Department of the Treasury

Internal Revenue Service

### **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

Open to Public Inspection

For the 2009 calendar year, or tax year beginning 2009, and ending 20 D Employer Identification number C Name of organization Magazine Publishers of America B Check if applicable Please Doing Business As 13 1087160 Address change label or Telephone number Number and street (or PO box if mail is not delivered to street address) print or Room/suite Name change type See 24th floor Initial return 810 Seventh Avenue 212) 872-3700 Specific City or town, state or country, and ZIP + 4 ☐ Terminated Instruc New York, NY 10019 G Gross receipts \$ 11,668,100 Amended return F Name and address of principal officer Nina Link Application pending H(a) Is this a group return for affiliates? ☐ Yes ☑ No same as C above H(b) Are all affiliates included? Yes No Tax-exempt status 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ www.magazine.org H(c) Group exemption number ▶ Form of organization ✓ Corporation ☐ Trust ☐ Association ☐ Other ▶ Year of formation 1919 M State of legal domicile NY Part I Summary To advance the interests of magazine 1 Briefly describe the organization's mission or most significant activities. publishers with the advertising community, the government, the press and the public. Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 30 3 Number of voting members of the governing body (Part VI, line 1a). . . . . 4 30 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 37 5 Total number of employees (Part V, line 2a) . . . . 6 0 Total number of volunteers (estimate if necessary) 0 7a Total gross unrelated business revenue from Part VIII, column (C), line 12. 7a b Net unrelated business taxable income from Form 990-T, line 34 0 **Current Year** 10,074,300 6,919,400 Contributions and grants (Part VIII, line 1h). 4,668,100 3,449,300 Program service revenue (Part VIII, line 2g) 70,000 (250,100)10 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) 342,700 261,300 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15,155,100 10.379.900.00 0 0 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 6,884,200 5,839,400 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (A), lines 11a-11d, 7,770,600 4,801,400 Total expenses. Add lines 13 (must equal Part IX, column (A), line 25) 14,654,800 10,640,800 19 Revenue less expenses Subtraceline to ind miline to in 500,300 (260,900)Beginning of Current Year End of Year 20 Total assets (Part X, line 16) 10,328,100 9.098.500 Total liabilities (Part X, line 26) 3,127,400 1,433,200 Net assets or fund balances. Subtract line 21 from line 20 7,200,700 7,655,300 Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Signature of officer Here resident & CEO Type or print name and title Check if Date Preparer's identifying number Preparer's self-(see instructions) signature employed ▶ □ Paid Preparer's Firm's name (or yours Use Only if self-employed), address, and ZIP + Phone no ▶ (

Cat No 11282Y

Form 990 (2009)

Par	t III Statement of Program Service Accomplishments
1	Briefly describe the organization's mission.  To advance the interests of the magazine publishers with the advertising community, the government, the press and the public.
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	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code: 900099 ) (Expenses \$ 1,899,000 including grants of \$ 0 ) (Revenue \$ 1,479,700 )
	ADVERTISING, MARKETING, AND RESEARCH  Programs were designed to promote better understanding among magazines and groups with allied interest, such as advertisers and advertising agencies, national and local business organizations, educators and students, local, state, and national civic and public bodies and organizations. These groups were encouraged to recognize that magazines are a continuing source of education for all, and that magazines provide the information, inspiration and entertainment upon which Americans everywhere base many of their thoughts, their tastes and their actions.
4b	(Code: 900099 ) (Expenses \$ 887,300 including grants of \$ 0 ) (Revenue \$ 797,000 )  EVENTS  The Events staff organized and put on five conferences during which members and others connected to the magazine industry were provided with services and information concerning every phase of magazine publishing, and were provided with assistance in solving their common problems.
4c	(Code: 900099 ) (Expenses \$ 1,370,000 including grants of \$ 0 ) (Revenue \$ 1,121,700 )  THE AMERICAN SOCIETY OF MAGAZINE EDITORS (ASME)  ASME has over 800 member editors and promotes editorial excellence through seminars and conferences. ASME organizes the National Magazine Award for best articles in a variety of catagories, and the Best Cover contest.  ASME also places students from journalism programs into the magazine industry from over 200 applicants.
	Other program services. (Describe in Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )  Total program service expenses \$ 5.875.700
70	Total program service expenses ► 5,875,700

Pai	rt 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		1
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		1
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		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	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? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, IX, or X as applicable	11	1	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, 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 assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	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.			
•	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			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.  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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	12	✓	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			_
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a	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, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>	14b		1
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, Part II	15		1
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, Part III	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? If "Yes," complete Schedule G, Part 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? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		1
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		1

Fel	Checklist of Required Schedules (continued)			
	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.	21		1
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		1
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	<b>✓</b>	
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 25	24a		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<b>✓</b>
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		1
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<b>✓</b>
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	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? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III.	27		✓
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		<b>✓</b>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		✓
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	✓	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		<b>\</b>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38		<b>V</b>
			▼	

Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	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 reportable gaming (gambling) winnings to prize winners?	1c		لـــــا
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 37			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	✓	<u> </u>
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		<b>√</b>
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>√</b>
b	If "Yes," enter the name of the foreign country: ▶			1
	See the instructions for exceptions and 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		1
b		5b		<b>V</b>
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
<b>6</b> a	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>√</b>
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).			
	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, during the year, 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		
-	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? .	7 <u>g</u>		
ħ	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7h		
8	required?		_	
5	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.			]
а	Did the organization make any taxable distributions under section 4966?	9a		ļ
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		<del></del>
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			ļ
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
40	amounts due or received from them)	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year.   12b	12a		

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.

Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			ļ
	any other officer, director, trustee, or key employee?	2		<b>✓</b>
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	L	✓
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		<b>✓</b>
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		<b>✓</b>
6	Does the organization have members or stockholders?	6	✓	ļ
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	<b>✓</b>	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	<u> </u>	1
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1	
	the year by the following:		l	
а	The governing body?	8a	<b>/</b>	ļ
b	Each committee with authority to act on behalf of the governing body?	8b	✓	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached		1	l .
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9a		<u> </u>
	tion B. Policies (This Section B requests information about policies not required by the Inter-	ernal		
Rev	enue Code.)		<del></del>	<del></del>
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a	<u> </u>	/
þ	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,	l	ł	
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b	<b></b>	<u> </u>
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the		1	١,
	form?	11	<u> </u>	<b>✓</b>
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<del>  ,</del>
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<del></del>	<b>✓</b>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give		1	<b> </b>
	rise to conflicts?	12b		/
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		1	
	describe in Schedule O how this is done	12c	<del>                                     </del>	1
13	Does the organization have a written whistleblower policy?	13	<del></del>	\ <u> </u>
14	Does the organization have a written document retention and destruction policy?	14		<del>                                     </del>
15	Did the process for determining compensation of the following persons include a review and approval by		ĺ	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	15-	-	
a		15a	1	$\vdash$
ь	Other officers or key employees of the organization	15b	<del>-</del>	<del> </del>
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	160	1	1
	with a taxable entity during the year?	16a		<del>  •</del>
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		1	
	the organization's exempt status with respect to such arrangements?	16b	1	-
Sec	ction C. Disclosure	100		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c			
.0	available for public inspection. Indicate how you make these available. Check all that apply.	<i>/</i> /(3/8	Jiliy)	
	Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict	of int	oroct	
13	policy, and financial statements available to the public.	OI IIII	51 <b>5</b> 51	
20	State the name, physical address, and telephone number of the person who possesses the books and reco	rde ~	f tha	
20	organization. ► Magazine Publishers of America, 810 Seventh Avenue, 24th floor, NY, NY 10019, 212-87.	2-370	0	

## 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. Use Schedule J-2 if additional space is needed.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. 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 the organization did not co	pmpensate	any o	curre			cer, d	lirec	tor, or trustee.		
(A)	(B)		(C)				(D)	(E)	(F)	
Name and Title	Average hours per	m nor						Reportable	Reportable compensation	Estimated amount of
	nours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount or other compensation from the organization and related organizations
John Q. Griffen										
Chairman	1	1	:	1		İ		0		0
Jack H. Griffen	1							0		0
Vice Chairman		✓		✓						<u> </u>
Efrem Zimbalist III	1							0		0
Treasurer	<u>'</u>	1		✓	<u> </u>					
Mary Berner	.5							o		0
Director		<b>✓</b>								
Cathleen Black	.5	١,						o		0
Director		<b>✓</b>	-	_		ļ				
Lawrence J. Burke II Director	.5	1						0		0
David Carey	_							_		
Director	.5	1			l .			0		0
Keith Clinkscales	.5							0		0
Director		1								<u> </u>
Michael Clinton Director	.5	/	:					0		0
Larry Diamond Director	.5	/						0		0
James Fishman	<u> </u>	<b>                                     </b>			$\vdash$				-	
Director	.5	1						0		0
Earl G. Graves	.5							0		0
Director		1						U		
Tom Hardy	.5							0		0
Director		✓	_		<u> </u>			•		
Ed Kelly	.5	١,						o		0
Director	ļ · · ·	<b>/</b>			_	<u> </u>				
Michael Kisseberth	.5	١,						o		0
Director		<b>✓</b>	-	-	├-		$\vdash$			
Jack Kliger	.5	,						0		0
Director	L .	✓		Щ.			$\bot$			

Name and title	Average						ply)	Reportable	Reportable		Estimati	
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	cor	amount other mpensa from th rganizati and relati ganizati	ation ne tion ted
David Liu	5							0				0
Director	.•	<b>✓</b>	┞	<u> </u>	ļ	ļ	ļ			$+\!-\!$		
Scott Masterson Director	5	,						0				0
Robert L. Miller		<b>  ^</b>	<del> </del>	-	-		<del>                                     </del>			+-		
Director	5	1						0				0
Ann Moore	_	<u> </u>	$\vdash$				T			1		
Director	.5	✓						0				0
Linda Johnson Rice	5							0				0
Director	.3	<b>✓</b>	<u> </u>	ļ			<u> </u>			<del>                                     </del>		
Paul Rossi	.5							0				0
Director Robert A. Sauerberg	1	<b> </b>	-	-	-		ļ	·		+-		
Director	.5	/	1					0				0
Marvin R. Shanken	<del> </del>	+					i –		<u> </u>	+-		
Director	.5	1						0				0
Richard M. Smith	1_	<u> </u>	1	1								
Director	.5	<b>/</b>				<u></u>		0				0
Terry Snow	.5							0				0
Director		✓						-		ļ		
John Fox Sullivan	.5	١,				1		0				0
Director Gary Thoe		<b>✓</b>	┝	╁	<b> </b> -		<del> </del>			┼─		
Director	.5	1						0		0		0
(continues on schedule J2)	1	-	├	┼	┢	<del> </del>	-			+-		
······································	·-								-			
1b Total				,			▶	ĺ				
2 Total number of individuals (including but		to th	ose	list	ed a	above	e) wl	ho received mo	ore than \$100,0	00 ın		
reportable compensation from the organization	zation >										<del></del>	<b>,</b>
											Yes	No
3 Did the organization list any former office							oye	e, or highest o	ompensated	- <u>-</u>		1 , 2
employee on line 1a? If "Yes," complete										3	┼	+
4 For any individual listed on line 1a, is the											}	i '
the organization and related organizations individual.	greater tha	an \$1:	50,0	3007	! ! ! .	'Yes,"	co	mplete Schedu	le J for such	4	1	1 '
5 Did any person listed on line 1a receive	or accrue	com	nen	satu	on i	from	 anv	unrelated org	anization for		†	<del>                                     </del>
services rendered to the organization? If	"Yes," com	plete	Sch	edu	ile J	for s	such	person		5	<u> </u>	<u> </u>
Section B. Independent Contractors												
1 Complete this table for your five highest of compensation from the organization.	compensate	ed ind	epe	ende	ent d	contra	acto	rs that receive	d more than \$1	00,00	10 of	
(A) (B) Name and business address Description of services Co							(C) ensatio	תי				
NONE NONE							N	IONE				
2 Total number of independent contractors					l to	those	list	ed above) who	received			
more than \$100,000 in compensation fro	in the orga	ıızatı	ווע 🕨	U		-						
										Ea-	000	ranna

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

(C)

(D)

(B)

rt VIII	Statement of Rever	nue						Page 9
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
and other similar amounts	Federated campaigns .	ļ	1a	. 0				
Б	Membership dues	].	1b	6,919,400				
Б с	Fundraising events	[	1c	0				
<u>a</u> d	Related organizations .		1d	0				
E e	Government grants (contribute	ions).	1e	0				
b f	All other contributions, gifts, grant	ts,						
	and similar amounts not included	above	1f	0				
일 9	Noncash contributions included in	lines 1a-1i	f: \$	0				
<u>a</u>   p	Total. Add lines 1a-1f .	<u> </u>	<del></del>		6,919,400			<del> </del>
			L	Business Code				
2a	Publishers Info. Bureau		-	900099	1,411,00	1,411,000		
Ь	Amer. Soc. of Mag. Edito	ors	ļ	900099	1,121,700	1,121,700		ļ
С	Events		}	900099	695,300	695,300		
d	Professional Developme	nt	-	900099	221,300	221,300		
е	***				0	0		
2a b c d e f	All other program service		_		0	0		
<u>g</u>								<del> </del> -
3	Investment income (includ	-			C4 900			64.00
					61,800			61,800
4	Income from investment of ta	x-exemp	t bond	proceeds -	0			<del> </del>
5	Royalties	(i) Real	т	(ii) Personal				<del> </del>
	<u></u>	(I) FICUI	0	0				
1	Gross Rents		0					
	Less: rental expenses  Rental income or (loss)		0	0				
	Net rental income or (loss)	\		<u> </u>				
	·	i) Secuntie	es .	(ii) Other				<del>                                     </del>
/a	Gross amount from sales of assets other than inventory	1,288	<del></del> +	0				
.	Less: cost or other basis	.,	,_,,_					
6	and sales expenses .	1,600	.100	0				
	Gain or (loss)	(311,		0				
	Net gain or (loss)	<u> </u>		▶	(311,900)			(311,900
	•	undraisin	ÌГ					
	events (not including \$							
	of contributions reported or	n line 1c	c).					
	See Part IV, line 18			0				
	Less: direct expenses .			0				
C	Net income or (loss) from	fundrais	ing ev	ents ►	0			
9a	Gross income from gaming	activities	s.					
	See Part IV, line 19			0				
	Less direct expenses .			0				
C	Net income or (loss) from	gaming	activit	ies ▶	0			ļ
10a	Gross sales of invento	ory, les	ss					
	returns and allowances .		a	0				
	Less: cost of goods sold			0		-	_	
ိ	Net income or (loss) from sa		vento		0			ļ
<u> </u>	Miscellaneous Revenue		-+	Business Code		- 484	-	
11a	Lifetime Achievement Av	ward	-	900099	101,700	101,700		
b	Kelly Award		}	900099	68,700	68,700		
C	Work Letter Amortization	n	-	900099	88,900	88,900		<del> </del>
	All other revenue				2,000	2,000		<u> </u>
e 12	Total. Add lines 11a-11d			🟲	261,300			
	Total revenue. See instrui	cuons.		🟲 🛭	10,379,900	3,710,600		(250,100)

Part IX Statement of Functional Expenses

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

	All other organizations must complete colu				
	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	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U.S See Part IV, line 22	0			<del>.</del> ,
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,001,700	393,300	608,400	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	3,853,300	2,266,900	1,586,400	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	349,300	202,500	146,800	
9	Other employee benefits	353,200	179,600	173,600	
10	Payroll taxes	281,900	147,000	134,900	
11	Fees for services (non-employees):				
а	Management	118,900		118,900	<del></del>
	Legal	59,800		59,800	
	Accounting	30,000		30,000	
	Lobbying	375,400		375,400	<del> </del>
	Professional fundraising services See Part IV, line 17			17 700	
	Investment management fees	17,700		17,700	
	Other	0			
	Advertising and promotion	252,800	90,400	162,400	
13	Office expenses	141,100	50,500	90,600	
14	Information technology	0	30,300	30,000	
15	Royalties	875,000	313,000	562,000	<u> </u>
16	Occupancy	208,500	144,600	63,900	
17	Travel	200,000	111,000	03,300	·
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings .	1,364,200	1,364,200		
20	Interest	0			
21	Payments to affiliates	0	00 700	100 000	
22	Depreciation, depletion, and amortization.	258,700	92,500	166,200	
23	Insurance	58,300	20,900	37,400	
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
а	Advertising, Marketing & Research	369,000	369,000		-
b	Legislative Affairs	233,200		233,200	
c	Consumer Marketing	57,700	57,700		
d	Achievement Awards	183,600	183,600		
e	Bad Debt Expense	140,000		140,000	
_	All other expenses	57,500		57,500	
25	Total functional expenses. Add lines 1 through 24f	10,640,800	5,875,700	4,765,100	
26	Joint costs. Check here ▶ ☐ If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part Part	X	Balance Sheet			
		,	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	3,793,100	1	2,475,500
ł	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	770,600	4	711,900
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of			
		Schedule L	0	5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L	0	6	0
ş	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
ا≽	9	Prepaid expenses and deferred charges	383,000	9	275,400
11	0a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation	1,190,000		988,600
1		Investments—publicly traded securities	4,191,400	11	4,647,100
1:	2	Investments—other securities. See Part IV, line 11	0	12	0
1:	3	Investments—program-related. See Part IV, line 11	0	13	0
1.	4	Intangible assets	0	14	0
1:	5	Other assets. See Part IV, line 11	0	15	0
11	6	Total assets. Add lines 1 through 15 (must equal line 34)	10,328,100	16	9,098,500
11	7	Accounts payable and accrued expenses	895,400	17	696,900
1:	8	Grants payable	0	18	0
1:	9	Deferred revenue	1,357,500	19	200,600
2	0	Tax-exempt bond liabilities	0	20	0
8 2	:1	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	0
Liabilities 5	2	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			<u> </u>
-		persons. Complete Part II of Schedule L		22	0
2		Secured mortgages and notes payable to unrelated third parties	0	23	0
2		Unsecured notes and loans payable to unrelated third parties	0	24	0
2		Other liabilities. Complete Part X of Schedule D	874,500		736,300
se 2	.6	Total liabilities. Add lines 17 through 25	3,127,400	26	1,633,800
	7	Unrestricted net assets	7,200,700	27	7,655,300
3ag	. <i>r</i> 28	Temporarily restricted net assets	0	28	0
	.o :9	Permanently restricted net assets	0	29	0
Net Assets or Fund Balance		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.			
इ ३	0	Capital stock or trust principal, or current funds		30	
Se	1	Paid-in or capital surplus, or land, building, or equipment fund		31	
A 3	2	Retained earnings, endowment, accumulated income, or other funds		32	
E et	3	Total net assets or fund balances	7,200,700	33	7,655,300
<b>2</b> 3	4	Total liabilities and net assets/fund balances	10,328,100		9,098,500

Pai	t XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990:   Cash  Accrual  Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		✓
b	Were the organization's financial statements audited by an independent accountant?	2b	<b>✓</b>	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	<b>✓</b>	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	۱		
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

Form **990** (2009)

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

### **Political Campaign and Lobbying Activities**

For Organizations Exempt From income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

OMB No 1545-0047 Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C. • Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B • Section 527 organizations. Complete Part I-A only.

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

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

	e <b>organization answered "Ye</b> s Section 501(c)(4), (5), or (6) orga	s," to Form 990, Part IV, line 5 (Proxy	/ Tax), then			
	me of organization	inizations Complete Fait iii			Employe	er identification number
	gazine Publishers of Amer	rica			13	1087160
Pai	t I-A Complete if the	organization is exempt unde	er section 501(c	) or is a sect	ion 527	1.
1 2 3	•	e organization's direct and indirect	•	-	_	0
Pai	t I-B Complete if the	organization is exempt und	er section 501(	c)(3).		
1 2 3 4a b	Enter the amount of any e If the organization incurred Was a correction made? If "Yes," describe in Part I"		managers under m 4720 for this ye	section 4955 . ear?	► \$ 	Yes No
Pa	rt I-C Complete if the	e organization is exempt und	er section 501(	c), except se	ction 5	01(c)(3).
1	activities  Enter the amount of the fil 527 exempt function activity		ed to other organi	zations for sect	▶ \$ tion ▶ \$	0
3 4 5	line 17b  Did the filing organization Enter the names, addresses were made For each organiz contributions received that v	penditures. Add lines 1 and 2. Er	r (EIN) of all section om the filing organ to a separate politic	n 527 political o ization's funds a ical organization	organizati Also ente	r the amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount par filing organiza funds If none, e	tion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
	N/A					

Sci	hedule C (Form 990 or 990-EZ) 2009					Page 2
P	art II-A Complete if the organizat under section 501(h)).	ion is exem	pt under sectio	n 501(c)(3) and	filed Form 5768	(election
A B	Check ► ☐ If the filing organization Check ► ☐ If the filing organization	belongs to a	in affiliated grou	p. control" provisio	ons apply.	
	Limits on Lob (The term "expenditures" m	bying Expend	litures		(a) Filing organization's totals	(b) Affiliated group totals
	a Total lobbying expenditures to influenc b Total lobbying expenditures to influenc c Total lobbying expenditures (add lines d Other exempt purpose expenditures e Total exempt purpose expenditures (ad f Lobbying nontaxable amount. Enter the columns	e a legislative 1a and 1b) 	body (direct lobb	yıng)		
_	If the amount on line 1e, column (a) or (b) is: Not over \$500,000  Over \$500,000 but not over \$1,000,000  Over \$1,000,000 but not over \$1,500,000  Over \$1,500,000 but not over \$17,000,000  Over \$17,000,000  g Grassroots nontaxable amount (enter 2 h Subtract line 1g from line 1a. If zero or i Subtract line 1f from line 1c If zero or if there is an amount other than zero on section 4911 tax for this year?  4-Ye	20% of the au \$100,000 plus \$175,000 plus \$225,000 plus \$1,000,000 5% of line 1f) less, enter -0 less, enter -0 either line 1h	or line 1, did the c	s over \$500,000 s over \$1,000,000 over \$1,500,000	rm 4720 reporting	☐ Yes ☐ No
	(Some organizations that ma	de a section	501(h) election of	lo not have to co 2a through 2f on		ive
	Lobbying	Expenditure	s During 4-Year	Averaging Period	1	,
	Calendar year (or fiscal year beginning in)	(a) 2006	( <b>b)</b> 2007	(c) 2008	(d) 2009	(e) Total
2	2a Lobbying nontaxable amount					
	<b>b</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 expenditures					

	(4	a)	(	(b)	_
	Yes	No	Aı	nount	t
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:	_				
a Volunteers?	<u> </u>		l		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .	-				
c Media advertisements?	-				
d Mailings to members, legislators, or the public?	-				
e Publications, or published or broadcast statements?	-				
f Grants to other organizations for lobbying purposes?	<b>-</b>		<u> </u>		
<ul> <li>b Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?</li> </ul>			1		
i Other activities? If "Yes," describe in Part IV					
j 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)?	L				
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912					
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	ļ	_			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	501(c)(	(5), o	r secti	on	
331(3)(3)				Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			1		1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		•	2		1
3 Did the organization agree to carryover lobbying and political expenditures from the prior year? .		·	3		Ť
Part III-B Complete if the organization is exempt under section 501(c)(4), section 5	501(c)(	5), o			
501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	II-A, li	ne 3	is ans	were	∍d
"Yes."					
1 Dues, assessments and similar amounts from members		1		6,91 <u>9</u>	,40
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polexpenses for which the section 527(f) tax was paid).	litical	•			
<b>a</b> Current year		2a		609	,000
<b>b</b> Carryover from last year		_2b			
c Total		2c			,000
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3		539	,700
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
excess does the organization agree to carryover to the reasonable estimate of nondeductible lob		-		-	201
and political expenditure next year?  5 Taxable amount of lobbying and political expenditures (see instructions)		4			,300
Part IV Supplemental Information	•_•	5	L		(

	·	ge 4
Part IV	Supplemental Information (continued)	
• • • • • • • • • • • • • • • • • • • •		
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### SCHEDULE D (Form 990)

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public

Name of the organization

Inspection Employer identification number

wag	jazine Publishers of America			13 :	1007100
Pai	Organizations Maintaining Don the organization answered "Yes"			unds or Acc	ounts. Complete if
		(a) Donor advised fur		(b) Funds a	and other accounts
1	Total number at end of year				
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and c	lonor advisors in writing th	at the assets he	ld in donor adv	used
•	funds are the organization's property, subje				
6	Did the organization inform all grantees, do	-	_		
	used only for charitable purposes and not for	or the benefit of the donor	or donor adviso	r, or for any ot	her
	purpose conferring impermissible private be	nefit?	<u></u>	· · · ·	Yes No
Pai	rt II Conservation Easements. Compl	ete if the organization and	swered "Yes" to	o Form 990, P	art IV, line 7.
1	Purpose(s) of conservation easements held	by the organization (check	all that apply).		
	Preservation of land for public use (e.g.,	recreation or pleasure)	☐ Preservation	of an historical	ly 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 organiza	tion held a qualified conser	vation contributi	on in the form	of a conservation
	easement on the last day of the tax year.				
					d at the End of the Tax Year
а	Total number of conservation easements.				<del> </del>
b	Total acreage restricted by conservation ear	sements			
C	Number of conservation easements on a ce	rtified historic structure inc	luded in (a)		
d	Number of conservation easements include	d in (c) acquired after 8/17	/06	. 2d	
3	Number of conservation easements modifie	d, transferred, released, ex	tinguished, or te	erminated by th	e organization during
	the tax year ▶				
4	Number of states where property subject to				_
5	Does the organization have a written policy			-	F1 F1
_	violations, and enforcement of the conserva				
6	Staff and volunteer hours devoted to monito	ming, inspecting, and emor	cing conservation	on easements t	during the year
7	Amount of expenses incurred in monitoring,	inepacting, and enforcing	consequation or	comente durin	a the year
•	►\$	inspecting, and emorting	Conservation ea	sements dunin	y trie year
8	Does each conservation easement reported	on line 2(d) above eatisfy:	the requirements	of section	
0	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?				Yes No
9	In Part XIV, describe how the organization r				
•	balance sheet, and include, if applicable, the				
	the organization's accounting for conservati				
Pai	rt III Organizations Maintaining Collection	ctions of Art, Historical	Treasures, or (	Other Similar	Assets.
	Complete if the organization answer	ered "Yes" to Form 990, I	Part IV, line 8.		
1a	If the organization elected, as permitted und	ler SEAS 116, not to repor	in its revenue s	tatement and I	nalance sheet works of
	art, historical treasures, or other similar asset				
	provide, in Part XIV, the text of the footnote	to its financial statements	that describes t	hese items.	•
b	If the organization elected, as permitted und	ler SFAS 116, to report in i	ts revenue state	ment and bala	nce sheet works of art.
-	historical treasures, or other similar assets h	neld for public exhibition, e			
	provide the following amounts relating to the				
	(i) Revenues included in Form 990, Part VII				\$
	(ii) Assets included in Form 990, Part X .				\$
2	If the organization received or held works of following amounts required to be reported to			assets for fina	ncial gain, provide the
а	Revenues included in Form 990, Part VIII, Iii			•	\$
h	Assets included in Form 990 Part Y	· · · ·			¢

-	Dane	2
	rane	~

Pai	rt III Organizations Maintaining C	ollections of	Art, Hi	storica	l Treasures,	or Oth	ner Similar	Āssets (	contir	nued)
3	Using the organization's acquisition, acce collection items (check all that apply):	ession, and oth	ner recor	rds, che	ck any of the f	ollowir	ng that are a	significa	nt use	of its
а	Public exhibition		d	_ ь	oan or exchan	ge pro	grams			
b	Scholarly research		е		ther					
С	Preservation for future generations									
4	Provide a description of the organization' Part XIV.	s collections a	and expl	ain how	they further t	he org	anızatıon's e	xempt p	urpose	) in
5	During the year, did the organization solicit assets to be sold to raise funds rather than	to be maintain	ed as pa	art of the	organization's	collec	tion?		Yes [	☐ No
Pa	rt IV Escrow and Custodial Arrang IV, line 9, or reported an amou					swere	d "Yes" to F	orm 990	), Part	[
	Is the organization an agent, trustee, cus included on Form 990, Part X?					ns or o	ther assets i	not _	Yes [	□No
b	If "Yes," explain the arrangement in Part	XIV and comp	lete the	followin	g table:					
						<u> </u>		Amount		
С						1c				
d	, , , , , , , , , , , , , , , , , , ,					1d				
e						1e				
f	Ending balance					1f				
	If "Yes," explain the arrangement in Part	XIV.						•	Yes	_  No 
Pal	rt V Endowment Funds. Complet	-								
	(a) (	Current year	(b) Prior	r year	(c) Two years b	ack (d	) Three years ba	ck (e) Fo	our years	s back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships							_		
е	Other expenditures for facilities and programs									
f g										
2	Provide the estimated percentage of the	year end bala	nce held	as:						
а	Board designated or quasi-endowment	· ·	%							
b	Permanent endowment ▶ %									
С	Term endowment ▶ %									
3a	Are there endowment funds not in the possorganization by:	session of the	organiza	ition tha	t are held and	admını	stered for th	e	Yes	No
	(i) unrelated organizations							3a(	0	
	(ii) related organizations							3a(i	i)	
	If "Yes" to 3a(II), are the related organization							. <u>3b</u>		
4	Describe in Part XIV the intended uses of									
Par	rt VI Investments—Land, Building	gs, and Equi	ipment.	See Fo	orm 990, Par	t X, lin	e 10.			
	Description of investment	(a) Cost or othe (investmen			t or other (other)		umulated eciation	(d) Bo	ook valu	е
1a	Land									
b	Buildings	<del>.</del>								
С	Leasehold improvements	1,54	17,200				831,600		715	5,600_
d	Equipment	19	94,200				156,800	<del></del> .	37	<u>7,400</u>
	Other	61	19,800				384,200		235	5,600
Tota	al. Add lines 1a through 1e. (Column (d) must e	equal Form 990	, Part X,	column (	(B), line 10(c) )		▶		988	8,600

Part VII Investments—Other Securi	ities. See Form 990, Part X, IIn	<u>e 12.                                      </u>
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
		-
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Re	lated. See Form 990, Part X, lin	e 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
(-,	(-,	Cost or end-of-year market value
		·
	1	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)	<b>D</b>	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)  Part IX  Other Assets. See Form 990		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13)  Part IX  Other Assets. See Form 990		(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
	, Part X, line 15.	(b) Book value
Part IX Other Assets. See Form 990	, Part X, line 15.  (a) Description	
Part IX Other Assets. See Form 990  Total. (Column (b) must equal Form 990, Part X,	, Part X, line 15.  (a) Description	(b) Book value
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9	col. (B) line 15.)	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability	, Part X, line 15.  (a) Description	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability	col. (B) line 15.)	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)	
Part IX Other Assets. See Form 990  Fotal. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability  Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X,  Other Liabilities. See Form 990	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount	
Total. (Column (b) must equal Form 990, Part X, Part X Other Liabilities. See Form 9  1. (a) Description of liability Federal income taxes	col. (B) line 15.)  (a) Description  col. (B) line 15.)  (b) Amount  736,300	

Р	'ar	'n	

Da	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial S		
	•		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	10,379,900
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	10,640,800
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	(260,900)
4	Net unrealized gains (losses) on investments	4	725,500
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	725,500
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	464,600
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue	e pe	r Return
1	Total revenue, gains, and other support per audited financial statements	1	10,998,800
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
- a	Net unrealized gains on investments	0	
b	Donated services and use of facilities		
c	Recoveries of prior year grants	7	
d	Other (Describe in Part XIV.)		
	Add lines 2a through 2d	20	725,500
e		3	<del>-  </del>
3	Subtract line 2e from line 1		10,273,300
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  4a  17,70	۸	
a	at the second of	_	
b	Other (Describe in Fact XIV.)		400.000
_C		40	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		, ,,,,,,,,,,
Pa	T XIII Reconciliation of Expenses per Audited Financial Statements With Expense	ses p	
1	Total expenses and losses per audited financial statements	_1	10,534,200
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	İ	
а	Donated services and use of facilities		
þ	Prior year adjustments	_	
С	Other losses		
d	Other (Describe in Part XIV.)	_	
е	Add lines 2a through 2d	20	
3	Subtract line 2e from line 1	3	10,534,200
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 17,70	0	
b	Other (Describe in Part XIV.)	0	
С	Add lines 4a and 4b	4	106,600
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,640,800
Pai	rt XIV Supplemental Information		
	pplete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a ar	nd 4·	Part IV lines 1b
	2b; Part V, line 4, Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d are		
	part to provide any additional information.		
Pai	rt XII-2d and Part XIII-2d consists of \$88,900 of the amortization of a capitalized work letter.		
<b></b>			
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Schedule D (For	m 990) 2009	Page <b>5</b>
Part XIV	Supplemental Information (continued)	
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### **SCHEDULE J** (Form 990)

Department of the Treasury

Internal Revenue Service Name of the organization **Compensation Information** 

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

Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Magazine Publishers of America 13 1087160 **Questions Regarding Compensation** Part I Yes No 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees Personal services (e.g., maid, chauffeur, chef) ☐ Discretionary spending account b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. ☑ Compensation committee ☑ Written employment contract ☐ Independent compensation consultant ☐ Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization. 4a b Participate in, or receive payment from, a supplemental nonqualified retirement plan?.... 4b c Participate in, or receive payment from, an equity-based compensation arrangement?.... 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: 5a 5b If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization? 6a **b** Any related organization? . . . 6b If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . . . . . . . . . . . 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe 8 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in 

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

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

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

		(B) Breakdown of W-2	۱.,	and/or 1099-MISC compensation	bac tromostod (2)	oldessetsold (C)	Total of ordinary	
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(i)(a)	reported in pror Form 990 or Form 990-EZ
Nina Link	© 3	531,266	0	453,254	63,264	13,862	1,061,647	453,254
Ellen Oppenheim	€ €	351,886	0		27,578	13,862	393,326	
James Cregan	€ €	248,688	0		27,129	16,661	292,478	
Kenneth Godshall	<b>E 3</b>	159,390	0		16,511	15,684	191,586	
Rita Cohen	€ €	197,875	0		21,222	638	219,735	
Wayne Eadie	€ €	199,746	0		22,652	13,850	236,249	
James C. McCullagh	88	175,985	0		18,965	6,049	200,999	
Howard Polskin	(3)	199,471	0		21,719	1,735	222,925	
Marlene Kahan	8	164,836	0		17,709	6,364	188,909	
Christopher Nolan	88	205,251	0		12,585	7,929	225,765	
Richard O'Rorke	8	137,539	0		14,569	13,850	165,958	
Stephen Frost	8	131,031	0		12,787	13,850	157,669	
Sidney Holt	88	217,560	0		16,397	114	234,071	
Nicole Kaplan	€ €	142,545	0		14,196	6,364	163,105	
Bradley Weltman	€ 3	114,153	0		11,069	1,111	126,332	
Myra Barcan	8	118,591	0		11460	639	130,690	
							Sche	Schedule J (Form 990) 2009

### SCHEDULE J-2 (Form 990)

### **Continuation Sheet for Form 990**

20**19** 

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

► See the Instructions for Form 990.

Name of the Organization

Employer Identification number

Part I Continuation of Officers, D Employees	Directors, Tru	ustee	s, l	Key	/ E	mplo	yee	es, and High	est Compensa	ited
(A)	(B)			(	C)			(D)	(E)	(F)
Name and title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Rey employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Bryan Welch Director	.5	1						0		0
David Willey	]				ĺ					
Director	.5	1		<u> </u>				0		0
Nina Link	]						ł			
President & CEO	40		L.	✓		<u> </u>		984,520		101,331
Ellen Oppenheim	1									
EVP Chief Marketing Officer	40				✓	<u> </u>		351,886		49,076
James Cregan	4	ĺ								
EVP Government Affairs	40					<b>✓</b>		248,688		56,690
Kenneth Godshall	1				İ					
EVP Consumer Marketing	40			_	ļ	<b>✓</b>	ļ	159,390		28,766
Rita Cohen										
SVP Legislative & Regulatory Policy	40				<u> </u>	<b>✓</b>	_	197,875		28,303
Wayne Eadie					ļ				i	
SVP Research	40				<u> </u>	✓		199,746		34,078
James C. McCullagh SVP Member Services	40					1		175,985		26,516
Howard Polskin										
SVP Communications & Events	40		<u> </u>	_		<b>✓</b>		199,471		27,757
Marlene Kahan ASME, Executive Director	40					<b>✓</b>		164,836		23,857
Christopher Nolan General Counsel	40					/		205,251		12,622
Richard O'Rorke										
CFO	40					✓		137,539		24,485
Stephen Frost										<u> </u>
Director - Research	40	<u></u>				1		131,031		26,442
Sidney Holt Chief Executive ASME	40					1		217,560		23,963
Nicole Kaplan				_	_			211,000		
VP - Marketing & Promotions	40					<b>✓</b>		142,545		21,030
Bradley Weltman								,		21,000
VP - Government Affairs	40					1		114,153		3,736
Myra Barcan						,				
VP - Systems & Technology	40					1		118,591	İ	12,562
				·						
					_					

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Supplemental Information to Form 990**

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

► Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Employer Identification number

Magazine Publishers of America 13 1087160 1. Form 990, Part VI, Sec A, line 6: The organization is a not-for-profit trade association representing consumer magazines ( published and/or distributed domestically. Dues paying domestic publishing entities comprise the voting membership. 2. Form 990, Part VI, Sec A, line 7a: The membership, comprised of dues paying domestic members, elect a Board of Directors, Board Officers and an Executive Committee each year at the annual general meeting of the membership. 3. Form 990, Part VI, Sec A, line 11a: The organization's accounting staff prepares the form 990. It is reviewed by the organization's Chief Financial Officer, The Chief Executive Officer and the independent accounting firm that conducts the annual audit. 4. Form 990, Part VI, Sec B, lines15a &15b: The organization utilizes a compensation committee made up of a subcommittee non-compensated members of the Board of Directors, headed by the chairman of the Board (3-5 members). The organization's outside counsel also acts as an advisor to the committee and keeps a record of the meetings. It meets annually for the purpose of evaluating the compensation of the CEO, key employees and senior management of the organization. In performing this function, the Committee reviews comparability and other data. 5. Form 990, Part VI, Sec C, line 19: The audited financial statements are available on the organization's web-site along with the organization's By-Laws.

Schedule O (Form 990) 2009	Page 2
Name of the organization	Employer Identification number
	<u> </u>
	<b></b>
	••••
	***************************************
	•••••
	•••••

# SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Magazine Publishers of America

Part I

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. See separate instructions. ■ Attach to Form 990. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

Open to Public

OMB No. 1545-0047

**Employer Identification number** 

1087160 73

Schedule R (Form 990) 2009 (f)
Direct controlling entity (f) Direct controlling Identification of Related Tax-Exempt Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34 because of had one or more related tax-exempt organizations during the tax year.) ۲ (e)
Public chanty status
(if section 501(c)(3)) PF End-of-year assets <u>e</u> (d) Exempt Code section 501(c)(3) (d) Total income Cat No 50135Y (c)
Legal domicile (state
or foreign country) Legal domicile (state or foreign country) **New York Education Grants** Primary activity Primary activity For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. MPA Foundation 810 Seventh Ave, 24th floor, New York, NY 10019 (a) (ame, address, and EIN of related organization (a) (ame, address, and EIN of disregarded entity Part II

Schedule R (Form 990) 2009

Yes No General or managing partner? Percentage ownership s Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, Ξ Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (g)
Share of
end-of-year assets Disproportionate allocations? ŝ Ξ Yes Share of total income (g) Share of end-of-year assets line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Type of entity (C corp, S corp, or trust) because it had one or more related organizations treated as a partnership during the tax year.) (f) Share of total income (d)
(Direct controlling entity Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) (d)
(Direct controlling entity Primary activity (c)
Legal
domicile
(state or
foreign Name, address, and EIN of related organization Primary activity Name, address, and EIN of related organization Part IV Part III

Schedule R (Form 990) 2009

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

<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		>	Yes	ဍ
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?	in Parts II-IV?			
		1a	_	>
Giff great or cepted contribution to other organization(s)	· · · · ·	1p	_	>
מוין, טומווי, טו כשטומו כטווווטמווטו וט טוופו טוטמווובמיוטווטן		,		
c Gift, grant, or capital contribution from other organization(s)		2 ;	+	
d Loans or loan quarantees to or for other organization(s)		<u> </u>	+	<b>,</b>
o Long or Long augmentance by other preparation(s)		1e	_	>
E Loais Grandings Dy onle Organization(s)				
			<u>.</u> 	1
f Sale of assets to other organization(s)	•	<b>+</b>	_	<u> </u>
		10		`>
		+		,
		<u> </u>	+	•
i Lease of facilities, equipment, or other assets to other organization(s)		=	1	>
				1
i Loses of facilities commant or other seests from other organization(s)		=	-	>
		2		<u> </u>
k Performance of services or membership or fundraising solicitations for other organization(s)		<u> </u>	$\dagger$	
I Performance of services or membership or fundraising solicitations by other organization(s)	• • • • • • • • • • • • • • • • • • • •	=	+	>
m Sharing of facilities, equipment, mailing lists, or other assets		Ę	_	
Chairman as formation and the second	· · · · · · · · · · · · · · · · · · ·	12	\ \	
I Stratuly of paid employees			+	[
			1	
o Rembursement paid to other organization for expenses		<u>2</u>		<u> </u>
		4		>
	·		-	
			Ī	1
Other transfer of cash or property to other organization(s)		<b>6</b> 1	1	<b>,</b>
r Other transfer of cash or property from other organization(s)		.   1r		<b>&gt;</b>
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	relationships and transa	action thre	esholc	ds.
(4)	2	(3)		1
Name of other organization	Transaction type (a-r)	Amount involved	volved	
MPA Foundation, 810 Seventh Ave, 24th floor, New York, NY 10019	u			0
MPA Foundation, 810 Seventh Ave, 24th floor, New York, NY 10019	E			0
(3)				
. (4)				
(c)				
(9)				
	Schedule	Schedule R (Form 990) 2009	990) 2	600

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

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

(a) (b) (c) (d) Share, address, and EIN of entity Primary activity (state or foreign section end-country) (5010(c)) as	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3)	(e) Share of end-of-year assets	(f) Disproportionate allocations?	(g) Code V—UBI amount in box 20 of Schedule K-1	(h) General or managing partner?
			Yes No		Yes No	(600)	Yes No
							:
					:		
					-		
						Schedule R (Form 990) 2009	m 990) 2009