. 0.	0
BOARD MEMBER									+	+

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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Higher (A) (B) (C)								(D)	(E)	(F)	
Name and title	Average			Posi	-			Reportable	Reportable	Estimated	
	hours	(cł		all t			ly)	compensation	compensation	amount of	
	per						_	from	from related	other	
	week	ž				Highest compensated employee		the	organizations	compensation	
	(list any	lirecto				i emp		organization	(W-2/1099-MISC)	from the organization	
	hours for related	e or d	E E			sated		(W-2/1099-MISC)		and related	
	organizations	truste	el trus		ж.	mpen				organizations	
	below	Individual trustee or director	Institutional trustee	*	Key employee	est co	G I			5	
	line)	Indiv	Instit	Officer	keye	High	Former				
(107) DANIEL TROY	1.00		_								
BOARD MEMBER	1.00	Х						0.	0.	0.	
(108) KENNETH ULMAN	1.00									•	
BOARD MEMBER	1.00	Х						0.	0.	0.	
(109) GRANT VEEDER	1.00									0	
BOARD MEMBER	1.00	X	 				L	0.	0.	0.	
(110) MICHAEL VICTORINO	1.00									0	
BOARD MEMBER	1.00	X						0.	0.	0.	
(111) BETTY LOU WARD	1.00							0.	0.	0.	
BOARD MEMBER	1.00	Х	-			_		0.	<u> </u>		
(112) KENTON WARD	1.00	x						0.	0.	0.	
BOARD MEMBER	1.00	<u> </u>						0.	<u>0 </u>		
(113) PATRICIA WARD		x						0.	0.	0.	
BOARD MEMBER	1.00						 				
(114) GEORGE WEBB		x						0.	0.	0.	
BOARD MEMBER (115) BONNIE WEBER	1.00	<u> </u>			-	-					
BOARD MEMBER	1.00	x						0.	0.	0.	
(116) LARRY WHITE	1.00			1							
BOARD MEMBER	1.00	X						0.	0.	0.	
(117) GLEN WHITLEY	1.00										
BOARD MEMBER	1.00	X						0.	0.	0	
(118) ARLANDA WILLIAMS	1.00]									
BOARD MEMBER	1.00	X						0.	0.	0	
(119) PAUL WILSON	1.00	i i									
BOARD MEMBER	1.00	X	ļ				-	0.	0.	0	
(120) NOAH WOODS	1.00	l									
BOARD MEMBER	1.00				<u> </u>	ļ	_	0.	0.	0	
(121) JAMES YOUNG	1.00							0	0	0	
BOARD MEMBER	1.00		<u> </u>					0.	0.		
(122) SALLIE CLARK	1.00		1		1			0.	0.	0	
SECOND VICE PRESIDENT	1.00	<u> x</u>		X	+			·			
(123) RIKI HOKAMA	1.00			v				0.	0.	0	
FIRST VICE PRESIDENT	1.00	^		X	+	+	+				
(124) LINDA LANGSTON	1.00	v		x	1			4,406.	1,065.	0	
PRESIDENT	1.00		+	^	+				1,000		
(125) CHRISTOPHER RODGERS	1.00			x		1		6,783.	0.	0	
IMMEDIATE PAST PRESIDENT	31.50		+	↑	+	+	1-				
(126) MATTHEW CHASE	6.00			X	1			280,310.	53,392.	57,536	
EXECUTIVE DIRECTOR	0.00	I		11					+		

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(A) Name and title (127) DAVID KEEN CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO JEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER (131) GEORGE GOODMAN	(B) Average hours per week (list any hours for related organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50 37.50	stee or director	Institutional frustee	Posi			Former	(D) Reportable compensation from the organization (W-2/1099-MISC) 141,229.	(E) Reportable compensation from related organizations (W-2/1099-MISC) 47,077.	(F) Estimated amount of other compensation from the organization and related organizations 47,913.
127) DAVID KEEN CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	hours per week (list any hours for related organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50		heck	Call t	key employee	app		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	per week (list any hours for related organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 37.50 36.00 1.50			Officer	Key employee			from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	week (list any hours for related organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50	Individual trustee or director	Institutional trustee		-	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	(list any hours for related organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50	Individual trustee or director	Institutional trustee		-	Highest compensated employ	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	hours for related organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 37.50 36.00 1.50	Individual trustee or dire	Institutional trustee		-	Highest compensated en	Former	(W-2/1099-MISC)		and related organizations
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	organizations below line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50	Individual trustee o	Institutional trustee		-	Highest compensat	Former	141,229.	47,077.	organizations
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	below line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50	Individual true	Institutional tr		-	Highest comp	Former	141,229.	47,077.	
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	line) 29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50		Institutio		-	Highest	Former	141,229.	47,077.	47,913.
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	29.00 8.50 13.00 24.50 37.50 37.50 36.00 1.50		<u></u>		-	_ 王	Fo	141,229.	47,077.	47,913.
CHIEF FINANCIAL OFFICER (128) DAN GILLISON CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	8.50 13.00 24.50 37.50 37.50 36.00 1.50			x	x			141,229.	47,077.	47,913.
128) DAN GILLISON SI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	13.00 24.50 37.50 37.50 36.00 1.50			X	x			141,229.	47,077.	47,913.
CSI DIRECTOR (129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	24.50 37.50 37.50 36.00 1.50				x			I	I	
(129) EDWIN ROSADO LEGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	37.50 37.50 36.00 1.50				X			66 150	124 211	26 000
EGISLATIVE DIRECTOR (130) BERT JARREAU CHIEF INNOVATION OFFICER	37.50 36.00 1.50				1	<u> </u>	-	66,153.	134,311.	26,998.
(130) BERT JARREAU CHIEF INNOVATION OFFICER	36.00	-							0	24 600
CHIEF INNOVATION OFFICER	36.00			1	X	1		202,852.	0.	24,698.
	1.50							011 046	<u></u>	
(131) GEORGE GOODMAN	1.50			-	X			211,046.	0.	35,325.
		4						1 6 2 4 4 2	11 177	33,912.
PUBLIC AFFAIRS DIRECTOR	1 37.50				X	 		163,449.	11,177.	33,912
(132) DEBORAH COX	57.50	-						164 271	0.	22,349
LEGISLATIVE DIRECTOR	27.50			i —	X			164,371.		
(133) DEBORAH STOUTAMIRE	37.50	4						120 140	0.	36,260.
DIRECTOR OF HUMAN RESOURCES	27.50		+	<u> </u>	-	X		128,449.	0.	30,200
(134) KIM ROSADO	37.50	4						110 067	ο.	34,234
DIRECTOR OF MEETINGS	07 50					X		110,867.	· · · · · ·	54,254
(135) SHANNON HOUSTON-SMACK	37.50	-						110 067	0.	34,234
CONTROLLER	07 50	-	+		-	X		110,867.	<u>v.</u>	54,254
(136) ROBERT FOGEL	37.50	_						111 555	0.	31,057
SENIOR LEGISLATIVE DIRECTOR	27 50	+		+		X		111,555.	V.	
(137) ANDREW GOLDSCHMIDT	37.50	-						107,900.	0.	31,276
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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).

 Grant organ Grant organ Grant organ Grant organ Grant organ Grant organ Grant organ Grant Grant	Ab. and 10b of Part VIII. its and other assistance to governments and nizations in the United States. See Part IV, line 21 ints and other assistance to individuals in United States. See Part IV, line 22 ints and other assistance to governments, anizations, and individuals outside the red States. See Part IV, lines 15 and 16 inefits paid to or for members inpensation of current officers, directors, tees, and key employees inpensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement ral	Total expenses 2,828,397. 1,436,699. 2,858,688. 276,978. 344,232. 273,990. 33,026.	(B) Program service expenses 2,828,397. 930,896. 1,301,996. 167,834. 149,072. 170,253.	Management and general expenses 505,803. 1,556,692. 109,144. 195,160. 103,737.	Fundraising expenses
2 Gran the L 3 Gran orga Unite 4 Bene 5 Com trust 6 Comp perso 7 Othe 8 Pensi sectio 9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roys 16 Occ 14 Infor 17 Trav 18 Payr 19 Con 20 Intel 20 Intel 20 Intel 21 Payr	nizations in the United States. See Part IV, line 21 Ints and other assistance to individuals in United States. See Part IV, line 22 Ints and other assistance to governments, anizations, and individuals outside the ted States. See Part IV, lines 15 and 16 efits paid to or for members inpensation of current officers, directors, tees, and key employees upensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): magement	1,436,699. 2,858,688. 276,978. 344,232. 273,990. 33,026.	930,896. 1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
 2 Gran the L 3 Gran organ Unite 4 Bene 5 Com trust 6 Comp perso 7 Othe 8 Pensis section 9 Othe 10 Payr 11 Feess a Man b Lega c Accord d Lobbin e Profe f Investig g Othe c Outrina t Lega c Accord d Lobbin e Profe f Investig g Othe c Outrina t Contra t Cont	nts and other assistance to individuals in United States. See Part IV, line 22 anizations, and individuals outside the red States. See Part IV, lines 15 and 16 efits paid to or for members npensation of current officers, directors, tees, and key employees npensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	1,436,699. 2,858,688. 276,978. 344,232. 273,990. 33,026.	930,896. 1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
the L the L Gran organ Unite Bene 5 Com trust 6 Comp perso 7 Othe 8 Pensi sectio 9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Payr 19 Con 20 Inter 20 Inter 20 Inter 21 Payr	United States. See Part IV, line 22 Ints and other assistance to governments, anizations, and individuals outside the red States. See Part IV, lines 15 and 16 efits paid to or for members inpensation of current officers, directors, tees, and key employees inpensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement al	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
 3 Gran orga Unite 4 Bene 5 Com trust 6 Composition 6 Composition 7 Othe 8 Pensisisection 9 Othe 8 Pensisisection 9 Othe 10 Payr 11 Feesisis a Manisis b Lega c According d Lobbin e Profie f Invesigion g Othe c Outring g Othe d Information g Othe g Othe	nts and other assistance to governments, anizations, and individuals outside the red States. See Part IV, lines 15 and 16 efits paid to or for members npensation of current officers, directors, tees, and key employees npensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
4 Bene 5 Com trust 6 Comp perso 7 Othe 8 Pensi sectio 9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe 12 Advo 13 Offic 14 Infor 15 Roys 16 Occ 17 Trav 18 Payr 10 Payr 10 Payr 11 Fees 10 Payr 10	anizations, and individuals outside the red States. See Part IV, lines 15 and 16 efits paid to or for members	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
4 Bene 5 Com trust 6 Comp perso perso 7 Othe 8 Pensi sectio 9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roys 16 Occ 17 Trav 18 Payr 10 Fees 10 Payr 10 Payr 11 Fees 10 Colur 12 Advo 13 Offic 13 Payr 16 Occ 17 Trav 18 Payr 19 Con 20 Intel 21 Payr	ted States. See Part IV, lines 15 and 16 efits paid to or for members	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
 4 Bend 5 Com trust 6 Compersore persore persore 7 Other 8 Pensisection 9 Other 10 Payr 11 Feess a Man b Legation c Accord d Lobbit e Profile f Inverge g Other coluring 13 Officiant 14 Information 15 Roya 16 Occord 17 Trave 18 Payr for a fige 20 Inter 21 Payr 	efits paid to or for members	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
 5 Com trust 6 Comp perso perso 7 Othe 8 Pensi section 9 Othe 10 Payr 11 Feess a Man b Lega c Accord d Lobbe e Profe f Investige g Othe colur 12 Advo 13 Offici 14 Infor 15 Roys 16 Occord 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr 	npensation of current officers, directors, tees, and key employees opensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits rroll taxes s for services (non-employees): nagement	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
 trust Compersorpersor persorpersor 7 Other 8 Pensissection 9 Other 10 Payr 11 Feess a Man b Lega c Accord d Lobte e Profer f Inverge g Other colur 12 Advord 13 Officit 14 Infor 15 Roys 16 Occord 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr 	tees, and key employees pensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): hagement	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
 6 Compension person person person 7 Otherers section 9 Otherers section 9 Otherers section 9 Otherers section 9 Otherers section 10 Payrers section 11 Feess a Manners section b Legas c Accord Lobbe d Lobe	appensation not included above, to disqualified ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	2,858,688. 276,978. 344,232. 273,990. 33,026.	1,301,996. 167,834. 149,072.	1,556,692. 109,144. 195,160.	
perso perso 7 Othe 8 Pensi sectio 9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr	ons (as defined under section 4958(f)(1)) and ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	276,978. 344,232. 273,990. 33,026.	167,834. 149,072.	109,144. 195,160.	
7 Othe 8 Pensi 9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roys 16 Occ 17 Trav 18 Payr for a 19 Con 20 Intel 21 Payr	ons described in section 4958(c)(3)(B) er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	276,978. 344,232. 273,990. 33,026.	167,834. 149,072.	109,144. 195,160.	
 7 Othe 8 Pensisection 9 Othe 10 Payr 11 Feess a Man b Lega c Accord d Lobbin e Profeting f Inverging Othe coluring 13 Officing 14 Information 15 Roystand 16 Occord 17 Traventian 18 Payrentian 19 Connation 20 Interval 21 Payrentian 	er salaries and wages sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	276,978. 344,232. 273,990. 33,026.	167,834. 149,072.	109,144. 195,160.	
 8 Pensisection 9 Other 10 Payre 11 Feession a Manibic Lega c According d Lobbic Profesion f Invesion g Other coluring 13 Officiant 14 Information 15 Roya 16 Occordination 17 Travistic Payre for a fige Consistency 19 Consistency 20 Inter 21 Payre 	sion plan accruals and contributions (include ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement	276,978. 344,232. 273,990. 33,026.	167,834. 149,072.	109,144. 195,160.	
9 Othe 10 Payr 11 Fees a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Adva 13 Offici 14 Infor 15 Roya 16 Occ 17 Trav 18 Payr for a 19 Con 20 Intel 21 Payr	ion 401(k) and 403(b) employer contributions) er employee benefits roll taxes s for services (non-employees): nagement al	344,232. 273,990. 33,026.	149,072.	195,160.	
 9 Other 10 Payr 11 Fees a Man b Lega c Accord d Lobb e Profetion f Inverge g Other colur 12 Adva 13 Offician 14 Infor 15 Roya 16 Occord 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr 	er employee benefits roll taxes s for services (non-employees): nagement	344,232. 273,990. 33,026.	149,072.	195,160.	
 10 Payr 11 Fees a Man b Lega c Accord d Lobb e Profeting f Inverget g Other colur 12 Advolution 13 Officit 14 Infor 15 Roya 16 Occord 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr 	roll taxes s for services (non-employees): nagement al	273,990. 33,026.	170,253.		
 Fees a Man b Lega c According d Lobbing e Proferent f Invergent g Otherent g Otherent	s for services (non-employees): nagement al	33,026.	170,255.	1037131	
a Man b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roy: 16 Occ 17 Trav 18 Payr for a 19 Con 20 Intel 21 Payr	nagement				
b Lega c Acco d Lobb e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr	al				
 c Accord d Lobb e Profe f Invege g Other colur 12 Adveget 13 Office 14 Infor 15 Roya 16 Occord 17 Trave 18 Payer for a 19 Content 20 Intent 21 Payer 			<u>. </u>	33,026.	
d Lobb e Profe f Inve g Othe colur 12 Adve 13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Paye for a 19 Con 20 Intel 21 Paye	ounting	60,563.		60,563.	
e Profe f Inve g Othe colur 12 Advo 13 Offic 14 Infor 15 Roy 16 Occ 17 Trav 18 Paya for a 19 Con 20 Inter 21 Paya	•	00,505.	·· ··		
f Invergent g Other colurt 12 Advatted 13 Office 14 Infort 15 Royate 16 Occord 17 Trave 18 Payre 19 Cont 20 Integent 21 Payre	bying				
g Othe colur 12 Adva 13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Paya for a 19 Con 20 Inter 21 Paya	fessional fundraising services. See Part IV, line 17	53,143.		53,143.	
colur 12 Adva 13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Paya for a 19 Con 20 Inter 21 Paya	estment management fees	557145.			
12 Adva 13 Offic 14 Infor 15 Roya 16 Occc 17 Trav 18 Payr for a 19 20 Inter 21 Payr	er. (If line 11g amount exceeds 10% of line 25,	313,886.	135,293.	178,593.	
13 Offic 14 Infor 15 Roya 16 Occ 17 Trav 18 Payr 19 Con 20 Inter 21 Payr	Imn (A) amount, list line 11g expenses on Sch O.)	350,991.	224,539.		
14 Infor 15 Roya 16 Occ 17 Trav 18 Paya for a for a 19 Con 20 Inter 21 Paya	vertising and promotion	399,721.	193,394.		
 15 Roya 16 Occ 17 Trav 18 Paya for a 19 Con 20 Inter 21 Paya 	ce expenses	56,021.	3,834.	52,187.	
 16 Occ 17 Trav 18 Pays 19 Con 20 Integ 21 Pays 	prmation technology	5070211	0,0010		
 17 Trav 18 Payr for a 19 Con 20 Inter 21 Payr 	/alties	1,107,449.		1,107,449.	
 18 Payr for a 19 Con 20 Inter 21 Payr 		444,103.	203,831.	240,272.	
for a 19 Con 20 Inter 21 Payr	vel				
19 Con 20 Inter 21 Payr	ments of travel or entertainment expenses	158,702.		158,702.	
20 Inter 21 Payr	any federal, state, or local public officials nferences, conventions, and meetings	2,224,231.	1,879,718.	344,513.	
21 Payı		8,114.	1101211200	8,114.	
	rest				
zz Dep	preciation, depletion, and amortization	615,468.	93,425.	522,043.	
		58,613.	11,388.	47,225.	
	urance er expenses. Itemize expenses not covered				
24 Othe abov	ve. (List miscellaneous expenses in line 24e. If line				
24e a	amount exceeds 10% of line 25, column (A)				
דות	amount exceeds 1076 of the 25, column (A)	959,100.	800.	958,300.	
	ount, list line 24e expenses on Schedule 0.)	86,744.	52,576.		
	ount, list line 24e expenses on Schedule 0.) JRCHASED SERVICES	37,604.	28,858.		
	Dunt, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS		2,620.		
	ount, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS ISCELLANEOUS	28,562		-1,961,521.	
	ount, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS SCELLANEOUS LAQUES, RECOGNITIONS &	28,562.			0.
	bunt, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS SCELLANEOUS LAQUES, RECOGNITIONS & other expenses	-1,961,521.	8,378,724.		
	bunt, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS SCELLANEOUS LAQUES, RECOGNITIONS & other expenses al functional expenses. Add lines 1 through 24e		8,378,724.		
	bunt, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS SCELLANEOUS LAQUES, RECOGNITIONS & other expenses al functional expenses. Add lines 1 through 24e nt costs. Complete this line only if the organization	-1,961,521.	8,378,724.		
60UC Chec	bunt, list line 24e expenses on Schedule 0.) JRCHASED SERVICES JBSCRIPTIONS SCELLANEOUS LAQUES, RECOGNITIONS & other expenses al functional expenses. Add lines 1 through 24e	-1,961,521.	8,378,724.		

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Form **990** (2013)

16 2013.04000 NATIONAL ASSOCIATION OF COU 53-01901

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NATIONAL ASSOCIATION OF COUNTIES

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Part X Balance Sheet

art /		Balance Sheet					
		Check if Schedule O contains a response or not	e to any lir	ne in this Part X		·····	
					(A)		(B) End of year
					Beginning of year		End of year
1	1	Cash - non-interest-bearing			0.044.746	1	E 116 00E
2	2	Savings and temporary cash investments	8,044,746.		5,116,895.		
3	3	Pledges and grants receivable, net	2 242 227	3	2 547 562		
4		Accounts receivable, net	2,343,327.	4	2,547,563		
5		Loans and other receivables from current and for					
		trustees, key employees, and highest compensation					
		Part II of Schedule L				5	
•		Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing					
		employers and sponsoring organizations of sect					
		employees' beneficiary organizations (see instr).				6	
5 7	7	Notes and loans receivable, net				7	
s ۱	8	Inventories for sale or use				8	240.005
	9	Prepaid expenses and deferred charges			302,859.	9	348,805
10	0a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	7,024,339	•		1 045 040
	b	Less: accumulated depreciation	10b	5,178,390	2,038,519.		1,845,949
1	1	Investments · publicly traded securities			22,761,758.		
1:	2	Investments - other securities. See Part IV, line	11		1,676,021.		1,649,649
1:	3	Investments - program-related. See Part IV, line	11			13	
14	4	Intangible assets	<u> </u>	14	400 557		
1	5	Other assets. See Part IV, line 11			584,371.		498,557
1	6	Total assets. Add lines 1 through 15 (must equ					39,704,581
1	7	Accounts payable and accrued expenses	2,128,733.		1,542,019		
18	8	Grants payable		18	3,727,122		
1	9	Deferred revenue					3,121,122
2	0	Tax-exempt bond liabilities				20	
2	1	Escrow or custodial account liability. Complete				21	
ທີ 2	2	Loans and other payables to current and forme					
		key employees, highest compensated employe	es, and dis	squalified persons.			
		Complete Part II of Schedule L				22	
2 2	3	Secured mortgages and notes payable to unrel				23	
2	4	Unsecured notes and loans payable to unrelate				24	
2	5	Other liabilities (including federal income tax, pa	ayables to	related third			
		parties, and other liabilities not included on line	s 17•24). C	Complete Part X of	1 017 001		255 104
		Schedule D			1,217,331		355,194
2	6	Total liabilities. Add lines 17 through 25			7,296,833	. 26	5,024,333
		Organizations that follow SFAS 117 (ASC 95		here 🕨 🚺 and			
ß		complete lines 27 through 29, and lines 33 a			30,454,768		34,080,246
2	27	Unrestricted net assets					54,000,240
5 2	28	Temporarily restricted net assets				28	
2 2	29					29	
2		Organizations that do not follow SFAS 117 (A	ASC 958),	check here 🕨 🛄			
5		and complete lines 30 through 34.					
g 3	80	Capital stock or trust principal, or current funds				30	
¥ 3	81	Paid-in or capital surplus, or land, building, or e				31	
¥	32	Retained earnings, endowment, accumulated in			1 20 AEA 760	32	34,080,246
- 3	33	Total net assets or fund balances			27 751 601		39,704,581
3	34	Total liabilities and net assets/fund balances		<u></u>	37,751,601	• 34	Form 990 (201

Form 990 (2013)

Form	990 (2013) NATIONAL ASSOCIATION OF COUNTIES	53-01	90321	Page 12
Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			<u> </u>
1 2	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25)			2,637. 3,504.
3	Revenue less expenses. Subtract line 2 from line 1	3		9,133.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			1,768.
5	Net unrealized gains (losses) on investments	5		2,717.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	373	3,628.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	34,080	0,246.
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			X
	Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	d on a		X X
3a	consolidated basis, or both: Separate basis X Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Sch As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Act and OMB Circular A-133? If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ne audit, nedule O. ngle Audit uired audit	<u>3a</u>	XX
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	<u>3b</u>	990 (2013)
			r unn	

SCHEDULE C (Form 990 or 990-EZ)	For Orga	Ditical Campaign	e Tax Under section	501(c) and section 527	омв No. 1545-0047
Department of the Treasury Internal Revenue Service	 Complete See separa 	if the organization is described ate instructions. Informatio instructio	d below. Attach t on about Schedule C ns is at <i>www.irs.go</i> u	(Form 990 or 990-EZ) ar	-EZ. Ind its Open to Public Inspection
If the organization answ	vered "Yes," to I	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, lir	ne 46 (Political Campaigr	Activities), then
		olete Parts I-A and B. Do not con			
		1(c)(3)) organizations: Complete		. Do not complete Part I-B	
 Section 527 organiza 					
		Form 990, Part IV, line 4, or For	m 990-EZ, Part VI, li	ne 47 (Lobbying Activitie	s), then
		ave filed Form 5768 (election un			
		ave NOT filed Form 5768 (election			
If the organization ansv	vered "Yes," to l	Form 990, Part IV, line 5 (Proxy	Tax) or Form 990-E	Z, Part V, line 35c (Proxy	Tax), then
 Section 501(c)(4), (5) 	, or (6) organizati	ons: Complete Part III.			oloyer identification number
Name of organization			COUNTER	Em	53-0190321
	NATIONAL	ASSOCIATION OF	COUNTIES	or is a soction 527	
Part I-A Comple	ete it the org	anization is exempt unde	er section 501(c)	or is a section 527	
	• ·	an an an an an the an a Data a	I	in Dout IV	
		ation's direct and indirect politica			\$
-					
3 Volunteer hours					
Part I-B Comple	te if the ora	anization is exempt und	er section 501(c)	(3).	
1 Estor the amount of	any evoice tax i	ncurred by the organization und	er section 4955	▶ 	\$
 Enter the amount of Enter the amount of 	f any excise tax i	ncurred by organization manage	rs under section 495	5	\$
		1 4955 tax, did it file Form 4720 f			
h If "Ves " describe in	Part IV				
Part I-C Comple	ete if the org	anization is exempt und	er section 501(c)	, except section 50	1 (c)(3).
		by the filing organization for sec			
		zation's funds contributed to oth			
exempt function ac	tivities			▶	\$
3 Total exempt functi	on expenditures	Add lines 1 and 2. Enter here a	nd on Form 1120-POL	-1	
4 Did the filing organi	zation file Form	1120-POL for this year?			Yes No
made payments. Fo contributions receiv	or each organizat /ed that were pro	ployer identification number (Ell ion listed, enter the amount pair omptly and directly delivered to a additional space is needed, prov	I from the filing organ a separate political org	ization's funds. Also enter ganization, such as a sepa	the amount of political
(a) Name	3	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	contributions received and
				Cabadula	C (Form 990 or 990-EZ) 2013
For Paperwork Reduct	ion Act Notice,	see the Instructions for Form §	190 OL 990-ES.	Schedule	

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Schedule C (Form 990 or 990 EZ) 2013 NATIONAL ASSOCIATION OF COUNTIES 53

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Part II-A Complete If the or (election under se	-	npt under sectio		ea rorm 5706	
	ation belongs to an affi	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
	are of excess lobbying				
B Check 🕨 🛄 if the filing organiz	ation checked box A a	nd "limited control" pro	ovisions apply.		
	nits on Lobbying Expe nditures" means amou)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditures to in	fluence public opinion (grass roots lobbying)			
b Total lobbying expenditures to in					
c Total lobbying expenditures (add					<u> </u>
d Other exempt purpose expenditu					
e Total exempt purpose expenditur	res (add lines 1c and 1c	(ل			
f Lobbying nontaxable amount. En	ter the amount from th	<u>e following table in bot</u>	th columns.		
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e	·		
Over \$500,000 but not over \$1,0	00,000 \$100,00	00 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1	,500,000 \$175,00	00 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$1	7,000,000 \$225,00	00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000	000.			
		<u> </u>			
g Grassroots nontaxable amount (e					
h Subtract line 1g from line 1a. If z					· · · · · · · · · · · · · · · · · · ·
i Subtract line 1f from line 1c. If ze					
j If there is an amount other than a				Г	Yes No
reporting section 4911 tax for thi				<u>.</u>	
(Some organ	izations that made a	eraging Period Under section 501(h) electio	n do not have to com	plete all of the five	
	columns below. See th Lobbying Expe	nditures During 4-Ye		age 4.)	
· · · · · · · · · · · · · · · · · · ·		T			
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditure	es				
				Schedule C (Form	990 or 990-EZ) 2013

332042 11-08-13

53-0190321 Page 3

Schedule C (Form 990 or 990 EZ) 2013 NATIONAL ASSOCIATION OF COUNTIES 53-019032 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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

Schedule C (Form 990 or 990-EZ) 2013

332043 11-08-13

18340717 790809 53-0190321

SCH	HEDULE D	Supplementa	al Financial Statements	OMB No. 1545-0047
(Form	n 990)	Complete if the org	anization answered "Yes," to Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.	2013 Open to Public
	nent of the Treasury Revenue Service	► Information about Schedule D (For	rm 990) and its instructions is at www.irs.gov	/form990. Inspection
Name	e of the organizat			Employer identification number
		NATIONAL ASSOCIATI		<u>53-0190321</u>
Par		-	ed Funds or Other Similar Funds or A	CCOUNTS. Complete il the
	organizatio	on answered "Yes" to Form 990, Part IV, lin		b) Funds and other accounts
1	Total number at e	nd of year		
2		butions to (during year)		
3		from (during year)		
4		at end of year		
5			writing that the assets held in donor advised fun	ids
			exclusive legal control?	
			advisors in writing that grant funds can be used o	
			or donor advisor, or for any other purpose confe	
	impermissible priv	vate benefit?		
Par			ganization answered "Yes" to Form 990, Part IV,	
1		servation easements held by the organizat		lly important land area
	<u> </u>	n of land for public use (e.g., recreation or of natural habitat	Preservation of a certified h	
		n of open space		
2			ified conservation contribution in the form of a co	onservation easement on the last
-	day of the tax yea			
				Held at the End of the Tax Year
а	Total number of c	conservation easements		2a
				2b
			ructure included in (a)	2c
d			after 8/17/06, and not on a historic structure	2d
3			eleased, extinguished, or terminated by the orga	
3	vear ►			-
4		where property subject to conservation early a subject to cons	asement is located 🕨	
5		ation have a written policy regarding the pe		
			it holds?	
6	Staff and volunte	er hours devoted to monitoring, inspecting	, and enforcing conservation easements during	the year ►
7	Amount of expen	ises incurred in monitoring, inspecting, and	enforcing conservation easements during the y	ear ► \$
8	Does each conse	ervation easement reported on line 2(d) abo	ove satisfy the requirements of section 170(h)(4)(B)(I)
	and section 170(h)(4)(B)(ii)?	tion easements in its revenue and expense state	······································
9	In Part XIII, desci	ribe how the organization reports conserva	ation's financial statements that describes the or	rganization's accounting for
	conservation eas		allori s'imancial statements that describes the of	gamzaton e cocoching to
Pa	rt III Organiz	ations Maintaining Collections	of Art, Historical Treasures, or Other	Similar Assets.
60000000	Complete	if the organization answered "Yes" to Form	n 990, Part IV, line 8.	
1a	If the organizatio	n elected, as permitted under SFAS 116 (A	SC 958), not to report in its revenue statement a	and balance sheet works of art,
	historical treasur	es, or other similar assets held for public ex	whibition, education, or research in furtherance o	f public service, provide, in Part XIII,
	the text of the fo	otnote to its financial statements that desc	ribes these items.	
b	If the organizatio	n elected, as permitted under SFAS 116 (A	SC 958), to report in its revenue statement and	balance sheet works of art, historical
			education, or research in furtherance of public se	ervice, provide the tollowing amounts
	relating to these			≉ ◀
	(i) Revenues in	cluded in Form 990, Part VIII, line 1		··· ►· \$
~	(II) ASSETS INCLUC	preceived or held works of art historical th	easures, or other similar assets for financial gain	, provide
2		ounts required to be reported under SFAS		· • · · · · · ·
а	Revenues includ	ed in Form 990. Part VIII. line 1		▶\$
b	Assets included	in Form 990, Part X		▶ \$
5				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-25-13 22 Schedule D (Form 990) 2013

22 2013.04000 NATIONAL ASSOCIATION OF COU 53-01901

18340717 790809 53-0190321

Sche	dule D (Form 990) 2013 NATIONA	L ASSOCIAT	ION O	F COU	NTIES		5	3-01	90321	Pa	ge 2
	t III Organizations Maintaining C	ollections of Ar	t, Histo	orical Tr	easures, o	r Other	Simila	r Asse	ts (continu	ied)	
3	Using the organization's acquisition, accessi										
	(check all that apply):										
а	Public exhibition	d		oan or exc	hange progra	ims					
b	Scholarly research	e	o	ther							
с	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explain	n how the	y further tl	ne organizatio	on's exem	pt purpo	se in Parl	t XIII.		
5	During the year, did the organization solicit o	r receive donations of	of art, hist	orical trea	sures, or othe	er similar a	assets		-		
	to be sold to raise funds rather than to be ma								Yes		No
Par	<u>tiv</u> Escrow and Custodial Arran		ete if the c	organizatio	n answered "	Yes" to F	orm 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Par				a ar athar ag		aludad				
1a	Is the organization an agent, trustee, custod							[Yes		No
-	on Form 990, Part X?								1163		NO
b	If "Yes," explain the arrangement in Part XIII	and complete the to	llowing ta	Die:					Amount		
							10		Anount		
c	Beginning balance										
	Additions during the year										
	Distributions during the year										
f	Ending balance Did the organization include an amount on F								Yes		No
2a	If "Yes," explain the arrangement in Part XIII.	Orm 990, Part A, line	214		provided in [Dart XIII					
	t V Endowment Funds. Complete i	the organization an	swered "	Yes" to Fo	rm 990. Part	IV. line 10	<u></u>				<u> </u>
	Lindowinent i dinds. Complete	(a) Current year	·	or year	(c) Two year			ears back	(e) Four	vears	back
4.	Designing of year balance	(a) Ourrent year		or year		0 5461 1					<u> </u>
1a	Beginning of year balance										
b	Contributions										
-	Net investment earnings, gains, and losses						· -				
d	Grants or scholarships		·								
e	Other expenditures for facilities										
	and programs							<u> </u>			
f	Administrative expenses								<u> </u>		
9	End of year balance			lumm (l					
2	Provide the estimated percentage of the cur			, column (a)) neio as.						
a	Board designated or quasi-endowment		%								
b	Permanent endowment	%									
С	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c sho					ما قريب ما		otion			
3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are neid a	and administe	ered for th	e organiz	ation	Г	Yes	No
	by:									103	110
	(i) unrelated organizations									- 1	
	(ii) related organizations		·····		•••••••••••••••••••••••••••••••••••••••				3a(ii)		
b	If "Yes" to 3a(ii), are the related organization								3b		
4	Describe in Part XIII the intended uses of the		owment f	unds.							
	t VI Land, Buildings, and Equipm Complete if the organization answere		Dort IV	lino 11a S	See Form 000) Part X li	ne 10				
		(a) Cost or (t or other		cumulate	d	(d) Book	valu	
	Description of property	basis (invest		• •	(other)	• • •	reciation		(4) 2001	(ruid	
۰ م	Lood				, . ,	P					
-	Land					<u>nananan</u> 9388866		<u></u>			
b			t	3.13	30,410.	1,9	03,7	84.	1,220	5,6	26.
c ام	Leasehold improvements				70,744.		64,5				79.
	Equipment				23,185.		10,0			3,1	
	I. Add lines 1a through 1e. (Column (d) must		t X. colum			· · · · · ·			1,84		
1010	A Aug intes 14 through 16. (Column (a) most			1-11-10				Schedul	e D (Form	n 990)	2013

332052 09-25-13

Schedule D (Form 990) 2013	NATIONAL	ASSOCIATION	OF	COUNTIES
Part VII Investments - 0	Other Securities	5.		

Complete if the organization answered "Yes"		e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			·····
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) 🕨			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"		e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	· · · · · · · · · · · · · · · · · · ·		
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX Other Assets.		dd d Ore France 000 Best X line 15	
Complete if the organization answered "Yes"	to Form 990, Part IV, IIr	e 11d. See Form 990, Part X, line 15.	(b) Book value
(3)	Description		
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	- 15)		•
Total. (Column (b) must equal Form 990, Part X, col. (B) lir Part X Other Liabilities.	<i>ie</i> [5.]	<u> </u>	
Complete if the organization answered "Yes"	to Form 000 Part IV lir	e 11e or 11f. See Form 990. Part X. I	ine 25.
(a) Departmention of lightlity	<u>toronn 350, rat rv, m</u>	(b) Book value	
(1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL	LEASE	69,168.	
DEFENDED COMDENICATION		428,130.	
		1,141,929.	
DUD TO ADDIT TAMEC		-1,284,033.	
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	be 25.) ►	355,194.	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statement organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII X

Schedule D (Form 990) 2013

332053 09-25-13

2013.04000 NATIONAL ASSOCIATION OF COU 53-01901

dule D (Form 990) 2013 NATIONAL ASSOCIATION OF CO	UNTI	ES	53-	0190321	Page 4
t XI Reconciliation of Revenue per Audited Financial Stateme	nts Wi	ith Revenue per F	leturr?	1.	
Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.					
Total revenue, gains, and other support per audited financial statements			1	16,962,	,023.
Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
Net unrealized gains on investments	2a	1,832,717.			
Donated services and use of facilities	2b				
Recoveries of prior year grants	_2c				

d Other (Describe in Part XIII.) 2d

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Add lines 2a through 2d

Subtract line 2e from line 1

373,628.

2e

3

2,206,345. 14,755,678.

-	Amounts included on Form 500, Fair Fin, and Fig. Surface on and the	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	-283,041.		
с	Add lines 4a and 4b			4c	-283,041.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	14,472,637.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	th Expenses per	Retu	rn.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.			_	
1	Total expenses and losses per audited financial statements			1	13,336,545.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
-	Prior year adjustments	2b			
	Other losses	2c			
	Other (Describe in Part XIII.)	2d	283,041.		
	Add lines 2a through 2d			2e	283,041.
3	Subtract line 2e from line 1			3	13,053,504.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)				
	Add lines 4a and 4b			4c	0.
с Е	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	13,053,504.
<u></u>	rt XIII Supplemental Information.				
	ream audolemental invinativit.				

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, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X, LINE 2:

S<u>chec</u>

Par

1 2 а b С

е

3

4

EXPLANATION: THE ASSOCIATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR
ANY TAX POSITIONS TAKEN, AND THEREFORE, DID NOT IDENTIFY ANY UNCERTAIN TAX
POSITIONS THAT ARE MATERIAL TO THE CONSOLIDATED FINANCIAL STATEMENTS
DURING EACH OF THE YEARS ENDED DECEMBER 31, 2013 AND 2012. AT A MINIMUM,
THE 2010 THROUGH 2013 TAX YEARS ARE OPEN FOR EXAMINATION BY TAXING
AUTHORITIES.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
EQUITY IN EARNINGS OF SUBSIDIARY 373,628.
PART XI, LINE 4B - OTHER ADJUSTMENTS:
332054 Schedule D (Form 990) 2013 09-25-13 25

			25				
18340717 79080)9 53-0190321	2013.04000	NATIONAL	ASSOCIATION	OF	COU	53-01901

 Schedule D (Form 990) 2013
 NATIONAL ASSOCIATION OF COUNTIES
 53-0190321
 Page 5

 Part XIII
 Supplemental Information (continued)
 53-0190321
 Page 5

RENTAL EXPENSE TO PART VIII

-283,041.

283,041.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE TO PART VIII

FORM 990, SCHEDULE D, PARTS XI AND XII

EXPLANATION: AUDITED FINANCIAL STATEMENTS ARE CONSOLIDATED TO INCLUDE NACO AND THE FINANCIAL ACTIVITIES OF THE RELATED ORGANIZATIONS AS OUTLINED IN SCHEDULE R, PARTS II AND IV. THE RECONCILIATION IN PARTS XI AND XII IS TO THE NACO PORTION OF THE CONSOLIDATED FINANCIAL STATEMENTS. NACO DOES NOT RECEIVE A SEPARATE AUDITED FINANCIAL STATEMENT.

Schedule D (Form 990) 2013

332055 09-25-13

26

Attach to Form Res. Attach to Form Res. Attach to Form Res. Attach to Form Res. Res of the organization Information And Selection Information And Selection Information And Selection And And And And And And And And And An	SCHEDULE I (Form 990)			Grants and Other Assistance to Organizations, Governments, and Individuals in the United States ^{Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22}	er Assistanc Id Individual n answered "Yes"	to Form 990, Parl	zations, ed States IV, line 21 or 22.		OMB No. 1545-0047
NATIONLI ASSOCIATION OF COUNTIES mellion on Gantis and Assistance mellion on Gantis and Assistance and the sance and Assistance on maintain records to substantiate the amount of the grants or assistance, the grants or assistance, and the selection and the selection the order parts or assistance consistance and the selection the order parts or assistance the order parts or assistance, and the selection and the united function the united states. Complete if the organizations in the United States. Complete if the organizations in the United States. Complete if the organization of non-restin assistance in assistance in the organization Other Assistance to Governments and Organizations in the United States. Complete if the organization of non-restin assistance in and the selection (a) Amount of non-restin assistance in assistance in the organization of non-restin assistance in assistance in the organization ATTON the applicable (a) Amount of non-restin assistance in assistance in assistance in and in an organization and in an organization and in an organization and in an organization (a) Each grant in a second in a sistance in assistance in a second in an organization and in a sistance in a sistance in a second in a sistance in a second in a se	Department of the Treasury Internal Revenue Service		Informati	ion about Schedule 1	► Attach to Forn (Form 990) and its	n 990. instructions is at	www.irs.gov/form9	90.	Open to Public Inspection
on Grents and Assistance and the selection table records to substandiate the amount of the grants or assistance, the grants or assistance, and the selection table records to substandiate the amount of the grants or assistance, the grants or assistance anization of assistance/ anization spreading (b) EN (b) EN (b) EN (b) EN (c) EN (c) EN	Name of the organizati		ASSOCIATI	ON OF COUNT	IES				Employer identification number $53-0190321$
train records to substantiate the amount of the grants or assistance, and the selection aprants or assistance? The grants or assistance for monitoring the united States. The infarpolated if additional space is needed. The organizations in the United States. The organizations in the United States. The organizations in the United States. The organization is the United		nformation on Grants an	nd Assistance						
arization's procedures for montoning the use of grant funds in the United States. Sestence to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, it explores the additional species reserved. Administration (b) EIN (b) EIN (c) (a) Amount of (c) Amount of (c) (a) Amount of (c) (a) Amount of (c) (a) (b) Excription of (c)	1 Does the organiz	zation maintain records to	o substantiate the tance?	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	istance, and the select	X Yes
ssistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, lit admore than \$5,000. Part II can be duplicated if additional space is needed. Arganization (b) EN (b) EN (c)		IV the organization's pro-	cedures for monit	toring the use of grant	funds in the United	l States.			
ed more than \$5,000. Part II can be duplicated if additional space is needed. yranization (b) EN (c) FIC section (c) Amount of Amount of Amount of Amount of Amount of Amount of Torcash assistance if applicable (cash grant assistance moreash) assistance (c) Amount of Amount o	j	d Other Assistance to C	Governments and	d Organizations in the	e United States. C	omplete if the orga	nization answered "Y	es" to Form 990, Part	IV, line 21, for any
E 500 Til applicable cash grant non-cash Ruttation non-cash assistance E 500 53-0241255 50.1(c) (3) 2,742,097 0 0 0 WTEX 31-0868827 50.1(c) (3) 2,742,097 0 0 0 WTEX 31-0868827 50.1(c) (3) 85,000 0 0 0 WTEX 31-0868827 50.1(c) (3) 85,000 0 0 0 WTEX 31-0868827 50.1(c) (13) 85,000 0 0 0 WTEX 31-0868827 50.1(c) (13) 65,000 0 0 0 WTEX 31-0868827 50.1(c) (13) 65,000 <t< td=""><td>1 (a) Name and ac</td><td>hat received more than \$</td><td>55,000. Part II can (b) EIN</td><td>be duplicated if addition</td><td>ional space is need (d) Amount of</td><td>ed. (e) Amount of</td><td>(f) Method of</td><td>(g) Description of</td><td>(h) Purpose of grant</td></t<>	1 (a) Name and ac	hat received more than \$	55,000. Part II can (b) EIN	be duplicated if addition	ional space is need (d) Amount of	ed. (e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
E 500 53.0241255 501(C)(3) 2,742,097, 0. DPEI WTERX 31-0868827 501(C)(3) 85,000, 0. 0. DPEI W 31-0868827 501(C)(3) 85,000, 0. 0. DPEI DPEI W 31-0868827 501(C)(3) 85,000, 0. 0. 0. DPEI W 31-0868827 501(C)(3) 85,000, 0. 0. 0. DPEI W 31-0868827 501(C)(3) 95,000, 0. 0. 0. DPEI W 31-0868827 501(C)(3) 95,000, 0. 0. 0. DPEI W 31-0868827 501(C)(3) 95,000, 0. 0. 0. DPEI W 31-0868827 501(C)(3) 0. 0. 0. 0. DPEI DPEI W 31-0868827 501(C)(3) 340,000 0. 0. 0. DPEI DPEI W 10.000 10.000 10.000 0. 0. 0. DPEI DPEI DPEI	or go	vernment		if applicable	cash grant	non-cash assistance	FMV, appraisal, other)	non-cash assistance	or assistance
DC 2001 53-0241255 501(C)(3) 2,742,097 0. PE PE DC 2001 53-0241255 501(C)(3) 2,742,097 0. 0 PE PE COLL LEGAL CENTER 31-0868827 501(C)(3) 85,000. 0. 0. PEE PEE TOL STREET, NW 31-0868827 501(C)(3) 85,000. 0. 0. PEE PEE DC 20001 31-0868827 501(C)(3) 85,000. 0. 0. PEE PEE DC 20001 31-0868827 501(C)(3) 95,000. 0. 0. PEE PEE DC 20001 31-0868827 501(C)(3) 95,000. 0. 0. PE PE DC 20001 31-0868827 501(C)(3) 95,000. 0. 0. PE PE DC 20001 31 95,000. 0. 0. PE PE DC 20001 31 95,000. 0. 0. PE PE PE DC 20001	NACO RESEARCH FOU	UNDATION					i		
31-0868827 501(C)(3) 85,000 0. 0 31-0868827 501(C)(3) 85,000 0. 0	25 MASSACHUSETTS	AVE STE	53-0241255	501(C)(3)	2,742,097.	0.			OPERATIONS
mber of certions listed in the line 1 table	STATE AND LOCAL I 444 N. CAPITOL SI	LEGAL CENTER TREET, NW	31-0868827	501 (C) (3)		0			OFERATIONS
The section S01(c)(3) and government organizations listed in the line 1 table	A DA WATANTINGUN								
Enter total number of section 501(c)(3) and government organizations listed in the line 1 table									
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Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table									
Enter total number of other organizations listed in the line 1 table		ber of section 501(c)(3) a	nd aovernment o	I rganizations listed in th	he line 1 table				▶ 2.
		ber of other organizations	s listed in the line	1 table					• 0 •

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NATIONAL SCOLTATION	ATTON OF	OF COUNTIES			53-0190321 Page 2
er Assistance to Individua	ted States. Com	plete if the organiza	ttion answered "Yes"	to Form 990, Part IV, line 22.	
(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
Part IV Supplemental Information. Provide the information required in	l quired in Part I, lin	e 2, Part III, column	Part I, line 2, Part III, column (b), and any other additional information.	dditional information.	
PART I, LINE 2:					
EXPLANATION: NACO REQUIRES THAT GR	GRANTS BE	BE MANAGED WITH	SOUND	FINANCIAL	
MANAGEMENT POLICIES, ADEQUATE INTE	INTERNAL CON	CONTROL SYSTEMS,		COST-EFFICIENT	
PROCUREMENT PROCEDURES, AND DOCUMENTATION OF	INTATION		ALL EXPENDITURES	AND	
PURCHASES. ALL FINANCIAL AND ACCOU	ACCOUNTING RECORDS		SHOULD BE AVAI	AVAILABLE FOR	
INSPECTION AND SHOULD BE RETAINED	BASED ON NACO'S	NACO'S DC	DOCUMENT RETENTION	ENTION	
POLICY.					
332102 10-29-13		28			Schedule I (Form 990) (2013)

	HEDULE J	_	pensation Information		MB No. 1		
(FOI	rm 990)	For certain Officers, L	Directors, Trustees, Key Employees, and Highest Compensated Employees		20 [.]	13	
			ation answered "Yes" on Form 990, Part IV, line 23.	00000000	pen to		00000000000
	tment of the Treasury	Attach to F	form 990. ► See separate instructions. J (Form 990) and its instructions is at www.irs.gov/fo	0.00000000	Inspec		•
	al Revenue Service e of the organizatio		J (Form 990) and its instructions is at www.iis.gov/i	Employer ident	tificatio	n nur	nber
T Carri	e el trie el gamzatio		IATION OF COUNTIES	53-019	0321	L	
Pa	t Question	s Regarding Compensation					
51.651	ducstion	5 negarang compensation				Yes	No
10	Check the appropr	iste box(es) if the organization provid	ed any of the following to or for a person listed in Form	990.			
1 a			any relevant information regarding these items.				
	First-class or c		Housing allowance or residence for perso	naluse			
	X Travel for com		Payments for business use of personal re				
		cation and gross-up payments	X Health or social club dues or initiation fee				
		spending account	Personal services (e.g., maid, chauffeur, c				
		spending account		incij			
	16 64 1 1 1 1	and the state of the state of all all all all and the state of the sta	inction follow a written policy recording poyment or				
b			nization follow a written policy regarding payment or		1b	X	-9993335533
•			ibed above? If "No," complete Part III to explain			<u>.</u>	
2			oursing or allowing expenses incurred by all directors,		2	X	388663866
	trustees, and office	ers, including the CEO/Executive Direct	ctor, regarding the items checked in line 1a?		2		
		· · · · · · · · ·	and the second	4			
3			tion used to establish the compensation of the organization				
			eck any boxes for methods used by a related organizat	ion to			
	<u> </u>	sation of the CEO/Executive Director,					
	X Compensatio	n committee	X Written employment contract				
		compensation consultant	X Compensation survey or study				
	X Form 990 of c	other organizations	X Approval by the board or compensation of	committee			
4	During the year, di	d any person listed in Form 990, Part	VII, Section A, line 1a, with respect to the filing				
	organization or a re	elated organization:					v
а		ce payment or change-of-control payr			<u>4a</u>		X
b			nonqualified retirement plan?		4b	X	
с			d compensation arrangement?		4 c		X
	If "Yes" to any of li	ines 4a-c, list the persons and provide	e the applicable amounts for each item in Part III.				
	Only section 501((c)(3) and 501(c)(4) organizations mu	ust complete lines 5-9.				
5			1a, did the organization pay or accrue any compensation	on.			
	contingent on the						
а					5a		X
b	-				5b		X
-	- · · · ·	or 5b, describe in Part III.					
6			1a, did the organization pay or accrue any compensation	วท			
-	contingent on the						
а	•	-			6a		X
	-				6b		X
~	• –	or 6b, describe in Part III.					
7			1a, did the organization provide any non-fixed payment	S			
•			t III		7	Х	
8			or accrued pursuant to a contract that was subject to t				
5	initial contract evo	ention described in Regulations section	ion 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9			buttable presumption procedure described in				
9					9		
	negulations section	<u>/// 00.4900-0(0/:</u>			1/5		0012

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

Schedule J (Form 990) 2013

332111 09-13-13

Farth Onicers, Directors, Hustees, hey Employees, and ingress Compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii)	be rei	ported in Schedule J	report compensatic	on from the organize	tion on row (i) and fron	1 related organizations	t, described in the ins	tructions, on row (ii).
Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the tot	Form. ed inc	990, Part VII. Jividual must equal tl	he total amount of F	orm 990, Part VII, So	al amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual	able column (D) and (E	;) amounts for that inc	dividual.
		(B) Breakdown of W-2 a	N-2 and/or 1099-MIS	nd/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			
43 VII MATMAR (11)	9	254.947.	24.780.	583.	27,846.	20,484.	328,640.	.0
LUJ		48,561.	4,720.	111.		3,902.	62,598.	.0
	9	138,587.	2,250.	392.		17,839.	177,164.	.0
Ц Ц		46,196.	750.	131.		5,946.	59,055.	.0
(3) DAN GILLISON	Ξ	57,749.	-	1,144.	8,	458.	75,062.	•
Ä		117,248.	14,740.	2,323.	17,159.	930.	•	
	ε	195,840.	• 0	7,012.	23,19	1,499.	227,550.	
ISI	8	.0		•0				
(5) BERT JARREAU	9	184,996.	24,250.	1,800.	24,98	10,345.	246,371.	
E P	3	.0	.0	• 0				
(6) GEORGE GOODMAN	9	158,937.	.0	4,512.	19,287.	12,454.	195,190.	
LIC.			.0	309.	1,319.	852.		
(7) DEBORAH COX	(E	162,307.	.0	2,064.	20,961.	1,388.	186,720.	
ISL	3	•0	.0	• 0				
(8) DEBORAH STOUTAMIRE	9	122,401.	5,000.	1,048.	15,99	20,263.	164,709.	
5	(ii)	• 0	.0	0	•0	•0	0	.0
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Page 2

53-0190321

Schedule J (Form 990) 2013 NATIONAL ASSOCIATION OF COUNTIES 53-0190321 Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

NATIONAL ASSOCIATION OF COUNTIES

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Schedule J (Form 990) 2013 NATIONAL ASSOCIATION OF COUNTIES	53-0190321 Page 3
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	part for any additional information.
PART I, LINE 1A:	
EXPLANATION: COMPANION TRAVEL IS PAID FOR THE PRESIDENT AND FOR THE	
EXECUTIVE DIRECTOR AS PART OF THE COSTS RELATED TO THEIR TRAVEL EXPENSES	
WHILE ON OFFICIAL BUSINESS REPRESENTING NACO. THESE AMOUNTS ARE REPORTED AS	
INCOME ON FORMS W-2 AND 1099, AS REQUIRED.	
NACO ALSO PAYS FOR AIRLINE CLUB MEMBERSHIPS FOR THE EXECUTIVE DIRECTOR AND	
ELECTED OFFICERS; FEES ARE SHOWN ON W-2 OR 1099, RESPECTIVELY.	
MEMBERSHIP DUES IN A LOCAL SOCIAL CLUB ARE PAID BY NACO FOR THE USE OF	
NUMEROUS NACO EMPLOYEES, AND ARE CONSIDERED ONE OF THE COSTS OF NETWORKING	
AND EXPANDING BUSINESS RELATIONSHIPS FOR NACO.	
PART I, LINE 7:	
EXPLANATION: THE NACO EXECUTIVE DIRECTOR HAS AN ANNUAL BONUS OPTION,	
WHICH IS TO BE BASED ON THE PERFORMANCE OBJECTIVES DETERMINED ANNUALLY BY	
THE NACO OFFICERS. THE OFFICERS WILL EVALUATE HIS PERFORMANCE EACH MAY AND	
DETERMINE HIS ANNUAL INCREASE AND THEN BONUS AMOUNT.	
	Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 NATIONAL ASSOCIATION OF COUNTIES	53-0190321 Page 3
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	part for any additional information.
ADDITIONALLY, DURING EMPLOYEE PERFORMANCE REVIEWS, SUPERVISORS CAN	
RECOMMEND THAT EMPLOYEES RECEIVE ABOVE STANDARD MERIT INCREASES AND/OR	
PERFORMANCE BONUSES. THOSE RECOMMENDATIONS MUST INCLUDE SPECIFIC	
JUSTIFICATION AND ARE SUBJECT TO REVIEW BY THE HR DIRECTOR AND ULTIMATELY	
THE EXECUTIVE DIRECTOR. THE BOARD DOES NOT APPROVE INDIVIDUAL GOALS OR	
BONUSES, WITH THE EXCEPTION OF THE EXECUTIVE DIRECTOR. HOWEVER, THE BOARD	
DOES APPROVE NACO'S STRATEGIC GOALS AND INITIATIVES, WHICH ARE THE BASIS	
FOR THE INDIVIDUAL BONUSES.	
	Schedule J (Form 990) 2013

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990- Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.	ZUIJ Open to Public
Name of the organization	-	Employer identification number 53-0190321
FORM 990, PA	RT I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:
THE NATIONAL	ASSOCIATION OF COUNTIES (NACO) ASSISTS AMERIC	CA'S COUNTIES
IN PURSUING	EXCELLENCE IN PUBLIC SERVICE. THE ASSOCIATION	WORKS TO
ADVANCE SOUN	D PUBLIC POLICIES, PROMOTE COUNTY SOLUTIONS A	ND INNOVATION,
FOSTER INTER	GOVERNMENTAL AND PUBLIC-PRIVATE COLLABORATION	, AND PROVICE
VALUE-ADDED	SERVICES TO SAVE COUNTIES AND TAXPAYERS MONEY	. NACO
PROVIDES ELE	CTED AND APPOINTED LEADERS FROM THE NATION'S	3,069 COUNTIES
WITH THE KNO	WLEDGE, SKILLS AND TOOLS NECESARY TO PROVIDE	
FISCALLY-RES	PONSIBLE, QUALITY-DRIVEN AND RESULTS-ORIENTED	POLICIES AND
SERVICES FOR	HEALTHY, VIBRANT, SAFE AND RESILIENT COUNTIE	S
FORM 990, PA	RT III, LINE 4D, OTHER PROGRAM SERVICES:	
PUBLIC AFFAI	RS - THIS DEPARTMENT IS RESPONSIBLE FOR MEMBE	RSHIP, MEDIA
RELATIONS, M	ARKETING, THE WEBSITE AND COUNTY NEWS WITH A	FOCUS ON
CREATING GRE	ATER VISIBILITY OF NACO AND COUNTY GOVERNMENT	S ON CAPITOL
HILL, WHILE	EDUCATING NACO MEMBERS ABOUT PROGRAMS, PRODUC	TS, AND
SERVICES PRO	VIDED BY NACO. COUNTY NEWS IS A BIWEEKLY PUBL	ICATION
CIRULATED TO	MORE THAN 28,000 ELECTED AND APPOINTED COUNT	Y OFFICIALS
ACROSS THE C	OUNTRY. COUNTY NEWS INFORMS COUNTY OFFICIALS	ABOUT WHAT IS
HAPPENING IN	OTHER COUNTIES AND PROVIDES INFORMATION ABOU	T LEGISLATIVE
AND REGULATO	RY ACTIVITIES IN WASHINGTON, D.C., THAT AFFEC	T COUNTIES AND
THEIR RESIDE	NTS. COUNTY NEWS IS ALSO AVAILABLE ON LINE. C	OUNTY NEWS
ALERT, AN EL	ECTRONIC NEWSLETTER DISTRIBUTED BIWEEKLY TO 4	3,000 MEMBERS,
TELLS MEMBER	S THAT COUNTY NEWS IS AVAILABLE ONLINE, HIGHL	IGHTS
HEADLINES IN	THE CURRENT ISSUE, AND KEEPS THEM UP-TO-DATE	ON
	NEWS, PROGRAMS AND MEMBER SERVICES. eduction Act Notice, see the Instructions for Form 990 or 990-EZ. Sched	dule O (Form 990 or 990-EZ) (2013)
332211 09-04-13		

2013.04000 NATIONAL ASSOCIATION OF COU 53-01901 18340717 790809 53-0190321

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
NATIONAL ASSOCIATION OF COUNTIES	53-0190321

EXPENSES \$ 898,176. INCLUDING GRANTS OF \$ 0. REVENUE \$ 8,224.

INFORMATION TECHNOLOGY - THE ASSOCIATION PROVIDES GUIDANCE AND EDUCATION TO COUNTY GOVERNMENTS ON INFORMATION TECHNOLOGY-RELATED

MATTERS THROUGH TECHNOLOGY SUMMITS AND WORKSHOPS HELD DURING NACO

CONFERENCES. THESE EVENTS BRING TOGETHER ELECTED COUNTY OFFICIALS,

COUNTY CIO'S AND VENDORS IN THE IT MARKETPLACE TO PROVIDE COUNTY

GOVERNMENTS THE TECHNOLOGY VISION AND LEADERSHIP FOR DEVELOPING AND

IMPLEMENTING IT INITIATIVES. ONGOING SUPPORT IS PROVIDED BY FORMING

BUSINESS ALLIANCES WITH COMPANIES AND ORGANIZATIONS IN THE INFORMATION

TECHNOLOGY MARKETPLACE. THE ASSOCIATION ALSO SERVES AS A LIAISON AND

ADVOCATE FOR COUNTIES WITH OTHER LEVELS OF GOVERNMENT.

EXPENSES \$ 187,728. INCLUDING GRANTS OF \$ 0. REVENUE \$ 104,000.

COUNTY SERVICES - THESE ACTIVITIES INCLUDE ONGOING RESEARCH ON ISSUES OF IMPORTANCE TO COUNTIES, RESPONDING TO INQUIRIES FROM AND ABOUT COUNTIES, MANAGING A PEER-TO-PEER NETWORK OF EXPERT COUNTY OFFICIALS, HOSTING A CLEARINGHOUSE OF INFORMATION ABOUT GRANTS FOR WHICH COUNTIES ARE ELIGIBLE, AND DISSEMINATING WRITTEN MATERIALS. NACO ALSO FACILITATES EDUCATIONAL PROGRAMS AT NACO'S CONFERENCES AND LEADERSHIP TRAINING FOR COUNTY OFFICIALS.

EXPENSES \$ 8,981. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

DEFERRED COMPENSATION - THE NATIONAL ASSOCIATION OF COUNTIES (NACO), IN

PARTNERSHIP WITH STATE ASSOCIATIONS OF COUNTIES, ENDORSES A SECTION 457

DEFERRED COMPENSATION PROGRAM ADMINISTERED BY NATIONWIDE RETIREMENT

SOLUTIONS (NRS). THE DEFERRED COMPENSATION PROGRAM OFFERS COUNTY

 EMPLOYEES A WAY TO AUGMENT RETIREMENT SAVINGS WHILE POSTPONING THE

 332212 09-04-13
 Schedule O (Form 990 or 990-EZ) (2013)

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Schedule O (Form 990 or 990 EZ) (2013)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
PAYMENT OF FEDERAL, AND IN MANY CASES, STATE INCOME TAXES	. MORE THAN
342,000 COUNTY EMPLOYEES FROM OVER 1,730 COUNTIES CURRENT	LY PARTICIPATE
IN THE PROGRAM WITH ACCUMULATED ASSETS OF MORE THAN \$13.6	3 BILLION AS
OF 12/31/2013.	
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,82	2,000.
MEMBERSHIP SERVICES- REPRESENTS THE COSTS OF OBTAINING AN	ID RETAINING
MEMBERSHIPS FOR COUNTY, ASSOCIATE AND PREMIER MEMBERS. ME	MBERSHIP
SERVICES COSTS (CLASSIFIED AS G&A) TOTALED \$1,531,042 FOR	2013.
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 5,60	9,056.
FORM 990, PART VI, SECTION A, LINE 1:	
EXPLANATION: NACO HAS A LEADERSHIP COMMITTEE, CONSISTING	OF FOUR OFFICERS,
WHICH IS RESPONSIBLE FOR THE PROPERTY, FUNDS AND BUSINESS	S AFFAIRS OF THE
ASSOCIATION IN THE ABSENCE OF THE BOARD. THE COMMITTEE HA	AS AND MAY EXERCISE
ALL POWERS OF AUTHORITY GRANTED TO THE BOARD. IT RECOMMEN	NDS THE APPOINTMENT

AND COMPENSATION OF THE EXECUTIVE DIRECTOR TO THE BOARD, AND MAY ESTABLISH SUCH POSITIONS AND SALARY SCHEDULES AS NECESSARY TO CONDUCT THE AFFAIRS OF THE ASSOCIATION, SUBJECT TO THE BOARD'S APPROVAL.

THE LEADERSHIP COMMITTEE IS COMPOSED OF THE NACO PRESIDENT, THE IMMEDIATE PAST PRESIDENT, THE FIRST VICE PRESIDENT, AND THE SECOND VICE PRESIDENT. ALSO ON THE COMMITTEE ARE FOUR REGIONAL REPRESENTATIVES, WHO HAVE NO VOTING AUTHORITY.

FORM 990, PART VI, SECTION A, LINE 6:

EXPLANATION: NACO HAS THE FOLLOWING CLASSES OF MEMBERSHIP:

ACTIVE MEMBER COUNTIES SHALL BE THOSE COUNTY GOVERNMENTS WHICH CONTRIBUTE 332212 09-04-13
Schedule O (Form 990 or 990-EZ) (2013) 35

Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
ANNUALLY TO THE FINANCIAL SUPPORT OF THE ASSOCIATION ACCO	ORDING TO THE
SCHEDULE OF DUES OR SERVICE FEES ADOPTED BY THE BOARD OF	DIRECTORS.
SEPARATE MEMBER CATEGORIES FOR ORGANIZATIONS OR INDIVIDU	ALS OTHER THAN
COUNTIES MAY BE AUTHORIZED BY THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION A, LINE 7A:	
EXPLANATION: ACTIVE NACO MEMBERS, AS PREVIOUSLY DEFINED,	ELECT BOARD
MEMBERS IN CATEGORIES B, C, D, E AND F, AT THE ANNUAL NA	CO MEMBER
CONFERENCE. CATEGORIES:	
B. ONE ELECTED OFFICIAL FROM EACH STATE WHICH HAS AN ACT	IVE MEMBER COUNTY.
C. TWELVE ELECTED OFFICIALS FROM ACTIVE MEMBER COUNTIES,	ONE FROM EACH OF
THE 12 STATES HAVING THE HIGHEST NUMBER OF VOTES AS CERT	IFIED BY THE
CREDENTIALS COMMITTEE BASED UPON NACO MEMBERSHIP AS OF 6	0 DAYS BEFORE THE
FIRST DAY OF THE ANNUAL CONFERENCE, PROVIDED THAT SUCH S	TATE HAS EITHER 50
PERCENT OF ITS COUNTIES AS ACTIVE MEMBER COUNTIES OR HAS	ACTIVE MEMBER
COUNTIES REPRESENTING 50 PERCENT OF THE STATE'S POPULATI	ON.
D. ONE ELECTED COUNTY OFFICIAL FROM EACH STATE HAVING 10	0 PERCENT OF ITS
COUNTIES AS ACTIVE MEMBERS.	
E. ONE ELECTED OFFICIAL FROM EACH REGIONAL DISTRICT THAT	HAS BEEN
AUTHORIZED BY THE BOARD AND APPROVED BY THE VOTING MEMBE	RS.
F. ONE DIRECTOR FROM EACH AFFILIATE ORGANIZATION THAT HA	S BEEN AUTHORIZED
BY THE BOARD AND APPROVED BY THE VOTING MEMBERS. THE NUM	BER OF DIRECTORS
FROM CATEGORY F SHALL NOT EXCEED 25 PERCENT OF THE TOTAL	NUMBER OF
DIRECTORS ON THE BOARD.	
EACH ACTIVE MEMBER COUNTY IS ENTITLED TO AT LEAST ONE VC	TE ON EVERY
QUESTION PUT BEFORE THE ANNUAL CONFERENCE OR SPECIAL MEE	TINGS OF THE
MEMBERSHIP. ACTIVE MEMBER COUNTIES WHOSE POPULATION REQU	VIRES THEM TO PAY

MEMBERSHIP. ACTIVE MEMBER COUNTIES WHOSE POPULATION REQUIRES THEM TO PAY 332212 09-04-13 36

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
MORE THAN \$499 IN DUES ARE ENTITLED TO ONE ADDITIONAL VOT	E FOR EACH
ADDITIONAL \$500 OR FRACTION THEREOF PAID IN THE YEAR IN W	HICH THE MEETING
IS HELD. DUES PAID SHALL NOT BE MORE THAN THE AMOUNT SPEC	IFIED IN THE
APPROVED DUES SCHEDULE. EVERY FULLY PAID ACTIVE MEMBER SH	ALL BE ALLOWED TO
VOTE. EACH COUNTY SHALL DETERMINE THE PERSON OR PERSONS (DELEGATES) WHO
WILL CAST THE COUNTY'S VOTE(S). AN ELECTED OR APPOINTED C	OUNTY OFFICIAL OF
A FULLY PAID ACTIVE MEMBER MAY CAST ALL OR ANY PORTION OF	THE ACTIVE
MEMBER'S TOTAL AUTHORIZED VOTE BUT NO FRACTION OF A WHOLE	. ANY ACTIVE
MEMBER MAY BUT IS NOT REQUIRED TO PERMIT ITS VOTES TO BE	CAST BY ITS STATE
AS A BLOCK.	

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

EXPLANATION: THE NACO BOARD OF DIRECTORS SHALL HAVE GENERAL SUPERVISION, MANAGEMENT AND CONTROL OF THE BUSINESS AND PROPERTY OF THE ASSOCIATION, SUBJECT TO THE ARTICLES OF INCORPORATION, THESE BYLAWS, AND THE POLICIES ESTABLISHED BY A MAJORITY VOTE OF THE VOTING ACTIVE MEMBER COUNTIES OF THE ASSOCIATION AT THE ANNUAL CONFERENCE.

FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: THE NACO AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE, SUBSETS OF THE BOARD OF DIRECTORS, REVIEW THE DRAFT FORM 990 BEFORE FILING. UPON APPROVAL, THE FINAL FORM IS MADE AVAILABLE TO ALL BOARD MEMBERS VIA THE NACO WEBSITE.

	FORM 990, PART VI, SECTION B, LINE 12C:
	EXPLANATION: THE TERM OF OFFICE OF THE MEMBERS OF THE BOARD IS FOR ONE
	REQUIRED TO SIGN, AS A MATTER OF ORGANIZATIONAL POLICY, A CONFLICT OF
	332212 09-04-13 Schedule O (Form 990 or 990-EZ) (2013)
	37
18	340717 790809 53-0190321 2013.04000 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
INTEREST DISCLOSURE STATEMENT DEFINED BY NACO. THE EXECU	JTIVE DIRECTOR AND
CHIEF FINANCIAL OFFICER ARE ALSO REQUIRED TO SIGN A CONFI	LICT OF INTEREST
DISCLOSRE STATEMENT UPON ASSUMPTION OF OFFICE AND TO PROM	APTLY REPORT AN
CONFLICT OF INTEREST SITUATION THAT MAY ARISE WHILE THEY	RE IN OFFICE.
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: CEO, EXECUTIVE DIRECTOR OR TOP MANAGEMENT	
THE PROCESS GOES THROUGH A REVIEW AND APPROVAL BY INDEPEN	NDENT PERSONS
(EXECUTIVE COMMITTEE), COMPARABILITY DATA (REVIEW OF SALA	ARIES AND BENEFITS
OF EXECUTIVE DIRECTORS/PRESIDENT OF OTHER NON-PROFIT ORGA	ANIZATIONS
COMPARABLE TO NACO) AND PERFORMANCE EVALUATION BY THE EXI	ECUTIVE BOARD. THE

EXECUTIVE DIRECTOR'S ANNUAL COMPENSATION, BASED UPON THE RECOMMENDATION OF THE EXECUTIVE COMMITTEE, IS DECIDED AND APPROVED AT THE BOARD OF DIRECTORS MEETING HELD DURING THE NACO ANNUAL CONFERENCE.

OTHER OFFICERS OR KEY EMPLOYEES:

NACO PARTICIPATES IN LOCAL SALARY SURVEYS AND USES THE SURVEY RESULTS TO ENSURE THAT ITS SALARY STRUCTURES ARE COMPETITIVE AND COMPARABLE WITH SIMILAR POSITIONS FROM OTHER ORGANIZATIONS. THE EXECUTIVE DIRECTOR REVIEWS AND APPROVES SALARY LEVELS AND MERIT INCREASES BASED ON THE EMPLOYEE PERFORMANCE EVALUATION RATING AND RECOMMENDATION OF THE EMPLOYEE'S SUPERVISOR/DEPARTMENT DIRECTOR. THE BOARD OF DIRECTORS MEETS IN NOVEMBER/DECEMBER OF EACH YEAR TO DECIDE ON THE RATE OF EMPLOYEE SALARY INCREASE FOR THE FOLLOWING YEAR.

FORM 990, PART VI, SECTION C, LINE 19: EXPLANATION: CORPORATE BY-LAWS AND ANNUAL REPORT ARE AVAILABLE ONLINE AT NACO'S WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE TO CONCERNED 332212 09-04-13 Schedule O (Form 990 or 990-EZ) (2013) 38 18340717 790809 53-0190321 2013.04000 NATIONAL ASSOCIATION OF COU 53-01901

chedule O (Form 990 or 990-EZ) (2013) ame of the organization NATIONAL ASSOCIATION OF COUNTIES	Page Employer identification number 53-0190321
NTITIES SUCH AS BOARD OF DIRECTORS, OFFICERS AND EMPLOYN	EES OF NACO AND IT
FFILIATED ORGANIZATIONS. FINANCIAL STATEMENTS AND FORM	990 ARE AVAILABLE
PON REQUEST AND CAN ALSO BY ACCESSED VIA GUIDESTAR, A NO	ON-PROFIT
NFORMATION DATABASE.	
ORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
QUITY IN EARNINGS OF SUBSIDIARY	373,628
ORM 990, PART XI, LINE 2C	
XPLANATION: THIS PROCESS HAS REMAINED UNCHANGED FROM TH	E PRIOR YEAR.

SCHEDULE R (Form 990)	Provide a construction of the const	anizations and Unrelated Partnerships tion answered "Yes" on Form 990, Part IV, line 33, 34, 35b, to Form 990. ► See separate instructions.	rtnerships ne 33, 34, 35b, 3 ictions. www.irs.gov/for	3, or 37. <i>m990</i> ,		OMB No. 1545-0047 2013 Open to Public Inspection
ation NATIONAL A	ASSOCIATION OF COUNTIES				Employer identification number 53-0190321	cation number 321
Part I Identification of Disregarded Entities Complete if the organization	ste if the organization answered "Yes"	answered "Yes" on Form 990, Part IV, line 33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	e) The End-of-year assets		(f) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizations Complete if organizations during the tax year.	zations Complete if the organization a	the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt	, Part IV, line 34 b	ecause it had one o	r more related tax-exe	mpt
(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	(g) Section 512(b)(13) controlled entity? Yes No
NACO RESEARCH FOUNDATION - 53-0241255 25 MASSACHUSETTS AVE WASHINGTON DC 20001	EDUCATION	DELAWARE	501(C)(3)	509(A)(2)	NACO	×
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ions for Form 990.				Schedule R	Schedule R (Form 990) 2013

כברכי מ For Paperwork He 40

Schedule R (Form 990) 2013 NATIONAL ASSOCIATION OF Part II Identification of Related Organizations Taxable as a Partnership organizations treated as a partnership during the tax year.	NATIONAL ASSOC ated Organizations Taxable las a partnership during the	ASSOCIATION Is Taxable as a Partne during the tax year.	OF COUNTIES ership Complete if the o	I E S the organizat	tion answered "	COUNTIES 53-0190321 Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related), Part IV, lin	e 34 becaus	53–0 e it had one or n	3-019032 Te or more relate		Page 2
(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?	() Code V-UBI amount in box 20 of Schedule	() () () () () () () () () () () () () ((j) (k) General or Percentage managing ownership	d ntage ership
		country)						8			2	
Part IV Identification of Related Organizations Taxable as a Corporation or corporation or trust during the tax year.	rganizations Taxable	e as a Corpo		omplete if the	or Trust Complete if the organization answered "Yes"	nswered "Yes" or	Form 990, F	art IV, line 3	on Form 990, Part IV, line 34 because it had one or more related	d one or I	nore relat	ted
(a) Name, address, and EIN of related organization	on	Prin	vity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	rg (C corp, S corp, or trust)		(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ge 512(b)(13) controlled entity7) b)(13) rolled Itty?
NACO FINANCIAL SERVICES CORPORATION 52-1913476, 25 MASSACHUSSETTS AVENUE WASHINGTON DC 20001	RATION - AVENUE, NW,	MANAGEMEN	MANAGEMENT SERVICES	DE		c corp	1,1	464,567.	1,766,768.	100.008		
332162 09-12-13				41		, , , , , , , , , , , , , , , , , , ,			Schee	Schedule R (Form 990) 2013	orm 990)	2013

COUNTIES
GF
ASSOCIATION OF
NATIONAL
Schedule R (Form 990) 2013

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

1.1. O				Yes No
Note. Complete line if it any entrity is listed in Farts 11, 11, of 14 of this sciencide.	with one or more rel	ated organizations listed	in Parts II-IV?	1000
				1a X
 Figure 1 (1) Interest (in annutus) (in) 10 anno 10 for the rest of the rest of the second of the second of the rest of the second of the rest of the				1b X
				1c X
				1d X
				1e X
e Loans or loan guarantees by related organization(s)				
 Dividende from related organization(e) 				1f X
				1a X
				th X
 Fulcilase of assets indiring televen organization (s) Evolution of accepts with related organization (s) 				1i X
 Exclidinge of assets with related organization(s) Exclidinge of assets with related organization(s) 				1i X
J Lease of facilities, equipment, of other assets to related organization(s)				
k Lease of facilities, equipment, or other assets from related organization(s)				1k X
	nization(s)			-F
m Performance of services or membership or fundraising solicitations by related organization(s)	nization(s)			+
Sharing of facilities, equipment, mailing lists, or other assets with relate	on(s)			1n X
				10 X
B Reimbursement paid to related organization(s) for expenses				1p X
				1q X
				1r X
r Other transfer of cash or property to related organization(s)				
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.	ho must complete th	is line, including covered	relationships and transaction thresholds.	
1	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	olved
(1) NACO RESEARCH FOUNDATION	щ	2,742,094.	CASH	
(2) NACO RESEARCH FOUNDATION	J	560,547.CASH	CASH	
(3) NACO RESEARCH FOUNDATION	0	1,690,390.CASH	CASH	
	Z	1 720 645 CASH	HS R.	
(4) NACO RESEARCH FOUNDALION	NT		Central	
(5)				

Schedule R (Form 990) 2013

42

332163 09-12-13

(9)

Indecided Organizations as a Partnership Complete in the organization answered of region transmission. The constraints of the activities (measured by rotal section or groups) with the organization answered by rotal section or any activity is a class and and the activities (measured by rotal section or any activity is a class and activity aclass activit	and EIN Tarations Taxable as a Partnership Complete if the fianization. See instructions regarding exclusion for cert and EIN Primary activity Legal do fiate of fiate of count coun		TZCNETNEC	Page 4
(e) (f) (f) Areali burgesses outpoints Share of burgesses income Byrospectrations Ves No Income assets	Area Area <th< th=""><th>ed "Yes" on Form 990, Part IV, line 37. on conducted more than five percent of its activiti</th><th>es (measured by total assets or gross reve</th><th>(enue)</th></th<>	ed "Yes" on Form 990, Part IV, line 37. on conducted more than five percent of its activiti	es (measured by total assets or gross reve	(enue)
Image: set of the set of	Country)	(e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	(h) Dispropor- tionate allocations?	(k) ercentage ownership
		es No	Yes No	

53.	-01	90	321	Page 5

ΝΙΔΠΙΤΟΝΙΔΙ	ASSOCIATION	$\cap \mathbf{F}$	COUNTER
NATIONAL	ASSOCIATION	Or	COONTIES

	Part VII	Supplemental Information	
n			

Schedule R (Form 990) 2013

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

Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► X

File a separate application for each return.

Information about Form 8868 and its instructions is at www.irs.gov/form8868

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (a-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

	Automatic 3-Month		
Part I			

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

_____ All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print	NATIONAL ASSOCIATION OF COUNTIES	53-0190321
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 25 MASSACHUSETTS AVENUE, N.W., NO. 500	Social security number (SSN)
return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

WASHINGTON, DC 2000	HINGTO	WASH	SHINGTON	, DC	20001

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application		· · · · ·	Return
For Code Is For C				Code	
Form 990 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720 (other than individual)			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above) 06 Form 8870					12
DAVID KEEN, CH	IEF F	INANCIAL OFFICER - 2	5 M.	ASSACH	USETTS
● The books are in the care of ▶ <u>AVE, NW, STE</u> .	500 -	WASHINGTON, DC 2000	1		
Telephone No. ► (202) 942-4206		Fax No. 🕨			
 If the organization does not have an office or place of busines 	s in the Ur	nited States, check this box			▶ □
 If this is for a Group Return, enter the organization's four digit 	Group Exe	emption Number (GEN)	s is foi	the whole g	roup, check this
box ▶ . If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs of all i	nemb	ers the exter	nsion is for
1 I request an automatic 3-month (6 months for a corporation					
AUGUST 15, 2014 , to file the exemp				The extension	n
is for the organization's return for:	Ū.	-			
► X calendar year 2013 or					
tax year beginning	, an	id ending			
2 If the tax year entered in line 1 is for less than 12 months, of	check reas	on: 🔲 Initial return 🛄 Fina	l retur	n	
Change in accounting period					
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720	, or 6069,	enter the tentative tax, less any			
nonrefundable credits. See instructions.			3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6065	9. enter an	v refundable credits and		-	
estimated tax payments made. Include any prior year over			ЗЬ	\$	0.
 Balance due. Subtract line 3b from line 3a. Include your participation of the state of the state					
by using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution. If you are going to make an electronic funds withdrawa	l (direct de	abit) with this Form 8868, see Form 8453	•EO a	nd Form 887	9-EO for payment
instructions.	. (==	,,			
LHA For Privacy Act and Paperwork Reduction Act Notice	see instr	ructions.		Form 8	3868 (Rev. 1-2014)
323841	,				. ,
12-31-13		45			





TRYON

A Professional Corporation

Certified Public Accountants and Consultants August 13, 2013

Mr. David Keen Chief Financial Officer National Association of Counties 25 Massachusetts Avenue, NW #500 Washington, DC 20001

Dear David:

Very truly yours,

abonal

TATE & TRYON

Enclosures

Deborah G. Kosnett, CPA

Enclosed are filing and taxpayer copies of the following for the National Association of Counties for the year ended December 31, 2012:

Form 990 -- Return of Organization Exempt from Income Tax (e-filed)

Gllosnit

Complete filing instructions have been included. For your convenience, we have included a public inspection copy of the Form 990.

We strongly recommend that all paper-filed returns be sent via U.S. certified mail, return receipt requested. Also, we suggest that we be advised immediately concerning any contact you may have with the taxing authorities regarding your returns.

WASHINGTON, DC

2021 L STREET, NW

. . . .

SUITE 400

. . . .

20036

. . . .

TELEPHONE

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202/293-2200

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FACSIMILE

202/293-2208

. . . .

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

DECEMBER 31, 2012

Prepared for	NATIONAL ASSOCIATION OF COUNTIES 25 MASSACHUSETTS AVENUE, N.W. NO. 500 WASHINGTON, DC 20001
Prepared by	TATE AND TRYON 2021 L STREET, NW SUITE 400 WASHINGTON, DC 20036
Amount due or refund	NOT APPLICABLE
Make check payable to	NOT APPLICABLE
Mail tax return and check (if applicable) to	NOT APPLICABLE
Return must be mailed on or before	NOT APPLICABLE
Special Instructions	THIS RETURN HAS QUALIFIED FOR ELECTRONIC FILING. THE RETURN HAS BEEN TRANSMITTED ELECTRONICALLY TO THE IRS AND NO FURTHER ACTION IS REQUIRED.

Form	99	0
Departn	nent of t	he Treasury

Internal Revenue Service

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

benefit trust or private foundation)



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

Α	For th	e 2012 calendar year, or tax year beginning a	and ending		
В	Check if applicab	C Name of organization		D Employer identific	ation number
	Addre	NATIONAL ASSOCIATION OF COUNTIES			
	Name			53-01	190321
]Initial return		Room/suit	te E Telephone number	
	 ated	- 25 MASSACHUSETTS AVENUE, N.W.	500	(202)	
	Amen return	ded City, town, or post office, state, and ZIP code		G Gross receipts \$	15,457,211.
	Applie tion pendi	MADITINGTON, DC 20001		H(a) Is this a group re	
	pendi	F Name and address of principal officer:MATTHEW CHASE		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates incl	
		empt status: $501(c)(3)$ X $501(c)(4)$ (insert no.) 4947(a))(1) or 52		ist. (see instructions)
		te: ► WWW.NACO.ORG		H(c) Group exemption	
10000		forganization: X Corporation Trust Association Other	L Yea	ar of formation: 1946 M	State of legal domicile: DE
8. st	art I	Summary	E SCHED		
S	1	Briefly describe the organization's mission or most significant activities: SEI		OULE O	
Activities & Governance	2	Check this box if the organization discontinued its operations or dis	noord of mo	we then DEV of its not on	
Ver		Check this box ▶ ⊥ if the organization discontinued its operations or dis Number of voting members of the governing body (Part VI, line 1a)		1 1	123
ő		Number of independent voting members of the governing body (Part VI, line 1a)		123	
<u>کہ</u>		Total number of individuals employed in calendar year 2012 (Part V, line 2a)		92	
vitie		Total number of volunteers (estimate if necessary)		1218	
cti		Total unrelated business revenue from Part VIII, column (C), line 12			0.
4		Net unrelated business taxable income from Form 990-T, line 34			0.
				Prior Year	Current Year
ø	8	Contributions and grants (Part VIII, line 1h)		0.	0.
enu	9	Program service revenue (Part VIII, line 2g)		8,073,483.	7,970,801.
Revenue	10	investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,238,534.	518,893.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		9,202,050.	5,636,655.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	18,514,067.	14,126,349.
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,763,007.	2,700,000.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		5,514,645.	5,875,275.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		U.	
Ä		Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>	9,273,220.	5,358,583.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	(16,550,872.	13,933,858.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		1,963,195.	192,491.
es	15	nevenue less expenses, subtract line To HOIT III e TZ		Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		34,545,392.	37,751,601.
Ass 1 Ba		Total liabilities (Part X, line 26)		5,986,418.	7,296,833.
Func		Net assets or fund balances. Subtract line 21 from line 20		28,558,974.	30,454,768.
		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 DAVID KEEN, CHIEF FINANCIAL OFFICER Type or print name and title	Date							
Paid Preparer	Print/Type preparer's name DEBORAH G. KOSNETT Firm's name TATE AND TRYON	Date Check PTIN if self-employed P00290720 Firm's EIN ► 52-1855942							
Use Only May the II	Firm's address 2021 L STREET, NW SUITE 400 WASHINGTON, DC 20036 RS discuss this return with the preparer shown above? (see instructions)	Phone no. (202) 293–2200 X Yes No							
232001 12-1	232001 12-10-12 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2012)								

	990 (2012) NATIONAL ASSOCIATION OF COUNTIES 53-0190321 Page 2
	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission: TO STIMULATE AND CONTRIBUTE TO THE IMPROVEMENT OF COUNTY GOVERNMENT THROUGHOUT THE UNITED STATES.
2	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
4a	revenue, if any, for each program service reported. (Code:) (Expenses \$2,500,000. including grants of \$2,500,000.) (Revenue \$0.)
	CONTRIBUTIONS AND OTHER MISC PROGRAMS- FUNDING TO PROVIDE FOR OPERATING COSTS OF RELATED ORGANIZATION, THE NATIONAL ASSOCIATION OF COUNTIES RESEARCH FOUNDATION (NACORF). NACORF'S CHARITABLE MISSION IS TO ASCERTAIN, DEVELOP AND DISTRIBUTE KNOWLEDGE ABOUT COUNTY GOVERNMENT FOR THE EDUCATION OF THE PUBLIC IN GENERAL, AND FOR THE SPECIFIC EDUCATION AND TRAINING OF PUBLIC OFFICIALS AND PROSPECTIVE PUBLIC OFFICIALS.
4b	(Code:) (Expenses \$ 2,317,626. including grants of \$ 200,000.) (Revenue \$ 306,558.)
	(Code:)(Expenses \$ 2,317,626. including grants of \$ 200,000.) (Revenue \$ 306,558.) LEGISLATIVE - THROUGH NACO'S MEMBER MEETINGS AND COMMITTEES, THIS DEPARTMENT DEVELOPS NATIONAL LEGISLATIVE POLICY IN SUPPORT OF AMERICA'S COUNTIES AND FOR REPRESENTATION TO CONGRESS AND FEDERAL AND EXECUTIVE AGENCIES. TO CONGRESS AND THE ADMINISTRATION, NACO PRESENTS THE COUNTY GOVERNMENT VIEW ON ALL LEGISLATIVE AND PROPOSED REGULATIONS AFFECTING COUNTIES.
4c	(Code:)(Expenses 1,817,707. including grants of \$0.)(Revenue \$2,151,706.) CONFERENCES AND MEETINGS - NACO HOLDS THREE MAJOR CONFERENCES EACH YEAR: LEGISLATIVE, ANNUAL, AND WESTERN INTERSTATE REGION. CONFERENCES AND MEETINGS AFFORD COUNTY OFFICIALS THE OPPORTUNITY TO LEARN AND GATHER INFORMATION TO HELP IMPROVE THE EFFECTIVENESS AND EFFICIENCY OF THEIR COUNTY'S OPERATIONS AND PROGRAMS.
	Other program services (Describe in Schedule O.) (Expenses \$ 1,306,535. including grants of \$) (Revenue \$ 9,334,537.)
<u>4e</u>	Total program service expenses ► 7,941,868. Form 990 (2012)
232002 12-10-	
460	2 813 790809 53-0190321 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

Form	000	(0010)
rorm	990	(2012)

NATIONAL ASSOCIATION OF COUNTIES Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	ĺ	X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
4	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	N/	a
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	147	<u> </u>
5	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<u> </u>		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		х	
b	Part VI Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	<u>11a</u>		
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<u>11f</u>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u>X</u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?		v	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	X	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> Did the organization maintain an office, employees, or agents outside of the United States?	13 14a		X
14а ь	Did the organization maintain an office, employees, or agents outside of the United States?	140		
U	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	-		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u>X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			3.7
	1c and 8a? If "Yes," complete Schedule G, Part II	18		_X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
<u></u>	complete Schedule G, Part III	19		<u>X</u> X
	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		<u> </u>
0	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	200	l	

Form 990 (2012)

232003 12-10-12

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NATIONAL ASSOCIATION OF COUNTIES

Form	<u>1990 (2012)</u> NATIONAL ASSOCIATION OF COUNTIES 53-0190	321	P	<u>age </u> 4
Pa	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
- 14	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a		x
h	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization mintain an escrow account other than a refunding escrow at any time during the year to defease	2.10		
U	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		
0	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
		25b		х
26	Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	200		
20	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	2.0		
21	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
~	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	********	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
C	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
29 30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	~		
30	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
31	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	<u> </u>		
52	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	02		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
34	Part V, line 1	34	х	
950	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
35a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	х	
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000	43	
36	If "Yes," complete Schedule R, Part V, line 2	36	N/	А
07	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	00		<u> </u>
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
20	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
38	Note. All Form 990 filers are required to complete Schedule O	38	х	
	TAGLE. AN TOTAL 330 HIELS ARE TEQUITED TO COMPLETE SCITEGUIE O		000	0010

Form **990** (2012)

232004 12-10-12

Form	990 (2012) NATIONAL ASSOCIATION OF COUNTIES 53-0190	321	P	age 5
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance		*****	
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 52			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	7		
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 92			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 ~	X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>	X	L
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			1
	were not tax deductible?	6b	X	<u></u>
7	Organizations that may receive deductible contributions under section 170(c). N/A			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
t	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	N/	
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
n o	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	147	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting N/A organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
9	Did the organization make any taxable distributions under section 4966?	9a	0.0000000	
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the yearN/A 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? ${ m N/A}$	13a	00000000	
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			v
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> X </u>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		L

Form 990 ((2012)
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232005 12-10-12

Form	990	(2012))

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

	Check if Schedule O contains a response to any question in this Part VI			X
Sec	tion A. Governing Body and Management			
		100000000000	Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year1a123	3		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 123	3		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			l
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
-	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
l0a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	Х	0000000
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	х	
	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15				
10	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		v	33333
	The organization's CEO, Executive Director, or top management official	15a	X X	
	Other officers or key employees of the organization	15b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
	taxable entity during the year?	16a		X
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	ion C. Disclosure			
	List the states with which a copy of this Form 990 is required to be filed NONE			
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	e	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	icial	
	statements available to the public during the tax year.			
	State the name, physical address, and telephone number of the person who possesses the books and records of the organiza	tion: 🕨	•	
	DAVID KEEN, CHIEF FINANCIAL OFFICER - (202) 942-4206			
	25 MASSACHUSETTS AVE, NW, STE. 500, WASHINGTON, DC 20001			
32006 2-10-1	2	Form	990	(201;
	б			
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

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

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

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

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

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

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and Title	Average	(do	not c	Pos			one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	1 '	compensation	amount of
	week		cer an	aaa	recic	T	(tee)	from	from related	other
	(list any hours for	lirecto				7		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or c	<u>8</u>			Isated		(W-2/1099-MISC)	(00-2/1099-00130)	organization
	organizations	truste	al trus		85	mper				and related
	below	Individual trustee or director	Institutional trustee	cí	Key employee	Highest compensated employee	5			organizations
	line)	lndiv	Instit	Officer	Key	High	Former			
(1) STEPHEN ACQUARIO	1.00									
BOARD MEMBER	1.00	Х						0.	0.	0.
(2) RONALD ANDERSON	1.00						l			
BOARD MEMBER	1.00	Х						0.	0.	0.
(3) ALLAN ANGEL	1.00						1			
BOARD MEMBER	1.00	X						0.	0.	0.
(4) ELIZABETH ARCHULETA	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(5) ORRIN BAILEY	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(6) PETER BALDACCI	1.00	1				ĺ	ſ			
BOARD MEMBER	1.00	X						0.	0.	0.
(7) THOMAS BARDWELL	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(8) LU BARRON	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(9) STANLEY BATEMON	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(10) CINDY BOBBITT	1.00									
BOARD MEMBER	1.00	X						0.	0.	0.
(11) TODD BONLARRON	1.00									<u>^</u>
BOARD MEMBER	1.00	X						0.	0.	0.
(12) MARY ANN BORGESON	1.00									0
BOARD MEMBER	1.00	Х				<u> </u>		0.	0.	0.
(13) ROY BROOKS	1.00								0	0
BOARD MEMBER	1.00	X						0.	0.	0.
(14) EFREN CARRILLO	1.00								0	0
BOARD MEMBER	1.00	X						0.	0.	0.
(15) KEITH CARSON	1.00							0		0
BOARD MEMBER	1.00	X						0.	0.	0.
(16) KATIE CASHION	1.00								0	0
BOARD MEMBER	1.00	X						0.	0.	0.
(17) GREG CASTANO	1.00							_		^
BOARD MEMBER	1.00	X				[Ĺ	0.	0.	0.
232007 12-10-12						-				Form 990 (2012)

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Form 990 (2012) NATIONAL	ASSOCIA	AT	101	N (ΟF	C	ΟU	INTIES	53-01	190	321 Page 8	
Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ghe	st	Compensated Employee	es (continued)			
(A)	(B)		-		C)			(D)	(E)		(F)	
Name and title	Average	1		Pos			_	Benortable	Reportable		Estimated	
	hours per					than is bot			compensatio		amount of	
	week	offi	cer ar	nd a d	lirecto	or/trus	tee)	from	from related		other	
	(list any	ector						the	organization	s	compensation	
	hours for	or din	e e			ted		organization	(W-2/1099-MIS	SC)	from the	
	related	stee	ruste			Sue		(W-2/1099-MISC)			organization	
	organizations	altru	onal 1		loyee	E CO					and related	
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			1	organizations	
	,	<u> </u>		풍	-Se	5,ê	Ē	· · · · · · · · · · · · · · · · · · ·				
(18) STANLEY CHANG	1.00					[
BOARD MEMBER	1.00	X	ļ					0.		0.	0.	
(19) SALLIE CLARK	1.00				ĺ	1	l I					
BOARD MEMBER	1.00	X						0.		0.	0.	
(20) GEORGE COLE	1.00											
BOARD MEMBER	1.00	X						0.		0.	0.	
(21) ROBERT COPE	1.00					1						
BOARD MEMBER	1.00	x				1		1,060.		0.	0.	
(22) FRED CROSBY	1.00								- <u></u>	<u> </u>		
	1.00	x						0.		0.	0	
BOARD MEMBER		<u>^</u>			 			U•		0.	0.	
(23) KENNETH DAHLSTEDT	1.00			ĺ	(0			0	
BOARD MEMBER	1.00	X				ļ	Ļ	0.		0.	0.	
(24) DON DAVID	$\frac{1.00}{1.00}$	x				}		0.				
BOARD MEMBER	0.	0.										
(25) REID DEMMEN												
BOARD MEMBER	0.	0.										
(26) MARK DENNY	Ţ											
BOARD MEMBER 1.00 X 0. 0.												
Joard Member 1.00 Å 0.000 0.000 1b Sub-total ▶ 1,060.000 0.000												
d Total (add lines 1b and 1c) ▶ 1,848,240. 212,922. 334,977 2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable												
		ose	IISLE	eu ai	JOVE	3) WI	101	received more than \$100	,000 of reportabl	e	13	
compensation from the organization	<u></u>										Yes No	
										F		
3 Did the organization list any former officer,			e, Ke	ey en	nplo	yee,	, or	highest compensated er	nployee on		- V	
line 1a? If "Yes," complete Schedule J for su			•••••		•••••		•••••				<u>3 X</u>	
4 For any individual listed on line 1a, is the su	•		-						-			
and related organizations greater than \$150),000? If "Yes,	" co	mple	ete S	Sche	edule	эJ	for such individual			4 X	
5 Did any person listed on line 1a receive or a	ccrue comper	nsat	ion f	rom	any	' unr	ela	ted organization or individ	dual for services			
rendered to the organization? If "Yes," com	olete Schedule	∍Jf	or su	ich j	pers	ion .	<u></u> .				<u>5 X</u>	
Section B. Independent Contractors												
1 Complete this table for your five highest cor	mpensated inc	depe	ende	ent c	ontr	acto	ors	that received more than §	\$100.000 of com	pensa	ation from	
the organization. Report compensation for t										•		
(A)		-						(B)			(C)	
Name and business	address							Description of se	ervices	C	ompensation	
INVNT, 138 SPRING STREET,		Δ	N	JEV	J	····· ·		CONVENTION MI				
YORK, NY 10012	I HOOK	71	, 1	1 1 1	v			PRODUCTION			381,336.	
		1	NT				-	FRODUCTION			301,330.	
STATE LOCAL AND LEGAL CEN	•				ا سد						170 000	
CAPITOL STREET, NW, SUITE								ADVOCACY SERV	······		170,000.	
SMG - DAVID L. LAWRENCE C								LABOR AND MAT			1 - 0 0 1 -	
1000 FORT DEQUESNE BLVD.,								FOR ANNUAL CO	DNFERENC		153,315.	
RUSSELL REYNOLDS ASSOCIAT	ED, INC	•••	, (CHU	JRC	СН						
STREET STATION, PO BOX 64	27, NEV	17	lOF	RΚ,	<u>1</u>	ΙY		RECRUITMENT	SERVICES		123,436.	
							_					
2 Total number of independent contractors (ir	cluding but n	ot lir	nite	d to	thos	se lis	stee	d above) who received m	ore than			
\$100,000 of compensation from the organization												
SEE PART VII, SECTION		II.	JUA	AT I	ION	1 5	ЗH	EETS	- <u></u>		Form 990 (2012)	
232008 12-10-12			-	_	-							
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Form 990
to service in the second second

NATIONAL ASSOCIATION OF COUNTIES

53-0190321

hest Compensated Emplo (D)	(E)	(F)	
Reportable	Reportable	Estimated	
ply) compensation	compensation	amount of	
from	from related	other	
	organizations	compensation	
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(W-2/1099-MISC)		organization	
		and related	
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the organization (W-2/1099-MISC)			
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232201 07-25-12

Part VII Section A. Officers, Directors,		nplo	byee		nd r C)	lign	est			
(A)	(B)							(D)	(E)	(F)
Name and title	Average hours per	(c		Pos all 1			ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	week (list any hours for related organizations below	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W·2/1099-MISC)	compensatio from the organization and related organizations
	line)	<u> </u>	lins	E	Υ.		F01			
47) GARY HOOSER OARD MEMBER	1.00	x						0.	Ο.	(
48) ANTHONY HYDE	1.00									
OARD MEMBER	1.00	x						0.	ο.	(
49) GERALD HYLAND	1.00		 							
OARD MEMBER	1.00	х						0.	ο.	(
50) MIKE JACOBS	1.00									
OARD MEMBER	1.00	x						0.	Ο.	(
51) MICHAEL JEANES	1.00		<u> </u>							
OARD MEMBER	1.00	x						0.	0.	(
52) RANDY JOHNSON	1.00									
OARD MEMBER	1.00	Х						0.	0.	(
53) TIM JOSI	1.00									
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54) DORIS KARLOFF	1.00									
OARD MEMBER	1.00	Х						0.	0.	(
55) AARON KENNARD	1.00									
OARD MEMBER	1.00	Х						0.	0.	(
56) EVELYN KOLBE	1.00									
OARD MEMBER	1.00	X						0.	0.	(
57) LESLIE KORGEL	1.00									
OARD MEMBER	1.00	Х						0.	0.	(
58) DONALD LARSON	1.00									
OARD MEMBER	1.00	X						0.	0.	(
59) GARY LEE	1.00									
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60) CHRISTIAN LEINBECH	1.00								0	
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61) IAN LEONARD	1.00							0	0	(
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62) MARK LUTTRELL	1.00	v						<u> </u>	<u> </u>	ſ
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63) HARLAN MADZEN	1.00	v						Ο.	0.	ſ
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64) LEE MAY	1.00	v						0.	ο.	(
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65) TIMOTHY MCCORMICK	1.00	y						0.	ο.	(
OARD MEMBER 66) TODD MCGEE	1.00	Λ						V•	V •	
66) TODD MCGEE OARD MEMBER	1.00	x						0.	ο.	(

07-25-12

(A) (B) (C) (D) (D) (E) (F) Name and tile Average hours per week (list any per related organization below (A) (B) (B		NAL ASSOCIA	AT:	101	N C)F	C	<u>1UC</u>	ITIES	53-019	0321
(A) Name and title (B) (Average hours (reack all that apply) (C) (reack all that apply) (D) (reack all that apply)	Part VII Section A. Officers, Director	s, Trustees, Key Ei	mplo	oyee	es, a	nd F	ligh	est	Compensated Employ	ees (continued)	
Name and title Average hours or weak (list any related organizations below into) Pepottable (becked aft at apply) respective below into) Pepottable compensation organizations (W-2/1099-MISC) Estimate compensation organizations (W-2/1099-MISC) (67) MICHARL MCGINLEY 1.00 X 0. 0. (67) MICHARL MCGINLEY 1.00 X 0. 0. (64) GRALD MCLEOD 1.00 X 0. 0. BOARD MEMBER 1.000 X 0. 0. 0. GARD MCLEOD 1.00 X 0. 0. 0. GARD MEMBER 1.000 X 0. 0. 0. GARD MEMBER 1.000 X 0. 0. 0. GY1 KARKER 1.000 X 0. 0. 0. GY2 KARKER 1.000 X 0. 0. 0. GY1 KARKER 1.000 X 0. 0. 0. GY2 KARKER 1.000 X 0. 0.	(A)	(B)		_	(0	C)			(D)	(E)	(F)
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(80) DUANE PATRICK 1.00 BOARD MEMBER 1.00 (81) CHESTER PINTARELLI 1.00 BOARD MEMBER 1.00			Х						0.	0.	0.
BOARD MEMBER 1.00 X 0.0.0. (81) CHESTER PINTARELLI 1.00 X 0.0.0. BOARD MEMBER 1.00 X 0.0.0. (82) TONI PRECKWINKLE 1.00 X 0.0.0. BOARD MEMBER 1.00 X 0.0.0. (83) JOHN PRINKI 1.00 X 0.0.0. BOARD MEMBER 1.00 X 0.0.0. (83) JOHN PRINKI 1.00 X 0.0.0. BOARD MEMBER 1.00 X 0.0.0.			f								
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(82) TONI PRECKWINKLE 1.00 BOARD MEMBER 1.00 (83) JOHN PRINKI 1.00 BOARD MEMBER 1.00 (84) RHONE RHONDEL 1.00			Х						0.	0.	0.
BOARD MEMBER 1.00 X 0.0.0. (83) JOHN PRINKI 1.00 X 0.0.0. BOARD MEMBER 1.00 X 0.0.0. (84) RHONE RHONDEL 1.00 X 0.0.0.	· · ····· ····· ······················										
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BOARD MEMBER 1.00 X 0.0.0 (84) RHONE RHONDEL 1.00 0.0.0											
(84) RHONE RHONDEL 1.00			X						0.	0.	0.
BOARD MEMBER $1.00 X$ 0.0	BOARD MEMBER		X						0.	0.	0.
(85) MANUEL RUIZ 1.00											
			X						Ο.	0.	0.
(86) JOHN RUSSELL 1.00										······································	
			Х						0.	0.	0.
Total to Part VII, Section A, line 1c	Total to Part VII, Section A, line 1c		<u></u>			<u></u>					

07-25-12

Form 990 NATIONA Part VII Section A. Officers, Directors,	L ASSOCIA								53-019 rees (continued)				
(A)	(B)		,)			(D)	(E) (F)				
Name and title	Average hours per	(C	heck	Pos	ition		ly)	Reportable compensation from	Reportable compensation from related	Estimated amount of other			
	week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations			
(87) HARVEY RUVIN BOARD MEMBER	1.00	x						0.	0.	0			
(88) WILLIAM RYAN	1.00												
BOARD MEMBER	1.00	x						0.	Ο.	0			
(89) DENNIS SANDQUIST	1.00	1											
BOARD MEMBER	1.00	Х						0.	0.	0			
(90) JOEL SCHELL	1.00												
BOARD MEMBER	1.00	X						0.	0.	0			
(91) ED SCHNEIDER	1.00												
BOARD MEMBER	1.00	X	<u> </u>					0.	0.	0			
(92) NANCY SCHOUWEILER	1.00												
BOARD MEMBER	1.00	X						0.	0.	C			
(93) HAL SMALLEY	1.00	v						0	0	C			
BOARD MEMBER	1.00	X	-					0.	0.	0			
(94) EUGENE SMITH	1.00	x						0.	Ο.	C			
BOARD MEMBER (95) JAMES SNYDER	1.00							U•	0.				
BOARD MEMBER	1.00	x						0.	Ο.	C			
(96) DAVID SORENSEN	1.00		<u> </u>										
BOARD MEMBER	1.00	x						0.	0.	C			
(97) ROBERT SPENCE	1.00							·······					
BOARD MEMBER	1.00	X						0.	0.	C			
(98) LEE STALKER	1.00												
BOARD MEMBER	1.00	X						0.	0.	C			
(99) ROBERT STELLE	1.00												
BOARD MEMBER	1.00	X	<u> </u>					0.	0.	C			
(100) ROBERT SUVER	1.00									~			
BOARD MEMBER	1.00	X						0.	0.	0			
(101) JERRIE TIPTON	1.00	v						0	0	0			
BOARD MEMBER	1.00	Λ						0.	0.	0			
(102) GORDON TOPHAM	1.00	y						0.	Ο.	0			
BOARD MEMBER (103) DANIEL TROY	1.00							0.					
GOARD MEMBER	1.00	x						0.	Ο.	0			
(104) KENNETH ULMAN	1.00	**	-					.					
BOARD MEMBER	1.00	x						0.	Ο.	0			
(105) GRANT VEEDER	1.00	_											
BOARD MEMBER	1.00	х						Ο.	0.	0			
(106) MICHAEL VICTORINO	1.00								· · · · · · · · · · · · · · · · · · ·				
BOARD MEMBER	1.00	v						0.	Ο.	0			

07-25-12

Part VII Section A. Officers, Directors, Ti	ASSOCI							Compensated Employ	<u>53-019</u> ees (continued)	
(A)	(B)		,		C)			(D)	(E)	(F)
Name and title	Average	1			ition	ł		Reportable	Reportable	Estimated
	hours	(c	heck	c all '	that	app	ly)	compensation	compensation	amount of
	per		1					from	from related	other
	week	M N				loyee		the	organizations	compensation
	(list any hours for	direct		ĺ	1	demp		organization (W•2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	Se or o	stee			nsater		(00-2/1099-00130)		and related
	organizations	Individual trustee or director	Institutional trustee		366	Highest compensated employee				organizations
	below	vidual	itution	R	Key employee	lest c	ner			-
	line)	lpdi	lnst	Officer	Key	Higt	Former			
(107) BETTY LOU WARD	1.00									
BOARD MEMBER	1.00	X				<u> </u>		0.	0.	0
(108) KENTON WARD	1.00									•
BOARD MEMBER	1.00	X	-		<u> </u>	[0.	0.	0
(109) GEORGE WEBB	1.00							0		0
BOARD MEMBER	1.00	X	ļ					0.	0.	0
(110) BONNIE WEBER	1.00								~	0
SOARD MEMBER	1.00	X						0.	0.	0
(111) LARRY WHITE	1.00	x						0.	ο.	0
SOARD MEMBER	1.00	^						U.	<u>_</u>	0
(112) GLEN WHITLEY	1.00	x						0.	0.	0
30ARD MEMBER (113) ARLANDA WILLIAMS	1.00	<u>^</u>						````		V
SOARD MEMBER	1.00	x						Ο.	0.	0
(114) PAUL WILSON	1.00									
SOARD MEMBER	1.00	x						0.	ο.	0
(115) NOAH WOODS	1.00							· · · · · · · · · · · · · · · · · · ·		
BOARD MEMBER	1.00	X						0.	0.	0
(116) JAMES YOUNG	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(117) JOE BRYAN	1.00									
BOARD MEMBER	1.00	X						0.	0.	0
(118) JOSEPH GILES	1.00									
SOARD MEMBER	1.00	X	 					0.	0.	0
(119) RONALD HOUSEMAN	1.00								1	
SOARD MEMBER	1.00	X						0.	0.	0
120) LENNY ELIASON	1.00									•
IMMED PAST PRESIDENT	1.00	X		X				4,652.	0.	0
(121) RIKI HOKAMA	1.00			37				0	0	0
2ND VICE PRESIDENT	1.00	X		X			-	0.	0.	0
122) LINDA LANGSTON	1.00			v					~	^
ST VICE PRESIDENT	1.00	X		Х				0.	0.	0
123) CHRISTOPHER RODGERS	1.00	x		х				Ο.	0.	0
PRESIDENT	33.60	^		Λ				······································	· · ·	0
124) LARRY NAAKE	3.90			х				358,523.	41,012.	47,311
EXEC DIRECTOR (OUTGOING) 125) MATTHEW CHASE	33.80	<u> </u>		17				5501525.		
EXEC DIRECTOR (INCOMING)	3.70	1		х				75,351.	8,372.	6,687
126) DAVID KEEN	32.50									
DIRECTOR, FINANCE & ADMIN	5.00			Х				157,643.	24,019.	40,625

Form 990

NATIONAL ASSOCIATION OF COUNTIES

53-0190321

Part VII Section A. Officers, Directors, T	rustees, Key E	mple	oyee	es, a	nd l	ligh	<u>es</u> t	Compensated Employ	ees (continued)	
(A) (B) (C)								(D)	(E)	(F)
Name and title	Average			Pos				Reportable	Reportable	Estimated
	hours	(c	heck	c all t	that	app	ly)	compensation	compensation	amount of
	per week					e e		from	from related	other
	list any	ğ]	ploye		tne organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				dem		(W-2/1099-MISC)	(00-2/1099-00130)	organization
	related	Ce or	stee			Insate		(11 2) 1000 11100)		and related
	organizations	trust	al tru		exec over	ompe				organizations
	below	individual trustee or director	Institutional trustee	ы	Key employee	Highest compensated employee	Former			_
	line)	Indi	lnst	Officer	Key	Higi	For			
(127) EDWARD FERGUSON	18.20									
DEPUTY EXECUTIVE DIRECTOR	19.30				Х	Ĺ		123,104.	130,068.	38,104.
(128) EDWIN ROSADO	37.50									
LEGISLATIVE DIRECTOR					Х			194,613.	0.	18,493.
(129) BERT JARREAU	37.50									
CHIEF INFORMATION OFFICER					Х			200,360.	0.	31,039.
(130) GEORGE GOODMAN	35.40									
PUBLIC AFFAIRS DIRECTOR	2.10				X			160,212.	9,451.	28,674.
(131) DEBORAH STOUTAMIRE	37.50]							
DIRECTOR OF HUMAN RESOURCE						X		120,972.	0.	31,912.
(132) WILLIAM CRAMER	37.50		ĺ							
MARKETING DIRECTOR						X		118,164.	0.	19,657.
(133) ROBERT FOGEL	37.50									
SENIOR LEGISLATIVE DIRECTO						X		118,260.	0.	32,340.
(134) KIM ROSADO	37.50									
DIRECTOR OF MEETINGS						X		111,356.	0.	13,693.
(135) SHANNON HOUSTON-SMACK	37.50									
CONTROLLER		L				X		103,970.	0.	26,442.
										-
			ł							
an <u>a 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977 - 1977</u>										
		1								
										••
		L								
									<u>. </u>	
		L								·······
		L]					
Total to Part VII, Section A, line 1c								1,847,180.	212.922.	334,977.
Total to Fart VII, Occupit A, IIIe To		<u></u>	<u></u>							

232201 07-25-12

	<u>1 990</u>				CIATION	OF COUNTIE	S	53-0190	321 Page 9
Pa	rt V		Statement of Reven						
			Check if Schedule O conta	ains a response	to any question	in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts		b I c I d F	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributi	1b 1c 1d		4			
ontributions nd Other Sir	1	f / s g r	All other contributions, gifts, grant similar amounts not included abov Noncash contributions included in lines	s, and /e 1f 1a-1f: \$					
<u>a C</u>	I	<u>h</u>]	Total, Add lines 1a-1f	<u></u>	Business Code				
8	2 8	a <u>1</u>	MEMBERSHIP DUES		900099	4,820,643.	4,820,643.		
Program Service Revenue	I	b 1	MEETINGS		900099	1,931,346.	1,931,346.		
en C	(c <u>s</u>	SPONSORSHIP		900099	1,202,000.	· · · · · · · · · · · · · · · · · · ·		1,202,000.
ran Sev		dI	PUBLIC LAND TRUST		900099	13,529.	13,529.		
<u>б</u> ц	•	e I	PUBLICATION SALES		511190	3,283.	3,283.	ļ	
ā	1	f /	All other program service rever	nue	<u> </u>				
		g ไ	Total. Add lines 2a-2f		>	7,970,801.			
	3 4	c	nvestment income (including o other similar amounts) ncome from investment of tax		►	473,348.			473,348.
	5	F	Royalties		►	5,379,243.	3,822,000.		1,557,243.
				(i) Real	(ii) Personal				
	6 a	a (Gross rents	292,432.	20,000.				
	ŀ	bι	ess: rental expenses	294,704.	0.				
		c F	Rental income or (loss)	-2,272.	20,000.				
				······································	▶	17,728.			17,728.
			Gross amount from sales of	(i) Securities	(ii) Other	(()			,, <i>,</i>
			assets other than inventory	1,081,703.					
	ł		_ess: cost or other basis			4			
	-		and sales expenses	1,036,158.					
			Gain or (loss)			4			
			Vet gain or (loss)		<u> </u>	45,545.			45,545.
enne		a C ii	Gross income from fundraising ncluding \$	g events (not of					
Other Revenue			contributions reported on line Part IV, line 18	•					
Ţ.	ł	b L	ess: direct expenses	b		[
	c	c 1	Net income or (loss) from fund	raising events	<u> </u>				
		F	Bross income from gaming act Part IV, line 19	а					
1			ess: direct expenses			1			
			Net income or (loss) from gami		<u> </u>			1	
	10 a		Gross sales of inventory, less r						
			ind allowances						
			ess: cost of goods sold						
ļ		<u>> N</u>	<u>let income or (loss) from sales</u>						
ļ			Miscellaneous Revenue	e	Business Code				
	11 a	<u>M</u>	IISCELLANEOUS		900099	165,903.	[165,903.
ł	k	<u>א</u> כ	ARKETING FEES		900099	73,781.			73,781.
	c	>_							
	c		Il other revenue						
	e	эT	otal. Add lines 11a-11d		▶	239,684.			
(12		otal revenue. See instructions.			14,126,349.	10,590,801.	0.	3,535,548.
23200 12-10-	9 12								Form 990 (2012)

¹⁵ 14460813 790809 53-0190321 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

NATIONAL ASSOCIATION OF COUNTIES

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). Check if Schedule O contains a response to any question in this Part IX

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	2,700,000.	2,700,000.		
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 464 155	C10 C70	050 400	
	trustees, and key employees	1,464,155.	610,673.	853,482.	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	2 2 4 7 601		1 720 144	
7	Other salaries and wages	3,247,691.	1,517,547.	1,730,144.	
8	Pension plan accruals and contributions (include	200 040	200 001	170 007	
-	section 401(k) and 403(b) employer contributions)	380,948.	200,961.	179,987.	
9	Other employee benefits	477,780.	212,075.	265,705.	
10	Payroll taxes	304,701.	149,356.	155,345.	
11	Fees for services (non-employees):				
a	Management	16,128.	· · · · · · · · · · · · · · · · · · ·	16 120	
b	Legal	49,925.		16,128. 49,925.	
с.	Accounting	49,925.	· · · · · · · · · · · · · · · · · · ·	49,925.	
d	Lobbying			<u> </u>	
e	Professional fundraising services. See Part IV, line 17	49,711.		49,711.	· · · · · · · · · · · · · · · · · · ·
f	Investment management fees	49,111.		49/111.	
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch 0.)	443,339.	239,197.	204,142.	
12		297,355.	177,284.	120,071.	
13	Advertising and promotion	452,772.	160,814.	291,958.	
13	Office expenses Information technology	66,443.	100,014.	66,432.	
15	Royalties	00/1100	<u>_</u> •	00/102.	
16	Occupancy	1,073,231.		1,073,231.	
17	Travel	355,941.	147,299.	208,642.	· · · · · · · · · · · · · · · · · · ·
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	171,197.	16,816.	154,381.	
19	Conferences, conventions, and meetings	2,078,420.	1,626,676.	451,744.	
20	Interest	10,814.		10,814.	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	593,387.	60,250.	533,137.	
23	Insurance	59,153.	14,497.	44,656.	
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	PURCHASED SERVICES	845,327.	1,500.	843,827.	
b	SUBSCRIPTIONS	107,388.	80,681.	26,707.	
С	PLAQUES, RECOGNITIONS &	32,193.	5,575.	26,618.	
d	CONTRIBUTIONS	10,200.	00.050	10,200.	
	All other expenses	-1,354,341.	20,656.	-1,374,997.	
25	Total functional expenses. Add lines 1 through 24e	13,933,858.	7,941,868.	5,991,990.	0.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here Lif following SOP 98-2 (ASC 958-720)				Eorm 990 (2012)

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Form 990 (2012)

NATIONAL ASSOCIATION OF COUNTIES

art X	(2012) NATIONAL ASSOCIATION OF COUNTI Balance Sheet		53-	-0190321 Page 1
	Check if Schedule O contains a response to any question in this Part X	·····		<u> </u>
		(A) Beginning of year		(B) End of year
1	Cash · non-interest-bearing	6,621,319.	1	8,044,746
2	Savings and temporary cash investments	0,021,319.	2	0,044,740
3	Pledges and grants receivable, net	2,287,689.	3	2 242 227
4	Accounts receivable, net	2,207,009.	4	2,343,327
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary			
	employees' beneficiary organizations (see instr). Complete Part II of Sch L	······	_6	
7	Notes and loans receivable, net		7	
	Inventories for sale or use	200 462	8	202 050
9	Prepaid expenses and deferred charges	300,463.	9	302,859
10a	Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a 8,113,783.			0 000 F10
b	Less: accumulated depreciation		10c	
11	Investments - publicly traded securities	19,949,941.	11	22,761,758
12	Investments - other securities. See Part IV, line 11	2,392,529.	12	1,676,021
13	Investments - program-related. See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets. See Part IV, line 11	547,209.	15	584,371
16	Total assets. Add lines 1 through 15 (must equal line 34)	34,545,392.	16	37,751,601
17	Accounts payable and accrued expenses	1,402,212.	17	2,128,733
18	Grants payable		18	0.000.000
19	Deferred revenue	3,370,987.	19	3,950,769
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons.			
	Complete Part II of Schedule L		_22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	ļ
25	Other liabilities (including federal income tax, payables to related third			
	parties, and other liabilities not included on lines 17-24). Complete Part X of			
	Schedule D	1,213,219.	25	1,217,331
26	Total liabilities. Add lines 17 through 25	5,986,418.	26	7,296,833
	Organizations that follow SFAS 117 (ASC 958), check here 🕨 and			
	complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	28,558,974.	27	30,454,768
28	Temporarily restricted net assets		28	
29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here 🕨 🥅			
	and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	28,558,974.	33	30,454,768
34	Total liabilities and net assets/fund balances	34,545,392.	34	37,751,601

Form **990** (2012)

232011 12-10-12

17 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

14460813 790809 53-0190321

	1990 (2012) NATIONAL ASSOCIATION OF COUNTIES	53-	0190321	Page 12
Pa	rt XI Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI	<u></u>		X
	Table construction of Dath (III as the set (A) from (A)		14,120	\$ 240
1	Total revenue (must equal Part VIII, column (A), line 12)		13,93	
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,491.
3	Revenue less expenses. Subtract line 2 from line 1	3	28,55	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))			9,811.
5	Net unrealized gains (losses) on investments	5		9,011.
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8	201	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	38.	3,492.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,		20 45	
	column (B))	10	30,454	±,/68.
Pa	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
				Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	d on a		
	separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			····
b	Were the organization's financial statements audited by an independent accountant?		000000000000	<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	te basis,		
	consolidated basis, or both:			
	Separate basis X Consolidated basis Both consolidated and separate basis			
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	ne audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	nedule O		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ingle Auc	dit 🛛	
	Act and OMB Circular A-133?			<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	uired auc	Jit	
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b	
			Form	990 (2012)

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 14460813 790809 53-0190321
 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

SCHEDULE C (Form 990 or 990-EZ)	Political Campaign and Lobbying Activitie For Organizations Exempt From Income Tax Under section 501(c) and section	
Department of the Treasury Internal Revenue Service	 Complete if the organization is described below. Attach to Form 990 or Form See separate instructions. 	n 990-EZ. Open to Public Inspection
If the organization answ	ered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Cam	paign Activities), then
 Section 501(c)(3) org 	anizations: 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 P	art I-B.
 Section 527 organiza 	tions: Complete Part I-A only.	
If the organization answ	ered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Ac	tivities), then
 Section 501(c)(3) org 	anizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do	o not complete Part II-B.
 Section 501(c)(3) org. 	anizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-	B. Do not complete Part II-A.
	ered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (
 Section 501(c)(4), (5) 	or (6) organizations: Complete Part III.	
Name of organization		Employer identification number
	NATIONAL ASSOCIATION OF COUNTIES	53-0190321
Part I-A Comple	te if the organization is exempt under section 501(c) or is a section	527 organization.

3	Volunteer hours	·····	
Pa	art I-B Complete if the organization is exempt under section 501(c)(3).	* <u>. </u>	
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 No
48	a Was a correction made?	Yes	No No
ł	ו f "Yes," describe in Part IV.		
Pa	art I-C Complete if the organization is exempt under section 501(c), except section 501(c)	(3).	
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 exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,		

	line 17b▶\$			
4	Did the filing organization file Form 1120-POL for this year?	Yes		No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the	filing orga	nization	
	made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the an	iount of po	litical	

contributions received that were 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
For Denominate Paduation Act Nation		<u> </u>		(Form 000 or 000 EZ) 2012

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

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Schedule C (Form 990 or 990-EZ) 2012 Part II-A Complete if the or					190321 Page 2
(election under se		mpt under sectio	on 501(c)(3) and 1	led Form 5768	
	ation belongs to an aff	iliated group (and list i	n Part IV each affiliated	group member's nam	e, address, EIN,
	are of excess lobbying			5	-,,, -,
B Check 🕨 🛄 if the filing organiz	ation checked box A a	nd "limited control" pr	ovisions apply.		
	nits on Lobbying Expe nditures" means amo)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to in	fluence public opinion	(grass roots lobbying)			
b Total lobbying expenditures to in					
c Total lobbying expenditures (add	lines 1a and 1b)				
d Other exempt purpose expenditu	ires		••••••		
e Total exempt purpose expenditu	res (add lines 1c and 1	d)			
f Lobbying nontaxable amount. En	ter the amount from th	e following table in bot	th columns.		
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:		
Not over \$500,000	20% of	the amount on line 1e	•		
Over \$500,000 but not over \$1,0	00,000 \$100,00	00 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,		00 plus 10% of the exc			
Over \$1,500,000 but not over \$1		00 plus 5% of the exce	ess over \$1,500,000.		
Over \$17,000,000	\$1,000,	000.	ł		
		······································			
g Grassroots nontaxable amount (e	,				· · · · · · · · · · · · · · · · · · · ·
h Subtract line 1g from line 1a. If ze					
 i Subtract line 1f from line 1c. If ze j If there is an amount other than z 					
reporting section 4911 tax for this				Г	Yes No
		eraging Period Under		<u> </u>	
(Some organ	izations that made a s			plete all of the five	
C	olumns below. See th	······		age 4.)	
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period	[
Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
<u></u>					
c Total lobbying expenditures					
d_Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures	8		L		
				Schedule C (Form §	990 or 990-EZ) 2012

14460813 790809 53-0190321

Schedule C (Form 990 or 990-EZ) 2012 NATIONAL ASSOCIATION OF COUNTIES 53-019032 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Fore	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(á	3)	1	(b)
of th	e lobbying activity.	Yes	No	Am	nount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6).	on 501(c)	(5), or se	ection	
			,	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			<u> </u>	<u>X</u>
	t III-B Complete if the organization is exempt under section 501(c)(4), secti 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	l "No," Ol	R (b) Par		ine 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polit expenses for which the section 527(f) tax was paid).	ical			
_			2a		
a	Current year				,,,,,
	Carryover from last year		·····		
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and exceediture part uppr?	political			
5	expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)				
Par			<u></u>	I	
£2.2.1.1.1.1.1.1	blete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; P	art II.A (affilia	ated aroun	list). Part	11.4 line 2.
	Part II-B, line 1. Also, complete this part for any additional information.	ar nn (allin	aleu gioup	not, i dit	n ∧, iiite ∠,
anur	art in 5, into 1, histo, complete this part for any additional information.				

Schedule C (Form 990 or 990-EZ) 2012

232043 01-07-13

14460813 790809 53-0190321

SCHEDULE D

(Form 990)

Part I

1

2

3

4

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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



No

No

Yes

Name	of the	organization
i i u i i i c	0. 0.0	or guine a livit

e of the organization		Employer identification n
NATIONAL ASSOCIA	ATION OF COUNTIES	53-0190321
t I Organizations Maintaining Donor Ad	vised Funds or Other Similar Fund	ds or Accounts. Complete if the
organization answered "Yes" to Form 990, Part I	V, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate contributions to (during year)		
Aggregate grants from (during year)		
Aggregate value at end of year		

4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds	
	are the organization's property, subject to the organization's exclusive legal control?	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only	

for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Dest II Conconvotion Ecomonte Complete if the

Pa	rt II 🛛 (Conservation	n Easements.	Complete if the orga	anization answere	ed "Yes" f	to Form 990	, Part IV, line 7.	
1	Purpos	e(s) of conservat	ion easements he	eld by the organizatio	n (check all that	apply).			

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

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

~		Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
с	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the orga	nization during the tax
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes 🗌 No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during	the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the y	ear 🕨 \$
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(
	and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	ement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization's financial statements that describes the or	rganization's accounting for
1	conservation easements.	
Pa		
	conservation easements. TIM Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	Similar Assets.
	conservation easements. TIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8.	Similar Assets.
1a	conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items.	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII,
1a	Conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and the text of the footnote to its financial statements that describes these items.	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical
1a	conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I treasures, or other similar assets held for public exhibition, education, or research in furtherance of treasures, or other similar assets held for public exhibition, education, or research in furtherance of	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical
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1a	 conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and it reasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and it reasures, or other similar assets held for public exhibition, education, or research in furtherance of public series items: (i) Revenues included in Form 990, Part VIII, line 1 	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical ervice, provide the following amounts
1a b	 conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and it reasures, or other similar assets held for public exhibition, education, or research in furtherance of the treasures, or other similar assets held for public exhibition, education, or research in furtherance of public series, or other similar assets held for public exhibition, education, or research in furtherance of public series to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical ervice, provide the following amounts > \$\$
1a	 conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I treasures, or other similar assets held for public exhibition, education, or research in furtherance of public serielating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain. 	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical ervice, provide the following amounts > \$\$
1a b	 conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I treasures, or other similar assets held for public exhibition, education, or research in furtherance of public series in the series items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: 	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical ervice, provide the following amounts \$ \$ \$
1a b	 conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I treasures, or other similar assets held for public exhibition, education, or research in furtherance of the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and I treasures, or other similar assets held for public exhibition, education, or research in furtherance of public serielating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain. 	Similar Assets. and balance sheet works of art, f public service, provide, in Part XIII, balance sheet works of art, historical ervice, provide the following amounts ► \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 12-10-12

Schedule D (Form 990) 2012

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2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

1.		L ASSOCIAT			·				9032		ige 2
Pa	t III Organizations Maintaining (
3	Using the organization's acquisition, access	ion, and other record	ds, check	any of the	following the	at are a sig	gnificant us	se of its	collectior	item:	3
	(check all that apply):										
а	Public exhibition	c	1 <u> </u>	oan or exc	hange progr	ams					
b	Scholarly research	e	, 🗌 c	Other							
С	Preservation for future generations										
4	Provide a description of the organization's c	ollections and explai	n how the	ey further tl	he organizat	ion's exen	npt purpos	e in Par	t XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, his	torical trea	sures, or oth	er similar	assets				
	to be sold to raise funds rather than to be m	aintained as part of	the organ	ization's co	ollection?		<u></u>		Yes		No
Par	till Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the d	organizatio	n answered	"Yes" to F	Form 990, I	Part IV, I	ine 9, or		
1a	Is the organization an agent, trustee, custod	lian or other intermed	diary for c	ontribution	is or other as	ssets not i	ncluded				
	on Form 990, Part X?								Yes	[No
b	If "Yes," explain the arrangement in Part XIII										
									Amount		
с	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
	Did the organization include an amount on F								Yes	1	No
	If "Yes," explain the arrangement in Part XIII.										
Terrer of the	t V Endowment Funds. Complete i										
005000000		(a) Current year		or year	(c) Two yea		d) Three yea	ars hack	(e) Four	Vears	
1a	Beginning of year balance			or your	10/ 100 you	15 DUOK I				yours	<u>Jack</u>
	Contributions		L			·····	<u></u>				
	Net investment earnings, gains, and losses						····.				
	Grants or scholarships										
	Other expenditures for facilities								·····		
e											
	and programs										
	Administrative expenses		· · · · · · · · · · · · · · · · · · ·								
	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balanc		, column (a	i)) held as:						
a	Board designated or quasi-endowment		_%								
	Permanent endowment	%									
с	Temporarily restricted endowment	%									
	The percentages in lines 2a, 2b, and 2c should be a should be should be a should be a should be a should be should be a should										
3a	Are there endowment funds not in the posse	ession of the organization	ation that	are held a	nd administe	ered for th	e organiza	tion	Г		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations										~
b	If "Yes" to 3a(ii), are the related organizations					•••••		•••••	_3b_		
4	Describe in Part XIII the intended uses of the				•·						
Par	t VI Land, Buildings, and Equipm										
	Description of property	(a) Cost or o		(b) Cost			cumulated		(d) Book	value	1
		basis (investr	nent)	basis ((other)	dep	reciation		<u> </u>		
	Land				1 0 0 0						
	Buildings				1,269.		04 10		15	,26	<u>, y.</u>
	Leasehold improvements				2,035.		94,13		1,237	,90	<u>10 ·</u>
d	Equipment				9,764.		94,28			5,47	
	Other				0,715.	····	86,84			3,87	
Total	. Add lines 1a through 1e. <i>(Column (d) must</i> e	qual Form 990, Part	X, columr	n (B), líne 1	0(c).)				2,038		
							So	chedule	D (Form	990)	2012

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Part VII Investments - Other Securities. See (a) Description of security or category (including name of security)	(b) Book value		valuation: Cost or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)		····	
(C)	······		
(D)			
(E)			
(F)			
(G)			
(H)			······································
(1)			······································
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related. See	Form 990 Part X lin		
(a) Description of investment type	(b) Book value		valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(9)			
(10)	······		
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets. See Form 990, Part X, line 11	5		
	escription	ann Lasann Lasan Martin Ann Ann	(b) Book value
(1)		······································	<u> </u>
(2)			
(3)			
(4)			
(5)			
(6)	······	······································	
(7)		······································	
(8)			
(9)	·····		
(10)		<u></u>	
otal. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		▶
Part X Other Liabilities. See Form 990, Part X, lin		(b) Book value	
Part X Other Liabilities. See Form 990, Part X, lin . (a) Description of liability		(b) Book value	
Part X Other Liabilities. See Form 990, Part X, lin . (a) Description of liability (1) Federal income taxes		······································	-
Part X Other Liabilities. See Form 990, Part X, lin (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL		99,153.	
Part X Other Liabilities. See Form 990, Part X, lin . (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION		99,153. 514,195.	
Part X Other Liabilities. See Form 990, Part X, lin . (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT		99,153. 514,195. 1,425,797.	
Part X Other Liabilities. See Form 990, Part X, lin I. (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES		99,153. 514,195.	
Part X Other Liabilities. See Form 990, Part X, lin . (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES (6)		99,153. 514,195. 1,425,797.	
Part X Other Liabilities. See Form 990, Part X, lin I. (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES (6) (7)		99,153. 514,195. 1,425,797.	
Part X Other Liabilities. See Form 990, Part X, lin I. (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES (6) (7) (8)		99,153. 514,195. 1,425,797.	
Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES (6) (7) (8) (9)		99,153. 514,195. 1,425,797.	
Part X Other Liabilities. See Form 990, Part X, lin . (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES (6)		99,153. 514,195. 1,425,797.	
Part X Other Liabilities. See Form 990, Part X, lin 1. (a) Description of liability (1) Federal income taxes (2) OBLIGATIONS UNDER CAPITAL (3) DEFERRED COMPENSATION (4) DEFERRED RENT (5) DUE TO AFFILIATES (6) (7) (8) (9)	LEASE	99,153. 514,195. 1,425,797.	

<u>liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has</u> en provided in Part XIII

Schedule D (Form 990) 2012

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Schedule D (Form 990) 2012 NATIONAL ASSOCIATION OF COUNTIES 53-0190321 Page									
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return									
1	Total revenue, gains, and other support per audited financial statements			1	16,124	,356.			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:								
	Net unrealized gains on investments	2a	1,319,811.						
b	Donated services and use of facilities	2b							
	Recoveries of prior year grants								
d	Other (Describe in Part XIII.)	2d	383,492.						
е	Add lines 2a through 2d			2e	1,703				
3	Subtract line 2e from line 1	•••••		3	14,421	<u>,053.</u>			
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:								
	Investment expenses not included on Form 990, Part VIII, line 7b								
b	Other (Describe in Part XIII.)		-294,704.						
-	Add lines 4a and 4b			4c		,704.			
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	14,126	<u>,349.</u>			
Par	t XII Reconciliation of Expenses per Audited Financial Stateme			Retu					
1	Total expenses and losses per audited financial statements	• • • • • • • • • • •		1	14,228	,562.			
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1							
	Donated services and use of facilities	2a							
b	Prior year adjustments								
	Other losses								
	Other (Describe in Part XIII.)		294,704.		204	704			
	Add lines 2a through 2d			2e		,704.			
	Subtract line 2e from line 1			3	13,933	,858.			
	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1							
	Investment expenses not included on Form 990, Part VIII, line 7b								
	Other (Describe in Part XIII.)	4b				0			
	Add lines 4a and 4b			4c	12 022	0.			
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	<u></u>		5	13,933	828.			
	t XIII Supplemental Information								
	blete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III,				2b; Part V, line	4; Part			
	2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to p				D				
PAR	T X, LINE 2: THE ASSOCIATION BELIEVES THAT		HAS APPROPR	TAT	<u>Ľ</u>				
CUID	TODE TOD ANY MAY DOCTOTONO MAKEN AND MILED		שמא מדמ ייזמ	TDD	א ער דידיד	177			
SUP	PORT FOR ANY TAX POSITIONS TAKEN, AND THER	Er U.	RE, DID NOT	TDE	NTIFI A	<u> </u>			
TINTO	ERTAIN TAX POSITIONS THAT ARE MATERIAL TO	៣មក	CONCOT TDAME	n F	T N I N N I C' T' N I	-			
UNC	ERIAIN TAX POSITIONS THAT ARE MATERIAL TO	TUE	CONSOLIDATE	Dr	INANCIAI	<u> </u>			
сшл	MEMENING DIDING FACE OF HUE VEADS FUDED DEC	נסאיד	ר 11 21 2012	מזא	2011 7	ג רות א			
<u>514</u>	TEMENTS DURING EACH OF THE YEARS ENDED DEC	EPID.	EK 51, 2012	AND	2011. 2				
MTN	IMUM, THE 2009 THROUGH 2012 TAX YEARS ARE	∩ਹੁਙਾ	Ν ΓΩ ΓΥΛΜΙΝ	አጥተ	ON BY				
	INON, THE 2009 THROUGH 2012 TAX TEARS ARE	ОГЦ	U FOR EARTIN	VI T.	ON DI				
ጥልጆ	ING AUTHORITIES.								
THV	TING VOLHOUTITED.								

PART XI, LINE 2D - OTHER ADJUSTMENTS:

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••••

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EQUITY IN EARNINGS OF SUBSIDIARY

PART XI, LINE 4B - OTHER ADJUSTMENTS:

RENTAL EXPENSE TO PART VIII

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSE TO PART VIII

294,704.

-294,704.

383,492.

AUDITED FINANCIAL STATEMENTS ARE CONSOLIDATED TO INCLUDE NACO AND THE FINANCIAL ACTIVITIES OF THE RELATED ORGANIZATIONS AS OUTLINED IN SCHEDULE R, PARTS II AND IV. THE RECONCILIATION IN PARTS XI AND XII IS TO THE NACO PORTION OF THE CONSOLIDATED FINANCIAL STATEMENTS. NACO DOES NOT RECEIVE A SEPARATE AUDITED FINANCIAL STATEMENT.

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SCHEDULE I Form 990)	Grants and Other Assistance to Organizations, Governments, and Individuals in the United States							
	Comp	lete if the organization	•					
epartment of the Treasury nternal Revenue Service	Comp	lete in the organization	Attach to For		(1 1 , inte 21 01 22.		Open to Public Inspection	
lame of the organization							Employer identification numb	
		ON OF COUNT	IES				53-019032	
Part I General Information on Grants a					·····			
 Does the organization maintain records t criteria used to award the grants or assis 		=			-			
 Describe in Part IV the organization's pro 								
Part II Grants and Other Assistance to					anization answered "	Yes" to Form 990, Par	t IV, line 21, for any	
recipient that received more than s	5,000. Part II car	be duplicated if additi	onal space is need	led.				
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
ACO RESEARCH FOUNDATION 5 MASSACHUSETTS, AVE STE 500								
ASHINGTON, DC 20001	53-0241255	501(C)(3)	2,500,000.	0_			OPERATIONS	
TATE AND LOCAL LEGAL CENTER								
44 N. CAPITOL STREET, NW								
ASHINGTON, DC 20001	31-0868827	501(C)(3)	170,000.	0.		-	OPERATIONS	
SENERATIONS UNITED								
.331 H STREET, NW SUITE 900								
ASHINGTON, DC 20005	31-1542973	501(C)(3)	10,000.	0.			OPERATIONS	
TILLARD COULOT DIGERTON POINDARION								
ILLARD SCHOOL DISTRICT FOUNDATION 85 EAST 450 NORTH							COURTHOUSE AWARD FOR	
DELTA, UT 84624	87-0451484	GOVERNMENTAL UNIT	5,000.	0.			SCHOLARSHIPS	
OUGLAS COUNTY YOUTH EDUCATION								
1000 JUSTICE WAY							COURTHOUSE AWARD FOR	
CASTLE ROCK, CO 80109	84-1187590	GOVERNMENTAL UNI	<u> </u>	0.			SCHOLARSHIPS	
2 Enter total number of section 501(c)(3) a	ind government o	rganizations listed in th	e line 1 table				▶	
3 Enter total number of other organization							•	

Schedule | (Form 990) (2012) NATIONAL ASSOCIATION OF COUNTIES

53-0190321

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance				
Part IV Supplemental Information. Complete this part to provide	de the informatio	n required in Part I,	line 2, Part III, colum	n (b), and any other additional ir	formation.				
SCHEDULE I, PART I, LINE 2: NACO R	EQUIRES	THAT GRANT	'S BE MANAG	ED WITH SOUND					
FINANCIAL MANAGEMENT POLICIES, ADE	QUATE IN	TERNAL CON	TROL SYSTE	MS,					
COST-EFFICIENT PROCUREMENT PROCEDU	RES, AND	DOCUMENTA	TION OF AL	L					
EXPENDITURES AND PURCHASES. ALL FINANCIAL AND ACCOUNTING RECORDS SHOULD BE									
AVAILABLE FOR INSPECTION AND SHOULD BE RETAINED BASED ON NACO'S DOCUMENT									
RETENTION POLICY.									

(Fo	HEDULE J rm 990) rtment of the Treasury al Revenue Service	For certain Officers, Direc Con	Isation Information tors, Trustees, Key Employees, and Highest npensated Employees nization answered "Yes" to Form 990, Part IV, line 23. 990. ► See separate instructions.	2 Opt	0 .	545-004 12 Publicition	
_	ne of the organization			Employer identifi	catic	n nur	nber
	-	NATIONAL ASSOCIAT	ION OF COUNTIES	53-0190			
Pa	rt I Question	s Regarding Compensation	<u>, , , , , , , , , , , , , , , , , , , </u>				
1000000			nan Maran Maran Maranan Maranan Maranan Maranan			Yes	No
1a	Part VII, Section A, First-class or c Travel for com Tax indemnific	line 1a. Complete Part III to provide any re harter travel	y of the following to or for a person listed in Form selevant information regarding these items. Housing allowance or residence for person Payments for business use of personal res X Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, c	nal use sidence s			
b	If any of the boxes	on line 1a are checked, did the organizatic	on follow a written policy regarding payment or				
	-		above? If "No," complete Part III to explain		1b	Х	
2			g or allowing expenses incurred by all officers, dire	_	T		
	trustees, and the C	EO/Executive Director, regarding the items	s checked in line 1a?		2	Х	
3	CEO/Executive Dire establish compensa X Compensation	ctor. Check all that apply. Do not check a tion of the CEO/Executive Director, but e committee ompensation consultant	sed to establish the compensation of the organizati ny boxes for methods used by a related organizati xplain in Part III. X Written employment contract X Compensation survey or study X Approval by the board or compensation c	on to			
4 a	organization or a rel	any person listed in Form 990, Part VII, S ated organization: e payment or change-of-control payment?			4a		<u>X</u>
b	Participate in, or rec	eive payment from, a supplemental nonqu	ualified retirement plan?		4b	Х	
с	Participate in, or rec	eive payment from, an equity-based com	pensation arrangement?		4c		X
5	Only section 501(c For persons listed in contingent on the re)(3) and 501(c)(4) organizations must co n Form 990, Part VII, Section A, line 1a, dic evenues of:	d the organization pay or accrue any compensation				
а					5a		- <u>X</u> X
b					5b		
	For persons listed ir contingent on the n	et earnings of:	d the organization pay or accrue any compensation				v
a L				1	6a 6b		<u>X</u> X
b	, ,				00		
7	For persons listed in		d the organization provide any non-fixed payments		7	x	
ø			rued pursuant to a contract that was subject to th			**	
8	-				8	x	
9	If "Yes" to line 8, did	the organization also follow the rebuttab	.4958-4(a)(3)? If "Yes," describe in Part III le presumption procedure described in		9		x
LHA		duction Act Notice, see the Instruction		Schedule J (Form	990)	2012

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deterred compensation	Deneiits	(B)(i)-(D)	reported as deferred in prior Form 990
(1) LARRY NAAKE	(i)	325,683.	4,487.	28,353.		15,077.		0.
EXEC DIRECTOR (OUTGOING)	(ii)	37,256.	513.	3,243.	3,240.	1,725.		0.
(2) DAVID KEEN	(i)	154,603.	2,603.	437.	20,219.	16,252.		0.
DIRECTOR, FINANCE & ADMIN	(ii)	23,555.	397.	67.	3,081.	2,476.		0.
(3) EDWARD FERGUSON	(i)	120,491.	0.	2,613.	12,792.	6,342.		0.
DEPUTY EXECUTIVE DIRECTOR	(ii)	127,307.	0.	2,761.	13,516.	6,701.	150,285.	0.
(4) EDWIN ROSADO	(i)	192,000.	0.	2,613.	12,792.	6,342.	213,747.	0.
LEGISLATIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) BERT JARREAU	(i)	181,362.	18,136.	862.	23,821.	8,640.	232,821.	0.
CHIEF INFORMATION OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) GEORGE GOODMAN	(i)	154,393.	1,416.	4,403.	18,817.	9,521.	188,550.	0.
PUBLIC AFFAIRS DIRECTOR	(ii)	9,107.	84.	260.	1,110.	562.	11,123.	0.
(7) DEBORAH STOUTAMIRE	(i)	115,000.	5,000.	972.	16,700.	16,310.	153,982.	0.
DIRECTOR OF HUMAN RESOURCE	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) ROBERT FOGEL	(i)	114,501.	1,000.	2,759.	15,015.	18,187.	151,462.	0.
SENIOR LEGISLATIVE DIRECTO	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)	<u>.,</u>						
	(i)		<u></u> ,					
	(ii)		<u></u>					
	(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, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A: COMPANION TRAVEL IS PAID FOR THE PRESIDENT AND FOR THE

EXECUTIVE DIRECTOR AS PART OF THE COSTS RELATED TO THEIR TRAVEL EXPENSES

WHILE ON OFFICIAL BUSINESS REPRESENTING NACO. THESE AMOUNTS ARE REPORTED AS

INCOME ON FORMS W-2 AND 1099, AS REQUIRED.

NACO ALSO PAYS FOR AIRLINE CLUB MEMBERSHIPS FOR THE EXECUTIVE DIRECTOR AND

ELECTED OFFICERS; FEES ARE SHOWN ON W-2 OR 1099, RESPECTIVELY.

MEMBERSHIP DUES IN A LOCAL SOCIAL CLUB ARE PAID BY NACO FOR THE USE OF

NUMEROUS NACO EMPLOYEES, AND ARE CONSIDERED ONE OF THE COSTS OF NETWORKING

AND EXPANDING BUSINESS RELATIONSHIPS FOR NACO.

PART I, LINE 4B: LARRY NAAKE PARTICIPATED IN A 457(F) PLAN THAT WAS

FUNDED IN 2002. THE PLAN WAS PAID OUT TO LARRY NAAKE AT 12/31/2012, IN THE

AMOUNT OF \$101,110.

PART I, LINE 7: THE NACO EXECUTIVE DIRECTOR HAS AN ANNUAL BONUS

OPTION, WHICH IS TO BE BASED ON THE PERFORMANCE OBJECTIVES DETERMINED

ANNUALLY BY THE NACO OFFICERS. THE OFFICERS WILL EVALUATE HIS PERFORMANCE

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Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

EACH MAY AND DETERMINE HIS ANNUAL INCREASE AND THEN BONUS AMOUNT.

ADDITIONALLY, DURING EMPLOYEE PERFORMANCE REVIEWS, SUPERVISORS CAN

RECOMMEND THAT EMPLOYEES RECEIVE ABOVE STANDARD MERIT INCREASES AND/OR

PERFORMANCE BONUSES. THOSE RECOMMENDATIONS MUST INCLUDE SPECIFIC

JUSTIFICATION AND ARE SUBJECT TO REVIEW BY THE HR DIRECTOR AND ULTIMATELY

THE EXECUTIVE DIRECTOR. THE BOARD DOES NOT APPROVE INDIVIDUAL GOALS OR

BONUSES, WITH THE EXCEPTION OF THE EXECUTIVE DIRECTOR. HOWEVER, THE BOARD

DOES APPROVE NACO'S STRATEGIC GOALS AND INITIATIVES, WHICH ARE THE BASIS

FOR THE INDIVIDUAL BONUSES.

PART I, LINE 8: MATTHEW CHASE'S BASE SALARY IS SUBJECT TO THE INITIAL

CONTRACT EXCEPTION OF REGS. SECTION 53.4958-4(A)(3). MR. CHASE WAS HIRED IN

2012 TO BE THE NEW NACO EXECUTIVE DIRECTOR. IMMEDIATELY BEFORE HIS HIRE,

MR. CHASE WAS NOT A DISQUALIFIED PERSON WITHIN THE MEANING OF SECTION

4958(F)(1) AND SECTION 53.4958-3.

Schedule J (Form 990) 2012

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.



NATIONAL ASSOCIATION OF COUNTIES

Employer identification number 53-0190321

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE NATIONAL ASSOCIATION OF COUNTIES (NACO) ASSISTS AMERICA'S COUNTIES IN PURSUING EXCELLENCE IN PUBLIC SERVICE. THE ASSOCIATION WORKS TO ADVANCE SOUND PUBLIC POLICIES, PROMOTE COUNTY SOLUTIONS AND INNOVATION, FOSTER INTERGOVERNMENTAL AND PUBLIC-PRIVATE COLLABORATION, AND PROVICE VALUE-ADDED SERVICES TO SAVE COUNTIES AND TAXPAYERS MONEY. NACO PROVIDES ELECTED AND APPOINTED LEADERS FROM THE NATION'S 3,069 COUNTIES WITH THE KNOWLEDGE, SKILLS AND TOOLS NECESARY TO PROVIDE FISCALLY-RESPONSIBLE, QUALITY-DRIVEN AND RESULTS-ORIENTED POLICIES AND SERVICES FOR HEALTHY, VIBRANT, SAFE AND RESILIENT COUNTIES.

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

PUBLIC AFFAIRS - THIS DEPARTMENT IS RESPONSIBLE FOR MEMBERSHIP, MEDIA

RELATIONS, MARKETING, THE WEBSITE AND COUNTY NEWS WITH A FOCUS ON

CREATING GREATER VISIBILITY OF NACO AND COUNTY GOVERNMENTS ON CAPITOL

HILL, WHILE EDUCATING NACO MEMBERS ABOUT PROGRAMS, PRODUCTS, AND

SERVICES PROVIDED BY NACO. COUNTY NEWS IS A BIWEEKLY PUBLICATION

CIRULATED TO MORE THAN 28,000 ELECTED AND APPOINTED COUNTY OFFICIALS

ACROSS THE COUNTRY. COUNTY NEWS INFORMS COUNTY OFFICIALS ABOUT WHAT IS

HAPPENING IN OTHER COUNTIES AND PROVIDES INFORMATION ABOUT LEGISLATIVE

AND REGULATORY ACTIVITIES IN WASHINGTON, D.C., THAT AFFECT COUNTIES AND

THEIR RESIDENTS. COUNTY NEWS IS ALSO AVAILABLE ON LINE. COUNTY NEWS

ALERT, AN ELECTRONIC NEWSLETTER DISTRIBUTED BIWEEKLY TO 43,000 MEMBERS,

TELLS MEMBERS THAT COUNTY NEWS IS AVAILABLE ONLINE, HIGHLIGHTS

HEADLINES IN THE CURRENT ISSUE, AND KEEPS THEM UP-TO-DATE ON

ASSOCIATION NEWS, PROGRAMS AND MEMBER SERVICES.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2012) 232211 01-04-13 33

14460813 790809 53-0190321

2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
EXPENSES \$ 1,055,116. INCLUDING GRANTS OF \$ 0. REVEN	UE \$ 13,283.
INFORMATION TECHNOLOGY - THE ASSOCIATION PROVIDES GUIDAN	CE AND
EDUCATION TO COUNTY GOVERNMENTS ON INFORMATION TECHNOLOG	Y-RELATED
MATTERS THROUGH TECHNOLOGY SUMMITS AND WORKSHOPS HELD DU	RING NACO
CONFERENCES. THESE EVENTS BRING TOGETHER ELECTED COUNTY	OFFICIALS,
COUNTY CIO'S AND VENDORS IN THE IT MARKETPLACE TO PROVID	E COUNTY
GOVERNMENTS THE TECHNOLOGY VISION AND LEADERSHIP FOR DEV	ELOPING AND
IMPLEMENTING IT INITIATIVES. ONGOING SUPPORT IS PROVIDED	BY FORMING
BUSINESS ALLIANCES WITH COMPANIES AND ORGANIZATIONS IN T	HE INFORMATION
TECHNOLOGY MARKETPLACE. THE ASSOCIATION ALSO SERVES AS A	LIAISON AND
ADVOCATE FOR COUNTIES WITH OTHER LEVELS OF GOVERNMENT.	
EXPENSES \$ 242,788. INCLUDING GRANTS OF \$ 0. REVENUE	\$ 124,500.

COUNTY SERVICES - THESE ACTIVITIES INCLUDE ONGOING RESEARCH ON ISSUES OF IMPORTANCE TO COUNTIES, RESPONDING TO INQUIRIES FROM AND ABOUT COUNTIES, MANAGING A PEER-TO-PEER NETWORK OF EXPERT COUNTY OFFICIALS, HOSTING A CLEARINGHOUSE OF INFORMATION ABOUT GRANTS FOR WHICH COUNTIES ARE ELIGIBLE, AND DISSEMINATING WRITTEN MATERIALS. NACO ALSO FACILITATES EDUCATIONAL PROGRAMS AT NACO'S CONFERENCES AND LEADERSHIP TRAINING FOR COUNTY OFFICIALS.

EXPENSES \$ 8,631. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

DEFERRED COMPENSATION - THE NATIONAL ASSOCIATION OF COUNTIES (NACO), IN

PARTNERSHIP WITH STATE ASSOCIATIONS OF COUNTIES, ENDORSES A SECTION 457

DEFERRED COMPENSATION PROGRAM ADMINISTERED BY NATIONWIDE RETIREMENT

SOLUTIONS (NRS). THE DEFERRED COMPENSATION PROGRAM OFFERS COUNTY

EMPLOYEES A WAY TO AUGMENT RETIREMENT SAVINGS WHILE POSTPONING THE 232212
01-04-13
Schedule O (Form 990 or 990-EZ) (2012) 34

14460813 790809 53-0190321 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 or 990-EZ) (2012)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
PAYMENT OF FEDERAL, AND IN MANY CASES, STATE INCOME TAXES	. MORE THAN
342,000 COUNTY EMPLOYEES FROM OVER 1,700 COUNTIES CURRENT	LY PARTICIPATE
IN THE PROGRAM WITH ACCUMULATED ASSETS OF MORE THAN \$11.4	BILLION AS OF
12/31/2012.	
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,82	2,000.
	7
MEMBERSHIP SERVICES- REPRESENTS THE COSTS OF OBTAINING AN	D RETAINING
MEMBERSHIPS FOR COUNTY, ASSOCIATE AND PREMIER MEMBERS. ME	MBERSHIP
SERVICES COSTS (CLASSIFIED AS G&A) TOTALED \$1,360,642 FOR	2012.
EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 5,37	4,754.

FORM 990, PART VI, SECTION A, LINE 1: NACO HAS A LEADERSHIP COMMITTEE, CONSISTING OF FOUR OFFICERS, WHICH IS RESPONSIBLE FOR THE PROPERTY, FUNDS AND BUSINESS AFFAIRS OF THE ASSOCIATION IN THE ABSENCE OF THE BOARD. THE COMMITTEE HAS AND MAY EXERCISE ALL POWERS OF AUTHORITY GRANTED TO THE BOARD. IT RECOMMENDS THE APPOINTMENT AND COMPENSATION OF THE EXECUTIVE DIRECTOR TO THE BOARD, AND MAY ESTABLISH SUCH POSITIONS AND SALARY SCHEDULES AS NECESSARY TO CONDUCT THE AFFAIRS OF THE ASSOCIATION, SUBJECT TO THE BOARD'S APPROVAL.

THE LEADERSHIP COMMITTEE IS COMPOSED OF THE NACO PRESIDENT, THE IMMEDIATE PAST PRESIDENT, THE FIRST VICE PRESIDENT, AND THE SECOND VICE PRESIDENT. ALSO ON THE COMMITTEE ARE FOUR REGIONAL REPRESENTATIVES, WHO HAVE NO VOTING AUTHORITY.

FORM 990, PART VI, SECTION A, LINE 6: NACO HAS THE FOLLOWING CLASSES OF MEMBERSHIP: ACTIVE MEMBER COUNTIES SHALL BE THOSE COUNTY GOVERNMENTS WHICH CONTRIBUTE

 Z32212 01-04-13
 Schedule O (Form 990 or 990-EZ) (2012)

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 14460813
 790809
 53-0190321
 2012.03050
 NATIONAL ASSOCIATION OF COU 53-01901

Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
ANNUALLY TO THE FINANCIAL SUPPORT OF THE ASSOCIATION ACCC	RDING TO THE
SCHEDULE OF DUES OR SERVICE FEES ADOPTED BY THE BOARD OF	DIRECTORS.
SEPARATE MEMBER CATEGORIES FOR ORGANIZATIONS OR INDIVIDUA	LS OTHER THAN
COUNTIES MAY BE AUTHORIZED BY THE BOARD OF DIRECTORS.	
FORM 990, PART VI, SECTION A, LINE 7A: ACTIVE NACO MEMBER	S, AS PREVIOUSLY
DEFINED, ELECT BOARD MEMBERS IN CATEGORIES B, C, D, E AND	F, AT THE ANNUAL
NACO MEMBER CONFERENCE. CATEGORIES:	
B. ONE ELECTED OFFICIAL FROM EACH STATE WHICH HAS AN ACTI	VE MEMBER COUNTY.
C. TWELVE ELECTED OFFICIALS FROM ACTIVE MEMBER COUNTIES,	ONE FROM EACH OF
THE 12 STATES HAVING THE HIGHEST NUMBER OF VOTES AS CERTI	FIED BY THE
CREDENTIALS COMMITTEE BASED UPON NACO MEMBERSHIP AS OF 60	DAYS BEFORE THE
FIRST DAY OF THE ANNUAL CONFERENCE, PROVIDED THAT SUCH ST	ATE HAS EITHER 50
PERCENT OF ITS COUNTIES AS ACTIVE MEMBER COUNTIES OR HAS	ACTIVE MEMBER
COUNTIES REPRESENTING 50 PERCENT OF THE STATE'S POPULATIO	PN •
D. ONE ELECTED COUNTY OFFICIAL FROM EACH STATE HAVING 100	PERCENT OF ITS
COUNTIES AS ACTIVE MEMBERS.	
E. ONE ELECTED OFFICIAL FROM EACH REGIONAL DISTRICT THAT	HAS BEEN
AUTHORIZED BY THE BOARD AND APPROVED BY THE VOTING MEMBER	S.
F. ONE DIRECTOR FROM EACH AFFILIATE ORGANIZATION THAT HAS	BEEN AUTHORIZED
BY THE BOARD AND APPROVED BY THE VOTING MEMBERS. THE NUMB	ER OF DIRECTORS
FROM CATEGORY F SHALL NOT EXCEED 25 PERCENT OF THE TOTAL	NUMBER OF
DIRECTORS ON THE BOARD.	

QUESTION PUT BEFORE THE ANNUAL CONFERENCE OR SPECIAL MEETINGS OF THE

MEMBERSHIP. ACTIVE MEMBER COUNTIES WHOSE POPULATION REQUIRES THEM TO PAY

MORE THAN \$499 IN DUES ARE ENTITLED TO ONE ADDITIONAL VOTE FOR EACH 232212
01-04-13
Schedule O (Form 990 or 990-EZ) (2012) 36

14460813 790809 53-0190321 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 or 990-EZ) (2012)	Page 2					
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321					
ADDITIONAL \$500 OR FRACTION THEREOF PAID IN THE YEAR IN W	HICH THE MEETING					
IS HELD. DUES PAID SHALL NOT BE MORE THAN THE AMOUNT SPEC	IFIED IN THE					
APPROVED DUES SCHEDULE. EVERY FULLY PAID ACTIVE MEMBER SHALL BE ALLOWED TO						
VOTE. EACH COUNTY SHALL DETERMINE THE PERSON OR PERSONS (DELEGATES) WHO						
WILL CAST THE COUNTY'S VOTE(S). AN ELECTED OR APPOINTED CO	OUNTY OFFICIAL OF					
A FULLY PAID ACTIVE MEMBER MAY CAST ALL OR ANY PORTION OF THE ACTIVE						
MEMBER'S TOTAL AUTHORIZED VOTE BUT NO FRACTION OF A WHOLE. ANY ACTIVE						
MEMBER MAY BUT IS NOT REQUIRED TO PERMIT ITS VOTES TO BE (CAST BY ITS STATE					
AS A BLOCK.						

FORM 990, PART VI, SECTION A, LINE 7B: THE NACO BOARD OF DIRECTORS SHALL HAVE GENERAL SUPERVISION, MANAGEMENT AND CONTROL OF THE BUSINESS AND PROPERTY OF THE ASSOCIATION, SUBJECT TO THE ARTICLES OF INCORPORATION, THESE BYLAWS, AND THE POLICIES ESTABLISHED BY A MAJORITY VOTE OF THE VOTING ACTIVE MEMBER COUNTIES OF THE ASSOCIATION AT THE ANNUAL CONFERENCE.

FORM 990, PART VI, SECTION B, LINE 11: THE NACO AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE, SUBSETS OF THE BOARD OF DIRECTORS, REVIEW THE DRAFT FORM 990 BEFORE FILING. UPON APPROVAL, THE FINAL FORM IS MADE AVAILABLE TO ALL BOARD MEMBERS VIA THE NACO WEBSITE.

FORM 990, PART VI, SECTION B, LINE 12C: THE TERM OF OFFICE OF THE MEMBERS OF THE BOARD IS FOR ONE YEAR. IMMEDIATELY AFTER ELECTION OR APPOINTMENT TO THE BOARD, THEY ARE REQUIRED TO SIGN, AS A MATTER OF ORGANIZATIONAL POLICY, A CONFLICT OF INTEREST DISCLOSURE STATEMENT DEFINED BY NACO. THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER ARE ALSO REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSRE STATEMENT UPON ASSUMPTION OF OFFICE AND TO PROMPTLY REPORT AN CONFLICT OF INTEREST SITUATION THAT MAY ARISE WHILE THEY'RE IN 237 14460813 790809 53-0190321 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

<u>Schedule O (Form 990 or 990-EZ) (2012)</u>	Page 2
Name of the organization	Employer identification number
NATIONAL ASSOCIATION OF COUNTIES	53-0190321

OFFICE.

FORM 990, PART VI, SECTION B, LINE 15: CEO, EXECUTIVE DIRECTOR OR TOP

MANAGEMENT

THE PROCESS GOES THROUGH A REVIEW AND APPROVAL BY INDEPENDENT PERSONS (EXECUTIVE COMMITTEE), COMPARABILITY DATA (REVIEW OF SALARIES AND BENEFITS OF EXECUTIVE DIRECTORS/PRESIDENT OF OTHER NON-PROFIT ORGANIZATIONS COMPARABLE TO NACO) AND PERFORMANCE EVALUATION BY THE EXECUTIVE BOARD. THE EXECUTIVE DIRECTOR'S ANNUAL COMPENSATION, BASED UPON THE RECOMMENDATION OF THE EXECUTIVE COMMITTEE, IS DECIDED AND APPROVED AT THE BOARD OF DIRECTORS MEETING HELD DURING THE NACO ANNUAL CONFERENCE.

OTHER OFFICERS OR KEY EMPLOYEES:

NACO PARTICIPATES IN LOCAL SALARY SURVEYS AND USES THE SURVEY RESULTS TO ENSURE THAT ITS SALARY STRUCTURES ARE COMPETITIVE AND COMPARABLE WITH SIMILAR POSITIONS FROM OTHER ORGANIZATIONS. THE EXECUTIVE DIRECTOR REVIEWS AND APPROVES SALARY LEVELS AND MERIT INCREASES BASED ON THE EMPLOYEE PERFORMANCE EVALUATION RATING AND RECOMMENDATION OF THE EMPLOYEE'S SUPERVISOR/DEPARTMENT DIRECTOR. THE BOARD OF DIRECTORS MEETS IN NOVEMBER/DECEMBER OF EACH YEAR TO DECIDE ON THE RATE OF EMPLOYEE SALARY INCREASE FOR THE FOLLOWING YEAR.

FORM 990, PART VI, SECTION C, LINE 19: CORPORATE BY-LAWS AND ANNUAL REPORT ARE AVAILABLE ONLINE AT NACO'S WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE TO CONCERNED ENTITIES SUCH AS BOARD OF DIRECTORS, OFFICERS AND EMPLOYEES OF NACO AND ITS AFFILIATED ORGANIZATIONS. FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE UPON REQUEST AND CAN ALSO BY ACCESSED VIA GUIDESTAR, A NON-PROFIT INFORMATION DATABASE. 222212 01-04-13 38 14460813 790809 53-0190321 2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 or 990-EZ) (2012) Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Pag Employer identification numb 53-0190321
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
EQUITY IN EARNINGS OF SUBSIDIARY	383,492
FORM 990, PART XI, LINE 2C	
THIS PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR.	
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(Form 990) Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No. 1545-0047 2012 Open to Public Inspection

Name of the organization

NATIONAL ASSOCIATION OF COUNTIES

Employer identification number 53-0190321

Part i Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN (if applicable) 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
	-				

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(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	Public charity Direct controlling atus (if section entity		g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
NACO RESEARCH FOUNDATION - 53-0241255							
25 MASSACHUSETTS AVE							
WASHINGTON, DC 20001	EDUCATION	DELAWARE	501(C)(3)	509(A)(2)	NACO	X	
						-	

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

Schedule R (Form 990) 2012

Schedule R (Form 990) 2012 NATIONAL ASSOCIATION OF COUNTIES

53-0190321 Page 2

Part III Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(i)	(k)
Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets	ate allo	cations?	Code V-UBI amount in box 20 of Schedule	General managir partner	Percentage ownership
	country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	2
							1			
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				_						
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1										
		Primary activity domicile (state or foreign	Primary activity	Primary activity	Primary activity Legal domicile Controlling Predominant income Share of total (state or foreign controlling entity entity excluded from tax under	Primary activity Legal Direct controlling Predominant income Share of total Share of	Primary activity Legal domicile (state or entity excluded from tax under essets	Primary activity Legal domicile (state or entity excluded from tax under entity entity excluded from tax under entity ent	Primary activity Legal domicile (state or entity excluded from tax under) Predominant income Share of total income end-of-year arount in box excluded from tax under excluded from tax under excluded from tax under excluded from tax under exclusion end-of-year assets 20 of Schedule	Primary activity Legal Direct controlling Predominant income Share of total Share of Disconcision Code V-I IBI General

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	conti ent	i) tion o)(13) rolled ity? No
NACO FINANCIAL SERVICES CORPORATION -									
52-1913476, 25 MASSACHUSSETTS AVENUE, NW, WASHINGTON, DC 20001	MANAGEMENT SERVICES	DE		C CORP	1,061,547.	1,843,742.	100.00%		Х
	-								

Schedule R (Form 990) 2012 NATIONAL ASSOCIATION OF COUNTIES

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

No	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transactions	s with one or more re	elated organizations listed in Pa	arts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		X
b	Gift, grant, or capital contribution to related organization(s)				1b	Х	[
с	Gift, grant, or capital contribution from related organization(s)				1c		X
	Loans or loan guarantees to or for related organization(s)				1d		X
	E Loans or loan guarantees by related organization(s)				1e		X
f	Dividends from related organization(s)				1f	******	X
	Sale of assets to related organization(s)				1g		X
	Purchase of assets from related organization(s)				1h		X
i	Exchange of assets with related organization(s)				1i		X
j	Lease of facilities, equipment, or other assets to related organization(s)				1j	Х	F
k	Lease of facilities, equipment, or other assets from related organization(s)				1k	0000000000	X
I	Performance of services or membership or fundraising solicitations for related organ				11		X
n	n Performance of services or membership or fundraising solicitations by related organ				1m		X
	Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n	Х	h
	Sharing of paid employees with related organization(s)				10	Х	f
p	Reimbursement paid to related organization(s) for expenses				1p	00000000000	X
	Reimbursement paid by related organization(s) for expenses				1q	Х	†
-	· · · · · · · · · · · · · · · · · · ·						
r	Other transfer of cash or property to related organization(s)				1r		X
	Other transfer of cash or property from related organization(s)				1s		X
	If the answer to any of the above is "Yes," see the instructions for information on w						L
	(a)			· · · · · · · · · · · · · · · · · · ·			
	Name of other organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount inv	olved		

(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) NACO RESEARCH FOUNDATION	В	2,500,000.	CASH
(2) NACO RESEARCH FOUNDATION	J	531,823.	CASH
(3) NACO RESEARCH FOUNDATION	0	1,333,454.	CASH
(4) NACO RESEARCH FOUNDATION	Q	111,868.	CASH
(5) NACO RESEARCH FOUNDATION	N	1,125,287.	CASH
_(6)			

Schedule R (Form 990) 2012 NATIONAL ASSOCIATION OF COUNTIES

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

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

				· · · · · · · · · · · · · · · · · · ·	(5	(-)	(1)	(3)	(1)	
(a)	(b)	(c)	(d)	(e) Are all partners sec. 501(c)(3) orgs.?	(f)	(g)	(h)	(i)	(i)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under section 512-514)	partners sec. 501(c)(3)	Share of	Share of	Dispropor- tionate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	General or managing	Percentage
of entity		(state or foreign	excluded from tax	orgs.?	total	end-of-year	allocations?	of Schedule K-1	partner?	ownership
		country)	under section 512-514)	Yes No	income	assets	Yes No	(Form 1065)	Yes No	
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Schedule R (Form 990) 2012

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				Schedule R (Form 990)
2165 12-10-12		44		Jonedale n (Form 980)

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► X

File a separate application for each return.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or
print	NATIONAL ASSOCIATION OF COUNTIES	53-0190321
File by the due date for filing your return, See	Number, street, and room or suite no. If a P.O. box, see instructions. 25 MASSACHUSETTS AVENUE, N.W., NO. 500	Social security number (SSN)
instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 1

Application	Return	Application			Return
ls For	Code	Is For			Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990-BL	02	Form 1041-A			08
Form 4720 (individual)	03	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990•T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870		<u></u>	12
		INANCIAL OFFICER - 2		ASSACHUSET	TS
• The books are in the care of ► AVE, NW, STE.	500 -	WASHINGTON, DC 2000	1		
Telephone No. ► (202) 942-4206		FAX No. ►			
• If the organization does not have an office or place of business	s in the Un	ited States, check this box			
• If this is for a Group Return, enter the organization's four digit (Group Exe	mption Number (GEN) If this	s is fo	r the whole group, c	heck this
box ▶ If it is for part of the group, check this box ▶	and atta	ch a list with the names and EINs of all r	nemb	ers the extension is	for.
1 I request an automatic 3-month (6 months for a corporation					
AUGUST 15, 2013 , to file the exempt	t organizat	tion return for the organization named al	oove.	The extension	
is for the organization's return for:					
\blacktriangleright X calendar year 2012 or					
▶ tax year beginning	, an	d ending		·	
2 If the tax year entered in line 1 is for less than 12 months, cl	heck reaso	on: 🗌 Initial return 🗌 Final	retur	'n	
Change in accounting period					
······································				y	
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6069, ei	nter the tentative tax, less any			
nonrefundable credits. See instructions.			<u>3a</u>	\$	0.
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 overp	ayment al	lowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required,			
by using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	0.
Caution. If you are going to make an electronic fund withdrawal w	<u>/ith this Fo</u>	orm 8868, see Form 8453-EO and Form 8	3879-	EO for payment instr	ructions,
LHA For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form 8868 (Re	v. 1·2013)
223841 01-21-13					
		45			

14460813 790809 53-0190321

2012.03050 NATIONAL ASSOCIATION OF COU 53-01901

rm 990	Return of Organization Exempt From In Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code benefit trust or private foundation)		OMB No. 1545-0047 2011 Open to Public Inspection
partment of the Treasur ernal Revenue Service	The organization of the second s		
For the 2011 ca	lendar year, or tax year beginning	D Employer identificati	on number
Check if C Nar	ne of organization		
applicable:	ATIONAL ASSOCIATION OF COUNTIES		0.001
		53-019	0321
changeDol	mber and street (or P.O. box if mail is not delivered to street address) Room/suite		942-4206
Termin- 2	5 MASSACHUSETTS AVENUE, N.W. 500	(202)	21,330,386.
Amended Cit	v or town, state or country, and ZIP + 4	G Gross receipts \$ H(a) Is this a group retu	
		for affiliates?	Yes X No
pending F Na	ame and address of principal officer: LARRY NAAKE	H(b) Are all affiliates includ	led? 🔄 Yes 🔄 No
SA	ME AS C ABOVE	7 If "No," attach a lis	t. (see instructions)
Tax-exempt sta	tus: $501(c)(3)$ $x 501(c)(-x) = 100000000000000000000000000000000000$	H(c) Group exemption	number 🕨
Website: 🏲 W	WW.NACO.ORG	r of formation: 1946 M S	State of legal domicile: DE
Form of organiza	tion: X Corporation I Hust I Hocosto 2		
Part I Sum	nary lescribe the organization's mission or most significant activities: SEE SCHED	ULE O	
8 1 Briefly d			
Check to Check to Che	his box 🕨 🗌 if the organization discontinued its operations or disposed of mo	ore than 25% of its net ass	126
2 Check t 3 Number	cut provide body (Part VI line 1a)		126
4 Numbe	r of independent voting members of the governing body (Part VI, line TD)	5	88
🕫 5 Total nu	imber of individuals employed in calendar year 2011 (Part V, inte 24)	6	966
🖞 6 Total nu	umber of volunteers (estimate if necessary)	7a	0.
7 a Total u	nrelated business revenue from Part VIII, column (C), line	7b	0.
b Net uni	related business taxable income from Form 990-T, ling	Prior Year	Current Year
		0.	8,073,483.
9 8 Contrit	nrelated business revenue from Part VIII, column (C), line	7,534,287.	1,238,534.
<u>.</u>	(i) service revenue (, er +) (ii) service (,	557,564. 9,563,727.	9,202,050.
10 Investr	(Dut VIII column (A) lines 5 6d, MCSUC, IUC, and ITC/	17,655,578.	18,514,067.
	Lilling 9 through 11 (must #9(a) Part VIII, column (V); into the	1,416,450.	1,763,007.
13 Grants	and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
1	for any hore (Port IX, column (A), (i)(#4)	5,745,031.	5,514,645.
	- ther compensation, employee benefits (Part IX, column (A), mes or loy	0.	0.
15 Salarie 16a Profes b Total 1	ssional fundraising fees (Part IX, column (A), line 11e) 0.		
b Total 1	fundraising expenses (Part IX, column (D), line 25)	8,875,800.	9,273,220. 16,550,872.
u 17 Other	expenses (Part IX, column (A), lines 11a 110, 112 10, 112 10, interest expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,037,281.	1,963,195.
18 Total	nue less expenses. Subtract line 18 from line 12	1,618,297.	End of Year
19 Rever		Beginning of Current Year 36, 216, 547.	34,545,392.
start 20 Total	assets (Part X, line 16)	8,751,635.	5,986,418.
Sin .	addete (Fuller, Milling 26)	27,464,912.	
tan 22 Net a	ssets or fund balances. Subtract line 21 from line 20		
Part II Sig	gnature Block of perjury, I declare that I have examined this return, including accompanying schedules and s	atements, and to the best of r	ny knowledge and belief, it is
Under penalties of	of perjury, I declare that I have examined this return, including accompanying schedules and o	parer has any knowledge.	
true, correct, and	of perjury, I declare that I have examined this return, including accompanying content which pre complete. Declaration of preparer (other than officer) is based on all information of which pre		
		Date	
Sign	Signature of officer DAVID KEEN, CHIEF FINANCIAL OFFICER		
Here	Type or print name and title	- A	PTIN
	A Annua signatura ///	Date Date In Check	
Prin	t/Type preparer's name BORAH G. KOSNETT	81312 self-emp	52-1855942
	o's name TATE AND TRYON	Firm's EIN	
	via address 2021 L STREET, NW SUITE 400	Phone no.	(202) 293-220
	WASHINGTON, DC 20036	Phone no.	X Yes No
Mov the IBS d	liscuss this return with the preparer shown above? (see instructions)	······	Form 990 (201

May the IRS discuss this return with the preparer shown above? (see instructions) Deduction Act Notice see the separate instructions.

	90 (2011) NATIONAL ASSOCIATION OF COUNTIES	53-0190321	Page 2
rm 9 art	Statement of Program Service Accomplishments		X
	Check if Schedule O contains a response to any question in this Part III		_
1	Briefly describe the organization's mission: TO STIMULATE AND CONTRIBUTE TO THE IMPROVEMENT OF COUNT THROUGHOUT THE UNITED STATES.		1
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes	, X No
	the prior Form 990 or 990-E2? If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program service:		s X No
	If "Yes," describe these changes on Schedule O.	as measured by expense	es.
	Describe the organization's program service accomplishments for each of its times target program service accomplishments for each of its times target program service required to report the amount others, the total expenses, and revenue, if any, for each program service reported.	of grante and an	
la	Others, the total expenses, and others of the total expenses, and others, the total expenses, and others, the total expenses, and others, the total expenses, and total expenses, and total expenses, and the	RED COMPENSA S (NRS). T A WAY TO AUG DERAL, AND IN MPLOYEES FRO	TATE TION HE MENT MANY
4b	(Code:)(Expenses 2,338,919. including grants of 110,500.) (R LEGISLATIVE - THESE ACTIVITIES INCLUDE POLICY DEVELOPM PROGRAMS ON BEHALF OF COUNTY GOVERNMENT. NACO PRESENT GOVERNMENT VIEW ON ALL LEGISLATION AND PROPOSED REGULA AND THE ADMINISTRATION.	MENT AND ADVO	
4c		CONFERENCES NUAL CONFERE DE EDUCATION ING OPPORTUN	AL ITIES
-4	OPERATIONS AND PROGRAMS.	4,750,213.)	
4	10,806,641.	Fo	rm 990 (2

	990 (2011) NATIONAL ASSOCIATION OF COUNTIES 53-01903	<u>21</u>	Pa	age 3
Form	990 (2011) NATIONAL ASSOCIATION OF CONTROL O			
Par	IV Checklist of Required Ochedules		Yes	No
	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		l	х
1		1		X
		_2		<u>^</u>
2	i ulive at an indirect political campaign activities of benan of or in opportunity			х
3	Did the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion of the organization engage in direct or indirect pointed campaign assortion engage in direct or indirect pointed campaign as or indirect pointed camp	_3_		<u> </u>
			N/	A
4		4	117	<u> </u>
_		5	Х	
5			<u> </u>	
-		6		x
6	is a line or involtment of amolinits in such julius of accounter in the second	0		
_		-		x
7		7	+	
-	the second s		{	x
8		8		+
				x
9		9		
		1.0	1	x
10		10		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Farty and a schedule D, Parts VI, VII, VII, IX, or X If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
11		888888		1999-1999 1999-1999
	as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	x	
i	Part VI			
		111	x x	
		<u> ""</u>	' -	
		110		X
				X
	d Did the organization report an amount for other assets in Part X, line To that to be a set of the	11		
	 Did the organization report an amount for other liabilities in rait X, into 25 m resp. f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 	11	f Z	2
			<u>- -</u>	
	the sector concrete independent auglieu induciai statomonico recenter a	12		X
12		. "	<u>a</u>	-+
		12		ĸ
				X
				X
1:		· -		
1				
			4ь	X
	investment, and program service activities outside the onned states, or aggregation of or more? If "Yes," complete Schedule F, Parts I and IV	~ ⊢ +		-+-
			5	X
٦	5 Did the organization report on Part IX, column (A), line 3, more than \$6,000 of granter and IV or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	··	-+-	
			6	2
٦		···		
			17	
1	7 Did the organization report a total of more than \$15,000 of expension of preference of preferen	··· -		
			18	
•	18 Did the organization report more than \$15,000 total of fundationing order group activities on Part VIII, line 9a? If "Yes," 1c and 8a? If "Yes," complete Schedule G, Part II	··· -	<u>''</u> +	+-
			19	
	19 Did the organization report more than \$15,000 of gloss mouth from gloss mouth from gloss mouth grant gran	···· ⊢	20a	
			20a 20b	
	20a Did the organization operate one or more hospital facilities? If 'res,' complete conductive to this return? b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<u></u> E	_	990 (20

+00000

NATIONAL ASSOCIATION OF COUNTIES 53-0190321 Page 4

Form	990 (2011) NATIONAL ASSOCIATION OF COUNTIES				_
Par	V Checklist of Required Schedules (continued)	- 1	Yes	No	
<u> 1980-1995</u>					
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the	21	Х		_
21					
00		22		X	
22	Did the organization report more than \$5,000 or grants and office assistance to many company of the organization's current column (A), line 2? If "Yes," complete Schedule I, Parts I and III			1	-
				1	
23	Did the organization answer "Yes" to Part VII, Section A, life 3, 4, 6 6 door compensated employees? If "Yes," complete and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	x		
	Schedule J	20		+	
24a		~ .		X	
	last day of the year, that was issued after December 01, 2002 m vap Schedule K. If "No", go to line 25	24a	}		_
		24b	┼	+	-
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary pender and the year to defease Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease				
с	Did the organization maintain an escrow account other than a returning output a returning	24c		+	
	Did the organization maintain an escrow account other than a reteriors of any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d			
c					
25	Did the organization act as an "on behalf of "issuer for bords outstanding at any market of a section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	25a		X	<u> </u>
200	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an en				
	disqualified person during the year? If "Yes," complete Schedule L, Fart Fart and be a served as a server and be the organization with a disqualified person in a prior year, and be the organization's prior Forms 990 or 990 EZ? If "Yes," complete				
	Is the organization aware that it engaged in an excess benefit transaction with a deep that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete	25b		X	K
	Schedule L, Part I				
	sources in a star key employee highly completible saled completion at a	26			K
26	Was a loan to or by a current or former officer, director, trustee, key employee, mgm, complete L, Part II person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	-20			
	person outstanding as of the end of the organization's tax year in yea, complete the end of the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial				
27	Did the organization provide a grant or other assistance to an onicer, director, di director, director, di		.		Х
	contributor or employee thereof, a grant selection committee member, or to do the advertise of a selection committee member, or to do the advertise of any of these persons? If "Yes," complete Schedule L, Part III	27			
	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV Was the organization a party to a business transactions and exceptions):				
28	Was the organization a party to a business transaction with one of the reasons?				X
	instructions for applicable filing thresholds, conditions, and choose and the sempleto Schedule 1. Part IV	28			<u>^</u>
	a A current or former officer, director, trustee, or key employee 1, 1, 00, and prove 2 if "Yes " complete Schedule L, Part IV	28	b		<u> </u>
	 A family member of a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, 				
	c An entity of which a current or former officer, director, trustee, or key employee (or a ranning more and the current or former officer, director, trustee, or key employee (or a ranning more and the current of the	28	Sc 2	X	
	 c An entity of which a current or former officer, director, trustee, or key employee (of a tarmy model) director, trustee, or direct or indirect owner? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	2	9		X
2	Did the organization receive more than \$25,000 in non-cash contributions? If Yes, complete conservation				
3		3	0		X
5	the Name 1 If "Yes " complete Schedule M		_	ł	
_	e contractionalizat	3	н		Х
3	I Did the organization induidate, terminate, or and I I I I I I I I I I I I I I I I I I I	· [==			
	11 res, complete content of a transfer more than 25% of its net assets? If 'res, complete		32		Х
3	2 Did the organization sell, exchange, dispose of, of transier more than a second the organization under Regulations Schedule N, Part II				
	Schedule N, Part II 3 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		33		Х
3	3 Did the organization own 100% of an entity disregarded as separate from the organization encoded as separate	├-	33	+	
	sections 301.7701-2 and 301.7701-3 rife residue complete contract		.	X	
	 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 	·· ––			
	If "Yes," complete Schedule R, Parts II, III, IV, and V, III e F	. 3	35a	X	
;	 If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of b Did the				
	b Did the organization receive any payment from or engage in any transition	[3	35b	X	
	 b Did the organization receive any payment from or engage in any transaction multiplication multiplication section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization 	?			I_
	36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chanter of the organization make any transfers to an exempt non-chanter of the organization make any transfers to an exempt non-chanter of the organization make any transfers to an exempt non-chanter of the organization make any transfers to an exempt non-chanter of the organization of the organization make any transfers to an exempt non-chanter of the organization make any transfers to an exempt non-chanter of the organization of the organization make any transfers to an exempt non-chanter of the organization of the organizati	L	36	N/	Α_
	36 Section 501(c)(3) organizations. Did the organization make any transiers to an energy of the organization. 36 If "Yes," complete Schedule R, Part V, line 2 37 of the organization and the organization.	Γ			
	If "Yes," complete Schedule R, Part V, line 2		37		X
	37 Did the organization conduct more than 5% of its activities through an entity that is not a folder engineering. 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI and that is treated as a partnership for federal income tax purposes? If "Section 2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	Γ		_	1
	and that is treated as a partnership for federal income tax purposes. <i>In Field</i> , early 1 , lines 11 and 19? 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		38	X	
	38 Did the organization complete Schedule O and provide explanations in objective or the Note. All Form 990 filers are required to complete Schedule O	 I	Form	990	(201

.

		53-	-01903	21	Pag	e <u>5</u>
990 (2011) NATIONAL ASSOCIATION OF COUNTIES						
					<u> </u>	
Statements Regarding Other IRS Filings and Tax Complements Check if Schedule O contains a response to any question in this Part V				Y	es I	<u>lo</u>
	1	l	43			
Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1b		0			
Enter the number reported in Box 3 of Form 1090. Enter 0 if not applicable	roporte	 able namin				
Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and Did the organization comply with backup withholding rules for reportable payments to vendors and	Tepon	abio guittin	.	1c	X	
Did the organization comply with backup withholding fulles for reportance of a second se						
(gambling) winnings to prize winners?	00		88			
Enter the number of employees reported on Form W-3, manufacture of the seturn filed for the calendar year ending with or within the year covered by this return	2a			2b	X	
filed for the calendar year ending with or within the year covered by this return	urns(.					
If at least one is reported on line 2a, did the organization ne all required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructio Note. If the sum of lines 1a and 2a is greater to e-file (see instructio Note. If the sum of lines 1a and 2a is greater to e-file (see instructio Note. If the sum of lines 1a and 2a is grea	ns)			3a		Χ_
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-line (see instruction) a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3b		
 a Did the organization have unrelated business gross income or provide an explanation in Schedule O b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule or other 			•••••			
 b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in our result of the organization have an interest in, or a signature or other a tany time during the calendar year, did the organization have an interest in, or a signature or other financial. 	er auth	ority over,	4	4a		Х
 At any time during the calendar year, did the organization have an interest in, or a signature of each of the signature of each of th	al acco	ount)?	•••••			
financial account in a foreign country (seen as a same						
 b If "Yes," enter the name of the foreign country: ▶	al Acco	ounts.		5a	200000000	Х
 b If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financia Was the organization a party to a prohibited tax shelter transaction at any time during the tax year Was the organization a party to a prohibited tax shelter transaction at any time during the tax s	r ?			5b		X
a Was the organization a party to a prohibited tax shorts, that a prohibited tax shelter tran	nsactio	on?				
b. Did any taxable party notify the organization that it was on to approximately a				5c		
c If "Yes," to line 5a or 5b, did the organization me form ever normally greater than \$100,000, and di	d the c	organization	n solicit		x	
a Does the organization have annual gross receipts that are normally gro				<u>6a</u>	<u> </u>	
any contributions that were not tax deductible?	ibution	s or gifts			x	
 any contributions that were not tax deductible? b If "Yes," did the organization include with every solicitation an express statement that such contributions are presented as a statement of the stateme				6b		
were not tax deductible?			N/A			88888
7 Organizations that may receive deductible contributions direct behavior and partly for goods and	d servic	es provided	to the payor	? <u>7a</u>	+	+
a Did the organization receive a payment in excess of \$75 made party as a contribution and party or defined?			·····	7b		
 a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and partly of goods and good	it was	required				
 b If "Yes," did the organization notify the donor of the value of the goods of services provide the organization sell, exchange, or otherwise dispose of tangible personal property for which c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which 				. 7c		
to file Form 8282?	·	7d				
 to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of the organization receive any funds, directly or indirectly or indirectly, on a personal benefit of the organization receives any funds. 	efit cor	ntract?		<u>7e</u>		X
 Did the organization receive any funds, directly of indirectly, to pay it 	contrac	ct?		7f		
f Did the organization, during the year, pay premiume, energy	file Fori	m 8899 as	required:			/A
- If the organization received a contribution of qualified measurements	nanizat	ion file a Fo	orm 1096-0	? <mark>7h</mark>		/A
 h If the organization received a contribution of cars, boats, airplanes, or other venicles, did the organization h If the organizations maintaining donor advised funds and section 509(a)(3) supporting organizations 8 Sponsoring organizations maintaining donor advised funds and section forganization, have excess business holding 	ns Did	the support	ing N/A			
 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) Supporting organization 8 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdir 	nos at a	nv time durii	ng the year?	8		220 2000
instign or a dopor advised fully lightened by a spontoning to	igo at a					
			N/A	98	<u> </u>	
organization, or a donor advised tand that an an organization organizations maintaining donor advised funds.			N/A	91	0	
9 Sponsoring organizations maintaining donor advised removality and 662						
9 Sponsoring organizations maintaining donor advised removality and 662				12666		
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 9 Sponsoring organizations maintaining donor advised failed. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? b Did the organization make a distribution to a donor, donor advisor, or related person? c Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	A	10a 10b 11a 11b 1041? 12b			2a 3a	
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 9 Sponsoring organizations maintaining donor advised failed. a Did the organization make any taxable distributions under section 4966? b Did the organization make a distribution to a donor, donor advisor, or related person? b Did the organization make a distribution to a donor, donor advisor, or related person? c Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 model on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu or b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	A A of Form	10a 10b 11a 11b 1041? 12b 13b 13c	N/2	A 1		

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53-0190321 Page 6

	11) NATIONAL ASSOCIATION OF COUNTIES 53-01903.		nse	-
orm 990 (20	NATIONAL ASSOCIATION OF COUNTIES 95 of 199 Association of a line line of a line line of a line of a line of a line of a line line	0 Tespo	1100	
Im 990 (20	11) NATIONIZE and Disclosure For each "Yes" response to lines 2 through response to lines 2 through response to lines 2 through response to line 3 through r		X	l
ti ti	o line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in occounter Check if Schedule O contains a response to any question in this Part VI	<u></u>		<u>-</u>
	the set of the contains a response to any question we	Yes	s No	-
		10		
ection A	. Governing Body and memo			
. Estand	the number of voting members of the governing body at the end of the tax year			
1a Entert	the number of voting members of the governing body at the one of the governing are material differences in voting rights among members of the governing body, or if the governing are material differences in voting rights among members of the governing body, or if the governing 126			
body a	elegated broad authority to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security to an executive committee or similar committee, explained and the security of		¥ ا	8888 K
b Enter	the number of voting there, or key employee have a family relationship of a business retained	2		<u> </u>
2 Did ar	hy officer, director, trustee, or key employee have a family relationship of a set r, director, trustee, or key employee? The organization delegate control over management duties customarily performed by or under the direct supervision the organization delegate control over management duties customarily performed by or under the direct supervision			K
office	r, director, trustee, or key employee remanagement duties customarily performed by or under the client of the ne organization delegate control over management duties customarily performed by or under the client of the icers, directors, or trustees, or key employees to a management company or other person?	3	-+-	X
3 Did th	he organization delegate control over management company or other person?	4		X
of off	he organization become aware during the year of a significant diversion of the organization's assets?	5		<u>^</u>
4 Did t	he organization make any significant during the year of a significant diversion of the organization success	6	X	
5 Did ti	he organization become aware during the year of a significant diversion of the organization become aware during the year of a significant diversion of the organization have members or stockholders?			
		7a	X	
more	e members of the governing body within the for subject to approval by members, etcan	7b	X	
		8a	X	
		8b	X	
		9		<u>X</u>
org	here any officer, director, dector, rectory, and the names and addresses in Schedule O names and addresses in I Schedule O names and addresses in Schedule O names and addresse		Yes	No
		10a		Х
000.0				
10a Dio	d the organization have local chapters, branches, or affiliates?	10b	1	ļ .
h lf'	d the organization have local chapters, branches, or affiliates? 'Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, 'Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,		X	
	d branches to ensure their operations and the numbers of its governing and			
an Hi	the acconization provided a complete in the review this Form 990.	12a	X	1
	as the organization process, if any, used by the organization to review this routed	12b	1 17	1
		120	+	+
12a D	id the organization have a written construction of the second secon	120	x	1
~	is the ergenization redularly and condictory	120		+
c D	Schedule O how this was done			+
		14		
13 D	Did the organization have a written winder and the state of the organization have a written document retention and destruction policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent Did the process for determining compensation of the following persons include a review and approval by independent Did the process for determining compensation of the following persons include a review and approval by independent Did the process for determining compensation of the following persons include a review and approval by independent			
14	bid the organization national compensation of the following persons include a review and existing and decision?		a X	2000000 2000000
		15		
F	Dersons, comparability data, and other in the management official	15	b _ ^	
а	The organization's CEO, Exceeded a			
b	Other officers or key employees of the organization			
	Other officers of key employees that the process in Schedule O (see instructions). If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16	ba	X
16a	Did the organization invest in, commotive according			
b	a side the organization follow a written period	1	6b	
	in joint venture arrangements under applicable rought			
	exempt status with respect to such an any			
Sec	tion C. Disclosure	only) ave	ailable	
17	List the states with which a copy of this roll with Forms 1023 (or 1024 if applicable), 990, and 990-1 (Section 601-61,)	011197		
	tion C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed ► NONE Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s Section 6104 requires an organization to make these available. Check all that apply.			
	a second mode these available. Showing the		financ	ial
18	for public inspection. Indicate how you made more and X Upon request			
	Section 6104 requires an organization to make its rolling to be the sequence of the section 6104 requires an organization to make its rolling to be the sequence of the section for public inspection. Indicate how you made these available. Check all that apply.	licy, and		
18	for public inspection. Indicate now you made the interest pole of the organization made its governing documents, conflict of interest pole of the organization made its governing documents, conflict of interest pole of the organization made its governing documents.	licy, and	on' 🕨	
	for public inspection. Indicate now you made its governing documents, conflict of interest poly Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest poly Describe in Schedule O whether (and if so, how), the organization made its governing documents, and records of the organization made its governing documents.	rganizati	on: 🕨	
18 19	for public inspection. Indicate now you make its governing documents, conflict of interest polytoches in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest polytoches attements available to the public during the tax year. Statements available to the public during the tax year. Solution to the public during the tax year. Statements available to the public during the tax year.	rganizati	on: 🕨	
18	for public inspection. Indicate how you made these and X Upon request Own website Another's website X Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest por statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the o DAVID KEEN, CHIEF FINANCIAL OFFICER – (202) 942–4206 DAVID KEEN, CHIEF FINANCIAL OFFICER – (202) 942–4206 25 MASSACHUSETTS AVE, NW, STE. 500, WASHINGTON, DC 20001			990 (20

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Form 990 (2011) NATIONAL A Part VII Compensation of Officers, Dire	SSOCIATI	ION	0) <u>F</u>				ees. Highest Corr	pensated		
Form 990 (2011)	ectors, trus	siee	э, 1	103				-]
Part VII Compensation of Onicers, 21 Employees, and Independent (Check if Schedule O contains a respons	Contractors	i	ن ما د	. 17 .	+ V	/11			<u></u>	<u></u>	<u> <u>La</u></u>
and the Cooptains 2 (eSD01)		_		<u>s ra</u>		<u></u>	ed.	Employees			
	INIOVEES, uno		_	_	_			the second se	Arganizzulu 5 Las Your		
Section A. Oncoros	. Report compen	satio		uie Lue	ind	ividu	ale	or organizations), regar	dless of amount of c	compe	nsation.
 List all of the organization's current on one on the organization's current on compensation is current in compensation. List all of the organization's current highest compensation (Box 5 of Form W-2 and/or Box 7 of Form - List all of the organization's former officers, is the organization from the organization and the organiz	ion was paid. oyees, if any. S sated employees (099-MISC) of m sey employees, d any related or	ee in (othe ore th and ganiz	nstru er tha nan S high zatio	uctic in an \$100 hest ons.	ons offi),000 ; coi	for d icer, c 0 fror mper	efin lirec n th nsa apa	ition of "key employee. stor, trustee, or key employ e organization and any rela ted employees who rec scity as a former director	" yee) who received repo ated organizations. eived more than \$10 or or trustee of the or	rtable 00,000 rganiza) of ation,
List all of the organization from the state of the s	m the organiza	inet	hituti	iona	al tru	Istee	s; c	officers; key employees	; highest compensat		.1
List all of the organization's former directors Dist all of the organization's former directors more than \$10,000 of reportable compensation from List persons in the following order: individual truster List persons in the persons.	es or directors	, 113		0.10		-			inactor or trustee.		
List persons in the following order: Individual truster and former such persons.	r any related of	rgani	zatio	on c	om	pens	ate	d any current officer, d	(F)	1	(F)
Check this box if neither the organization no	(B)	<u> </u>		(C)	•			(D)	Reportable		Estimated
(A)	Average	(-)	P	ositi ck m	ion ore t	han or	ne	Reportable compensation	compensation		amount of
Name and Title		box, u office	-1	nore	on is	s nour	anı	from	from related		other
	week +		rand	adin		1		the	organizations	co	mpensation from the
	(describe	irecto			- 1	Ð		organization	(W-2/1099-MISC)		organization
	hours for	eord	22			Insate		(W-2/1099-MISC)			and related
	related organizations	fuste	al trus		o)ee	ompe				c	rganizations
	in Schedule	Individual trustee or director	Institutional trustee	5	Key employee	Highest compensated employee	Former				
	0)	hdiv	Instit	Officer	Key	eng	For				_
								0	().	0.
RONALD ANDERSON	1.00	X			L						
BOARD MEMBER				ļ	1			0		0.	0.
ALLAN ANGEL	1.00	X					₋			-	0
BOARD MEMBER								0		0.	0.
BRENDA ARNOLD	1.00	X			1		+				0
BOARD MEMBER			1		1			0		0.	0
PETER BALDACCI	1.00	X					+-				0
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THOMAS BARDWELL	1.00) X					+-				0
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KITTY BARNES	1.00) X					-+-				
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LU BARRON	1.0	0 X	٢				-+-			l	
BOARD MEMBER			ł	ł					0.	0.	(
STANLEY BATEMON	1.0	0 2	X				+				
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TONY BENNETTE	1.0	0 2	X								
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CINDY BOBBITT	1.0	0	X								
BOARD MEMBER									0.	0.	
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TODD BONLARRON

BOARD MEMBER

VALERIE BROWN

BOARD MEMBER

WELTON CADWELL

SALUD CARVAJAL

BOARD MEMBER

BOARD MEMBER

KEITH CARSON

BOARD MEMBER

KATIE CASHION

BOARD MEMBER

GREG CASTANO

BOARD MEMBER

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orm 990 (2011) NATIONAL Part VII Section A. Officers, Directors, T	ABBUCIN		/665	. an	d H	iahe	est C	Compensated Employe	es (continued)	
	(B)	pioj		(C	;)			(D)		(F)
(A)	Average			osi	tion	a		Reportable	Reportable	Estimated amount of
Name and title		hox.	unles	s per	nore t son is	s both	ı an	compensation	compensation from related	other
	week	office	er and	adi	rector	/trust	tee)	from	organizations	compensation
	(describe	director						the organization	(W-2/1099-MISC)	from the
	hours for	51	8			sated		(W-2/1099-MISC)	(organization
	related organizations	ustee	trust		8	npen		(112) 1000 1110 27		and related
	in Schedule	hual tr	tional		nptoy	stcol	تة ا			organizations
	O)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
TANLEY CHANG	1 00	x					ļ	0.	0.	0.
BOARD MEMBER	1.00	^								0
SEORGE COLE	1.00	x						0.	0.	0.
BOARD MEMBER	1.00			+	1-	+	1		0	0.
PETER CORROON	1.00	X						0.	. 0.	· · · · ·
BOARD MEMBER		1	1-	1	1-				0	0.
GREG COX	1.00	X	-					0	•	
BOARD MEMBER SHARON COX				ł				0	0	. 0.
BOARD MEMBER	1.00	X		+-						
WILLIAM COX	1.00	x						0	. 0	. 0.
BOARD MEMBER		1		+-		-			0	0.
FRED CROSBY	1.00	X						0	•	•
BOARD MEMBER								0	0	. 0.
BRYAN DESLOGE BOARD MEMBER	1.00) <u>X</u>	<u> </u>				_		•	
ROCCO DIVERONICA								0	. 0	• 0.
BOARD MEMBER	1.00))	<u> </u>		_1_			0	• 0	0.
						'		1,692,100	147,932	. 401,684.
the Sub-total c Total from continuation sheets to Pa	art VII, Section A	•				י		1,692,100	147,932	. 401,684.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including 	hut not limited to	tho	se li	stec	abo	ove)	who	o received more than \$	100,000 of reportable	11
2 Total number of individuals (including										Yes No
compensation from the organization										
3 Did the organization list any former o	fficer, director, or	trus	stee,	, key	/ em	ploy	/ee,	or highest compensate	d employee on	3 X
3 Did the organization list any former of line 1a? If "Yes," complete Schedule	J for such individu	Jal					•••••		m the organization	
line 1a? If "Yes," complete Schedule 4 For any individual listed on line 1a, is	the sum of report	able	e coi	mpe	ensa	tion	and	other compensation in	om the organization	
4 For any individual listed on line 1a, is and related organizations greater tha	n \$150,000? <i>lf</i> "Y	′es, "	cor	nple	ete S	che	dule	J for such individual	dividual for services	
and related organizations greater tha 5 Did any person listed on line 1a recei	ve or accrue com	pen	satio	on fi	rom	any	unre	elated organization of in		5 X
rendered to the organization? If "Yes	<u>, complete Scrie</u>	uule	1010	, 00						
Section B. Independent Contractors 1 Complete this table for your five high		d ind	lepe	nde	ent c	ontr	acto	ors that received more t	han \$100,000 of comp	pensation from
 Complete this table for your five high the organization. Report compensati 	on for the calend	ar ye	ear e	endi	ng v	vith (<u>or w</u>	ithin the organization's	tax year.	(C)
((A)							() Description	B) of services	Compensation
Name and bu	siness address							CONVENTION	MEDIA	
INVNT, 138 SPRING STR	EET, FLOO	DR	4	, 1	NEV	N		PRODUCTION	1122	411,642
								WEB ENHANC	CEMENT	
OLD TOWN IT, 2312 MT.	VERNON A	AVI	с,	0				SERVICES		133,292
									CAL	107 066
OT TARADATH HOSTING LLC	, 2405 0	1				. 2		SERVICES		107,966
STE J17-722, HERNDON,	VII LUII			_		_				
							_			
2 Total number of independent contr	actors (including	but	not	limit	ted t	o th	ose	listed above) who recei	ved more than	
2 Total number of independent contra \$100,000 of compensation from th	e organization 🕨	•					3	CUEETC		Form 990 (201
\$100,000 of compensation from th SEE PART VII, SEC	CTION A C	ON	rr I	NU	נאנ	. 10	ЛИ	OTHERTO		

53-0190321 Page 9

NATIONAL ASSOCIATION OF COUNTIES

- 0	00.00	NATIONAL	ASSOCI	ATION 0	F COUNTIE.	,		
Form 9 Part	90 (2 \/III	2011)				(B)	(C)	(D) Revenue
Part	V 111	Statement				Related or	Unrelated	excluded from
					Total revenue	exempt function	business	tax under sections 512,
						revenue	revenue	513, or 514
ts ts	1 a	Federated campaigns	1a					
un a	b	Membership dues	10					
ΞÊ	- C	Fundraising events	10					
LA	, A	Related organizations	1d					
Gila		Government grants (contributions)	1e					
Sin	e 4	All other contributions, gifts, grants, and	1 E					
Contributions, Gifts, Grants and Other Similar Amounts	T	similar amounts not included above	1f					
ਵੱਡ		Noncash contributions included in lines 1a-1f:	\$					
to p	ę	Noncash contributions included with the second		>				
<u>ā Č</u>	1	h Total. Add lines fa fi		Judinee		471553	0.	
}		UTION OUT DUES	Γ	900099	4715530	-	1./	
8	2	MEMBERSHIP DUES		900099	1978061			1,345,209.
اہ کے		b MEETINGS		900099	1345209	31,38	0	
Se Se		c SPONSORSHIP		900099	31,388		5	
e a				511190	3,295	. 3,29	15.	
Program Service Revenue	l	e PUBLICATION SALES		511				
Pro	l	f All other program service revenue	•	L	8073483	3.		
	1			·····				483,735.
	3	Investment income (including div	idenas, intere	551, and	483,735	5.		40577555
	J	(it is a mounte)						1,304,135.
	4	Income from investment of tax-e;	xempt bond p	Sloceeus	910413	5. 78000	00.	1,304,155.
	5							
			(i) Reai		-			
			278380		4			
	1	b Less: rental expenses	277608					772.
		c Rental income or (loss)	772		77	2.		112.
		d Net rental income or (loss)			·	<u> </u>		
		d Net rental licome of (locs)	(i) Securities	(ii) Other				
		7 a Gross amount from sales of	3,293,510					
		assets other than inventory						
		b Less: cost or other basis	2,538,71	1.				
		and sales expenses	754799	•				75 <u>4,799.</u>
	ł	c Gain or (loss)			754,79	<u>19 . </u>		
		d Net gain or (loss)	avente (not					
	•	8 a Gross income from fundraising	events (not					
	Ž	including \$	0					
	eve	contributions reported on line	1c). See					
I	Ĕ	Part IV, line 18		a				
	Other Revenue	the set direct expenses		D				
	δ	 Not income or (loss) from func 	iraising evenu	(s				
		O a Gross income from gaming ac	tivities. See					
		Part IV, line 19		a				
	1	1 h		0	▶			
	1	 b Less: direct expenses c Net income or (loss) from gar 	ning activities	······································				
	}	10 a Gross sales of inventory, less	returns					
		and allowances		. a				
		the speed sold						
		 b Less: cost of goods sold c Net income or (loss) from sal 	es of invento	ly	_ ▶			
		c Net income or (IOSS) from sea Miscellaneous Reven	ue			578		63,578.
		MISCEILANIFOLIS		9000		578.		33,565.
		11 a MISCELLANEOUS		9000	99 33,	565.		
		b MARKETING FEES						
		c						
		d All other revenue			▶ 97,	143.	COD 274	0. 3,985,793.
		e Total. Add lines 11a-11d	•••••		18,51	4,067. 14,	528,274.	Form 990 (2011)
		12 Total revenue. See instruction	<u></u>					
	100	2000			1 5			1 - 0 - 1

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NATIONAL ASSOCIATION OF COUNTIES

Form 990 (2011)

501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to Part IX Statement of Functional Expenses S

olete columns (B), (C), and (D). Check if Schedule O contains a respons	e to any question in this	(B)	(C)	(D) Fundraising
Check If Schedule O contained	(A) Total expenses		Management and general expenses	
not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general	
, 8b, 9b, and 10b of rate the		1,763,007.		
Grants and other assistance to governments and	1,763,007.	1,703,007		
organizations in the United States. See Part IV, line 21				
Grants and other assistance to individuals in				
the United States. See Part IV, line 22				
Grants and other assistance to governments,				
organizations, and individuals outside the				
United States. See Part IV, lines 15 and 16			-	
Benefits paid to or for members		100 506	806,34	17.
6 Compensation of current officers, directors,	1,288,933.	482,586	• • • • • • •	
twistees and key employees				
a componention not included above, to disquanted				
persons (as defined under section 4958(1)(1)) and		0.00	1,497,8	06.
persons described in section 4958(C)(3)(D)	3,136,878	. 1,639,072	· 1/45/10	
- Other salaries and wages		1	180,3	95.
 Dension plan accruals and contributions (include 	388,025	. 207,63		58.
401(k) and section 403(b) employer contributions)	427,561	211,00		51.
9 Other employee benefits	273,248	138,19	7. 135,0	
n Pavroll taxes	2157210			
to Free for services (non-employees):				701
a Management	2,731		2,	731.
1	41,848		41,8	848.
c Accounting	41,040			
and the state of the				- 40
 d Lobbying	17 40 14	2	48,	142.
f Investment management fees	48,14	2. 123,69	7. 105,	785.
g Other	229,48		76. 202,	
g Other 12 Advertising and promotion	468,23		(1.) (249)	
12 Advertising and promotion	426,14		68. 60,	520.
13 Office expenses	81,28	8. 2011		
14 Information technology			1,377,	,258.
15 Royalties	1,377,25	186,2		,431.
16 Occupancy	397,66	100,2	5.0	
17 Travel	es	12,8	66 130	,993.
 Travel Payments of travel or entertainment expens 	143,85			,053.
t user fodoral state, or local public official	2 006 0	70. 1,576,0	12	,718.
Conferences, conventions, and meetings	12.7	18.		
on Interest			58 550	,356.
P	576,4	14. 26,0	////	,190.
22 Depreciation, depletion, and amortization	46,3	61. 6,	171. 40	
ee leevropce				
24 Other expenses. Itemize expenses not covered other expenses. Itemize expenses in line 24e.	If line			
above (List miscellaneous expenses column (A)	CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONT CONTRACTOR CONTRACTOR CON		000 007	3,078.
	4, 794, 0	78. 3,901,	0000	8,106.
PURCHASED SERVICED	100,9	350 027	041.	3,412.
- SUBSCRIPTIONS)63. 6,	651. 1	0,000.
MISCELLANEOUS		000.		0,000.
CONTRIBUTIONS	-1,590,	088		0,088.
		872. 10,806	,641. 5,74	4,231.
- to transford expenses Add lines 1 tilloug				
Complete this line only if the organ	nzución			
and in column (B) joint costs from a com	billeo			
educational campaign and fundraising solicitat	tion.			
educational campaign and tendensity = 1400 generations = 14000		1		Form 990

NATIONAL ASSOCIATION OF COUNTIES

iorm 990 Part X) (20 E	Balance Sheet	(A) Beginning of year			(B) End of year
<u></u>			Beginning of year			
				1 2		6,621,319.
1	(Cash - non-interest-bearing	6,993,992.	3		
	2 5	Cash - non-interest-bearing Savings and temporary cash investments	0 657 467	4		2,287,689.
			2,657,467.			
1						
. I.				5 5	999999999 	
		to and highest compensated employees. Compensated		<u> </u>		
1						
ł						
		4958(f)(1)), persons described in section 4950(0)(0)(2), and (c)(9) voluntary		6	100000	
		4958(f)(1)), persons described in section 4950(0)(4)(4), (2), (2), (2), (2), (2), (2), (2), (2		7	+	
ł				8	+	
ets	7		441,506.		+	300,463.
Assets	8		441,500			
- 1	9	Inventories for sale or use Prepaid expenses and deferred charges				
	10a	a cost of other of the original of the origina	2,739,181	. 10		2,446,242.
ł		E 550 371	19,912,282	. 11		19,949,941.
1	t	Less: accumulated depreciation	19,912,202	. 12		2,392,529.
1	11	Investments - publicly traded securities	3,000,550	1:		
	12	Investments - publicly traded securities Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11		1		
1	13					547,209.
1	14	Intangible assets	36,216,547	• 1		21 545,392.
	15			. 1	_	1,402,212.
	16		1,003/02-	1	8	
	17			. 1	9	3,370,987.
	18				20	
	19	Deferred revenue D Tax-exempt bond liabilities			21	
	20	 Tax-exempt bond liabilities Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D Escrow or custodial account liability. Complete Part IV of Schedule D 				
es	2	 Escrow or custodial account liability. Complete Faith or one Escrow or custodial account liability. Complete Faith or one Payables to current and former officers, directors, trustees, key employees, Payables to current and former officers, and disgualified persons. Complete Part I 	u			
Liabilities	2	and amployees, and organist	n h		22	
iab		of Schedule L			23	
		of Schedule L 23 Secured mortgages and notes payable to unrelated third parties			24	
	2	 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties Unsecured notes and loans payable to unrelated third 			1	
	2	 Unsecured notes and loans payable to unrelated third unservice including federal income tax, payables to related third Other liabilities (including federal income tax, payables to related third other liabilities and included on lines 17-24). Complete Part X of 	f	Į	1	1,213,219.
	2	25 Other liabilities (including federal income tax, payables to feature 25 parties, and other liabilities not included on lines 17-24). Complete Part X of parties, and other liabilities not included on lines 17-24.	2,785,67	1.	25	5,986,418.
		parties, and other liabilities not included on income and set of the set of t	8,751,63	35.	26	
		Schedule D 26 Total liabilities. Add lines 17 through 25 X and complete the term of term	ete			
	-+-	Organizations that follow SFAS (17, check hore				28,558,974.
		lines 27 through 29, and lines 33 and 34.	27,464,9	12.	27	2075507-
	ő	lines 27 through 29, and lines 33 and 04. 27 Unrestricted net assets			28	
-		28 Temporarily restricted net assets			29	
ć	Ra	28 Temporarily restricted net assets 29 Permanently restricted net assets □ and	d			
	n	Organizations that do not follow SFAS TTY, cheering			30	
I	<u>ц</u>	complete lines 30 through 54.			30	
	tsc	30 Capital stock or trust principal, or current funds			31	
	sse	 30 Capital stock or trust principal, or current tunus 31 Paid in or capital surplus, or land, building, or equipment fund 31 and the page multiple income, or other funds 		12	-	28,558,974
	Net Assets or Fund Balances	 Paid-in or capital surplus, or land, building, or equipment term Paid-in or capital surplus, or land, building, or equipment term Retained earnings, endowment, accumulated income, or other funds 	27,464,9	12	. 33	34,545,392
	Š		36,216,5	<u>,4 /</u>	• 34	Form 990 (2011
		 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 				

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53-0190321 Page 12

	ASSOCIATION	OF	COUNTIES
NATITONAL	ASSOCIATION	<u></u>	00011

_	NATIONAL ABDOCING					$\overline{\mathbf{C}}$
Form	990 (2011) NATIONAL Meeting XI Reconciliation of Net Assets		<u></u>		<u> </u>	<u> </u>
3.8	Check if Schedule O contains a response to any in	1	18,	514,	06	$\frac{7}{2}$
1 2 3 4 5	Total revenue (must equal Part VIII, column (A), line 12) Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	2 3 4 5 6	1, 27,	550, 963, 464 -869 ,558	,19 ,91 ,13	<u>5.</u> 2. 3.
	Net assets or fund balances at end of year. Combine lines 3, 4, and a					X
Pa	Net assets or fund balances at end of year. Comment art XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII				/es	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedul If the organization's financial statements compiled or reviewed by an independent accountant?	e O. he audit,		2a 2b 2c	x x	<u>x</u>
	 c If "Yes" to line 2a or 2b, does the organization of an independent accountant? review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization changed either its oversight process or selection process during the tax year, explain in So If the organization process during the tax year, explain in So If the organization process or selection process during the tax year, explain in So If the organization process during the tax year. 	hedule C Jed on a Single A). udit	3a		x
	 3a As a result of a federal award, was the organization required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? If the organization did not undergo the required audit or audits? b If "Yes," did the organization undergo the required audit or steps taken to undergo such audits. 	quired a	JULI	<u>3b</u>		
	 Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits? 	<u></u>		Forn	n 99((2011)

or audits, explain why in Schedule O a

+00010

				OMB No. 1545-0047					
	—	- Compaign and L	_obbying Ac	tivities	2011				
SCHEDULE C	SCHEDULE C Political Campaign and Lobbying Activities								
(Form 990 or 990-EZ)	For Organizatio	anizations Exempt From Income Tax Under section 501(c) and section 527 the if the organization is described below. Attach to Form 990 or Form 990-EZ.			Open to Public Inspection				
	Complete if the	organization is described below							
Department of the Treasury Internal Revenue Service		► See separate instr 90, Part IV, line 3, or Form 990-F Parts I-A and B. Do not complete F	Z Part V, line 46 (Po	olitical Campaign Activ	ities), then				
ans	wered "Yes" to Form 9	90, Part IV, line 3, or Form 990-	,, Part I-C.						
If the organization and	nanizations: Complete F	arts I-A and B. Do not complete r	A and C below. Do no	t complete Part I-B.					
If the organization answered "Yes" to Form 990, Part IV, line 0, error on the operative of the organization answered "Yes" to Form 990, Part IV, line 0, error on the operative of the organization of the org									
Section 501(c) (orner	rations: Complete Part I	A only.	CZ Part VI. line 47 (L	_obbying Activities), th	en an turb				
Section 527 organiz	wered "Yes" to Form	990, Part IV, line 4, or Form 990- ed Form 5768 (election under sec IOT filed Form 5768 (election under	tion 501(h)): Complet	e Part II-A. Do not comp	lete Part II-B.				
If the organization and	ragnizations that have fi	ed Form 5768 (election under sec IOT filed Form 5768 (election under 990, Part IV, line 5 (Proxy Tax), c		mplete Part II-B. Do not	complete Part II-A.				
 Section 501(c)(3) 01 Section 501(c)(3) 01 	rganizations that have N	IOT filed Form 5768 (election und	er section oo ranne a	V, line 35c (Proxy Tax)	, then				
 Section 501(c)(3) 0 	swered "Yes" to Form	IOT filed Form 5768 (election und 990, Part IV, line 5 (Proxy Tax), c Complete Part III.	or Form 350 LL		in the stification number				
If the organization and	(5), or (6) organizations:	Complete Part III.		Employ	Employer identification number				
 Section 501(c)(4), (5), 01 (0) 01guni200		NUTES		53-0190321				
Name of organization	NATTONAL A	SSOCIATION OF COL	ction 501(c) or is	a section 527 org	anization.				
Com	plete if the organiz	SSOCIATION OF COU ation is exempt under se							
Part I-A Com			tion activities in Pat	t IV.					
	tion of the organization	's direct and indirect political cam	ipaign activities in rea	▶\$_					
1 Provide a descrip	ption of the organization	's direct and indirect political carr							
2 Political expendit	tures								
3 Volunteer hours			-tion 501(c)(3).						
	plote if the organi	zation is exempt under su rred by the organization under se rred by organization managers ur	ection Sononer	►\$					
					No No				
 Enter the amount 	nt of any excise tax incl	urred by organization managers ur 955 tax, did it file Form 4720 for th	aer section 4000						
a Entor the amount		10/ IC	IS year :		Yes No				
3 If the organizati	ion incurred a section	955 tax, did it file Point 4720 for a			1(0)				
4a Was a correction	n made:		ection 501(c), ex	cept section 501	c)(3).				
b If "Yes," descri	be in Part IV.	ization is exempt under s the filing organization for section tion's funds contributed to other o	section of res	activities					
Part I-C Col	historia expended b	the filing organization for section	527 exempt function	ion 527					
 Enter the amound 	unt directly expended a	tion's funds contributed to other o	organizations for seet	▶ 9	·				
2 Enter the amount									
					\$No				
3 Total exempt f	function experiate enditoreer	20-POL for this year?			Yes No				
line 17b				ical organizations to wh	ich the filing organization				
n Duthe filing (vrganization me rom .	EIN)	of all section oz / point	1001 ÷191	us a amount of DOIITICAL				
5 Enter the name	nes, addresses and emp	20-POL for this year loyer identification number (EIN) of on listed, enter the amount paid fr nptly and directly delivered to a s dditional space is needed, provide	om the tiling organiza	nization, such as a sepa	rate segregated fund of a				
contributions	received that were pr	nptly and directly delivered to a s dditional space is needed, provide		(d) Amount paid from	(e) Amount of political				
		(b) Address	(c) EIN	filing organization's	directly				
(a)	Name			funds. If none, enter -(dolivered to a separate				
					political organization.				
					If none, enter -0				
		_							
		ł		Cahad	ule C (Form 990 or 990-EZ) 201				
		Least nuctions for Form	990 or 990-EZ.	Scheu	µ				

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For Paperwork Reduction Act Notice, see the Instructions for F LHA

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		TATTON OF (COUNTIES	53-01	90321 Page 2
dule C (Form 990 or 990 EZ) 2011 NAT t II-A Complete if the organiz	IONAL ASSOC	IATION OF	1(c)(3) and file	d Form 5768	
LUC Complete if the organiz	ation is exempt u	Inder seduer e			
t II-A Complete if the organiz (election under section neck if the filing organization b	501(h)).	Der	+ IV each affiliated q	roup member's name	e, address, EIN,
(election and anization t	pelongs to an affiliated	group (and list in Par	I IV Each annuar o		
neck if the filing organization c expenses, and share of	excess lobbying expen	ditures).			
	checked box A and "lin	nited control" provision	ons apply.	(a) Filing	(b) Affiliated group
heck if the filing organization t				organization's	totals
(The term "expenditur	n Lobbying Expenditu es" means amounts p			totals	
Total lobbying expenditures to influence	e public opinion (grass	s roots lobbying)			
 Total lobbying expenditures to influence Total lobbying expenditures to influence Gold lines 	e a legislative body (d	irect lobbying)			
- Total lobbying expenditures to initiative					
Tetal Jobbying expenditures (aud intoo					
- Other exempt purpose expenditures					
 Total exempt purpose expenditures (a f Lobbying nontaxable amount. Enter the 	the fol	lowing table in both c	columns.		
Labbying nontaxable amount. Enter u	ic anice	ng nontaxable amou	int is:		
If the amount on line 1e, column (a) or (b		- mount on line 1e.			
Not over \$500,000		A COL of the exces	ss over \$500,000.		
Quer \$500,000 but not over \$1,000,0		$1 \rightarrow 400\%$ of the exces			
Quer \$1,000 000 but not over \$1,500		olus 5% of the excess	s over \$1,500,000.		
Over \$1,500,000 but not over \$17,00] [
Over \$17,000,000	\$1,000,000)			
Over \$17,000,000					
enterrable amount (enter	er 25% of line 11)	•••••••			
g Grassroots nontaxable amount (ente	or less, enter -0-				
a the stling to from line 10 il 2010					
a the stling to from line 10 il 2010	or less, enter -0-	·····	tion file Form 4720		Yes N
 h Subtract line 1g from line 1a. if zero i Subtract line 1f from line 1c. If zero i If there is an amount other than zero 	or less, enter -0 o on either line 1h or lir	ne 1i, did the organiza	ation file Form 4720		Tes Land
 h Subtract line 1g from line 1a. if zero i Subtract line 1f from line 1c. If zero i If there is an amount other than zero 	or less, enter -0 o on either line 1h or lir	ne 1i, did the organiza	ation file Form 4720		Tes Land
 h Subtract line 1g from line 1a. if zero i Subtract line 1f from line 1c. If zero j If there is an amount other than zero reporting section 4911 tax for this y 	or less, enter -0- o on either line 1h or lir rear? 4-Year Aver	ne 1i, did the organiza aging Period Under	ation file Form 4720 Section 501(h)	omplete all of the five	Tes Land
 h Subtract line 1g from line 1a. if zero i Subtract line 1f from line 1c. If zero j If there is an amount other than zero reporting section 4911 tax for this y 	or less, enter -0- o on either line 1h or lir rear? 4-Year Aver ations that made a se	ne 1i, did the organiza aging Period Under action 501(h) election	ation file Form 4720 Section 501(h) n do not have to co es 2a through 2f on	omplete all of the five 1 page 4.)	
 h Subtract line 1g from line 1a. If zero i Subtract line 1f from line 1c. If zero j If there is an amount other than zero reporting section 4911 tax for this y 	or less, enter -0- o on either line 1h or lir rear? 4-Year Aver ations that made a se	ne 1i, did the organiza aging Period Under action 501(h) election	ation file Form 4720 Section 501(h) n do not have to co es 2a through 2f on	omplete all of the five 1 page 4.)	e
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Schedule C (Form 990 or 990-EZ) 2011 NATIONAL ASSOCIATION OF COUNTIES 53-0190321 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)		(b)	
ch "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	Yes	No		Amoun	ıt
lobbying activity.					
to a farming national state or					
During the year, did the filing organization attempt to influence foreign, national, state or					
During the year, did the filing organization attempt to influence rologity me local legislation, including any attempt to influence public opinion on a legislative matter					
or referendum, through the use of:	_				
or referendum, through the use of: Volunteers?					<u></u>
Volunteers?					
Paid staff or management (include compensation in expenses reported and Media advertisements?					
Media advertisements?					
Media advertisements? Mailings to members, legislators, or the public? Mailings to members, legislators, or the public?					
Publications, or published or broadcast statements					
Grants to other organizations for lobbying purposed in the are logislative body?					
Direct contact with legislators, their statis, governmented loctures or any similar means?					
Rallies, demonstrations, seminars, conventione, a					
Other activities?			<u></u>		
i Total Add lines 1c through 11				<u></u>	<u></u>
- Did the activities in line 1 cause the organization of a	<u>83333333</u>		Ī		
bid the dotting and the amount of any tax incurred under section 4912					
 bit fire advantee amount of any tax incurred under section 4912 b If "Yes," enter the amount of any tax incurred by organization managers under section 4912 c If "Yes," enter the amount of any tax incurred a section 4912 tax, did it file Form 4720 for this year? 					<u></u>
 If "Yes," enter the amount of any tax incurred by organization managers under section 2. If "Yes," enter the amount of any tax incurred a section 4912 tax, did it file Form 4720 for this year? If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? 	ction 501	(c)(5), (or se	ction	
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501(c)(6).				VAC	140
			1	X	
			1	X	X
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SCHEDULE D (Form 990)	Complete if the organ	Financial Statements hization answered "Yes," to Form 990, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. 200. ▶ See separate instructions.	OMB No. 1545-0047 2011 Open to Public Inspection
-	Attach to Form	990. ► See separate instructions.	
Department of the Treasury Internal Revenue Service			53-0190321
Name of the organization	NATIONAL ASSOCIATIO	ON OF COUNTIES d Funds or Other Similar Funds e 6.	or Accounts. Complete in the
Organization	s Maintaining Donor Advise		(b) Funds and other accounts
Part I Organization	vered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	
 2 Aggregate contribution: 3 Aggregate grants from 4 Aggregate value at ence 5 Did the organization initiare the organization initiate purposes (s) of conservation of the preservation of the tax year. a Total number of conservation of the tax is a total number of con	form all grantees, donors, and donor s and not for the benefit of the donor benefit? on Easements. Complete if the vation easements held by the organiz land for public use (e.g., recreation of atural habitat f open space rough 2d if the organization held a qu servation easements	writing that the assets held in donor advises s exclusive legal control? advisors in writing that grant funds can be or donor advisor, or for any other purpose organization answered "Yes" to Form 990, ation (check all that apply). or education) Preservation of a n Preservation of a ce ualified conservation contribution in the for	Part IV, line 7. No Part IV, line 7. No No Part IV, line 7. No No No No No No No No No No
 d Number of conserv listed in the Nation 3 Number of conserv year ▶ 	al Register	ed, released, extinguished, or terminated b on easement is located ►	y the organization during the tax
			turing the year
violations, and en 6 Staff and volunter 7 Amount of expen 8 Does each conse and section 170(er hours devoted to monitoring, inspecting ses incurred in monitoring, inspecting ervation easement reported on line 2(h)(4)(B)(ii)?	ecting, and enforcing conservation easements of g, and enforcing conservation easements of section	during the year on 170(h)(4)(B)(i) xpense statement, and balance sheet, and cribes the organization's accounting for
conservation ea	sements: Maintaining Collect	Ions of Art, meter	hast works of art,
1a If the organizati historical treasu the text of the f b If the organizati treasures, or o	on elected, as permitted under SFAS ures, or other similar assets held for p ootnote to its financial statements th ion elected, as permitted under SFAS ther similar assets held for public ext as items:	5 116 (ASC 958), not to report in the public exhibition, education, or research in that describes these items. S 116 (ASC 958), to report in its revenue st hibition, education, or research in furtheran	furtherance of public service, provide, mathematic tatement and balance sheet works of art, historic ce of public service, provide the following amoun \$ \$ \$
(i) Revenues	included in Form 990, Part Vin, line	·	r financial gain, provide
(ii) Assets inc	iuded in restrict works of art, hi	storical treasures, or other in these it	ems:
2 If the organiza	ation received of these he reported unc	ler SFAS 116 (ASC 958) Toldards	▶ \$
the following	amounts required to be reported in a mounts required to be report vill, line 1	ler SFAS 116 (ASC 958) relating to these the	▶ \$
a Revenues inc	Juded in Form 990. Part X		Schedule D (Form 990) 2
A sects inclus	led in Form 990, Factor		Schedule D (Charles)
LHA For Paperw	ork Reduction Act Notice, see the	nstructions for Form soci 2.2	

chedule D (Form 990) 2011 NATIONAL Part III Organizations Maintaining Col	ASSOCIATIC	Historica	al Trea	sures, or Ot	her Si	milar	Assets	(continue	<u>d)</u>	-
Part III Organizations Maintaining Col Using the organization's acquisition, accession,	and other records.	check any c	of the fol	lowing that are a	a signific	ant use	of its col	lection ite	ms	
3 Using the organization's acquisition, accession,	, and other receiver,	•								
(check all that apply):	d			nge programs						
a Public exhibition	e	Other								-
b Scholarly research	-	_						(N.)		
 c Preservation for future generations 4 Provide a description of the organization's collection 	etions and explain h	now they fu	rther the	organization's	exempt	purpose	in Part X	av.		
4 Provide a description of the organization's colle	ections and explain f	art historic	al treasu	res, or other sin	nilar ass	ets		ſ	No	_
E During the year, did the organization solicit or i	eceive domanerie		المحدي	action?		<u>.</u>	<u>L</u>	res		<u>,</u>
5 During the year, did the organization solicit or r to be sold to raise funds rather than to be main	tained as part of the	s if the oroa	nization	answered "Yes	" to Forr	n 990, F	Part IV, lin	ie 9, or		
Part IV Escrow and Custodial Arrange										-
reported an amount on Form 990, Part	A, IIIIe Z I.		ibutions	or other assets	not incl	uded				
reported an amount on Form 990, Part 1a Is the organization an agent, trustee, custodia	n or other intermedia	iry for contr	10011011-					Yes	N	0
					_					
on Form 990, Part X? b If "Yes," explain the arrangement in Part XIV a	nd complete the foll	Swing table	•					Amount		
						1c				
c Beginning balance						1d				
c Beginning balanced Additions during the year						1e				
d Additions during the yeare Distributions during the year						1f				
e Distributions during the year f Ending balance			•••••					Yes		No
 f Ending balance 2a Did the organization include an amount on Formation inc	orm 990, Part X, line	21?								
2a Did the organization include an amount of Part XIV					10					
b If "Yes," explain the arrangement in Part XIV. Part V Endowment Funds. Complete it	the organization an	swered "Ye	s" to Fo	rm 990, Part IV,	line IU.	Throp M	ears back	(e) Four	vears ba	ick
Part V Endowment Funds. Completen	(a) Current year	(b) Prior	year	(c) Two years b	ack (d)	Three y	Ears Dack			
1a Beginning of year balance										
b Contributions										
c Net investment earnings, gains, and losses										
d Grants or scholarships				T						
 Other expenditures for facilities 										
and programs		+						_		
f Administrative expenses		+								<u></u>
g End of year balance				(a)) held as:						
 Durvide the estimated percentage of the cu 	rrent year end balan	ce (line 1g,	CONTINU							
Build decignated or quasi-endowment		%								
 b Permanent endowment 	%									
c Temporarily restricted endowment	%									
The percentages in lines 2a, 2b, and 2c sho	ould equal 100%.				ad for th		ization			
The percentages in lines 2a, 2b, and 2c sho 3a Are there endowment funds not in the post	session of the organ	ization that	are held	and administer	eatorti	ie organ			Yes	No
								3a(i)		
by: (i) unrelated organizations								3a(ii		
(i) unrelated organizations						•••••				
(ii) related organizations	an listed as required	d on Sched	ule R?							
 (i) related organizations b If "Yes" to 3a(ii), are the related organization 	he erconization's er	dowment f	unds							
									ook valu	
Part VI Land, Buildings, and Equit	(a) Cost c		(b) C	ost or other	(c) A	ccumul	ated	(a) BC	OK Val	16
Description of property	basis (inve			sis (other)	de	preciati	on			
	Dasis (inte					<u></u>				
1a Land									24 6	571
b Buildings			2	832,035.	1,	307,	464.	1,5	24,5	$\frac{1}{2}$
c Leasehold improvements	l		41			227	992.	5	37,0	
G Leasenoid interesterio		1	1	765,085.		2211	110			
d Equipment			1,	765,085.		023,	865.	3	84,	
d Equipment e Other Total. Add lines 1a through 1e. (Column (d) mu			3,	765,085. 408,443.	3,	023,	865.	3	84,	242

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AL ASSOCIATION OF COUNTIES

53-0190321 Page 2

53-0190321 Page **3**

 ASSOCIATION	OF	COUNTIES

NATIONAL AS	SOCIATION OF C		
hedule D (Form 990) 2011 NATIONAL A3. art VII Investments - Other Securities. See	e Form 990, Part X, line 12.	(c) Method of val	uation:
(a) Description of security or category	(b) Book value	Cost or end-of-year m	larket value
(including name of security)	(0) = -		
(Including harrie of early)			
Financial derivatives			
Closely-held equity interests			
	2,392,529.	COST	
(A) INVESTMENT INFORMATION (B) SERVICES CORPORATION	2,392,525		
(B) SERVICED			
(C)			
(D)			
(E)			
(F)			
(G)			
<u>(H)</u>	2,392,529.		
(I) tal. (Col (b) must equal Form 990, Part X, col (B) line 12.)	2,392,525	12	
otal. (Col (b) must equal Form 990, Part X, col (B) line 12.)	See Form 990, Part X, line	13. (c) Method of	valuation:
Part VIII Investments - Programme	(b) Book value	Cost or end-of-yea	r market value
(a) Description of investment type	(6) Beert tan		
(1)			
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10) (10) (10) (10) (10) (10) (10) (10)			(b) Book value
(10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) Part IX Other Assets. See Form 990, Part X	(line 15.		(b) BOOK Value
Part IX Other Assets. See Form 990, Futt	(a) Description		
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10) (10) Part X, co.	<u>I (B) líne 15.)</u>		
(10) Total. (Column (b) must equal Form 990, Part X, co. Part X Other Liabilities. See Form 990,	Part X, line 25.	(b) Book value	
Part X Other Liabilities. See Tomoses, (a) Description of liabilit		(b) BOOK VALUE	
(a) Description of Mazaria	·		
(1) Federal income taxes	THAT LEASE	126,440.	
	TTAL HERIOL	479,031.	
DEFERRED COMPENSATION		1,672,527.	
(3) DEFERRED RENT (4) DEFERRED RENT		-1,064,779.	
(4) DEFERRED RELL		-1/00-1	
(4) DEFERRED AFFILIATES (5) DUE TO AFFILIATES			
(6)			
(7)			
(8)			
(9)			
(10)		1 212 219	
(11)	(D) (inc. 25.)	► 1,213,217 •	ability for uncertain tax positions under
Total (Column (b) must equal Form 990, Part X,	col (B) line 23.) he footnote to the organization's fina	ncial statements that reports the right	Schedule D (Form 990)
(10) (11) Total. (Column (b) must equal Form 990, Part X, FIN 48 (ASC 740) Footnote In Part XIV, provide the text of t FIN 48 (ASC 740).	col (B) line 23.7 he footnote to the organization's fina	ncial statements that reports and a s	Schedule D (Form 990)

		COUNTER	5	3-0190321 Page 4
	NATIONAL ASSOCIATION OF of Change in Net Assets from Form 99	COUNTIES	ncial Statem	ents
Schedule D (Form 990) 2011			1	18,514,067.
Part XI Reconciliation	Part VIII, column (A), line 12)		2	16,550,872.
1 Total revenue (Form 990, F	Part VIII, column (A), line 12) , Part IX, column (A), line 25)		3	1,963,195.
2 Total expenses (Form 990	, Part IX, column (A), line 25) year. Subtract line 2 from line 1		4	-1,227,444.
3 Excess or (deficit) for the	/ear. Subtract line 2 from line 1 es) on investments		5	
4 Net unrealized gains (loss	es) on investments e of facilities		6	
5 Donated services and use	e of facilities		7	250 211
6 Investment expenses	·····	•••••	8	<u>358,311.</u> -869,133.
7 Prior period adjustments	IV.)		9	1,094,062.
8 Other (Describe in Fait A	IV.) Add lines 4 through 8	- 2 ood 9	10	1,094,002.
9 Total adjustments (net).	Add lines 4 through 8	tements With Re	venue per R	eturn
10 Excess or (delicit) for the	Add lines 4 through 6 year per audited financial statements. Combine line n of Revenue per Audited Financial Statements	Itemen		1 11,922,9120
Part All Reconcentrations and	d other support per audited financial statements			
1 Total revenue, game, and	e 1 but not on Form 990, Part VIII, line 12:	2a - 1,	227,444.	
2 Amounts included on min	e 1 but not on Form 990, Fait this			-
a Net Unrealized game and u	investments	2c		4
b Donated services of prior year	se of facilities	2d	358,311.	
c Recoveries of prior year	grants XIV.)			10 701 675.
e Add lines 2a through 2	XIV.)			3 18,791,0750
e Add lines ze through a				
3 Subtract line ze from in	Form 990, Part VIII, line 12, but not on line 1:	4a		-
Line at aveances		4b	-277,608	
				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
a Add lines 4a and 4b	es 3 and 4c. (This must equal Form 990, Part I, line ion of Expenses per Audited Financial	12.)		Beturn
	es 3 and 4c. (mis meet	Statements with		1 16,828,480.
Part XIII Reconciliat	ion of Expenses per Addited I me		••••••	
1 Total expenses and lo	ion of Expenses per Audited Financial esses per audited financial statements			
2 Amounts included on	line 1 but not on Form 990, Part IX, line 25:	2a		
a Donated services and	line 1 but not on Form 990, 1 are by a	2b		
b Prior year adjustment	S	20	277,60	8.
c Other losses			211,00	2/1,000.
d Other (Describe in Pa	art XIV.)			<u>3</u> 16,550,872.
e Add lines 2a through	2d 1 line 1			
3 Subtract line 2e from	line 1	1 1		
A Amounts included o	n Form 990, Fait 17, mile 24	48		
 Investment expense 	IS NOT INCIDUED ON POINT	4b		4c 0.
b Other (Describe in P	es not included on Form 990, Fait Vill, inter- Part XIV.)			4c 5 16,550,872.
A dia lines 4a and 40	- OOD Port!	line 18.)		
5 Total expenses. Ad	d lines 3 and 40. (The		and 4: Part IV, lir	nes 1b and 2b; Part V, line 4; Part
Part XIV Suppleme	erital Informed and for Part II lines 3, 5,	and 9; Part III, lines 14		wadditional information.
Complete this part to pro	vide the descriptions require the Art XIII, lines 2d and 4	b. Also complete this p	HAS APPR	OPRIATE
PART X, LINE	vide the descriptions required for Part II, interest art XII, lines 2d and 4b; and Part XIII, lines 2d and 4 2: THE ASSOCIATION BELIEV ANY TAX POSITIONS TAKEN, F	ND THEREFOR	E, DID N	OT IDENTIFY ANY
SUPPORT FOR	ANY TAX POSITIONS TARENT	TAT TO THE	CONSOLID	ATED FINANCIAL
	X POSITIONS THAT ARE MATER	(IAL 10 11-		2010 AT A
UNCERTAIN IA		DECEMBE	ER 31, 20	11 AND 2010. AT 11
THE THE PROPERTY OF THE PROPER	X POSITIONS THAT ARE MAIN	NDED DEC		TTON BY
STATEMENTS D	VIII TO VIII	ADS ARE OPEN	N FOR EXA	MINATION BI
WINT MIM THE	E 2008 THROUGH 2011 TAX YE	ARD MILL		
MINIMOM, III				
TAXING AUTHO	DRITIES.			
TAXING ACTA		_		
				Schedule D (Form 990) 201
PART XI, LI	NE 8 - OTHER ADJUSTMENTS:			Schedulo - Comment

53-0190321 Page 5
Schedule D (Form 990) 2011 NATIONAL ASSOCIATION OF COUNTIES 53-0190321 Page 5
Schedule D (Form 990) 2011 [1112] Part XIV Supplemental Information (continued) 358, 311.
EQUITY IN EARNINGS OF SUBSIDIARY
AUDITED FINANCIAL STATEMENTS ARE CONSOLIDATED TO INCLUDE NACO AND THE FINANCIAL ACTIVITIES OF THE RELATED ORGANIZATIONS AS OUTLINED IN SCHEDULE R, PARTS II AND IV. THE RECONCILIATION IN PARTS XII AND XIII IS TO THE
R, PARTS II AND IV. THE RECONCILIENT
NACO PORTION OF THE AUDITED FINANCIAL STATEMENT.
Schedule D (Form 990) 201

3 Enter total number of other organizations listed in the line internet to the 990. LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

53-0190321 Page 2		(f) Description of non-cash assistance										Schedule I (Form 990) (2011)
	Form 990) (2011) NATIONAL ASSOCIATION OF COUNTIES NATION 990) Part IV, line 22.	A Method of valuation	of (c) Amount of (d) Amount of non- cash grant cash assistance (book, FMV, appraisal, other)					INTERNAL CONTROL SISTERAL	AL AND ACCOUNTING RECORDS	RETAINED BASED ON NACO'S DOCUMENT		80
	NATIONAL ASSOCIATION 01 NATIONAL ASSOCIATION 01	and its Grants and Other Assistance to Individuals in the United States 2 and its ordering and the Assistance to Individuals in the United States and Other Assistance to Individual space is needed.	Part III can be duplicated if administrated if administrated (b) Number of (a) Type of grant or assistance				Part N Supplemental Information. Complete this part to provide the information.	FINANCIAL MANAGEMENT POLICIES, ADEQUATE	VT PROCUREMENT	1 ()1	RETENTION POLICY.	

044
UII
m to Public
spection
cation number
321
Yes No
1b X
2 X
4a X
4b X
4a X 4b X 4c X
4b X 4c X
5a
5b
5a 5b
6a
6b
68 6b
7 8
8
8
dule J (Form 990)

							Page 2	
			TES	53-019032				
NATIONA NATIONA	AL ASSOCIATI	ON OF CONTRACT	rees. Use duplicate	copies if additional spa	elated organizations, (described in the instru	uctions, on row (II).	
officers, Directors, Trustees, Key Employees, and rights of compensation from the organization on row () and induced and the individual.	every and my of J.	report compensation	from the organizati		Ę į	commute for that indi-	vidual.	
or each individual whose compensation most of Form 990, Part VII.	m 990, Part VII.	e total amount of Fo	rm 990, Part VII, Sec	tion A, line 1a, applica	ole column (U) and (c)		Q	
in the mark and mark (B)(i)-(iii) for each listed it	Individual must equal the				0	(1)	(r) Camponention	
lote. The sum of columns (A/A) where a	In Breakdown of V	An Breakdown of W-2 and/or 1099-MISC	C compensation	(C) Retirement and	Nontaxable	Total of columns (B)(i)-(D)	reported as deferred	
		(ii) Bonus &	(iii) Other	other deferred	penetits		in prior Form 990	
	(I) Dase compensation	incentive	compensation	compensation				
(A) Name	-	compensation		000 00	21,542.	376,877.		
		0	42,791.	.060'67		21,233.		
	(1) 283,454	0	2,411.	1,039.	27.701.	194,155.		
			4					
1 LARRY NAME			73.					
	24,		1,414.	12,999.	12 279	119,677.		
2 DAVID KEEN	, 66					226,444		
NOSILGER	93,			21,881.	.0			1
	181,530				12 69	216,92		. 1
			5,97	21,				
4 EDWIN RUSADU	176,48				15 70			•1
			166.2	17,	107			• 1
5 BERT JARREAU	13					166,819.		•1
	9,518		α	18,08	777			• {
6 GEORGE GOODMAN	12		5			165.902		•1
				17,35	10,4			• {
7 JEFFREY ARNOLD	96,469	. 33,53	-					•
	•		82 0	15,162.	26,			•
, TOHN SAMARTZIS	110.866.		- 7					١
1	1211	0		•				
, PORFRT FOGEL								Į
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	(ii)							ĮĘ
15	()					ŭ	Schedule J (Form agol 2011	
	(ii)							
16			30					

Page 2

NATIONAL ASSOCIATION OF COUNTIES rmation, explanation, or descriptions required for Part I, lines 1a, MPANION TRAVEL IS PAID FOR THE F	AS PART OF THE COSTS RELATED TO THEIR TRAVEL EXPENSES BUSINESS REPRESENTING NACO. THESE AMOUNTS ARE REPORTED AS -2 AND 1099, AS REQUIRED.	R AIRLINE CLUB MEMBERSHIPS FOR THE EXECUTIVE DIRECTOR AND FEES ARE SHOWN ON W-2 OR 1099, RESPECTIVELY.	N A LOCAL SOCIAL CLUB ARE PAID BY NACO FOR THE USE OF LOYEES, AND ARE CONSIDERED ONE OF THE COSTS OF NETWORKING INESS RELATIONSHIPS FOR NACO.	LARRY NAAKE PARTICIPATES IN A 457(F) PLAN THAT WAS 3UT TO WHICH CONTRIBUTIONS HAVE NOT BEEN MADE SINCE THAT THE PLAN FOR 2011 WERE \$5,645.	Schedule J (Form 990) 2011
	UTIVE DIRECTOR AS PART E ON OFFICIAL BUSINESS ME ON FORMS W-2 AND 109	ARE SHOWN	E E C	NAAKE WHICH AN FOR	

HEDULE L rm 990 or 990-EZ)		"Yes" on	► Com Form 990,	DS With Inter plete if the organizatio , Part IV, line 25a, 25b, m 990-EZ, Part V, line 0 or Form 990-EZ. ►	26, 27, 28a, 28b, or	28c,			20 Open 1 Inspec		6			
al Revenue Service							Emp	<u>-0190</u>	yer identification number					
ne of the organizatio	n እጉጥተር	NAL AS	SOCIA	TION OF COUN	TIES	only).		0150						
art I Excess	Benefit Tra	ansaction	s (section	TION OF COOL 501(c)(3) and section 5	01(c)(4) organizations	990-EZ, F	Part V, I	ine 40b.						
Complete	if the organiza	ation answer	ed "Yes" or	501(c)(3) and section 5 <u>Form 990, Part IV, line</u>	(b) Description of		วก			:) Correc Yes	No			
	ame of disqua				(b) Description of					Tes				
(0) 11														
									+					
2 Enter the amount section 4958	t of tax impose	ed on the or , on line 2, a	ganization r bove, reimt	managers or disqualifie bursed by the organizat	d persons during the	year unde	er							
				Persons. on Form 990, Part IV, I					roved	(g) W	ritten			
Complet (a) Name of inte	te if the organ	mioant		(c) Original principal amount	(d) Balance due	defa	ult?	by boa	ittee?		ment?			
(a) Name of Inte person and pu	urpose	the organ	nization?	amount		Yes	No	Yes	No	Yes	No			
		To	From											
						+		+						
											+			
											+			
								+						
		+												
			+						1					
				▶	\$									
Comp	nts or Assis blete if the org e of interested	anization an	enefiting	es" on Form 990, Part I	ns. /, line <u>27.</u> ween interested pers organization	on and		(c) A	mount assis	and type tance	e of			
			1											

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53 -	01	190)32	1	Page 2

	TAT ACCOCTANTON OF CO	JUNTIES	53 <u>-0190</u>	321	Page 2
Schedule L (Form 990 or 990 EZ) 2011 NATIO	ving Interested Persons.			_	
D IN Ducinose Transactions invol				TATOL	
Complete if the organization answere	d "Yes" on Form 990, Part IV, line 28a, 2 (b) Relationship between interested	(c) Amount of	(d) Description of	organiz	aring of zation's
(a) Name of interested person	person and the organization	transaction	transaction		nues?
			PLEASE SEE	Yes	No X
NATIONAL ASSOCIATION OF C	OCOMMON BOARD MEMBER	0.	PLEASE SEE	+	- <u></u> -
NATIONIL INCOME				+	
					+
				_	+
					+
Part V Supplemental Information		na on Schedule I. (see	e instructions).		
Complete this part to provide addition	onal information for responses to questio	ins di denedalo E joo			
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLV	ING INTERES	TED PERSONS	:	
SCH L, PART IV, BUSINESS					
(A) NAME OF INTERESTED PI	ERSON:				
		UNDATION			
NATIONAL ASSOCIATION OF	COUNTIES RESEARCH FO	UNDATION			
	INTERESTED PERSON A	ND ORGANIZA	TION:		
(B) RELATIONSHIP BETWEEN	INTEREDIED THROUT				
COMMON BOARD MEMBERS					
COMMON BOARD MERIDING			OR ALL REP	ORTAE	3LE
(D) DESCRIPTION OF TRANS	ACTION: PLEASE SEE S	CHEDULE K I	OR HELL REP		
	O AND THE NACO RESEA	RCH FOUNDAT	TION.		
TRANSACTIONS BETWEEN NAC	O AND THE NACO REPHY				
		-			

n 990 (2011) NAT I rt VII Section A. Officers, Direc	ctors, Trustees, Key En	nplo	yees	<u>, ar</u> , ^^		gne		(D)	(E)	(F)
(A)	(6)			-,-	ion			Reportable	Reportable	Estimated
Name and title	Average hours	(ch			hat a	appl	y)	compensation	compensation	amount of other
	per	- (0.			T			from	from related organizations	compensation
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
RRY DIX		+	5		×	T	-	0.	0.	0.
ARD MEMBER	1.00	X		+	+-					
LLIAM DOHERTY	1 00	x				1		0.	0.	0.
ARD MEMBER	1.00		+	+			+			0
MES DWYER	1.00	X						0.	0.	0.
ARD MEMBER	1.00	1	-	+-	+-	+	+		•	0.
ERNARD FAZZINI	1.00	x l						0.	0.	
DARD MEMBER		-	-†	+		T			0	0.
AT FLEMING	1.00) >	C				1-	0.	0	
DARD MEMBER				T				0	0	. 0.
IKE GILLESPIE	1.00))	٢							
OARD MEMBER REGG GOSLIN							1	0	0	. 0.
OARD MEMBER	1.00	0 2	<u>x</u>		-+-	-+-	-+-			
ANE HAGUE	1.0	.						0	• 0	• 0.
OARD MEMBER	1.0	<u>u </u> :	<u>x</u>			-+-	-+-			0
AMES HAM	1.0	0	x					0	• 0	. 0
BOARD MEMBER	1.0	-+	<u>~</u> +	-+		-+-	-		0	0
ARC HAMLIN	1.0	0	x					0	•	•
BOARD MEMBER		- 1							c	0
ROGER HANEY	1.0	0	X			_		0	•	
BOARD MEMBER			_						. (). 0
BILL HANSELL BOARD MEMBER	1.0	0	X				-+		•	
NANCY HANSEN							1). (). 0
BOARD MEMBER	1.0	00	X			-+	-+			
LARRY HARVARD	1.0	ا مد ا	x).	0.0
BOARD MEMBER		10	^							0.
SALLY HEYMAN	1.0	00	x).	0. 0
BOARD MEMBER										0.
JACK HILBERT	1.	00	Х						0.	· ·
BOARD MEMBER									0.	0.
CAROL HOLDEN BOARD MEMBER	1.	00	X		_				•	
STEPHEN HOLT		~ ~				l			0.	0.
BOARD MEMBER	1.	00	X			+	+-	+		
HELEN HOLTON	1	00	x	1	ł				0.	0.
BOARD MEMBER	1.	00	^	+	+	+-	+-	+		0.
RONALD HOUSEMAN	1	00	X						0	0.
BOARD MEMBER	<u>+</u>									

m 990 (2011) NATION Int VII Section A. Officers, Director	s, Trustees, Key Em	ploy	/ees	, an	ан	gne	SIU	(D)	(E)	(F)
(A)	(B)				,			(D) Reportable	Reportable	Estimated
Name and title	Average		F	osit	tion	امم		compensation	compensation	amount of
	hours	(ch	eck		nat a	apply	<u> (v</u>	from	from related	other compensation
	per week	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
MES HUDELSON				0	×		-	0.	0.	0.
DARD MEMBER	1.00	X			+					
THONY HYDE	1.00	x		1				0.	0.	0.
ARD MEMBER	1.00	1		+	+	+	+			0.
ERALD HYLAND	1.00	X						0.	0.	0.
DARD MEMBER	1.00		+	1	+	-	1-		0	0.
JACKSON	1.00	x		1				0.	0.	
DARD MEMBER		1	+-	1-	1				0.	0.
IKE JACOBS	1.00	X	:					0	•	,
OARD MEMBER								0	0	0.
ICHAEL JEANES	1.00	X		_				0	•	
OARD MEMBER YNTHIA JOHNSON								0	0	. 0.
COARD MEMBER	1.00) 7	<u> </u>				-+-			
ANDY JOHNSON			,					0	. 0	. 0
BOARD MEMBER	1.00) 2	<u>-</u> -			-+-				
TIM JOSI	1.0		x					0	. 0	. 0
BOARD MEMBER	1.00			-+-	-+-	+	-+			0
AARON KENNARD	1.0	0	x					0	. 0	•
BOARD MEMBER		-+-		-	-					0
ANDREW KIMMEL	1.0	0	x				_		<u> </u>	•
BOARD MEMBER				_).). 0
BILLY KING	1.0	0	X	_		_+				
BOARD MEMBER LEE KLEIN). (). 0
BOARD MEMBER	1.0	0	X		+	-+				
ELIZABETH KNISS	1 1 0		v						0.	D . C
BOARD MEMBER	1.0		^							
LESLIE KORGEL	1.0		X						0.	0. (
BOARD MEMBER										0.
KUALII KIPUKAI	1.0	00	x						0.	<u>v</u> .
BOARD MEMBER			-						0	0.
ANGELO KYLE	1.0	00	X						0.	
BOARD MEMBER									0.	0.
DONALD LARSON BOARD MEMBER	1.	00	X							
CHRISTIAN LEINBACH		~ ~			1				0.	0.
BOARD MEMBER	1.	00	X	+	+-	+	+	+		
LEIGH LENZMEIER	1	00	x		1				0.	0.
BOARD MEMBER	1.	00	1				_ _			

m 990 (2011) NATIO art VII Section A. Officers, Directo	rs, Trustees, Key Em	ploy	ees	i, ar	ап	igne	510	(D)	(F)	(F)
(A)	(B)			10	9				Reportable	Estimated
Name and title	Average			Posi		. 1		Reportable compensation	compensation	amount of
	hours	(ch	eck	all t	hat a	appi	<u>y)</u>	from	from related	other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099·MISC)	compensation from the organization and related organizations
ARRY LIDDELL	1 00	x						0.	0.	0.
DARD MEMBER	1.00	X			+					
ARK LUTTRELL	1 00	x						0.	0.	0.
DARD MEMBER	1.00	^		+-	+ -	-	+			<u> </u>
ARLAN MADZEN	1.00	x	1	ł				0.	0.	0.
OARD MEMBER	1.00		+	+	+ -	+	+			0
EE MAY	1.00	x		1				0.	0.	0.
OARD MEMBER	1.00	1	+	+	+-	+	+			0.
IMOTHY MCCORMICK	1.00	x						0.	0.	0.
OARD MEMBER		+	+	+	+	-			0	0.
ICHAEL MCGINLEY	1.00	X						0	. 0.	·
OARD MEMBER		+				-			0	0.
ATTIE MCKINNEY	1.00	X	:					0	•	·
OARD MEMBER			1					0	0	0.
AURA MERRILL	1.00) X	[]_					0	•	•
BOARD MEMBER								0	0	0.
KAREN MILLER BOARD MEMBER	1.00) X	<u> </u>						•	
JUDY ANN MILLER								0	0	. 0
BOARD MEMBER	1.00	2 2	<u> </u>				_		•	
CAROL MOERHLE								0	0	. 0
BOARD MEMBER	1.00	0 2	<u>x</u>	-+	_	-+	-+-			
WAYMON MUMFORD	1.0							C	0	. 0
BOARD MEMBER	1.0		X	-+						
JANIE MURRAY	1.0	\mathbf{A}	x					C	00	0. 0
BOARD MEMBER	1.0	<u> </u>	≏┼	- +	-+	-+	-†			
CAROL MOERHLE	1.0	0	x					(). (). 0
BOARD MEMBER). O
WAYMON MUMFORD	1.0	0	x					().	<u>) </u>
BOARD MEMBER		-+								o. 0
JANIE MURRAY	1.0	0	x						D.	<u></u>
BOARD MEMBER										0.
PAUL NAGUIN	1.0	0	Х						0.	
BOARD MEMBER			-						0.	0.
O.D. NETTER BOARD MEMBER	1.0	00	X		_	-	┞		•	
FRANK NEWTON					1				0.	0.
BOARD MEMBER	1.0	00	X							
DAVID NICHOLSON		~ ~							0.	0.
BOARD MEMBER	1.0	00	X	1	1	1	1	└─┼─────		

n 990 (2011) NATION rt VII Section A. Officers, Directors	AL ASSOCIA , Trustees, Key En	ploy	yees	s, ar	nd H	ighe	est C	ompensated Employe	es (continuea)	(F)
(A)	(B)			(C	;)			(0)	(-)	(r) Estimated
Name and title	Average				tion			Reportable	Reportable compensation	amount of
	hours	(ch	eck	all t	hat a	appl	<u>y)</u>	compensation from	from related	other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
ATTY O'CONNOR	1.00	v						0.	0.	0.
DARD MEMBER	1.00	X				+				
ATRICK PADILLA	1 00	x			1			ο.	0.	0.
DARD MEMBER	1.00	_ ^		+ -		+-				
DNI PAPPAS	1.00	x						0.	0.	0.
DARD MEMBER	1.00	1	+	+	+	+	+			-
JANE PATRICK	1.00	X						0.	0.	0.
DARD MEMBER			+-		+-	-	+			
AUL PEARCE	1.00	x						0.	0.	0
OARD MEMBER		+	+ -	+	+	+	-			0
HESTER PINTARELLI	1.00	X						0.	0.	
OARD MEMBER		-	-	1	+-					0
OSEPH PONTANILLA	1.00	X						0.	. 0.	
OARD MEMBER									0.	0
ONI PRECKWINKLE	1.00	X	:					0	•	·
OARD MEMBER								0	0	0
COARD MEMBER	1.00) X	<u> </u>					0	•	,
YNDA RING ERICKSON								0	0	. 0
BOARD MEMBER	1.00) }	<u>۲</u>	_		_	_		•	
ANUEL RUIZ								0	0	. 0
BOARD MEMBER	1.00) 2	<u> </u>			-+-	-+-		•	
JOHN RUSSELL								0	0	. 0
BOARD MEMBER	1.0	0 2	X	-+-		-+-	-+-			
HARVEY RUVIN	1 1 0							0	0	• 0
BOARD MEMBER	1.0	<u> </u>	<u>~</u>		-+-					
WILLIAM RYAN	1 0		v					0	. 0	. (
BOARD MEMBER	1.0	<u> </u>	^	-+	-+	- +	-+			
JOHN SANDOVAL	1.0		v					0	0	. (
BOARD MEMBER	1.0	-	<u>-</u> +-	-+	-+	-+				
DENNIS SANDQUIST	1.0	0	x					0	00	
BOARD MEMBER		-				- †	-+-			
MICHELE SHERRER	1.0	0	x					(). ()
BOARD MEMBER		<u> </u>		-	†	- 1	- -			
HAL SMALLEY	1.0	0	x					()()
BOARD MEMBER		-		-) .
EUGENE SMITH	1.0	0	x). ().
BOARD MEMBER			-	_						o.
JAMES SNYDER	1.0	0	X						0.	/ <u>·</u>
BOARD MEMBER						-				

rm 990 (2011) NATION art VII Section A. Officers, Directors	, Trustees, Key Em	ploy	rees	i, an		gne		(D)	(E)	(F)	
(A) Name and title	(B) Average hours	verage Position Reportable Reportable hours (check all that apply) from from related								Estimate amount other	of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensa from th organiza and rela organiza	ne ation ated
OBERT SPENCE	1 00	x		-				0.	0.		0.
OARD MEMBER	1.00	Δ		+						l	
ON STAPLEY	1.00	x						0.	0.		0.
OARD MEMBER									0.		0.
OBERT SUVER	1.00	X	1					0.			
SOARD MEMBER									0.		0.
DAVID TALERICO	1.00	Х				1_		0.		+	
BOARD MEMBER								0.	0.		Ο.
BOARD MEMBER	1.00	X	-	-						·	
DANIEL TROY								0.	0	_	Ο.
BOARD MEMBER	1.00	X	-			_			·		
KENNETH ULMAN								0	0	-	0.
BOARD MEMBER	1.00	X			+-				•		
GRANT VEEDER								0	0	•	0.
BOARD MEMBER	1.00	X	<u> </u>						•		
RON WALTER			-					0	0	•	0.
BOARD MEMBER	1.00) <u>X</u>	<u> </u>			-+-	-+-				
BETTY LOU WARD	1		,					0	. 0	•	0.
BOARD MEMBER	1.00) }	<u>-</u>	-+-		+	-+-				
KENTON WARD	1 00	$ \cdot $,			ł		0	. 0	•	0.
BOARD MEMBER	1.00))	<u> </u>		-+-		-+-				•
GEORGE WEBB	1.00							0	. 0	•	0.
BOARD MEMBER	1.00		<u> </u>	-+		-+-					0
BONNIE WEBER	1.0	<u>n</u> ,	x					0	•)	0.
BOARD MEMBER		<u> </u>	<u>~</u> +	-+		+-					0
ARLANDA WILLIAMS	1.0	0	x					(). ()	0.
BOARD MEMBER		<u> </u>	-+	- †	-+						0.
NOAH WOODS	1.0	0	x					()()	0
BOARD MEMBER				- 1						o .	0.
LENNY ELIASON	1.0	0	X		X			3,632	2.		
PRESIDENT		_								0.	0
CHRISTOPHER RODGERS 1ST VICE PRESIDENT	1.0	0	X		X).		
1ST VICE PRESIDENT			-					82	n	0.	0
2ND VICE PRESIDENT	1.0	0	X		X			62	I •		
GLEN WHITLEY								4,11	7	0.	0
IMMEDIATE PAST PRESIDENT	1.0	0	X		X		┣	4,11	••		
LARRY NAAKE							1	326,24	5. 18,38	0. 4	7,252
EXECUTIVE DIRECTOR	35.5	0		1	X	1	<u> </u>	520123			_

rt VII Section A. Officers, Directors, Tr	rustees, Key Em (B)	iploy	<u>/ees</u>	<u>s, an</u> (C	<u>ום חי</u> גו	igne	<u>ist (</u>	(D)	(E)	(F)
(A) Name and title	Average	I		Posit	ition		ļ	Reportable	Reportable	Estimated
Name and two	hours	(ch			that a	apply	.y)	compensation from	compensation from related	amount of other compensation
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
DAVID KEEN	32.10		1	x				146,950.	24,721.	50,677.
DIRECTOR, FINANCE & ADMIN	32.10	┝─┥	ا ا		'	+'	+-			
EDWARD FERGUSON	19.30		1		x	'		100,783.	95,040.	46,875.
DEPUTY EXECUTIVE DIRECTOR		┼──┤	<u> </u>	+'		+'	+			
EDWIN ROSADO	37.50		1		X			184,049.	0.	38,572.
EGISLATIVE DIRECTOR		+-+	<u> </u>	+	1	1	+			
BERT JARREAU CHIEF INFORMATION OFFICER	37.50				X			182,467.	0.	30,660.
		+	-	1	-	1	1			20 471
GEORGE GOODMAN PUBLIC AFFAIRS DIRECTOR	35.10				X			143,184.	9,791.	32,471.
JEFFREY ARNOLD						T	Τ			25 570
DEFFREY ARNOLD DEPUTY LEGISLATIVE DIRECTO	37.50				\perp	X	<u>.</u>	137,621.	0.	25,570.
JOHN SAMARTZIS		T	Ţ					120 116	0.	34,346.
CORPORATE PROGRAMS DIRECTOR	37.50				_	X	<u>-</u>	130,116.	,	34/310.
ROBERT FOGEL	T						_	112 652	0.	39,343.
SENIOR LEGISLATIVE DIRECTOR	37.50	4_	+	+		<u> </u>	·+-	113,652.	•	
DEBORAH STOUTAMIRE	27 50					x	-	110,284.	0.	31,465.
DIRECTOR OF HUMAN RESOURCES	37.50		+-	-+-		^	·+	110/201	•	
WILLIAM CRAMER	27 50					x	,	108,176	. 0.	. 24,453.
MARKETING DIRECTOR	37.50		+-	+	+	-	-+-	100,		
					_		_			
			+	+	+-	-				
		+-	+	+	+	+	+			
				_	\downarrow	+	_			+
		-	+	+	+					
	_			+	+	+	+			
					\rightarrow	_	_			
	-	+	+	-+-	+	-	+			
		_+-	+	-+-	-+	+	-+			
			-	.	-			1,692,100	147 932	401,684

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SCHI	EDUL	E O	
(Form	990 or	990	EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.



Department of the Treasury Internal Revenue Service Name of the organization

NATIONAL ASSOCIATION OF COUNTIES

Employer identification number 53-0190321

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO STIMULATE THE CONTINUING IMPROVEMENT OF COUNTY GOVERNMENT; TO SPEAK

NATIONALLY FOR COUNTY GOVERNMENT; TO CONTRIBUTE TO THE KNOWLEDGE AND

AWARENESS OF THE HERITAGE AND FUTURE OF COUNTY GOVERNMENT; TO SERVE AS

A LIASION BETWEEN THE NATION'S COUNTIES AND OTHER LEVELS OF GOVERNMENT;

AND TO ACHIEVE UNDERSTANDING OF THE ROLE OF COUNTIES IN THE FEDERAL

SYSTEM.

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

CONTRIBUTIONS AND OTHER MISC PROGRAMS- FUNDING TO PROVIDE FOR OPERATING

COSTS OF RELATED ORGANIZATION.

EXPENSES \$ 1,642,507. INCLUDING GRANTS OF \$ 1,642,507. REVENUE \$ 0.

INFORMATION TECHNOLOGY CENTER

EXPENSES \$ 181,030. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

PUBLIC AFFAIRS

EXPENSES \$ 981,488. INCLUDING GRANTS OF \$ 0. REVENUE \$ 3,295.

COUNTY SERVICES

EXPENSES \$ 7,943. INCLUDING GRANTS OF \$ 0. REVENUE \$ 31,388.

MEMBERSHIP AND OTHER SERVICES

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 4,715,530.

FORM 990, PART VI, SECTION A, LINE 1: NACO HAS AN EXECUTIVE COMMITTEE

 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990 or 990-EZ) (2011)

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10450813 790809 53-0190321 2011.04010 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 or 990 EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
WHICH IS RESPONSIBLE FOR THE PROPERTY, FUNDS AND BUSINESS	AFFAIRS OF THE
ASSOCIATION IN THE ABSENCE OF THE BOARD. THE EXECUTIVE HA	S AND MAY EXERCISE
ALL POWERS OF AUTHORITY GRANTED TO THE BOARD. IT RECOMMEN	DS THE APPOINTMENT
AND COMPENSATION OF THE EXECUTIVE DIRECTOR TO THE BOARD;	MAY ESTABLISH SUCH
POSITIONS AND SALARY SCHEDULES AS NECESSARY TO CONDUCT TH	E AFFAIRS OF THE
ASSOCIATION, SUBJECT TO THE BOARD'S APPROVAL.	

THE EXECUTIVE COMMITTEE IS COMPOSED OF THE NACO PRESIDENT, PRESIDENT-ELECT, FIRST VICE PRESIDENT, SECOND VICE PRESIDENT, AND IMMEDIATE PAST PRESIDENT (THE MOST RECENT PAST PRESIDENT WHO IS STILL AN ELECTED COUNTY OFFICIAL OF AN ACTIVE NACO MEMBER). THE PRESIDENT CHAIRS THE EXECUTIVE COMMITTEE.

FORM 990, PART VI, SECTION A, LINE 6: NACO HAS THE FOLLOWING CLASSES OF MEMBERSHIP:

ACTIVE MEMBER COUNTIES SHALL BE THOSE COUNTY GOVERNMENTS WHICH CONTRIBUTE ANNUALLY TO THE FINANCIAL SUPPORT OF THE ASSOCIATION ACCORDING TO THE SCHEDULE OF DUES OR SERVICE FEES ADOPTED BY THE BOARD OF DIRECTORS. SEPARATE MEMBER CATEGORIES FOR ORGANIZATIONS OR INDIVIDUALS OTHER THAN COUNTIES MAY BE AUTHORIZED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7A: ACTIVE NACO MEMBERS, AS PREVIOUSLY DEFINED, ELECT BOARD MEMBERS IN CATEGORIES B, C, D, E AND F, AT THE ANNUAL NACO MEMBER CONFERENCE. CATEGORIES:

B. ONE ELECTED OFFICIAL FROM EACH STATE WHICH HAS AN ACTIVE MEMBER COUNTY.

C. TWELVE ELECTED OFFICIALS FROM ACTIVE MEMBER COUNTIES, ONE FROM EACH OF

THE 12 STATES HAVING THE HIGHEST NUMBER OF VOTES AS CERTIFIED BY THE

CREDENTIALS COMMITTEE BASED UPON NACO MEMBERSHIP AS OF 60 DAYS BEFORE THE

FIRST DAY OF THE ANNUAL CONFERENCE, PROVIDED THAT SUCH STATE HAS EITHER 50 132212 01-23-12 35

10450813 790809 53-0190321 2011.04010 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 or 990 EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
PERCENT OF ITS COUNTIES AS ACTIVE MEMBER COUNTIES OR HAS	ACTIVE MEMBER
COUNTIES REPRESENTING 50 PERCENT OF THE STATE'S POPULATIO	N
D. ONE ELECTED COUNTY OFFICIAL FROM EACH STATE HAVING 100	PERCENT OF ITS
COUNTIES AS ACTIVE MEMBERS.	
E. ONE ELECTED OFFICIAL FROM EACH REGIONAL DISTRICT THAT	HAS BEEN
AUTHORIZED BY THE BOARD AND APPROVED BY THE VOTING MEMBER	S
F. ONE DIRECTOR FROM EACH AFFILIATE ORGANIZATION THAT HAS	BEEN AUTHORIZED
BY THE BOARD AND APPROVED BY THE VOTING MEMBERS. THE NUMB	ER OF DIRECTORS
FROM CATEGORY F SHALL NOT EXCEED 25 PERCENT OF THE TOTAL	NUMBER OF
DIRECTORS ON THE BOARD.	

EACH ACTIVE MEMBER COUNTY IS ENTITLED TO AT LEAST ONE VOTE ON EVERY QUESTION PUT BEFORE THE ANNUAL CONFERENCE OR SPECIAL MEETINGS OF THE MEMBERSHIP. ACTIVE MEMBER COUNTIES WHOSE POPULATION REQUIRES THEM TO PAY MORE THAN \$499 IN DUES ARE ENTITLED TO ONE ADDITIONAL VOTE FOR EACH ADDITIONAL \$500 OR FRACTION THEREOF PAID IN THE YEAR IN WHICH THE MEETING IS HELD. DUES PAID SHALL NOT BE MORE THAN THE AMOUNT SPECIFIED IN THE APPROVED DUES SCHEDULE. EVERY FULLY PAID ACTIVE MEMBER SHALL BE ALLOWED TO VOTE. EACH COUNTY SHALL DETERMINE THE PERSON OR PERSONS (DELEGATES) WHO WILL CAST THE COUNTY'S VOTE(S). AN ELECTED OR APPOINTED COUNTY OFFICIAL OF A FULLY PAID ACTIVE MEMBER MAY CAST ALL OR ANY PORTION OF THE ACTIVE MEMBER'S TOTAL AUTHORIZED VOTE BUT NO FRACTION OF A WHOLE. ANY ACTIVE MEMBER MAY BUT IS NOT REQUIRED TO PERMIT ITS VOTES TO BE CAST BY ITS STATE AS A BLOCK.

FORM 990, PART VI, SECTION A, LINE 7B: THE NACO BOARD OF DIRECTORS SHALL HAVE GENERAL SUPERVISION, MANAGEMENT AND CONTROL OF THE BUSINESS AND PROPERTY OF THE ASSOCIATION, SUBJECT TO THE ARTICLES OF INCORPORATION, ¹³²²¹² Schedule O (Form 990 or 990-EZ) (2011) 36 10450813 790809 53-0190321 2011.04010 NATIONAL ASSOCIATION OF COU 53-01901

Schedule O (Form 990 d	990·EZ) (2011)	Page 2
Name of the organizatio	NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
THESE BYLAWS	, AND THE POLICIES ESTABLISHED BY A MAJORITY	VOTE OF THE VOTING

FORM 990, PART VI, SECTION B, LINE 11: THE NACO AUDIT COMMITTEE AND THE EXECUTIVE COMMITTEE, SUBSETS OF THE BOARD OF DIRECTORS, REVIEW THE DRAFT

ACTIVE MEMBER COUNTIES OF THE ASSOCIATION AT THE ANNUAL CONFERENCE.

FORM 990 BEFORE FILING. UPON APPROVAL, THE FINAL FORM IS MADE AVAILABLE TO ALL BOARD MEMBERS VIA THE NACO WEBSITE.

FORM 990, PART VI, SECTION B, LINE 12C: THE TERM OF OFFICE OF THE MEMBERS OF THE BOARD IS FOR ONE YEAR. IMMEDIATELY AFTER ELECTION OR APPOINTMENT TO THE BOARD, THEY ARE REQUIRED TO SIGN, AS A MATTER OF ORGANIZATIONAL POLICY, A CONFLICT OF INTEREST DISCLOSURE STATEMENT DEFINED BY NACO. THE EXECUTIVE DIRECTOR AND CHIEF FINANCIAL OFFICER ARE ALSO REQUIRED TO SIGN A CONFLICT OF INTEREST DISCLOSRE STATEMENT UPON ASSUMPTION OF OFFICE AND TO PROMPTLY REPORT AN CONFLICT OF INTEREST SITUATION THAT MAY ARISE WHILE THEY'RE IN OFFICE.

FORM 990, PART VI, SECTION B, LINE 15: CEO, EXECUTIVE DIRECTOR OR TOP

THE PROCESS GOES THROUGH A REVIEW AND APPROVAL BY INDEPENDENT PERSONS (EXECUTIVE COMMITTEE), COMPARABILITY DATA (REVIEW OF SALARIES AND BENEFITS OF EXECUTIVE DIRECTORS/PRESIDENT OF OTHER NON-PROFIT ORGANIZATIONS COMPARABLE TO NACO) AND PERFORMANCE EVALUATION BY THE EXECUTIVE BOARD. THE EXECUTIVE DIRECTOR'S ANNUAL COMPENSATION, BASED UPON THE RECOMMENDATION OF THE EXECUTIVE COMMITTEE, IS DECIDED AND APPROVED AT THE BOARD OF DIRECTORS MEETING HELD DURING THE NACO ANNUAL CONFERENCE.

OTHER	OFFICER	S OR	KEY	EMPLOYEES:							-
132212 01-23-12							Schedule	O (Fo	rm 990 c	or 990-EZ) (2011))
						37					
10450813	790809	53-0	1903	21 2011.	.04010	NATIONAL	ASSOCIATION	\mathbf{OF}	COU	53-01901	

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization NATIONAL ASSOCIATION OF COUNTIES	Employer identification number 53-0190321
NACO PARTICIPATES IN LOCAL SALARY SURVEYS AND USES THE SU	RVEY RESULTS TO
ENSURE THAT ITS SALARY STRUCTURES ARE COMPETITIVE AND COM	PARABLE WITH
SIMILAR POSITIONS FROM OTHER ORGANIZATIONS. THE EXECUTIV	E DIRECTOR REVIEWS
AND APPROVES SALARY LEVELS AND MERIT INCREASES BASED ON T	HE EMPLOYEE
PERFORMANCE EVALUATION RATING AND RECOMMENDATION OF THE E	MPLOYEE'S
SUPERVISOR/DEPARTMENT DIRECTOR. THE BOARD OF DIRECTORS ME	ETS IN
NOVEMBER/DECEMBER OF EACH YEAR TO DECIDE ON THE RATE OF E	MPLOYEE SALARY
INCREASE FOR THE FOLLOWING YEAR.	

FORM 990, PART VI, SECTION C, LINE 19: CORPORATE BY-LAWS AND ANNUAL REPORT ARE AVAILABLE ONLINE AT NACO'S WEBSITE. THE CONFLICT OF INTEREST POLICY IS AVAILABLE TO CONCERNED ENTITIES SUCH AS BOARD OF DIRECTORS, OFFICERS AND EMPLOYEES OF NACO AND ITS AFFILIATED ORGANIZATIONS. FINANCIAL STATEMENTS AND FORM 990 ARE AVAILABLE UPON REQUEST AND CAN ALSO BY ACCESSED VIA GUIDESTAR, A NON-PROFIT INFORMATION DATABASE.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-1,227,444.
EQUITY IN EARNINGS OF SUBSIDIARY	358,311.
TOTAL TO FORM 990, PART XI, LINE 5	-869,133.
FORM 990, PART XI, LINE 2C	
THIS PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR.	

Schedule O (Form 990 or 990-EZ) (2011)

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ▲ Attach to Form 990.	and Unrelated Partner (es" to Form 990, Part IV, line 33, 3 See separate instructions.	r tnerships le 33, 34, 35, 36, ctions.	or 37.	<u> </u>	OMB No. 1545-0047 2011 Open to Public Inspection
ation NATIONAL	ASSOCIATION OF COUNTIES				Employer identification number 5 3-0 1 9 0 3 2 1	cation number 3 2 1
Part 1 Identification of Disregarded Entities (Complete if the organization	te if the organization answered "Yes"	answered "Yes" to Form 990, Part IV, line 33.)	(
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	ne End-of-year assets		(f) Direct controlling entity
Part II organization of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	ations (Complete if the organization a	answered "Yes" to Form 990	Part IV, line 34 b	ecause it had one c	r more related tax-exe	mpt
(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	(g) Section 512(b)(13) controlled entity? Yes No
NACO RESEARCH FOUNDATION - 53-0241255 25 MASSACHUSETTS AVE WASHINGTON DC 20001	EDUCATION	DELAWARE	501(C)(3)	509(A)(2)	NACO	X
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	ons for Form 990.				Schedule R	Schedule R (Form 990) 2011

. For Paperwork Reduction Act Notice

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Schedule R (Form 990) 2011 NATIONAL ASSOCIATION OF ldentification of Related Organizations Taxable as a Partnership organizations treated as a partnership during the tax year.)	NATIONAL ASSOCIATION ated Organizations Taxable as a Partm as a partnership during the tax year.)	T I ON a Partnei year.)	OF COUNTIES rship (Complete if the	S e organization an	COUNTIES 53-0190321 (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related	990, Part IV, line 3	t because it	53-019032 had one or more relate	0 3 2 1 e related	Page 2
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	e Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations? Yes No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes No	(j) (k) General or Percentage managing ownership Partner/ Yes No
		;								
Part IV Identification of Related Organizations Taxable as a Corporation or Antion of Related Action or trust during the tax year.)	rganizations Taxable as	a Corpo the tax y		nplete if the organ	or Trust (Complete if the organization answered "Yes"	to Form 990, Part IV, line 34 because it had one or more related	IV, line 34 b	ecause it had o	ne or mor	e related
(a) Name, address, and EIN of related organization	NII		(b) Primary activity	ty Legal domicile (ctate or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) total Share of end-of-year assets		(h) Percentage ownership
NACO FINANCIAL SERVICES CORPORATION 25 MASSACHUSSETTS AVENUE, NW WASHINGTON DC 20001	RATION - 52-1913476		MANAGEMENT SERVICES	DE		c corp	4,598,229	۲	661,685.	100.008
										8
							L			
132162 01-23-12				40				Schedule	e R (Form	Schedule R (Form 990) 2011

Page 3 53-0190321

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II. III. or IV of this schedule.				Yes No
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?	s with one or more re	lated organizations listed in Pa	arts II-IV?	
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a X
b Gift, grant, or capital contribution to related organization(s)				1b X
c Gift, grant, or capital contribution from related organization(s)				1c X
				1d X
Loans or loan guarantees by related organization(s)				1e X
f Sale of assets to related organization(s)				1f X
g Purchase of assets from related organization(s)				1g X
Exchange of assets with related organization(s)				± ₩
i Lease of facilities, equipment, or other assets to related organization(s)				1i X
i I accord of facilities actuinment or other assets from related organization(s)				1i X
Lease of radiatives, equipments of survives association of the relations for related or as the rela	lated organization(s)			1k X
Performance of services or membership or fundraising solicitations by rel	anization(s)			11 X
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			1m X
n Sharing of paid employees with related organization(s)				1n X
				X
 Reimbursement paid to related organization(s) for expenses 				>
p Reimbursement paid by related organization(s) for expenses				1 <u>p</u> X 2, X
 Qther transfer of cash or property to related organization(s) Ther transfer of cash or property from related organization(s) 				+
	who must complete th	his line, including covered relation	ionships and transaction thresholds.	
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved	
(1) NACO RESEARCH FOUNDATION	В	1,652,507.CASH	SH	
(2) NACO RESEARCH FOUNDATION	Ъ	698, 377.CASH	HS	
(3) NACO RESEARCH FOUNDATION	W	1,111,612.CASH	SH	
(4) NACO RESEARCH FOUNDATION	N	1,229,668.CASH	SH	
(5) NACO RESEARCH FOUNDATION	Q	273, 162. CASH	HS	
(6) NACO RESEARCH FOUNDATION	Ι	484,138.CASH	HS	
2	41		Schedule R	Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 NATIONAL ASSOCIATION OF COUNTIES Darive Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)	NATIONAL ASSOCIATION ations Taxable as a Partnership (Complet	DN OF COU	COUNT I ES organization answered "Yes	s" to Form	990, Part IV, line	37.)		53-019	-0190321	Page 4
Provide the following information for each entity taxed as a partnership through which the organization cond that was not a related ornanization See instructions renarching exclusion for certain investment partnerships.	intity taxed as a partnersh tructions reparding exclusion	ip through which t	which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) tain investment partnerships.	ucted mor	e than five percen	t of its activities (π	neasured t	oy total assets o	r gross r	evenue)
(a) (a) Name, address, and ElN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(c) (c) (c) (c) Are all Are all Are all (related, unrelated, sofic)(3) excluded from tax under section 512-514) (ves No	(e) Are all 501(c)(3) orgs.? Yes No	(f) Share of total income	(g) Share of end-of-year assets	Dispropor- tionate allocations	(h) (i) (j) (j) (k) Dispropertionable Code V-UBI General or Percentage (k) amount in box 20 managing ownership ownership allocations? of Schedule K-1 partner? ownership Yes No (Form 1065) Yes No	(j) General or managing partner? Yes NO	(k) Percentage ownership
						_				
							!			
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				-				1		
								Schedule	e R (Forr	Schedule R (Form 990) 2011

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Sc	he	dule	R	(Form	990	2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions).

12165 -23-12	

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

►	File a	separate	application	for	each	return.
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• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing *(e-file)* You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or	Name of exempt organization or other filer, see instructions.	Employer identification number (EIN) or			
File by the due date for filing your return. See instructions.	NATIONAL ASSOCIATION OF COUNTIES	X 53-0190321			
	Number, street, and room or suite no. If a P.O. box, see instructions. 25 MASSACHUSETTS AVENUE, N.W., NO. 500	Social security number (SSN)			
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20001				

Enter the Return code for the return that this application is for (file a separate application for each return)

Application	Return	Application			Return	
Is For	Code	Is For				
Form 990	01	Form 990-T (corporation)		07		
Form 990-BL	02	Form 1041-A		08		
Form 990-EZ	01	Form 4720			09	
Form 990-PF	04	Form 5227		10		
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				
Form 990-T (trust other than above)	06	Form 8870				
 The books are in the care of ► AVE, NW, STE. Telephone No. ► (202) 942-4206 If the organization does not have an office or place of busines If this is for a Group Return, enter the organization's four digit box ► . If it is for part of the group, check this box ► . I request an automatic 3-month (6 months for a corporation) 	500 – ss in the Ur Group Exe and atta n required	FAX No. ►	1 s is for memb l	r the whole group, cl ers the extension is	heck this	
 is for the organization's return for: ★ alendar year 2011 or ★ tax year beginning 2 If the tax year entered in line 1 is for less than 12 months, on the constraint of the tax year is accounting period 			l retur	 n		
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, nonrefundable credits. See instructions.	or 6069, e	nter the tentative tax, less any	3a	\$	0.	
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 over	\$	0.				
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						
by using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c \$						
Caution. If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and Form	8879-	EO for payment inst	ructions.	
HA For Privacy Act and Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev.					»v. 1•2012)	
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