For	" 9	90	Return of Organization Exempt From Inc			OMB No. 1545-0047
			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code benefit trust or private foundation)	(except blac	ck lung	Open to Public
Dep	artment c nal Reve	of the Treasury Inue Service	rements.	Inspection		
A	For the	e 2011 cale	ndar year, or tax year beginning 08/01 , 2011, and endin	g 07	7/31	, 20 12
в	Check i	if applicable:	C Name of organization NASBA CENTER FOR THE PUBLIC TRUST		D Employ	er identification number
		s change	Doing Business As			20-1746267
	Name c	hange	Number and street (or P.O. box if mail is not delivered to street address) Room/suit	te	E Telepho	ne number
	Initial re	eturn	150 Fourth Avenue North Suite 700			615-880-4200
	Termina	ated	City or town, state or country, and ZIP + 4			
	Amende	ed return	Nashville, TN 37219-2417		G Gross re	eceipts \$ 515,870
		tion pending	F Name and address of principal officer: Alfonzo Alexander	H(a) is this	a group return	for affiliates? 🗌 Yes 🗹 No
		, ,	150 Fourth Avenue North, Nashville, TN 37219-2417	H(b) Are a	Il affiliates ir	ncluded? Yes No
1	Tax-exe	empt status:	✓ 501(c)(3)	If "N	io," attach a	a list. (see instructions)
J	Websit		w.centerforpublictrust.org	H(c) Grou	p exemption	n number 🕨
ĸ	Form of	organization:	✓ Corporation Trust Association Other ► L Year of format	ion: 2004	M State	of legal domicile: TN
E	art	Summ	ary			
	1	Briefly de	scribe the organization's mission or most significant activities: NASB	A Center for	the Publi	c Trust's mission is to
			the public trust by advancing ethical leadership in business, institutions a			
Sce			forums for ethics education, affirming and encouraging what is ethical, sh			
nar		***************************************	d on Schedule O, Statement 1)			
Ver	2		s box > if the organization discontinued its operations or disposed of	of more than	1 25% of	its net assets.
ő	3					16
ళ	4			16		
tie	5		of independent voting members of the governing body (Part VI, line 1b) aber of individuals employed in calendar year 2011 (Part V, line 2a)			0
Activities & Governance	6		ber of volunteers (estimate if necessary)		6	23
Ă	7a		elated business revenue from Part VIII, column (C), line 12			0
	b		ated business taxable income from Form 990-T, line 34		7b	0
	0	Neturier		Prior Y		Current Year
	•	Contribut	ions and grants (Part VIII, line 1h) .		334,483	464,692
ue	8		service revenue (Part VIII, line 2g)		351	7,600
Revenue	9	*			<u>331</u> 0	822
Be	10		nt income (Part VIII, column (A), lines 3, 4, and 7d)		33,146	22,987
	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12				367,980	496,101
	13		nd similar amounts paid (Part IX, column (A), lines 1–3)		0	0
	14		baid to or for members (Part IX, column (A), line 4)		0	0
ses	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		176,417	200,935
ens	16a		nal fundraising fees (Part IX, column (A), line 11e)		0	0
Expen	b		draising expenses (Part IX, column (D), line 25) ► 69,286		400.00	And
u	1.1		benses (Part IX, column (A), lines 11a–11d, 11f–24e)		196,626	231,423
	18	7	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)		373,043	432,358
	19	Revenue	less expenses. Subtract line 18 from line 12		-5,063	63,743
S or			-	Beginning of C		End of Year
Net Assets or Fund Relances	20		ets (Part X, line 16)		196,942	249,771
at Ås ad R	21		ilities (Part X, line 26)		124,336	113,422
-			s or fund balances. Subtract line 21 from line 20		72,606	136,349
	art II	<u> </u>	ure Block			
Ur tru	ider pen	alties of perju	ry, I declare that I have examined this return, including accompanying schedules and state ate. Declaration of preparer (other than officer) is based on all information of which preparer	ments, and to the has any know	the best of ledge.	my knowledge and belief, it is

Sign Here	Signature of officer Michael Bryant, CFO Type or print name and title	Michael R. Br	jant-	Date 3/15/2013
Paid	Print/Type preparer's name	Preparer's signature	Date	Check [] If self-employed
Preparer Use Only	Firm's name			Firm's EIN >
•	Firm's address 🕨	Phone no.		
May the IRS	discuss this return with the pre	parer shown above? (see instructions	5)	🗌 Yes 🗌 No
For Paperwo	rk Reduction Act Notice, see the s	separate instructions.	Cat. No. 11282Y	Form 990 (2011)

Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	NASBA Center for the Public Trust's mission is to champion the public trust by advancing ethical leadership in business,
	institutions and organizations. Our goals include providing forums for ethics education, affirming and encouraging what is eth
	showcasing best practices, and promoting a positive perspective. See Schedule O for more information.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
U	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured
•	expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the am grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 74,415 including grants of \$ 0) (Revenue \$ 7,600
	Ethics Advancement Program: The NASBA Center for the Public Trust (CPT) manages three areas of activities under the Ethics
	Advancement program. The main activity in this area during this fiscal year was production of the Ethics Matters newsletter. T
	four newsletters produced included stories highlighting ethics and ethical behavior as well as positive perspective on activitie
	the CPT, business and accounting communities. The Ethics Membership Network is a membership-based initiative created to
	provide resources and opportunity to connect, promote and advance ethical behavior. The third area of activity is the Being A
	Difference Award. Each year, the CPT honors the accomplishments of individuals and organizations that demonstrate exempla
	practices of ethics in leadership and strong corporate citizenship. In this fiscal year there were five awards presented to
	outstanding leaders. In previous years the Being A Difference Award has been granted to Fortune 500 executives, Olympic
	athletes, a Big Four Audit firm, a public water utility and individuals quietly serving their community.
4b	(Code:) (Expenses \$224,768 including grants of \$) (Revenue \$0
	Student Chapters Program: A primary focus of CPT continues to be The Student Center for the Public Trust (SCPT). This progr
	promotes ethics, accountability, and leadership to young adults in order to impact the future. SCPT had tremendous growth in
	past year. Ten active campus chapters with 300 students are in place and many more in line to begin the process to organize a
	launch. These chapters offer students practical training in ethical decision-making and leadership. This program also offers
	activities such as the annual Ethics in Action Video Competition and the Student Leadership Conference. These events
	supplement the student's business education experience through exposure to ethics education and situational ethics activities
4c	(Code:) (Expenses \$ 5,634 including grants of \$0) (Revenue \$0
-10	Conferences Program: On December 1, 2011, a day before the 10th anniversary of Enron's spectacular bankruptcy filing, the C
	with Baruch College of the City University of New York, held its Sixth Annual Auditing Conference on "Ensuring Integrity." The
	conference's strong regulatory focus was particularly fitting as Enron's anniversary was remembered. Conference speakers
	included representatives of the PCAOB, Securities and Exchange Commission, AICPA Auditing Standards Board, and major
	accounting and law firms. In the audience were public accounting practitioners, academics, students and representatives of the
	press.
4d	Other program services (Describe in Schedule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

Form 99	0 (2011)			Page 3
Part	V 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	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	3		~
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? <i>If "Yes," complete Schedule C, Part II</i>	4		~
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		~
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? <i>If "Yes," complete Schedule D, Part I</i>	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		~
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .			~
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	9 10	r	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	11b		~
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? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		~
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? <i>If "Yes," complete Schedule D, Part IX</i>	11d		~
	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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)? <i>If "Yes," complete Schedule D, Part X</i> .	11e	~	~
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	~	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	~	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		~
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .	18	~	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	19		~
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2011)

Form 990 (2011) Part 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 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States 22 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the 23 organization's current and former officers, directors, trustees, key employees, and highest compensated V 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24a \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . 24b С Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c **d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction 25a ~ **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 25b Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or 26 disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II . . . 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, 27 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 Was the organization a party to a business transaction with one of the following parties (see Schedule L, 28 Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . 28a ~ A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete h 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 V Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30 30 V Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N. 31 31 ~ 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," ~ 32 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 1 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, 34 V 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a b Did the organization receive any payment from or engage in any transaction with a controlled entity within the 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable 36 1 36 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, 1 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 38 V 38

Form 990 (2011)

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Form 99	0 (2011)		I	Page 5
Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	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		~
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		~
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		~
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
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?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			
	organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
a b	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
40	against amounts due or received from them.)	10		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b		

Form 9	90 (2011)		F	-age 6
Part	VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			
	Check if Schedule O contains a response to any question in this Part VI			~
Secti	on A. Governing Body and Management			
4			Yes	No
18	Enter the number of voting members of the governing body at the end of the tax year 1a 10 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.	<u>></u>		
b 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 1 <i>i</i> 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	~	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		~
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~
6	Did the organization have members or stockholders?	6	~	
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?			
b	one or more members of the governing body?	7a 7b		~ ~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	75		
а	The governing body?	8a	~	
b	Each committee with authority to act on behalf of the governing body?	8b	~	
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		~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	nue C	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	~	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	r	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	~	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i> .	12c	~	
13	Did the organization have a written whistleblower policy?	13	マ マ	
14 15	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 persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	14	V	
а	The organization's CEO, Executive Director, or top management official	15a	~	
b	Other officers or key employees of the organization	15b		~
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		~
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
<u></u>	organization's exempt status with respect to such arrangements?	16b		
Secti				
	on C. Disclosure			
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	n 501(c)(3)s	only)

- **19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Michael R Bryant CPA, (615)880-4200

~

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 1a Complete this table for all persons required to be listed. 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.

		<u> </u>		(C)						,
(A)	(B)	Position						(D)	(E)	(F)
Name and Title	Average	(do not check more than on				Reportable	Reportable	Estimated		
	hours per					compensation	ompensation compensation from			
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
Larry Bridgesmith Esq										
Director & Chairman	2	~						0	0	0
Noel Allen Esq										
Director & Secretary	2	~		r				0	0	0
Milton Brown PA										
Director	2	~						0	0	0
Janet Buchanan										
Director	2	~						0	0	0
Robert Chandler Ph D										
Director	2	~						0	0	0
Manny Espinoza										
Director	2	~						0	0	0
Jerry Esselstein										
Director	2	~						0	0	0
Jack Farris										
Director	2	~						0	0	0
Linda Ferrell Ph D										
Director	2	~						0	0	0
OC Ferrell Ph D										
Director	2	~						0	0	0
Ellen Glazerman										
Director	2	~						0	0	0
Miley Glover CPA										
Director	2	~						0	0	0
Michael Santoro Ph D										
Director	2	~						0	0	0
Charles Story										
Director	2	~						0	0	0

Part VII Section A. Officers, Directors, Trus			,)	inginee				400/
(A) Name and title	(B) Average hours per	Positio (do not check ma box, unless perso officer and a dire			ition more rson	ion nore than one son is both an		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
C Dan Stubbs CPA										
Director	2	~						0	0	
David A Costello CPA										
President & CEO through Dec 2011	0			~				0	1,211,450	33,0
Ken Bishop CEO	0			~				0	422,585	33,0
Alfonzo Alexander										
/ice President	20			~				0	177,349	32,1
Michael R Bryant CPA										
CFO & Treasurer	0			~				0	250,620	42,3
_isa Axisa /P & Executive Director through Nov 2011	32			~				0	135,926	28,5
1b Sub-total							•	0	2,197,930	169,2
c Total from continuation sheets to Par						•		-		
 d Total (add lines 1b and 1c) 2 Total number of individuals (including burreportable compensation from the organication) 	ut not limited	l to th					► e) w	ho received m	1 1 1 1 1 1	169,2 0 of
 3 Did the organization list any former of employee on line 1a? If "Yes," complete 	officer, direc	tor, c								d Yes N 3 /

- For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the 4 organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual 5 for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

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

	(A) Name and business address	(B) Description of services	(C) Compensation
2	Total number of independent contractors (including but not limited to received more than \$100,000 of compensation from the organization ►	those listed above) who 0	

4 V

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Form 990 (2011)

	90 (201	-					Page 9
Pan		Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
s, Grants Amounts	1a b c	Federated campaigns.1aMembership duesFundraising events	0		revenue		512, 515, 51 514
Contributions, Gifts, Grants and Other Similar Amounts	d e f	Related organizations1dGovernment grants (contributions)1eAll other contributions, gifts, grants,					
Contribut and Othe	g h	and similar amounts not included above 1f Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	0	464,692			
			Business Code	404,072			
Program Service Revenue	2a	Membership Dues	813410	7,600	7,600	0	0
Be	b						
vice	с						
Ser	d		_				
am	е						
uBo	f	All other program service revenue .		0	0	0	0
4	g	Total. Add lines 2a–2f		7,600			
	3	Investment income (including divi and other similar amounts)	🕨	822	0	0	822
	4	Income from investment of tax-exempt		0	0	0	0
	5	Royalties		0	0	0	0
		(i) Real	(ii) Personal				
	6a		0 0				
	b		0 0				
	C .		0 0	-	-	-	
	d 7a	Net rental income or (loss) Gross amount from sales of assets other than inventory	► (ii) Other 0 0	0	0	0	0
	b	Less: cost or other basis	0 0				
	с	-	0 0				
	d	Net gain or (loss)	🕨	0	0	0	0
Other Revenue	8a b	Less: direct expenses	a <u>42,756</u> b <u>19,769</u>				
-	С	Net income or (loss) from fundraising		22,987		0	22,987
	9a	Gross income from gaming activities. See Part IV, line 19					
	b c	Less: direct expenses	b 0 tivities►	0	0	0	0
	10a	Gross sales of inventory, less returns and allowances					
	b	Less: cost of goods sold	b 0				
	с	Net income or (loss) from sales of in	ventory 🕨	0	0	0	0
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	с						
	d	All other revenue		0	0	0	0
	е	Total. Add lines 11a-11d		0			
	12	Total revenue. See instructions.	🕨	496,101	7,600	0	23,809
							Form 990 (2011)

Part IX Statement of Functional Expenses

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

Check if Schedule O contains a response to any question in this Part IX									
Do no	t include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C)	(D)				
	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and		oxponoco	general expenses	схрензез				
-	organizations in the United States. See Part IV, line 21	0	0						
2	Grants and other assistance to individuals in								
	the United States. See Part IV, line 22	0	0						
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	0	0						
4	Benefits paid to or for members	0	0						
5	Compensation of current officers, directors, trustees, and key employees	101,613	64,429	20,259	16,925				
6	Compensation not included above, to disqualified	101,010	01,123		10,720				
	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)	0	0	0	0				
7	Other salaries and wages	72,303	50,928	10,891	10,484				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	4,190	2,982	615	593				
9	Other employee benefits	10,335	6,294	1,837	2,204				
10	Payroll taxes	12,494	8,397	2,165	1,932				
11	Fees for services (non-employees):								
а	Management	0	0	0	0				
b	Legal	2,030	1,977	53	0				
С	Accounting	8,500	0	8,500	0				
d	Lobbying	0	0	0	0				
е	Professional fundraising services. See Part IV, line 17	0			0				
f	Investment management fees	0	0	0	0				
g	Other	29,376	28,496	0	880				
12	Advertising and promotion	14,133	13,805	0	328				
13	Office expenses	22,671	14,265	4,395	4,011				
14	Information technology	2,613	2,481	132	0				
15	Royalties	0	0	0	0				
16	Occupancy	7,080	3,894	1,699	1,487				
17	Travel	81,655	64,574	1,057	16,024				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials	0	0	0	0				
19	Conferences, conventions, and meetings	41,949	36,702	9	5,238				
20		0	0	0	0				
21	Payments to affiliates	0	0	0	0				
22	Depreciation, depletion, and amortization	4,482	0	4,482	0				
23		0	0	0	0				
24	Other expenses. Itemize expenses not covered								
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а	State fees and permits	9,909	750	1,601	7,558				
b	Bank fees	1,925	269	383	1,273				
C	Dues and subscriptions	4,926	4,574	177	175				
d	Other	174	0	0	174				
е	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	432,358	304,817	58,255	69,286				
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 ▶				5 000 mm				

Form 990 (2011)

Ρ	art X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	91,965	1	66,863
	2	Savings and temporary cash investments	9,701	2	64,279
	3	Pledges and grants receivable, net	· · · · ·	3	0
	4	Accounts receivable, net	93,262	4	116,509
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of			
		Schedule L		5	0
ts	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	0
Assets	7	Notes and loans receivable, net		7	0
As	8	Inventories for sale or use		8	0
	9	Prepaid expenses and deferred charges	2,014	9	2,120
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments-publicly traded securities		11	0
	12	Investments – other securities. See Part IV, line 11		12	0
	13	Investments-program-related. See Part IV, line 11		13	0
	14	Intangible assets		14	0
	15	Other assets. See Part IV, line 11		15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	196,942	16	249,771
	17	Accounts payable and accrued expenses	120,477	17	112,753
	18	Grants payable		18	0
	19	Deferred revenue	3,859	19	669
	20	Tax-exempt bond liabilities		20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	0
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons.			
iab		Complete Part II of Schedule L		22	0
-	23	Secured mortgages and notes payable to unrelated third parties		23	0
	24	Unsecured notes and loans payable to unrelated third parties		24	0
	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	0	25	0
	26	Total liabilities. Add lines 17 through 25	104.00/	25	112.422
	20	Organizations that follow SFAS 117, check here ► ✓ and complete	124,336	20	113,422
es		lines 27 through 29, and lines 33 and 34.			
nc	27	Unrestricted net assets	12,808	27	-26,499
Sala	28	Temporarily restricted net assets	31,371	28	78,218
ЧE	29	Permanently restricted net assets	28,427	29	84,630
Ë		Organizations that do not follow SFAS 117, check here and			
Net Assets or Fund Balances		complete lines 30 through 34.			
ts (30	Capital stock or trust principal, or current funds		30	
se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţĂ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Net	33	Total net assets or fund balances	72,606	33	136,349
	34	Total liabilities and net assets/fund balances	196,942	34	249,771

Form **990** (2011)

Page		orm 99
		Part
[
40/ 1/	1	4
496,10	2	1
432,3	2	2 3
63,74	3	3 4
72,60	5	4 5
	5	ว 6
136,34	6	0
130,34	U	art
[
Yes N		
	olain in	1
2a 🖌		2a
2b 🖌		b
	versight	с
2c 🖌	ntant?	
	plain in	
	ar were	d
	forth in	3a
3a 🖌 🗸		
3b	rgo the udits	b

Form **990** (2011)

SCHI	EDUL	E A
(Form	990 oi	r 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047 2011 **Open to Public** Inspection

Employer identification number

NAS	BA	CENTER FOR T	HE PUBLIC TRUS	т						20-17	46267	
Par	τI	Reason f	or Public Char	r ity Status (All orga	nization	s must c	omplete	this par	t.) See i	nstructio	ons.	
The o	orga	anization is not	a private founda	tion because it is: (Fo	r lines 1 t	through 1	1, check	only one	box.)			
1				nes, or association of			ed in sec	tion 170(b)(1)(A)(i).		
2				170(b)(1)(A)(ii). (Attac								
3		•	•	spital service organiza								
4		hospital's nam	ne, city, and state									
5			on operated for t)(1)(A)(iv). (Comp	the benefit of a collect plete Part II.)	ge or uni	versity ov	wned or	operated	by a go	vernment	al unit describ	ed in
6 7												
8		A community	trust described ir	n section 170(b)(1)(A))(vi). (Cor	nplete Pa	art II.)					
9		receipts from support from	activities related gross investme	receives: (1) more that to its exempt funct nt income and unrel fter June 30, 1975. Se	ions—sul lated bus	bject to o siness ta	certain ex xable inc	ceptions ome (les	, and (2) s sectio	no more	e than 331/3%	of its
10		An organizatio	n organized and	operated exclusively	to test fo	or public s	safety. Se	e sectio	n 509(a)(4).		
11		purposes of c	one or more pub	d operated exclusive licly supported organ describes the type of s	nizations	describe	d in sect	on 509(a	l)(1) or se	ection 50	9(a)(2). See se	
		a 🗌 Type I	b 🗌	Type II c	🗌 Туре	III-Funct	ionally int	egrated		d] Type III–Othe	er
е		, ,	indation manage	that the organization rs and other than one								
f			ation received a check this box	written determinatio	on from t	the IRS t	that it is	a Type 	I, Type I	ll, or Typ 	e III supportin	g
g		Since August following pers		ne organization accep	oted any	gift or co	ontributio	n from a	ny of the)		
				ndirectly controls, eith ody of the supported of								No
		(ii) A family m	ember of a perso	on described in (i) abo	ove?						11g(ii)	
		• •	•	a person described in							11g(iii)	
h		Provide the fo	llowing informati	on about the supporte	ed organi	ization(s).						
(i)		ne of supported rganization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	in col. (i) lis	organization sted in your document?	the organ	ou notify nization in of your port?	organizat (i) organi	s the ion in col. zed in the S.?	(vii) Amount c support	of
					Yes	No	Yes	No	Yes	No		
(A)												
(B)												
(C)												
(D)												
(E)												

Total

Schedule A (Form 990 or 990-EZ) 2011 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ► (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total grants, contributions. 1 Gifts and membership fees received. (Do not include any "unusual grants.") . . . 37,974 334,048 293,878 367,629 487,679 1,521,208 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . 0 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 0 0 0 0 0 Total. Add lines 1 through 3. 4 37.974 334,048 293,878 367,629 487,679 1,521,208 5 The portion of total contributions by each person (other than а governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 869,558 Public support. Subtract line 5 from line 4. 6 651,650 Section B. Total Support Calendar year (or fiscal year beginning in) ► (a) 2007 (b) 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total 7 Amounts from line 4 37,974 487,679 334.048 293.878 367,629 1,521,208 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 109 30 298 822 0 1,259 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) 0 0 0 0 0 0 **Total support.** Add lines 7 through 10 11 1,522,467 Gross receipts from related activities, etc. (see instructions) 12 31,528 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) 14 14 42.8 % 15 15 36.38 % 331/3% support test-2011. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a ~ **33**¹/₃% support test-2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33¹/₃% or more, b check this box and **stop here.** The organization qualifies as a publicly supported organization \square 17a 10%-facts-and-circumstances test-2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line b 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization
Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2011

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
2	received from other than disgualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organization	n's first, secon	d, third, fourth	, or fifth tax ye	ear as a sect	tion 501(c)(3)
	organization, check this box and stop he	re					· · · ► 🗆
Secti	on C. Computation of Public Suppor	rt Percentag	e				
15	Public support percentage for 2011 (line 8		•			15	%
16	Public support percentage from 2010 Sch					16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2011 (-		17	%
18	Investment income percentage from 2010					18	%
19a	331/3% support tests-2011. If the organ						
	17 is not more than $33^{1/3}$ %, check this box	-	-	-		-	
b	331/3% support tests-2010. If the organiz						
	line 18 is not more than 33 ¹ / ₃ %, check this l	-	-	-			
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see inst	ructions 🕨 🗌

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (I	Form 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).	•
	,	

SCHEDULE	D
(Form 990)	

Supplemental Financial Statements

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

2b.	Open to Public Inspection
) 0.	2011
	OMB No. 1545-0047

	ent of the Treasury Revenue Service		, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or to Form 990. ► See separate instructions.	120.		Inspection
	f the organization			Employ	er identification	
NASB	A CENTER FOR	THE PUBLIC TRUST			20-174	6267
Par			r Advised Funds or Other Similar Fu	inds or		
	organiz	ation answered "Yes" to Fo	orm 990, Part IV, line 6.			
			(a) Donor advised funds		(b) Funds and ot	her accounts
1	Total number a	at end of year				
2		tributions to (during year) .				
3		nts from (during year)				
4		le at end of year				
5	-		donor advisors in writing that the assets			
~			t to the organization's exclusive legal cont			
6			nors, and donor advisors in writing that gr benefit of the donor or donor advisor, or			
	-	ermissible private benefit?		-		⊂ □ Yes □ No
Par		-	lete if the organization answered "Yes			
1		•	by the organization (check all that apply).	10 1 011	11000,1 art	10, 110 1.
-			recreation or education)	of an his	torically impo	ortant land area
		of natural habitat			• •	
	Preservatio	on of open space	_			
2	Complete lines	2a through 2d if the organization	tion held a qualified conservation contribut	tion in the	e form of a c	onservation
	easement on t	he last day of the tax year.				
					Held at t	he End of the Tax Year
а					2a	
b	-	-	ements	t	2b	
c			tified historic structure included in (a)	+	2c	
d			ed in (c) acquired after 8/17/06, and no			
3		re listed in the National Regist	er	l	2d	nization during the
3	tax year ►	iservation easements modified	i, italisteried, released, extiliguistied, of te	minaleo	i by the organ	lization during the
4		tes where property subject to	conservation easement is located \blacktriangleright			
5			cy regarding the periodic monitoring, in	spectior	n. handling o	of
			ion easements it holds?			🗌 Yes 🗌 No
6	Staff and volur	nteer hours devoted to monitor	ring, inspecting, and enforcing conservatio	n easem	ents during t	he year
	•				Ū	-
7	Amount of exp	enses incurred in monitoring,	inspecting, and enforcing conservation eas	sements	during the ye	ear
	▶\$					
8			on line 2(d) above satisfy the requirements			
						🗌 Yes 🗌 No
9		0	ports conservation easements in its revenu		•	
		accounting for conservation e	text of the footnote to the organization's f	inancial	statements tr	hat describes the
Part	-	=	ctions of Art, Historical Treasures, c	or Other	Similar As	sets
T GIT			ered "Yes" to Form 990, Part IV, line 8			
1a			ler SFAS 116 (ASC 958), not to report in i		ue statement	and balance sheet
	works of art, I	nistorical treasures, or other s	similar assets held for public exhibition, e	educatio	n, or researc	h in furtherance of
	public service,	provide, in Part XIV, the text of	of the footnote to its financial statements th	nat descr	ibes these ite	ems.
b	-	· ·	nder SFAS 116 (ASC 958), to report in its			
			similar assets held for public exhibition, e	educatio	n, or researc	h in furtherance of
		provide the following amounts				
	(i) Revenues in	ncluded in Form 990, Part VIII,	line 1		. ► \$	
_	(ii) Assets inclu	uded in Form 990, Part X			. 🕨 \$	
2			of art, historical treasures, or other similar		s for financia	I gain, provide the
	-		nder SFAS 116 (ASC 958) relating to these			
a			e1		. 🏲 💲	
D	ASSETS INCLUDE	d in Form 990. Part X			• •	

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

Schedu	le D (Form 990) 2011									Page 2
Part	III Organizations Maintaining	Collections of	Art, His	torical T	reasures,	or Oth	er Similar As	sets	(contin	ued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot	her reco	rds, chec	k any of the	e followir	ng that are a s	signific	ant use	of its
а	Public exhibition		d	🗌 Loan	or exchange	e progra	ms			
b	Scholarly research		e	Other	-					
с	Preservation for future generations	6								
4	Provide a description of the organizat XIV.	tion's collections a	and expla	ain how tl	hey further t	he orgai	nization's exer	npt pı	urpose i	n Part
5	During the year, did the organization assets to be sold to raise funds rather							ar	Yes 🗌	No
Part	Excrow and Custodial Arra line 9, or reported an amoun				anization a	inswere	d "Yes" to Fo	orm 9	90, Par	t IV,
1a	Is the organization an agent, trustee, included on Form 990, Part X?	custodian or oth	er intern	nediary fo				ot	Yes [No
b	If "Yes," explain the arrangement in Pa								_	-
		·		U			A	moun	t	
с	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amour	nt on Form 990, Pa	art X, line	21?.					Yes 🗌	No
b	If "Yes," explain the arrangement in Pa	art XIV.								
Par	Endowment Funds. Complete	ete if the organiz	ation ar	nswered	"Yes" to F	orm 990), Part IV, line			
		(a) Current year	(b) Pri	or year	(c) Two years	back (c	I) Three years bac	k (e)	Four years	s back
1a	Beginning of year balance	28,427		0		0		0		
b	Contributions	56,203		28,427		0		0		
С	Net investment earnings, gains, and									
	losses	454		0		0		0		
d	Grants or scholarships	0		0		0		0		
е	Other expenditures for facilities and									
	programs	0		0		0		0		
f	Administrative expenses	454		0		0		0		
g	End of year balance	84,630		28,427		0		0		
2	Provide the estimated percentage of t	he current year en	d balanc	e (line 1g	, column (a)) held as	:			
а	Board designated or quasi-endowmer	nt 🕨 (0 %							
b	Permanent endowment 1	00 %								
с	Temporarily restricted endowment ►	0 %								
	The percentages in lines 2a, 2b, and 2									
3a	Are there endowment funds not in the	e possession of th	e organi	zation tha	at are held a	and adm	inistered for th	ne		
	organization by:								Yes	No
	(i) unrelated organizations							38	a(i)	~
	(ii) related organizations							3a	ı(ii)	~
b	If "Yes" to 3a(ii), are the related organi							3	b	
4	Describe in Part XIV the intended uses	•								
Par	VI Land, Buildings, and Equip			art X, lin	e 10.					
	Description of property	(a) Cost or ot (investme			r other basis ther)	• •	cumulated reciation	(d)	Book valu	ie
1a	Land									
b	Buildings									
с	Leasehold improvements									
d	Equipment									
e	Other									
Total.	Add lines 1a through 1e. (Column (d) m	nust equal Form 9	90. Part 2	X. column	(B), line 10	(c).) .	►			

Schedule D (Form 990) 2011

Schedule D (For	m 990) 2011			Page 3
Part VII	Investments-Other Securities	. See Form 990, Part X,	line 12.	
(a)	Description of security or category (including name of security)	(b) Book value	(c) Method of val Cost or end-of-year m	
(1) Financial	derivatives			
(2) Closely-h	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I) 				
) must equal Form 990, Part X, col. (B) line 12.) ►	L Cas Faire 000 Dait V	line 10	
Part VIII	Investments – Program Related			
(a) Description of investment type	(b) Book value	(c) Method of va Cost or end-of-year m	
(1)			,	
(1) (2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	b) must equal Form 990, Part X, col. (B) line 13.) ►			
Part IX	Other Assets. See Form 990, Pa			
	(a) Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8) (9)				
(10)				
Total. (Colur	nn (b) must equal Form 990, Part X, co	ol. (B) line 15.)		
Part X	Other Liabilities. See Form 990,			
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes	0		
(2)				
(3)				
(4)				
(5)				
(4) (5) (6) (7) (8)				
(7)				
(8)			-	
(9)			-	
(10)			-	
(11) Tetel (Column //	New standing Come 000 Dart V and (D) line 05)		-	
i otal. (Column (b	b) must equal Form 990, Part X, col. (B) line 25.)	0		

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

Schedu	le D (Form 990) 2011		Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Sta	atements	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		496,101
2	Total expenses (Form 990, Part IX, column (A), line 25)	. 2	432,358
3	Excess or (deficit) for the year. Subtract line 2 from line 1		63,743
4	Net unrealized gains (losses) on investments	. 4	0
5	Donated services and use of facilities		0
6	Investment expenses	. 6	0
7	Prior period adjustments		0
8	Other (Describe in Part XIV.)		0
9	Total adjustments (net). Add lines 4 through 8	. 9	0
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	. 10	63,743
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue	e per Return	
1	Total revenue, gains, and other support per audited financial statements	. 1	496,101
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments	0	
b	Donated services and use of facilities	0	
С	Recoveries of prior year grants	0	
d	Other (Describe in Part XIV.)	0	
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	496,101
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	0	
b	Other (Describe in Part XIV.)	0	
С	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	496,101
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Retur	'n
1	Total expenses and losses per audited financial statements	1	432,358
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	0	
b	Prior year adjustments	0	
С	Other losses	0	
d	Other (Describe in Part XIV.)	0	
е	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	432,358
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	0	
b	Other (Describe in Part XIV.)	0	
С	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	432,358
Part	XIV Supplemental Information		
Part V	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an 7, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also dditional information.		
	lule D, Part V, Line 4 - Income from the Endowment fund is intended to be used to benefit two progra		
	c Trust, which establishes chapters on college campuses to engage students in ethical behavior early		
	ng pathway to ethical leadership; and the Ethics Network, a program which promotes membership in	a community of	like-minded
indivio	duals for whom ethics, integrity, accountability and trust are guiding principles.		
policy	dule D, Part X, Line 2 - As of July 31, 2012, CPT has accrued no interest and penalties related to uncer to recognize interest and penalties related to income tax matters in other expense. In general, CPT is nations by tax authorities for U.S. federal income tax returns before fiscal 2009.		

SCHEDULE G

(Form	990	or	990	-EZ
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Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047
2011
Open to Public

	Revenue Service		Attach to Form 9	90 or Form 99	0-EZ. 🕨 See	e separate instruction			Inspection
Name	of the organization						Emp	loyer identifi	cation number
NASE		THE PUBLIC TRUS							1746267
Par		sing Activities. 0-EZ filers are n	•	•		vered "Yes" to F	Form 990), Part IV, I	line 17.
1		ner the organizatio	•			owing activities. C	heck all t	hat apply.	
а	Mail solicit	ations		e] Solicitati	on of non-govern	iment gra	nts	
b	Internet an	d email solicitatio	าร	f] Solicitati	on of governmen	t grants		
С	Phone soli			g 🗌	Special f	fundraising events	S		
d	•	solicitations							
2a		zation have a writ ees listed in Form							
b		e ten highest paid at least \$5,000 by			draisers) pi	ursuant to agreen	nents und	ler which th	ne fundraiser is to be
	(i) Name and addre or entity (fur		(ii) Activity	custody o	draiser have r control of outions?	(iv) Gross receipts from activity	(or reta fundrais	unt paid to ained by) er listed in bl. (i)	(vi) Amount paid to (or retained by) organization
				Yes	No				
1									
2									
3									
4									
5									
6									
7									
8									
9									
10									
Total					•				
3			nization is regis		ensed to s	olicit contribution	is or has	been notifi	ed it is exempt from

 Part II
 Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

 (a) Event #1
 (b) Event #2
 (c) Other events
 (d) Total events (add col. (a) through col. (c))

 92
 92
 93
 93
 93
 93
 93

Rever	1	Gross receipts	42,756		42,756
Re	2	Less: Charitable contributions	0		0
	3	Gross income (line 1 minus line 2)	42,756		42,756
	4	Cash prizes	0		0
	5	Noncash prizes	0		0
səsu	6	Rent/facility costs	1,264		1,264
Direct Expenses	7	Food and beverages	11,731	0	11,731
Direc	8	Entertainment	450	0	450
	9	Other direct expenses .	6,324		6,324
	10			olumn (d)	(19,769)
	11	Net income summary. Comb	ine line 3, column (d), a	nd line 10	22,987

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
xpen	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	□ Yes% □ No	□ Yes% □ No	□ Yes% □ No	
	7	Direct expense summary. Ac	ld lines 2 through 5 in c	olumn (d)		()
	8	Net gaming income summar	y. Combine line 1, colur	nn d, and line 7		
	a	Enter the state(s) in which the or Is the organization licensed to o If "No," explain:		in each of these states		🗌 Yes 🗌 No
10		Were any of the organization's g If "Yes," explain:	-	-	ted during the tax year	

Schedu	ile G (Form 990 or 990-EZ) 2011 Page 3
11 12	Does the organization operate gaming activities with nonmembers?
13	Indicate the percentage of gaming activity operated in:
а	The organization's facility 13a %
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name
	Address ►
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
	If "Yes," enter the amount of gaming revenue received by the organization ► \$ and the amount of gaming revenue retained by the third party ► \$ If "Yes," enter name and address of the third party:
	Name ►
	Address ►
16	Gaming manager information:
	Name ►
	Gaming manager compensation
	Description of services provided ►
	Director/officer
17 а	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$
Part	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Schedule G (Form 990 or 990-EZ) 2011

SCHEDULE J		Compensation Information	OMB No. 1545-0047			
(Form	990)	For certain Officers, Directors, Trustees, Key Employees, and Hi Compensated Employees	ighest	20	11	
Denartm	ent of the Treasury	Complete if the organization answered "Yes" to Form 990, Part IV, line 23.			o Pul	
Internal I	Revenue Service	► Attach to Form 990. ► See separate instructions.	From Lance and Lance Aldia and	Inspe	ectio	n
	f the organization	THE PUBLIC TRUST	Employer identification			
Part		Regarding Compensation	20-1	746267		
		····· 3			Yes	No
1a	990, Part VII, Se First-class Travel for c	ropriate box(es) if the organization provided any of the following to or for a section A, line 1a. Complete Part III to provide any relevant information regardi or charter travel Housing allowance or residence companions Payments for business use of payments hiftication and gross-up payments Health or social club dues or inition	ng these items. for personal use ersonal residence	orm		
	Discretiona	ary spending account	nauffeur, chef)			
b	or reimbursen	boxes on line 1a are checked, did the organization follow a written polic ment or provision of all of the expenses described above? If "No,"			v	
2	Did the organi	zation require substantiation prior to reimbursing or allowing expenses in ees, and the CEO/Executive Director, regarding the items checked in line		ers,	~	
3	organization's	, if any, of the following the filing organization used to establish the comp CEO/Executive Director. Check all that apply. Do not check any boxes fo ation to establish compensation of the CEO/Executive Director. Explain	r methods used by	a		
		tion committeeImage: Written employment contractnt compensation consultantImage: Compensation survey or studyof other organizationsImage: Approval by the board or compensation	ensation committee			
4		r, did any person listed in Form 990, Part VII, Section A, line 1a, with resp r a related organization:	ect to the filing			
a b c	Receive a seve Participate in, Participate in,	erance payment or change-of-control payment?				ン ン ン
5	For persons lis	501(c)(3) and 501(c)(4) organizations must complete lines 5–9. ted in Form 990, Part VII, Section A, line 1a, did the organization pay or a contingent on the revenues of:	ccrue any			
a b	Any related org	on?				V V
6	For persons lis	ted in Form 990, Part VII, Section A, line 1a, did the organization pay or a contingent on the net earnings of:	ccrue any			
a b	•	ion?				レ レ
D	If "Yes" to line	6a or 6b, describe in Part III.				
7		sted in Form 990, Part VII, Section A, line 1a, did the organization p described in lines 5 and 6? If "Yes," describe in Part III				r
8	to the initial	unts reported in Form 990, Part VII, paid or accrued pursuant to a contrac contract exception described in Regulations section 53.4958-4(a)(3)	? If "Yes," descr	ibe		~
9	If "Yes" to lin	ne 8, did the organization also follow the rebuttable presumption protection 53.4958-6(c)?	ocedure described	in		
For Pa	perwork Reduct	ion Act Notice, see the Instructions for Form 990. Cat. No. 5005	ізт S а	hedule J (Fo	orm 99	0) 2011

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.

			f W-2 and/or 1099-MIS		(C) Retirement and (D) Nontaxable			
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
David A Costello CPA	(i)	0	0	0	0	0	0	0
1	(ii)	884,665	150,000	176,785	21,842	13,510	1,246,802	
Alfonzo Alexander	(i)	0	0	0	0	0	0	0
2	(ii)	166,349	11,000	0	14,812	18,281	210,442	0
Michael R Bryant CPA	(i)	0	0	0	0	0	0	0
3	(ii)	215,620	35,000	0	21,842	22,278	294,740	0
Ken Bishop	(i)	0	0	0	0	0	0	0
4	(ii)	362,301	60,000	284	21,842	12,364	456,791	0
Lisa Axisa	(i)	0	0	0	0	0	0	0
5	(ii)	100,748	4,000	31,178	10,163	19,577	165,666	0
	(i)							
6	(ii)							
	(i)							
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
12	(i)							
40	(ii)							
13	(i)							
14	(ii)				<u> </u>			
	(i)							
15	(ii)				+·			
	(i)							
16	(ii)				+·			
10	···							

Schedule J (Form 990) 2011

Schedule J (Form 990) 2011

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.

Schedule J, Part I, Line 1a - CPT provides for the travel of the spouse of the Chief Executive Officer. This practice is done as a result of the integral part of the accompanying travel of the spouse. The spouse assists in planning and coordinating the activities, functions, and entertainment at various meetings and conferences.

Schedule J, Part II - The staff of CPT are employed by National Association of State Boards of Accountancy (NASBA), a related company. CPT reimbursed NASBA for the cost relevant to the time spent on CPT activities. Since CPT did not issue any W-2s, row (i) is reported as zero. The amount reported in column B row (ii) represents the amount reported by NASBA on the W-2 Box 5 for each person listed. The amount CPT reimbursed NASBA for the fiscal year for each of the officers that were employed by NASBA is as follows: David Costello \$0 Alfonzo Alexander \$68,050 Michael Bryant \$0 Ken Bishop \$0 Lisa Axisa \$33,563

Schedule J (Form 990) 2011

SCHEDULE M (Form 990)

Noncash Contributions

990, Part IV, lines 29 or 30.

Attach to Form 990.

Complete if the organizations answered "Yes" on Form

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

NASBA CENTER FOR THE PUBLIC TRUST

Employer identification number

20-1746267

Part	Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method on noncash con	(d) of determinir itribution am	
1	Art-Works of art	~	21	0	0		-
2	Art-Historical treasures						
3	Art-Fractional interests						
4	Books and publications	~		0	0		
5	Clothing and household goods	v		0	0		
6	Cars and other vehicles						
7	Boats and planes						
8	Intellectual property						
9	Securities-Publicly traded						
10	Securities—Closely held stock .						
11	Securities-Partnership, LLC,						
	or trust interests						
12	Securities-Miscellaneous						
13	Qualified conservation						
	contribution—Historic						
	structures						
14	Qualified conservation contribution—Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate-Other						
18	Collectibles	~	6	0	0		
19	Food inventory	~	16	0	0		
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens						
24	Archeological artifacts						
25	Other ► (Jewelry)	~	11	0	0		
26	Other ► (Tickets to events)	~	7	0	0		
27	Other ► ()						
28	Other►()				<u> </u>		
29	Number of Forms 8283 received						
	which the organization completed	Form 8283	3, Part IV, Donee Acknowled	agement	29		0
						Yes	No
30a	During the year, did the organizat						
	it must hold for at least three year						
	used for exempt purposes for the					30a	~
	If "Yes," describe the arrangemen		topoo policy that was in	a the various of any	n atomalaud		
31	Does the organization have a contributions?					31	v

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

32a

V

Schedule M (Form 990) (2011) Page 2					
Part II	Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.				
Schedule N	I, Part I, Line 33 - Part I, line 33. The non-cash items reported in Part I were all associated with an annual silent auction. The				
auction price	ce received for the items was less than the estimated retail value, therefore no excess amount was reported as contribution on Part VIII, line 1.c. and Schedule M, Part I, column (c).				

SCHEDULE 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.



Internal Revenue Service Name of the organization

Department of the Treasury

NASBA CENTER FOR THE PUBLIC TRUST

Employer identification number

Form 990, Part I, Line 1 - NASBA Center for the Public Trust's mission is to champion the public trust by advancing ethical leadership in business, institutions and organizations. Its goals include providing forums for ethics education, affirming integrity in business execution, encouraging ethical professional practices, showcasing best practices, and promoting a positive perspective. The NASBA Center for the Public Trust (CPT) addresses the issue of ethics and ethical behavior in business, education, public policy and society, while promoting a positive perspective on activities within the business and accounting communities. The CPT Board of Directors adopted two important guiding documents: Core Commitments and Aspirations. The purpose of these documents is to act as the Board's guiding principles and to assure stakeholders of the intent and integrity with which the Board of Directors leads the organization. The main points of each are listed below. Core Commitments: 1. A dedication to ethics 2. A passionate commitment to ethics education Board Aspirations: 1. Promoting trust and integrity 2. Supporting ethics education 3. Maintaining a positive perspective 4. Engaging in and supporting business practices that are honest and that strive to make a difference 5. Bridging the gap between theory and practice 6. Governing with openness, mutual respect, candor and personal accountability

Form 990, Part III, Line 1 - NASBA Center for the Public Trust's mission is to champion the public trust by advancing ethical leadership in business, institutions and organizations. Its goals include providing forums for ethics education, affirming integrity in business execution, encouraging ethical professional practices, showcasing best practices, and promoting a positive perspective. The NASBA Center for the Public Trust (CPT) addresses the issue of ethics and ethical behavior in business, education, public policy and society, while promoting a positive perspective on activities within the business and accounting communities. The CPT Board of Directors adopted two important guiding documents: Core Commitments and Aspirations. The purpose of these documents is to act as the Board's guiding principles and to assure stakeholders of the intent and integrity with which the Board of Directors leads the organization. The main points of each are listed below. Core Commitments: 1. A dedication to ethics 2. A passionate commitment to ethics education Board Aspirations: 1. Promoting trust and integrity 2. Supporting ethics education 3. Maintaining a positive perspective 4. Engaging in and supporting business practices that are honest and that strive to make a difference 5. Bridging the gap between theory and practice 6. Governing with openness, mutual respect, candor and personal accountability

Form 990, Part III, Line 2 - In March 2012 the Center for the Public Trust was awarded a grant from the Daniels Fund to establish a new ethics certification program for students. The project will produce a six-module online self-study undergraduate curriculum on principle-based business ethics that leads to a Business Ethics Certification from CPT. A portion of the work for this project occurred in this reporting period. The completion of the development and the launch of the program is expected in the next fiscal year.

Form 990, Part V, Line 2a - The staff of CPT are employed by National Association of State Boards of Accountancy (NASBA), a related company. CPT reimburses NASBA at cost for the time spent on CPT activities.

Form 990, Part VI, Section A, Line 2 - Two of the organization's Directors are related by marriage: OC Ferrell and Linda Ferrell are married.

Form 990, Part VI, Section A, Line 6 - The Bylaws of the organization specifies that there is one member. National Association of State Boards of Accountancy, Inc. (NASBA) is named as the sole member.

Form 990, Part VI, Section B, Line 11b - The management and staff of the organization prepared Form 990 and it is reviewed by the governing Board of Directors. The form is made available to the Board in electronic format to review and for comment prior to filing. Any changes deemed necessary are made prior to the return being filed.

Supplemental Information (Continued)

Form 990, Part VI, Section B, Line 12c - Annually every Director, officer and employee is required to sign a compliance statement which states they have read and understand the conflict of interest policy and that they are in full compliance with the policy. Any exceptions to the policy are noted on the statement. All conflicts of interest are disallowed without the prior approval of the President and CFO. In addition, new vendor relationships are reviewed during the year to determine if any conflicts of interest exist. Form 990, Part VI, Section B, Line 15 - Each year, the compensation for the Chief Executive Officer is approved by the Executive Committee of the Board of Directors of National Association of State Boards of Accountancy, Inc. (member). The total annual compensation is determined based on a national compensation study as annually commissioned with specific discussion of the President and Chief Executive Officer, as well as, an evaluation of the overall performance. Documentation of the decision is provided to the Chief Financial Officer and Human Resources. Form 990, Part VI, Section C, Line 17 - Following are the states that this organization is required to submit a copy of this Form 990 as part of registration with the state to solicit contributions. AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, ME, MD, MA, MI, MN, MS, NH, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI Form 990, Part VI, Section C, Line 19 - Documents made available to the public Currently the organization's governing documents, conflict of interest policy and financial statements are available to the officers, directors, key employees, member of the organization and others upon request. Form 990, Part VII, Section A, Line 1a - The staff of CPT are employed by National Association of State Boards of Accountancy (NASBA), a related company. CPT reimbursed NASBA for the cost relevant to the time spent on CPT activities. Since CPT did not issue any W-2s, column (D) is reported as zero. The amount reported in column (E) represents the amount reported by NASBA on the W-2 Box 5 for each person listed. The amount CPT reimbursed NASBA for the fiscal year for each of the four officers that were employed by NASBA is as follows: David Costello \$0 Ken Bishop \$0 Alfonzo Alexander \$68,050 Michael Bryant \$0 Lisa Axisa \$33,563

Activity Or Mission Description

Description

positive perspective. The NASBA Center for the Public Trust (CPT) addresses the issue of ethics and ethical behavior in business, education, public policy and society, while promoting a positive perspective on activities within the business and accounting communities.

States Where Copy Of Return Is Filed

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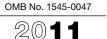
SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

Attach to Form 990.



Open to Public

Inspection

Employer identification number

20-1746267

See separate instructions.

Name of the organization

NASBA CENTER FOR THE PUBLIC TRUST

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

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1)	-				
(2)					
(3)					
(4)					
(5)					
(6)					

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 501(c)(3))	(f) Direct controlling entity	Section 5 contr ent	g) 512(b)(13) rolled ity?
						Yes	No
(1) National Assoc of State Boards of Accountancy (13-3448166) 150 Fourth Avenue North Suite 700, Nashville, TN 37219	Enhancing the effectiveness of state	DE	501(c)6		N/A		~
(2)	-						
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(7)	-						

Schedule R (Form 990) 2011

Part III Identification because	ation of Related Organi it had one or more relate	zations Ta d organiza	axable as a Pa ations treated a	artnership (Comple as a partnership du	te if the orga ring the tax y	nization answ ear.)	/ered	"Yes	s" to Form 990, Pa	art IV,	line	34		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant SI income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total S income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		General or managing		(k) Percentage ownership
							Yes	No		Yes	No			
(1)														
(2)														
(3)														
(4)														
(5)														
(6)														
(7)														

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.) Part IV

(a) Name, address, and EIN of related organiza	ation	(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
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								

Schedule R (Form 990) 2011

Part V

Note. Complete line 11 any entry is listed in Parts II, III, or IV of this schedule. Ves Note Note 1 During the tax year, diff he organization angage in any of the following transactions with one or more related organizations listed in Parts II-IV? Ia Ves Note a Receipt of (i) interest (ii) annuities (iii) royalizes or (ii) ront acastical organization(s) 1b Ves Note b Gitt, grant, or capatia contribution to related organization(s) 1c Ves Note c Loans or loan guarantees by related organization(s) 1c Ves Note f Sale of assets to related organization(s) 1f Ves Note i Lease of facilities, equipment, or other assets to related organization(s) 1h Ves Note i Lease of facilities, equipment, or other assets from related organization(s) 1h Ves Note i Reimbursement paid to related organization(s) 1h Ves Note Note g Reimbursement paid to related organization(s) 1h Ves Note Note g Reimbursement paid to related organization(s) 1h Ves Note Note g Reimbursement paid to related organization(s) 1h Ves Note Note No							
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Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Schedule R (Form 990) 2011

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.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	income (related, unrelated, excluded from tax under	(e) Are all partners section 501(c)(3) organizations?		Are all pa section 501(c)	bartners tion c)(3)	(f) Share of total income	(g) Share of end-of-year assets			(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		General or managing		General or managing		General o managing		General o managing		(k) Percentag ownershij							
			section 512-514)	Yes	No			Yes	No	-	Yes	No																		
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	Form 990) 2011	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions).	
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