

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

Subcommittee in Energy and Mineral Resources  
Oversight hearing on  
*"America's Mineral Resources: Creating Mining and Manufacturing Jobs and Securing America"*  
and a legislative hearing on:

- HR 1063 (Lamborn), *"National Strategic and Critical Minerals Policy Act of 2013"*
- HR 687 (Gosar/Kirkpatrick), *"Southeast Arizona Land Exchange and Conservation Act of 2013"*
- HR 697 (Heck), *"Three Kids Mine Remediation and Reclamation Act"*
- HR 761 (Amodei), *"Critical and Strategic Minerals Production Act"*
- HR 767 (Cramer), To amend the Energy Policy Act of 2005 to modify the Pilot Project offices of the Federal Permit Streamlining Pilot Project.
- HR 957 (Lummis), *"American Soda Ash Competitiveness Act"*
- HR 981 (Johnson of GA and Markey), *"Resource Assessment of Rare Earths Act of 2013"*

March 21, 2013

For Individuals:

1. Name:
2. Address:
3. Email Address:
4. Phone Number:

\* \* \* \* \*

For Witnesses Representing Organizations:

1. Name: Hal Quinn
2. Name of Organization(s) You are Representing at the Hearing: National Mining Association
3. Business Address: 101 Constitution Avenue NW, Suite 500 East, Washington, DC 20001
4. Business Email Address: [Information redacted for privacy]
5. Business Phone Number: [Information redacted for privacy]

## For all Witnesses

Name/Organization: Hal Quinn, National Mining Association

Title/Date of Hearing: Oversight hearing on "America's Mineral Resources: Creating Mining and Manufacturing Jobs and Securing America" and a legislative hearing on 7 bills

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

Quinn is a graduate of Denison University and received his law degree from Wake Forest University.

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

Quinn serves on the board of directors of the American Coal Foundation, National Energy Foundation, Coal Advisory Board and the United States Energy Association. He also serves on the International Energy Agency's Coal Industry Advisory Board.

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

Quinn is the President and CEO of the National Mining Association. NMA is the national trade association for the U.S. mining industry and represents coal, metal and industrial mineral producers, mineral processors, equipment manufacturers and other suppliers of goods and services to the domestic mining industry. As President and CEO, he directs the association's public policy efforts before Congress, regulatory agencies and the White House and sets the association's strategic agenda for media relations, grassroots communications and political involvement.

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

None.

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

None.

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

None.

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

Quinn is the President and CEO of the National Mining Association. NMA is the national trade association for the U.S. mining industry and represents coal, metal and industrial mineral producers, mineral processors, equipment manufacturers and other suppliers of goods and services to the domestic mining industry. As President and CEO, he directs the association's public policy efforts before Congress, regulatory agencies and the White House and sets the association's strategic agenda for media relations, grassroots communications and political involvement.

## Witnesses Representing Organizations

Name/Organization: Hal Quinn, National Mining Association

Title/Date of Hearing: Oversight hearing on “America’s Mineral Resources: Creating Mining and Manufacturing Jobs and Securing America” and a legislative hearing on 7 bills

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

President and Chief Executive Officer of the National Mining Association

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

None

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

*State of Wyoming v. EPA*, 11-9508 (10th Cir.) (Wyoming GHG SIP call)(Clean Air Act)

*Coalition for Responsible Regulation, et al v. EPA*, 10-1092 (D.C. Cir.) (GHG Motor Vehicle Rule)(Clean Air Act)

*GA Coalition for Sound Environment v. EPA*, 10-1200 (D.C. Cir.)(GHG Tailoring Rule) (Clean Air Act)

*American Iron and Steel Institute v. EPA*, 10-1109 (D.C. Cir.)(Johnson Memo)(Clean Air Act)

*Sierra Club v. EPA*, 09-1301 (D.C. Cir.) (Coal Prep Plant NSPS)(Clean Air Act)

*Natural Resources Defense Council v. EPA*, 09-1065 (D.C. Cir.)(Fugitive Emissions Rule)(Clean Air Act)

*American Farm Bureau Federation v. EPA*, 06-1410 (D.C. Cir.)(PM NAAQS)(Clean Air Act)

*Mississippi v. EPA*, 08-1200 (D.C. Cir.)(Ozone NAAQS)(Clean Air Act)

*New Jersey v. EPA*, 08-1065 (D.C. Cir.)(NSR Reasonable Possibility in Recordkeeping Rule)(Clean Air Act)

*State of New Jersey, et al., v. EPA*, 05-1097 (D.C. Cir.)( Clean Air Mercury Rule (CAMR); Section 112 “Delisting”)(Clean Air Act)

*State of North Carolina v. EPA*, 05-1244 (D.C. Cir.)(Clean Air Interstate Rule (CAIR))(Clean Air Act)

*NRDC v. EPA*, 07-1151 (D.C. Cir.)("Exceptional Events Policy" Clean Air)(Clean Air Act)

*American Petroleum Institute v. EPA*, 09-1038 and 09-1041 (Definition of Solid Waste)(RCRA)

*IN RE POLAR BEAR ENDANGERED SPECIES ACT LISTING AND § 4(d)RULE LITIGATION; Ctr. for Biological Diversity, et al. v. Salazar*, 08-2113 (DDC (EGS) and *Defenders of Wildlife v. U.S. Dep't of the Interior*, 09-153 (DDC (EGS))(Polar Bear "4(d)" rule)(Endangered Species Act)

*Earthworks v. Department of the Interior* C.A. No. 09-01972 (Millsites; Ancillary Use; Fair Market Value)(FLPMA)

*United Mine Workers of America v. Secretary of Labor, MSHA*, 08-1147 (D.C. Cir.)(Mine Rescue Teams)(Federal Mine Safety and Health Act (FMSHA)

*National Mining Association & Alabama Coal Association v. Secretary of Labor/MSHA* (11<sup>th</sup> Cir.)(extended cuts)(FMSHA)

*National Mining Association v. Secretary of Labor, MSHA* 08-1241 (D.C. Circuit)(Diesel Particulate Matter)(FMSHA)

*Scott Howard v. Secretary of Labor* Docket 08-5799 (6<sup>th</sup> Circuit)(Respirable Coal Mine Dust)(FMSHA)

*UMWA v. MSHA* 09-1014 (D.C. Cir.)(Mine Refuge Chambers/Belt Air)(FMSHA)

*Citizens Coal Council v. Kempthorne*, No. 1:08-cv-00190-JR (D.D.C.)(Ownership and Control)(SMCRA)

*NMA v. Kempthorne*, 06-5199 (D.C. Cir.)(Valid Existing Rights)(SMCRA)

*National Parks v. Salazar*, No. 1:09-cv-00015HHK (D.D.C.); *Coal River v. Salazar* No. 1:08-cv-2212HHK (D.D.C.)(Stream Buffer Zone Rule)(SMCRA)

*NMA v. Office of Hearings and Appeals*, Civ. No. 04-128 (RWR) D.D.C. (Burden of Proof Regulations)(SMCRA)

*Ohio Valley Environmental Coal v. Robert Antwerp* 09-1635 (4<sup>th</sup> Cir)(Nationwide Permit 21)(Clean Water Act)

*Kentucky Riverkeepers v. Rowlette*, 05-CV-181-DLB (E.D. KY)(NWP 21 copycat)(Clean Water Act)

*NMA v. Jackson* No. 1:10-cv-01220 (D.D.C)(CWA Permit Moratorium)(Clean Water Act)

*OVEC v. Bulen*, Civ. No. 3:05-0784 (S.D. W. Va.) (*Bulen II*)(404 individual permits)(Clean Water Act)

*Southeast Alaska Conservation Council v. U.S. Corps of Engineers*, 486 F.3d 638 (9<sup>th</sup> Cir. 2007)(hardrock tailings for fill material)(Clean Water Act)

*Wild Earth Guardians v. Salazar* 1:10-cv-01174-CKK (D.D.C.)(Federal Coal Leasing)(National Environmental Policy Act)

*NMA v. EPA*, 11-1039 (D.C. Cir) (GHG SIP call) (CAA)

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

None.

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

See attached forms for NMA.

Form **990**  
 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  
**2011**  
**Open to Public Inspection**

**A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011**

- B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Terminated  
 Amended return  
 Application pending

**C** Name of organization  
 NATIONAL MINING ASSOCIATION

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
 101 CONSTITUTION AVENUE NW NO 500E

City or town, state or country, and ZIP + 4  
 WASHINGTON, DC 200012133

**D** Employer identification number  
 52-1916480

**E** Telephone number  
 (202) 463-2600

**G** Gross receipts \$ 33,951,065

**F** Name and address of principal officer  
 HAROLD QUINN  
 101 CONSTITUTION AVENUE NW NO 500E  
 WASHINGTON, DC 200012133

**H(a)** Is this a group return for affiliates?  Yes  No

**H(b)** Are all affiliates included?  Yes  No  
 If "No," attach a list (see instructions)

**H(c)** Group exemption number

**I** Tax-exempt status  501(c)(3)  501(c) ( 6 ) (insert no )  4947(a)(1) or  527

**J Website:** WWW.NMA.ORG

**K** Form of organization  Corporation  Trust  Association  Other

**L** Year of formation 1995 **M** State of legal domicile DE

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities TO PROMOTE THE GENERAL WELFARE OF THE PRODUCERS OF COAL AND MINERALS, REPRESENT THE COAL AND MINERAL INDUSTRY ON PUBLIC POLICY ISSUES BEFORE CONGRESS, THE EXECUTIVE BRANCH, AND THE JUDICIARY AND PREPARE AND DISTRIBUTE INFORMATION TO CARRY OUT THESE PURPOSES		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	74
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	74
	<b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	38
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	0
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	0	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	1,493,748	15,000
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14,247,710	14,666,364
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	705,807	1,169,939
	<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	111,031	212,596
		16,558,296	16,063,899
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	0	0
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	7,142,460	7,308,901
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	9,980,795	10,474,901
<b>18</b> Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	17,123,255	17,783,802	
<b>19</b> Revenue less expenses Subtract line 18 from line 12	-564,959	-1,719,903	
<b>Net Assets or Fund Balances</b>		<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>20</b> Total assets (Part X, line 16)	27,440,468	29,950,244
	<b>21</b> Total liabilities (Part X, line 26)	7,924,770	14,258,286
<b>22</b> Net assets or fund balances Subtract line 21 from line 20	19,515,698	15,691,958	

**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 information furnished by filer.

**Sign Here**  
 Signature of officer  
 ROGER C ROBERTS JR TREASURER/SVP FINANCE  
 Type or print name and title

**Paid Preparer's Use Only**  
 Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_  
 Firm's name (or yours if self-employed), address, and ZIP + 4  
 JOHNSON LAMBERT & CO LLP  
 700 SPRING FOREST ROAD STE 115  
 RALEIGH, NC 27609

May the IRS discuss this return with the preparer shown above? (see instructions)

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission

NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL SUPPORT FOR THE MINING INDUSTRY AND TO HELP THE NATION REALIZE THE ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING CAPABILITY OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE THE PUBLIC POLICY PROCESS ON THE MOST SIGNIFICANT AND TIMELY ISSUES THAT IMPACT OUR ABILITY TO LOCATE, PERMIT, MINE, PROCESS, TRANSPORT, AND UTILIZE THE NATION'S VAST COAL AND MINERAL RESOURCES NMA SERVICES ITS MEMBERSHIP BY -PROMOTING THE PRODUCTION AND USE OF COAL AND MINERAL RESOURCES PRODUCED BY THE US MINING INDUSTRY, -ESTABLISHING A STRONG POLITICAL PRESENCE IN THE NATION'S CAPITAL ON BEHALF OF NMA'S MEMBERSHIP, -SERVING AS THE INFORMATION CENTER FOR AND A SINGLE VOICE OF THE US MINING INDUSTRY, -AND ADDRESSING THE CURRENT AND FUTURE NEEDS OF THE INDUSTRY, MINING EQUIPMENT MANUFACTURERS, AND SUPPORT SERVICES MEMBERS OF THE ASSOCIATION

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

If "Yes," describe these new services on Schedule O

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses 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 ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
PRESENTED THE INTEREST OF MINING BEFORE CONGRESS, THE ADMINISTRATION, FEDERAL AGENCIES, THE JUDICIARY, AND THE MEDIA

**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
HELD SPECIALIZED SEMINARS, WORKSHOPS, MINEXPO INTERNATIONAL, AND OTHER SIGNIFICANT MEETINGS AND EVENTS

**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
THE FEDERATION FOR AMERICAN COAL, ENERGY AND SECURITY (FACES OF COAL) IS AN ALLIANCE OF PEOPLE FROM ALL WALKS OF LIFE WHO ARE JOINING FORCES TO EDUCATE LAWMAKERS AND THE GENERAL PUBLIC ABOUT THE IMPORTANCE OF COAL AND COAL MINING TO LOCAL AND NATIONAL ECONOMIES AND TO THE NATION'S ENERGY SECURITY IN ADDITION TO KEEPING TENS OF THOUSANDS OF PEOPLE EMPLOYED IN GOOD-PAYING JOBS, COAL IS THE LIFEBLOOD OF THE U S DOMESTIC ENERGY SUPPLY, GENERATING HALF THE ELECTRICITY CONSUMED IN THE UNITED STATES TODAY

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
DEVELOP GENERAL INDUSTRY AND ISSUE SPECIFIC ADVERTISING CAMPAIGNS

**4d** Other program services (Describe in Schedule O )  
(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses \$



**Part IV Checklist of Required Schedules**

		Yes	No
<b>1</b>	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> . . . . .		No
<b>2</b>	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? <input checked="" type="checkbox"/> . . . . .	Yes	
<b>3</b>	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> <input checked="" type="checkbox"/> . . . . .	Yes	
<b>4</b>	<b>Section 501(c)(3) organizations.</b> 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> . . . . .		
<b>5</b>	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> <input checked="" type="checkbox"/> . . . . .	Yes	
<b>6</b>	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> <input checked="" type="checkbox"/> . . . . .		No
<b>7</b>	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> <input checked="" type="checkbox"/> . . . . .		No
<b>8</b>	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> <input checked="" type="checkbox"/> . . . . .		No
<b>9</b>	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> <input checked="" type="checkbox"/> . . . . .		No
<b>10</b>	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> <input checked="" type="checkbox"/> . . . . .		No
<b>11</b>	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
<b>a</b>	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> <input checked="" type="checkbox"/> . . . . .	Yes	
<b>b</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> <input checked="" type="checkbox"/> . . . . .		No
<b>c</b>	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> <input checked="" type="checkbox"/> . . . . .		No
<b>d</b>	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> <input checked="" type="checkbox"/> . . . . .		No
<b>e</b>	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> <input checked="" type="checkbox"/> . . . . .	Yes	
<b>f</b>	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> <input checked="" type="checkbox"/> . . . . .	Yes	
<b>12a</b>	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> <input checked="" type="checkbox"/> . . . . .	Yes	
<b>b</b>	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> <input checked="" type="checkbox"/> . . . . .		No
<b>13</b>	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> . . . . .		No
<b>14a</b>	Did the organization maintain an office, employees, or agents outside of the United States? . . . . .		No
<b>b</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, Part I</i> . . . . .		No
<b>15</b>	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 U S ? <i>If "Yes," complete Schedule F, Part II and IV</i> . . . . .		No
<b>16</b>	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 U S ? <i>If "Yes," complete Schedule F, Part III and IV</i> . . . . .		No
<b>17</b>	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</i> . . . . .		No
<b>18</b>	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> . . . . .		No
<b>19</b>	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> . . . . .		No
<b>20a</b>	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> . . . . .		No
<b>b</b>	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements . . . . .		

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

<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	<b>21</b>		No
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>	<b>22</b>		No
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . . . .</i>	<b>23</b>	Yes	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25 . . . . .</i>	<b>24a</b>		No
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .	<b>24b</b>		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	<b>24c</b>		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .	<b>24d</b>		
<b>25a 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>	<b>25a</b>		
<b>b</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? <i>If "Yes," complete Schedule L, Part I . . . . .</i>	<b>25b</b>		
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II . . . . .</i>	<b>26</b>		No
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III . . . . .</i>	<b>27</b>		No
<b>28</b> 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)			
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28a</b>		No
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28b</b>		No
<b>c</b> 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 owner? <i>If "Yes," complete Schedule L, Part IV . . . . .</i>	<b>28c</b>		No
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<b>29</b>		No
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>	<b>30</b>		No
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I . . . . .</i>	<b>31</b>		No
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>	<b>32</b>		No
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>	<b>33</b>		No
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 . . . . .</i>	<b>34</b>	Yes	
<b>35a</b> Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	<b>35a</b>		No
<b>b</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	<b>35b</b>		No
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	<b>36</b>		
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI . . . . .</i>	<b>37</b>		No
<b>38</b> 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 . . . . .	<b>38</b>	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for question number, question text, and Yes/No columns. Includes rows for 1a-1b, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .		
<b>1b</b>	Enter the number of voting members included in line 1a, above, who are independent . . . . .		
<b>2</b>	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? . . . . .		No
<b>3</b>	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? . . . . .		No
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		No
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		No
<b>6</b>	Did the organization have members or stockholders? . . . . .	Yes	
<b>7a</b>	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? . . . . .	Yes	
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .		No
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
<b>8a</b>	The governing body? . . . . .	Yes	
<b>8b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	Yes	
<b>9</b>	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 . . . . .		No

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Did the organization have local chapters, branches, or affiliates? . . . . .		No
<b>10b</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? . . . . .		
<b>11a</b>	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . . . .	Yes	
<b>11b</b>	Describe in Schedule O the process, if any, used by the organization to review the Form 990 . . . . .		
<b>12a</b>	Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . . .		No
<b>12b</b>	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .		
<b>12c</b>	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done . . . . .		
<b>13</b>	Did the organization have a written whistleblower policy? . . . . .		No
<b>14</b>	Did the organization have a written document retention and destruction policy? . . . . .	Yes	
<b>15</b>	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?		
<b>15a</b>	The organization's CEO, Executive Director, or top management official . . . . .	Yes	
<b>15b</b>	Other officers or key employees of the organization . . . . .	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .		No
<b>16b</b>	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . .		

**Section C. Disclosure**

- 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 Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request
- 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. See Additional Data Table.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization   
 ROGER ROBERTS  
 101 CONSTITUTION AVE NW STE 500E  
 WASHINGTON, DC 20001  
 (202) 463-2600



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

(A) Name and Title	(B) Average hours per week per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
<b>1b Sub-Total</b>										
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							4,056,264	0	840,756	

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶**19

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

**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
EDELMAN INC 200 E RANDOLPH DR 63RD FL CHICAGO, IL 60601	GOVERNMENT AFFAIRS CONSULTING	1,570,360
CROWELL & MORING 1001 PENNSYLVANIA AVE NW WASHINGTON, DC 20004	LEGAL CONSULTING	603,193
HALL-ERICKSON INC 98 EAST CHICAGO AVE WESTMONT, IL 60559	MINEXPO 2012 MANAGEMENT	435,228
PODESTA GROUP 1001 G STREET NW WASHINGTON, DC 20001	GOVERNMENT AFFAIRS CONSULTING	375,000
TROUTMAN SANDERS PO BOX 933652 ATLANTA, GA 31193	LEGAL SERVICES	367,520
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>▶</b> 22		

**Part VIII 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		
<b>Contributions, gifts, grants and other similar amounts</b>	<b>1a</b> Federated campaigns . . . . . <b>1a</b>						
	<b>b</b> Membership dues . . . . . <b>1b</b>						
	<b>c</b> Fundraising events . . . . . <b>1c</b>						
	<b>d</b> Related organizations . . . . . <b>1d</b>						
	<b>e</b> Government grants (contributions) <b>1e</b>						
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above <b>1f</b>	15,000					
	<b>g</b> Noncash contributions included in lines 1a-1f \$ _____						
	<b>h Total.</b> Add lines 1a-1f . . . . .	15,000					
<b>Program Service Revenue</b>	<b>2a</b> MEMBERSHIP DUES & ASSE		900099	14,461,787	14,461,787		
	<b>b</b> CONVENTIONS, CONFERENC		900099	201,132		201,132	
	<b>c</b> PUBLICATIONS		900099	3,445	3,445		
	<b>d</b> _____						
	<b>e</b> _____						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f . . . . .			14,666,364			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts) . . . . .			403,402		403,402	
	<b>4</b> Income from investment of tax-exempt bond proceeds . . . . .						
	<b>5</b> Royalties . . . . .						
	<b>6a</b> Gross rents	(i) Real	(ii) Personal				
		<b>b</b> Less rental expenses					
		<b>c</b> Rental income or (loss)					
		<b>d</b> Net rental income or (loss) . . . . .					
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other	18,653,703			
		<b>b</b> Less cost or other basis and sales expenses		17,880,600	6,566		
		<b>c</b> Gain or (loss)		773,103	-6,566		
		<b>d</b> Net gain or (loss) . . . . .		766,537			766,537
	<b>8a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .		<b>a</b>				
	<b>b</b> Less direct expenses . . . . .		<b>b</b>				
	<b>c</b> Net income or (loss) from fundraising events . . . . .						
	<b>9a</b> Gross income from gaming activities See Part IV, line 19 . . . . .		<b>a</b>				
<b>b</b> Less direct expenses . . . . .		<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities . . . . .							
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .		<b>a</b>					
<b>b</b> Less cost of goods sold . . . . .		<b>b</b>					
<b>c</b> Net income or (loss) from sales of inventory . . . . .							
Miscellaneous Revenue		Business Code					
<b>11a</b> SUBLEASE		900099	201,110		201,110		
<b>b</b> MISCELLANEOUS		900099	11,486		11,486		
<b>c</b> _____							
<b>d</b> All other revenue . . . . .							
<b>e Total.</b> Add lines 11a-11d . . . . .			212,596				
<b>12 Total revenue.</b> See Instructions . . . . .			16,063,899	14,465,232	0	1,583,667	

**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b>	Grants and other assistance to governments and organizations in the United States See Part IV, line 21				
<b>2</b>	Grants and other assistance to individuals in the United States See Part IV, line 22				
<b>3</b>	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
<b>4</b>	Benefits paid to or for members				
<b>5</b>	Compensation of current officers, directors, trustees, and key employees . . . . .	3,833,915			
<b>6</b>	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .				
<b>7</b>	Other salaries and wages	2,429,144			
<b>8</b>	Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	308,315			
<b>9</b>	Other employee benefits . . . . .	452,991			
<b>10</b>	Payroll taxes . . . . .	284,536			
<b>11</b>	Fees for services (non-employees)				
<b>a</b>	Management . . . . .				
<b>b</b>	Legal . . . . .	21,584			
<b>c</b>	Accounting . . . . .	38,419			
<b>d</b>	Lobbying . . . . .	3,096,723			
<b>e</b>	Professional fundraising See Part IV, line 17 . . . . .				
<b>f</b>	Investment management fees . . . . .	19,587			
<b>g</b>	Other . . . . .	3,645,230			
<b>12</b>	Advertising and promotion . . . . .	666,123			
<b>13</b>	Office expenses . . . . .	248,558			
<b>14</b>	Information technology . . . . .	142,086			
<b>15</b>	Royalties . . . . .				
<b>16</b>	Occupancy . . . . .	1,264,646			
<b>17</b>	Travel . . . . .	236,308			
<b>18</b>	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .				
<b>19</b>	Conferences, conventions, and meetings . . . . .	403,988			
<b>20</b>	Interest . . . . .				
<b>21</b>	Payments to affiliates . . . . .				
<b>22</b>	Depreciation, depletion, and amortization . . . . .	55,394			
<b>23</b>	Insurance . . . . .	80,750			
<b>24</b>	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O )				
<b>a</b>	DUES & SUBSCRIPTIONS	510,401			
<b>b</b>	BAD DEBT	33,250			
<b>c</b>	TRAINING	11,559			
<b>d</b>	TAXES & LICENSES	295			
<b>e</b>					
<b>f</b>	All other expenses				
<b>25</b>	<b>Total functional expenses.</b> Add lines 1 through 24f	17,783,802			
<b>26</b>	<b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				



**Part X Balance Sheet**

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	1,000	<b>1</b>	1,000
	<b>2</b> Savings and temporary cash investments . . . . .	4,452,077	<b>2</b>	2,024,200
	<b>3</b> Pledges and grants receivable, net . . . . .		<b>3</b>	
	<b>4</b> Accounts receivable, net . . . . .	67,289	<b>4</b>	398,667
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		<b>5</b>	
	<b>6</b> 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 . . . . .		<b>6</b>	
	<b>7</b> Notes and loans receivable, net . . . . .		<b>7</b>	
	<b>8</b> Inventories for sale or use . . . . .		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges . . . . .	983,338	<b>9</b>	1,705,107
	<b>10a</b> Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D . . . . .	760,798		
	<b>b</b> Less accumulated depreciation . . . . .	60,779	<b>10c</b>	198,447
	<b>11</b> Investments—publicly traded securities . . . . .	21,790,680	<b>11</b>	25,483,433
	<b>12</b> Investments—other securities See Part IV, line 11 . . . . .		<b>12</b>	
	<b>13</b> Investments—program-related See Part IV, line 11 . . . . .		<b>13</b>	
	<b>14</b> Intangible assets . . . . .		<b>14</b>	
	<b>15</b> Other assets See Part IV, line 11 . . . . .	85,305	<b>15</b>	139,390
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	27,440,468	<b>16</b>	29,950,244	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	1,270,072	<b>17</b>	991,662
	<b>18</b> Grants payable . . . . .		<b>18</b>	
	<b>19</b> Deferred revenue . . . . .	3,757,479	<b>19</b>	10,063,190
	<b>20</b> Tax-exempt bond liabilities . . . . .		<b>20</b>	
	<b>21</b> Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .		<b>24</b>	
	<b>25</b> 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 . . . . .	2,897,219	<b>25</b>	3,203,434
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	7,924,770	<b>26</b>	14,258,286
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets . . . . .	19,154,343	<b>27</b>	15,691,958
	<b>28</b> Temporarily restricted net assets . . . . .	361,355	<b>28</b>	0
	<b>29</b> Permanently restricted net assets . . . . .		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds . . . . .		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building or equipment fund . . . . .		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>32</b>	
<b>33</b> Total net assets or fund balances . . . . .	19,515,698	<b>33</b>	15,691,958	
<b>34</b> Total liabilities and net assets/fund balances . . . . .	27,440,468	<b>34</b>	29,950,244	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	16,063,899
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	17,783,802
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	-1,719,903
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	19,515,698
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	-2,103,837
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	15,691,958

**Part XII Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant?	Yes	
<b>c</b>	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>d</b>	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
<b>3a</b>	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?		No
<b>b</b>	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

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.

2011

Open to Public 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 V, line 46 (Political Campaign Activities), then

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

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

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

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

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

Name of the organization NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
2 Political expenditures
3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
2 Enter the amount of any excise tax incurred by organization managers under section 4955
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
4a Was a correction made?
b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
4 Did the filing organization file Form 1120-POL for this year?
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments

Table with 5 columns: (a) Name, (b) Address, (c) EIN, (d) Amount paid from filing organization's funds, (e) Amount of political contributions received. Includes rows for COALPAC and MINEPAC.

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B** Check  if the filing organization checked box A and "limited control" provisions apply

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)	(a) Filing Organization's Totals	(b) Affiliated Group Totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)														
<b>d</b> Other exempt purpose expenditures														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)														
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%; text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%; text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000													
Over \$17,000,000	\$1,000,000													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)														
<b>h</b> Subtract line 1g from line 1a If zero or less, enter -0-														
<b>i</b> Subtract line 1f from line 1c If zero or less, enter -0-														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

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

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

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	14,461,787
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year	<b>2a</b>	4,728,784
<b>b</b> Carryover from last year	<b>2b</b>	-207,507
<b>c</b> Total	<b>2c</b>	4,521,277
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	4,772,390
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	-251,113

**Part IV Supplemental Information**

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

Identifier	Return Reference	Explanation

SCHEDULE D (Form 990)

OMB No 1545-0047

Supplemental Financial Statements

2011

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service

Name of the organization NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows 1-4: Total number at end of year, Aggregate contributions to (during year), Aggregate grants from (during year), Aggregate value at end of year.

- 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply): Preservation of land for public use, Protection of natural habitat, Preservation of open space, Preservation of an historically importantly land area, Preservation of a certified historic structure.

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

Table with 2 columns: Description, Held at the End of the Year. Rows 2a-2d: Total number of conservation easements, Total acreage restricted by conservation easements, Number of conservation easements on a certified historic structure included in (a), Number of conservation easements included in (c) acquired after 8/17/06.

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year
4 Number of states where property subject to conservation easement is located
5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?
6 Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year
7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?
9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

**3** Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange programs
- e**  Other

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

**5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

**b** If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
<b>1c</b> Beginning balance	
<b>1d</b> Additions during the year	
<b>1e</b> Distributions during the year	
<b>1f</b> Ending balance	

**2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

**b** If "Yes," explain the arrangement in Part XIV

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

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
<b>1a</b> Beginning of year balance . . . . .					
<b>b</b> Contributions . . . . .					
<b>c</b> Investment earnings or losses . . . . .					
<b>d</b> Grants or scholarships . . . . .					
<b>e</b> Other expenditures for facilities and programs . . . . .					
<b>f</b> Administrative expenses . . . . .					
<b>g</b> End of year balance . . . . .					

**2** Provide the estimated percentage of the year end balance held as

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Term endowment ▶

**3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
<b>(i)</b> unrelated organizations . . . . .	<b>3a(i)</b>	
<b>(ii)</b> related organizations . . . . .	<b>3a(ii)</b>	
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? . . . . .	<b>3b</b>	

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land . . . . .				
<b>b</b> Buildings . . . . .				
<b>c</b> Leasehold improvements . . . . .		41,600	39,177	2,423
<b>d</b> Equipment . . . . .		502,967	468,758	34,209
<b>e</b> Other . . . . .		216,231	54,416	161,815
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . . ▶				198,447

**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 valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 12 )		

**Part VIII Investments—Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 13 )		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>Total.</b> (Column (b) should equal Form 990, Part X, col.(B) line 15.)	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
DUE TO RELATED PARTY	81,768
CAPITAL LEASE	52,846
ACCRUED PENSION OBLIGATION	2,972,718
DEFERRED COMPENSATION LIABILITY	96,102
<b>Total.</b> (Column (b) should equal Form 990, Part X, col (B) line 25 )	3,203,434

**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)



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

<b>1</b>	Total revenue (Form 990, Part VIII, column (A), line 12)	<b>1</b>	16,063,899
<b>2</b>	Total expenses (Form 990, Part IX, column (A), line 25)	<b>2</b>	17,783,802
<b>3</b>	Excess or (deficit) for the year Subtract line 2 from line 1	<b>3</b>	-1,719,903
<b>4</b>	Net unrealized gains (losses) on investments	<b>4</b>	-924,402
<b>5</b>	Donated services and use of facilities	<b>5</b>	
<b>6</b>	Investment expenses	<b>6</b>	
<b>7</b>	Prior period adjustments	<b>7</b>	
<b>8</b>	Other (Describe in Part XIV)	<b>8</b>	-1,179,435
<b>9</b>	Total adjustments (net) Add lines 4 - 8	<b>9</b>	-2,103,837
<b>10</b>	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	<b>10</b>	-3,823,740

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	14,784,708
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
<b>a</b>	Net unrealized gains on investments	<b>2a</b>	-924,402
<b>b</b>	Donated services and use of facilities	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-924,402
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	15,709,110
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV)	<b>4b</b>	354,789
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	354,789
<b>5</b>	Total Revenue Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 12)	<b>5</b>	16,063,899

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

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	16,972,288
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIV)	<b>2d</b>	-818,080
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	-818,080
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	17,790,368
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	
<b>b</b>	Other (Describe in Part XIV)	<b>4b</b>	-6,566
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	-6,566
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This should equal Form 990, Part I, line 18)	<b>5</b>	17,783,802

**Part XIV Supplemental Information**

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	MANAGEMENT HAS CONCLUDED THAT THE ASSOCIATION HAS MAINTAINED ITS EXEMPT STATUS, ALL REVENUE WITHIN THE STATEMENT OF ACTIVITIES HAS BEEN PROPERLY CLASSIFIED FOR THE YEARS ENDED DECEMBER 31, 2011 AND 2010 AND DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THROUGH DECEMBER 31, 2011
PART XI, LINE 8 - OTHER ADJUSTMENTS		FAS 158 ADJUSTMENT -818,080 REFUND OF ABANDONED MINE LAND INITIATIVE -361,355 TOTAL TO SCHEDULE D, PART XI, LINE 8 -1,179,435
PART XII, LINE 4B - OTHER ADJUSTMENTS		RECLASS OF GAIN (LOSS) ON SALE OF ASSETS -6,566 REFUND OF ABANDONED MINE LAND INITIATIVE 361,355
PART XIII, LINE 2D - OTHER ADJUSTMENTS		FAS 158 ADJUSTMENT -818,080
PART XIII, LINE 4B - OTHER ADJUSTMENTS		RECLASS OF GAIN (LOSS) ON SALE OF ASSETS -6,566

**Schedule J**  
(Form 990)

**Compensation Information**

OMB No 1545-0047

**2011**

**Open to Public Inspection**

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization  
NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

**Part I Questions Regarding Compensation**

Yes No

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items

- First-class or charter travel
- Travel for companions
- Tax idemnification and gross-up payments
- Discretionary spending account
- Housing allowance or residence for personal use
- Payments for business use of personal residence
- Health or social club dues or initiation fees
- Personal services (e g , maid, chauffeur, chef)

**b** If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain

**1b** No

**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** Yes

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

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization

**a** Receive a severance payment or change-of-control payment?

**4a** No

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**4b** No

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

**4c** No

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III

**Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.**

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

**a** The organization?

**5a**

**b** Any related organization?

**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

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

**7**

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III

**8**

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

**9**

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space 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, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) HAROLD QUINN JR	(i)	490,480	670,000	57,880	73,240	27,358	1,318,958	0
	(ii)	0	0	0	0	0	0	0
(2) ROGER ROBERTS	(i)	146,510	35,000	18,440	27,964	14,303	242,217	0
	(ii)	0	0	0	0	0	0	0
(3) MARY SWEENEY	(i)	173,860	42,000	17,265	37,113	27,165	297,403	0
	(ii)	0	0	0	0	0	0	0
(4) BRUCE WATZMAN	(i)	231,715	90,000	28,986	71,518	28,557	450,776	0
	(ii)	0	0	0	0	0	0	0
(5) DANIEL GERKIN	(i)	203,560	50,000	27,766	113,915	25,692	420,933	0
	(ii)	0	0	0	0	0	0	0
(6) MERLYN NOLAN	(i)	289,060	100,000	19,410	37,477	36,428	482,375	0
	(ii)	0	0	0	0	0	0	0
(7) MOYA PHELLEPS	(i)	143,650	16,000	25,248	43,188	13,851	241,937	0
	(ii)	0	0	0	0	0	0	0
(8) CAROL RAULSTON	(i)	214,010	62,000	29,679	59,526	14,098	379,313	0
	(ii)	0	0	0	0	0	0	0
(9) GLENN KELLY	(i)	207,460	25,000	1,410	13,301	6,559	253,730	0
	(ii)	0	0	0	0	0	0	0
(10) KAREN BENNETT	(i)	146,943	24,000	17,673	32,733	7,017	228,366	0
	(ii)	0	0	0	0	0	0	0
(11) LUKE POPOVICH	(i)	114,010	21,000	30,195	34,503	13,869	213,577	0
	(ii)	0	0	0	0	0	0	0
(12) TAWNY BRIDGEFORD	(i)	122,007	23,000	8,703	17,627	14,261	185,598	0
	(ii)	0	0	0	0	0	0	0
(13) BRADFORD FRISBY	(i)	94,137	19,000	19,207	22,336	27,157	181,837	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	CLUB BENEFITS ARE AVAILABLE TO MEMBERS OF SENIOR MANAGEMENT ON AN AS-APPROPRIATE BASIS. FIVE OFFICERS OR KEY EMPLOYEES RECEIVED CLUB DUES AS A BENEFIT, WHICH WAS NONTAXABLE TO THE RECIPIENTS.
	PART I, LINE 1B	NMA DOES NOT HAVE A WRITTEN POLICY CONCERNING CLUB DUES. THEY ARE APPROVED BY THE CEO ON A CASE-BY-CASE BASIS FOR SENIOR MANAGEMENT WITH A VALID BUSINESS PURPOSE AND ARE REIMBURSED BASED UPON ACTUAL COST.

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization  
NATIONAL MINING ASSOCIATION

**Employer identification number**

52-1916480

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	ANY ORGANIZATION, CORPORATION, PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN OR CLOSELY ASSOCIATED WITH MINING ACTIVITIES SHALL BE ELIGIBLE FOR MEMBERSHIP MEMBERSHIP IN THE ASSOCIATION CONSISTS OF THE FOLLOWING CLASSES PRODUCER MEMBERSHIP - ANY ORGANIZATION CORPORATION, PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN THE MINING AND PRODUCTION OF COAL OR MINERALS PRODUCERS MEMBERS ARE DIVIDED INTO TWO SEPARATE CLASSES (I) COAL PRODUCER MEMBERS AND (II) MINERAL PRODUCER MEMBERS MANUFACTURERS AND SERVICES MEMBERSHIP - ANY ORGANIZATION, CORPORATION PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN THE MANUFACTURE OF MINING MACHINERY, EQUIPMENT, AND SUPPLIES MINING RELATED SERVICES OR CLOSELY ASSOCIATED WITH AND INTERESTED IN PROMOTING THE GENERAL WELFARE OF THE MINING INDUSTRY, BUT NOT ENGAGED IN MINING
	FORM 990, PART VI, SECTION A, LINE 7A	THE BOARD OF DIRECTORS SHALL CONSIST OF DIRECTORS SELECTED BY, AND REPRESENTING AS CLASSES, COAL PRODUCER MEMBERS, MINERAL PRODUCER MEMBERS, MANUFACTURERS AND SERVICES MEMBERS IN ADDITION, THE PRESIDENT OF THE ASSOCIATION SERVES AS AN EX OFFICIO MEMBER OF THE BOARD OF DIRECTORS DIRECTORS ARE ELECTED BY A MAJORITY VOTE AT THE ANNUAL MEETING OF THE ASSOCIATION
	FORM 990, PART VI, SECTION B, LINE 11	FOR 990 IS PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO FILING FORM 990 IS REVIEWED BY SENIOR MANAGEMENT AND GENERAL COUNSEL AND ANY CHANGES ARE COMMUNICATED TO THE OUTSIDE ACCOUNTANTS PRIOR TO FILING THE RETURN
	FORM 990, PART VI, SECTION B, LINE 15	THE ORGANIZATION UTILIZES A COMPENSATION CONSULTANT TO PERFORM A BI-ANNUAL COMPENSATION SURVEY OF COMPARABLE TRADE ASSOCIATIONS NATIONAL MINING ASSOCIATION'S GOAL WHEN SETTING SALARIES FOR ALL EMPLOYEES IS TO HAVE THEIR COMPENSATION AT THE 75TH PERCENTILE OF COMPARABLE TRADE ASSOCIATIONS USING THE RESULTS FROM THIS SURVEY FURTHERMORE, THE PRESIDENT AND CEO'S SALARY IS NEGOTIATED VIA CONTRACT WITH THE FOLLOWING BOARD MEMBERS CHAIRMAN, VICE CHAIRMAN, AND CHAIRMAN OF THE AUDIT AND FINANCE COMMITTEE
	FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -924,402 FAS 158 ADJUSTMENT -818,080 REFUND OF ABANDONED MINE LAND INITIATIVE -361,355 TOTAL TO FORM 990, PART XI, LINE 5 -2,103,837
	FORM 990, PART VII	HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS HAROLD QUINN 2 0 HRS PER WEEK (AMERICAN COAL FOUNDATION) ROGER ROBERTS 2 0 HRS PER WEEK (AMERICAN COAL FOUNDATION)

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No 1545-0047

**2011**

**Open to Public Inspection**

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

Department of the Treasury  
Internal Revenue Service

**Name of the organization**  
NATIONAL MINING ASSOCIATION

**Employer identification number**

52-1916480

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

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

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on 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	(g) Section 512(b)(13) controlled organization	
						Yes	No
<b>(1)</b> AMERICAN COAL FOUNDATION 101 CONSTITUTION AVE STE 525E WASHINGTON, DC 20001 52-1236554	EDUCATIONAL FOUNDATION	DC	501(C)(3)	11-II	NMA		No
<b>(2)</b> MINEPAC 101 CONSTITUTION AVE STE 525E WASHINGTON, DC 20001 52-1939409	POLITICAL ACTION COMMITTEE	DC	527		N/A		No
<b>(3)</b> COALPAC 101 CONSTITUTION AVE STE 525E WASHINGTON, DC 20001 52-1322749	POLITICAL ACTION COMMITTEE	DC	527		N/A		No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total 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?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

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

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

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

- a** Receipt of **(i)** interest **(ii)** annuities **(iii)** royalties **(iv)** rent from a controlled entity
- b** Gift, grant, or capital contribution to related organization(s)
- c** Gift, grant, or capital contribution from related organization(s)
- d** Loans or loan guarantees to or for related organization(s)
- e** Loans or loan guarantees by related organization(s)

- f** Sale of assets to related organization(s)
- g** Purchase of assets from related organization(s)
- h** Exchange of assets with related organization(s)
- i** Lease of facilities, equipment, or other assets to related organization(s)
- j** Lease of facilities, equipment, or other assets from related organization(s)
- k** Performance of services or membership or fundraising solicitations for related organization(s)
- l** Performance of services or membership or fundraising solicitations by related organization(s)
- m** Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
- n** Sharing of paid employees with related organization(s)

- o** Reimbursement paid to related organization(s) for expenses
- p** Reimbursement paid by related organization(s) for expenses

- q** Other transfer of cash or property to related organization(s)
- r** Other transfer of cash or property from related organization(s)

	Yes	No
<b>1a</b>		No
<b>1b</b>		No
<b>1c</b>		No
<b>1d</b>		No
<b>1e</b>		No
<b>1f</b>		No
<b>1g</b>		No
<b>1h</b>		No
<b>1i</b>		No
<b>1j</b>		No
<b>1k</b>		No
<b>1l</b>		No
<b>1m</b>	Yes	
<b>1n</b>	Yes	
<b>1o</b>	Yes	
<b>1p</b>		No
<b>1q</b>		No
<b>1r</b>		No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
<b>(1)</b>			
<b>(2)</b>			
<b>(3)</b>			
<b>(4)</b>			
<b>(5)</b>			
<b>(6)</b>			





**Part VII Supplemental Information**

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

**Identifier****Return Reference****Explanation****Schedule R (Form 990) 2011**

# Additional Data

**Software ID:**

**Software Version:**

**EIN:** 52-1916480

**Name:** NATIONAL MINING ASSOCIATION

## Form 990, Special Condition Description:

**Special Condition Description**

## Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

### 4d. Other program services

(Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

DEVELOP GENERAL INDUSTRY AND ISSUE SPECIFIC ADVERTISING CAMPAIGNS

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
GREGORY H BOYCE CHAIRMAN	1 00	X		X				0	0	0
FRANCIS R MCALLISTER VICE CHAIRMAN	1 00	X		X				0	0	0
ALI ALAVI DIRECTOR	1 00	X						0	0	0
DAN ALLAN DIRECTOR (TO MAY '11)	1 00	X						0	0	0
JACK ATWATER DIRECTOR	1 00	X						0	0	0
PHILLIPS S BAKER JR DIRECTOR	1 00	X						0	0	0
JANPETER BEKKERING DIRECTOR (TO JUL '11)	1 00	X						0	0	0
ROBERT L BENSON DIRECTOR	1 00	X						0	0	0
JOHN BLASCHAK DIRECTOR	1 00	X						0	0	0
ALEX C BOULTON DIRECTOR	1 00	X						0	0	0
FRANK CALANDRA JR DIRECTOR	1 00	X						0	0	0
JOSEPH A CARRABBA DIRECTOR	1 00	X						0	0	0
NICK CARTER DIRECTOR	1 00	X						0	0	0
KEITH CLARK DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
RED CONGER DIRECTOR	1 00	X						0	0	0
JOSEPH W CRAFT III DIRECTOR	1 00	X						0	0	0
CINDY CRANE DIRECTOR	1 00	X						0	0	0
KEVIN CRUTCHFIELD DIRECTOR	1 00	X						0	0	0
JOHN DISHAROON DIRECTOR (FROM AUG '11)	1 00	X						0	0	0
GENE B DIXON DIRECTOR	1 00	X						0	0	0
GARRY N DRUMMOND DIRECTOR	1 00	X						0	0	0
MARK DUNN DIRECTOR	1 00	X						0	0	0
ROBERT L EVANS DIRECTOR	1 00	X						0	0	0
DAVID FARNSWORTH DIRECTOR (TO OCT '11)	1 00	X						0	0	0
CLIFF FORREST DIRECTOR	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAC FOURIE DIRECTOR	1 00	X						0	0	0
JOHN GALASSINI DIRECTOR (TO JUN '11)	1 00	X						0	0	0
DAVID P GARDNER DIRECTOR (FROM JUN '11)	1 00	X						0	0	0
TIM GITZEL DIRECTOR	1 00	X						0	0	0
DAVID W GODLEWSKI DIRECTOR	1 00	X						0	0	0
GARY J GOLDBERG DIRECTOR (TO NOV '11)	1 00	X						0	0	0
BENJAMIN GUENTHER DIRECTOR	1 00	X						0	0	0
LEROY G HAGENBUCH DIRECTOR	1 00	X						0	0	0
PETER T HALPIN DIRECTOR	1 00	X						0	0	0
GARY HALVERSON DIRECTOR (FROM DEC '11)	1 00	X						0	0	0
JOHN HAMRICK DIRECTOR (TO AUG '11)	1 00	X						0	0	0
DOUGLAS R HARDMAN DIRECTOR	1 00	X						0	0	0
J BRETT HARVEY DIRECTOR	1 00	X						0	0	0
BENNETT HATFIELD DIRECTOR (TO JUN '11)	1 00	X						0	0	0
RON F HOCHSTEIN DIRECTOR	1 00	X						0	0	0
ROBERT F HOGAN JR DIRECTOR	1 00	X						0	0	0
CHARLES A JEANNES DIRECTOR	1 00	X						0	0	0
TONY JENSEN DIRECTOR	1 00	X						0	0	0
GREG JESSEE DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
KEITH B KIMBLE DIRECTOR	1 00	X						0	0	0
JOHN KING DIRECTOR (FROM AUG '11)	1 00	X						0	0	0
MITCHELL J KREBS DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
PAUL KRIVOKUCA DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
GREG LANG DIRECTOR (TO NOV '11)	1 00	X						0	0	0
GUY L LEBLANC DIRECTOR	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN F LEER DIRECTOR	1 00	X						0	0	0
KEVIN LOUGHREY DIRECTOR	1 00	X						0	0	0
PETER LUTHIGER DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
TOM MACKALL DIRECTOR	1 00	X						0	0	0
COLIN MARSHALL DIRECTOR	1 00	X						0	0	0
JAMES M MATTERN DIRECTOR	1 00	X						0	0	0
MARK MCCORMICK DIRECTOR	1 00	X						0	0	0
MICHAEL W MCLANAHAN DIRECTOR	1 00	X						0	0	0
ROBERT E MURRAY DIRECTOR	1 00	X						0	0	0
RICHARD O'BRIEN DIRECTOR	1 00	X						0	0	0
TONY PANCHYSHYN DIRECTOR	1 00	X						0	0	0
BAXTER PHILLIPS DIRECTOR (TO JUN '11)	1 00	X						0	0	0
DAVID POTTER DIRECTOR	1 00	X						0	0	0
MARK PREMO DIRECTOR	1 00	X						0	0	0
JOHN W RICH JR DIRECTOR	1 00	X						0	0	0
DUANE L RICHARDS DIRECTOR	1 00	X						0	0	0
LAUREN ROBERTS DIRECTOR (FROM JUL '11)	1 00	X						0	0	0
BRYAN RONCK DIRECTOR	1 00	X						0	0	0
KELLY SANDERS DIRECTOR (FROM DEC '11)	1 00	X						0	0	0
WALT SCHELLER DIRECTOR	1 00	X						0	0	0
GARY SELF DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
MARK A SMITH DIRECTOR	1 00	X						0	0	0
RICHARD L SMITH DIRECTOR	1 00	X						0	0	0
VICTOR P STABIO DIRECTOR	1 00	X						0	0	0
ROBERT J STENGER DIRECTOR	1 00	X						0	0	0

**Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL W SUTHERLIN DIRECTOR	1 00	X						0	0	0
WILLIAM TATE DIRECTOR (TO JUN '11)	1 00	X						0	0	0
CHARLES C UNGUREAN DIRECTOR	1 00	X						0	0	0
JOSEPH E USIBELLI JR DIRECTOR	1 00	X						0	0	0
RANDY K VRANES DIRECTOR (FROM NOV '11)	1 00	X						0	0	0
DENNIS WHEELER DIRECTOR (TO AUG '11)	1 00	X						0	0	0
RICHARD M WHITING DIRECTOR	1 00	X						0	0	0
DONNA WICHERS DIRECTOR (FROM SEP '11)	1 00	X						0	0	0
JAY WILEMAN DIRECTOR (TO JUL '11)	1 00	X						0	0	0
MIKE WILLIAMS DIRECTOR	1 00	X						0	0	0
DAVID WILICK DIRECTOR (FROM AUG '11)	1 00	X						0	0	0
HAROLD QUINN JR PRESIDENT & CEO	35 00			X				1,218,360	0	100,598
ROGER ROBERTS TREASURER/SVP FINANCE	35 00			X				199,950	0	42,267
MARY SWEENEY ASST SECY/GEN COUNSEL	35 00			X				233,125	0	64,278
BRUCE WATZMAN SECRETARY/SVP LEGAL & REG	35 00			X				350,701	0	100,075
DANIEL GERKIN SVP POLITICAL	35 00				X			281,326	0	139,607
MERLYN NOLAN SVP GOVERNMENT AFFAIRS	35 00				X			408,470	0	73,905
MOYA PHELLEPS SVP MEMBERSHIP SERVICES	35 00				X			184,898	0	57,039
CAROL RAULSTON SVP COMMUNICATIONS	35 00				X			305,689	0	73,624
GLENN KELLY VP GOVERNMENT AFFAIRS	35 00					X		233,870	0	19,860
KAREN BENNETT VP ENVIRONMENTAL AFFAIRS	35 00					X		188,616	0	39,750
LUKE POPOVICH VP COMMUNICATIONS	35 00					X		165,205	0	48,372
TAWNY BRIDGFORD ASSOC GEN COUNSEL	35 00					X		153,710	0	31,888
BRADFORD FRISBY ASSOC GEN COUNSEL	35 00					X		132,344	0	49,493

# 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.

<b>A</b> For the <b>2010</b> calendar year, or tax year beginning and ending																							
<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2"><b>C</b> Name of organization <b>NATIONAL MINING ASSOCIATION</b></td> <td rowspan="2"><b>D</b> Employer identification number <b>52-1916480</b></td> </tr> <tr> <td colspan="2">Doing Business As</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> <td rowspan="2"><b>E</b> Telephone number <b>202-463-2600</b></td> </tr> <tr> <td><b>101 CONSTITUTION AVENUE NW</b></td> <td><b>500E</b></td> </tr> <tr> <td colspan="2">City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20001-2133</b></td> <td><b>G</b> Gross receipts \$ <b>17,876,199.</b></td> </tr> <tr> <td colspan="2"><b>F</b> Name and address of principal officer: <b>HAROLD QUINN</b> <b>SAME AS C ABOVE</b></td> <td><b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2"></td> <td><b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2"></td> <td><b>H(c)</b> Group exemption number ▶</td> </tr> </table>	<b>C</b> Name of organization <b>NATIONAL MINING ASSOCIATION</b>		<b>D</b> Employer identification number <b>52-1916480</b>	Doing Business As		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number <b>202-463-2600</b>	<b>101 CONSTITUTION AVENUE NW</b>	<b>500E</b>	City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20001-2133</b>		<b>G</b> Gross receipts \$ <b>17,876,199.</b>	<b>F</b> Name and address of principal officer: <b>HAROLD QUINN</b> <b>SAME AS C ABOVE</b>		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)			<b>H(c)</b> Group exemption number ▶
<b>C</b> Name of organization <b>NATIONAL MINING ASSOCIATION</b>		<b>D</b> Employer identification number <b>52-1916480</b>																					
Doing Business As																							
Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	<b>E</b> Telephone number <b>202-463-2600</b>																					
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		<b>H(c)</b> Group exemption number ▶																					
<b>I</b> Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) ( <b>6</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527																							
<b>J</b> Website: ▶ <b>WWW.NMA.ORG</b>																							
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	<b>L</b> Year of formation: <b>1995</b> <b>M</b> State of legal domicile: <b>DE</b>																						

Part I Summary															
<b>Activities &amp; Governance</b>	<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TO PROMOTE THE GENERAL WELFARE OF THE PRODUCERS OF COAL AND MINERALS, REPRESENT THE COAL AND</b>													
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.													
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b> <b>73</b>												
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b> <b>73</b>												
	<b>5</b>	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	<b>5</b> <b>38</b>												
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b> <b>0</b>												
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b> <b>0.</b>												
	<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b> <b>0.</b>												
<b>Revenue</b>	<b>8</b>	Contributions and grants (Part VIII, line 1h)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">Prior Year</th> <th style="width:30%;">Current Year</th> </tr> <tr> <td style="text-align: right;">1,467,473.</td> <td style="text-align: right;">1,493,748.</td> </tr> <tr> <td style="text-align: right;">13,119,897.</td> <td style="text-align: right;">14,247,710.</td> </tr> <tr> <td style="text-align: right;">522,521.</td> <td style="text-align: right;">705,807.</td> </tr> <tr> <td style="text-align: right;">15,589.</td> <td style="text-align: right;">111,031.</td> </tr> <tr> <td style="text-align: right;">15,125,480.</td> <td style="text-align: right;">16,558,296.</td> </tr> </table>	Prior Year	Current Year	1,467,473.	1,493,748.	13,119,897.	14,247,710.	522,521.	705,807.	15,589.	111,031.	15,125,480.	16,558,296.
	Prior Year	Current Year													
	1,467,473.	1,493,748.													
	13,119,897.	14,247,710.													
	522,521.	705,807.													
	15,589.	111,031.													
15,125,480.	16,558,296.														
<b>9</b>	Program service revenue (Part VIII, line 2g)	13,119,897.													
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	522,521.													
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	15,589.													
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	15,125,480.													
<b>Expenses</b>	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.												
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	0.												
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,867,052.												
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	0.												
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>0.</b>													
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	8,098,044.												
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	15,965,096.													
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	-839,616.													
<b>Net Assets or Fund Balances</b>	<b>20</b>	Total assets (Part X, line 16)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:30%;">Beginning of Current Year</th> <th style="width:30%;">End of Year</th> </tr> <tr> <td style="text-align: right;">23,459,850.</td> <td style="text-align: right;">27,440,468.</td> </tr> <tr> <td style="text-align: right;">5,381,539.</td> <td style="text-align: right;">7,924,770.</td> </tr> <tr> <td style="text-align: right;">18,078,311.</td> <td style="text-align: right;">19,515,698.</td> </tr> </table>	Beginning of Current Year	End of Year	23,459,850.	27,440,468.	5,381,539.	7,924,770.	18,078,311.	19,515,698.				
	Beginning of Current Year	End of Year													
	23,459,850.	27,440,468.													
5,381,539.	7,924,770.														
18,078,311.	19,515,698.														
<b>21</b>	Total liabilities (Part X, line 26)	5,381,539.													
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	18,078,311.													

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.				
<b>Sign Here</b>	▶ Signature of officer	Date		
	▶ <b>ROGER ROBERTS, TREASURER/SVP FINANCE</b>	Type or print name and title		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed PTIN
	Firm's name ▶ <b>JOHNSON LAMBERT &amp; CO. LLP</b>	Firm's EIN ▶		
	Firm's address ▶ <b>700 SPRING FOREST ROAD, STE 115 RALEIGH, NC 27609</b>	Phone no. <b>919-719-6400</b>		

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



Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission:
NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL SUPPORT FOR THE MINING INDUSTRY AND TO HELP THE NATION REALIZE THE ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING CAPABILITY. OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE 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? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

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

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

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
PRESENTED THE INTEREST OF MINING BEFORE CONGRESS, THE ADMINISTRATION, FEDERAL AGENCIES, THE JUDICIARY, AND THE MEDIA.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
HELD SPECIALIZED SEMINARS, WORKSHOPS, MINEXPO INTERNATIONAL, AND OTHER SIGNIFICANT MEETINGS AND EVENTS.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
THE FEDERATION FOR AMERICAN COAL, ENERGY AND SECURITY (FACES OF COAL) IS AN ALLIANCE OF PEOPLE FROM ALL WALKS OF LIFE WHO ARE JOINING FORCES TO EDUCATE LAWMAKERS AND THE GENERAL PUBLIC ABOUT THE IMPORTANCE OF COAL AND COAL MINING TO LOCAL AND NATIONAL ECONOMIES AND TO THE NATION'S ENERGY SECURITY. IN ADDITION TO KEEPING TENS OF THOUSANDS OF PEOPLE EMPLOYED IN GOOD-PAYING JOBS, COAL IS THE LIFEBLOOD OF THE U.S. DOMESTIC ENERGY SUPPLY, GENERATING HALF THE ELECTRICITY CONSUMED IN THE UNITED STATES TODAY.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? .....	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....	X	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i> .....		
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> .....	X	
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? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> .....	X	
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> .....		X
c	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> .....		X
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> .....		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> .....	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> .....	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> .....		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? .....		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Parts I and IV</i> .....		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> .....		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> .....		X
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</i> .....		X
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> .....		X
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> .....		X
20a	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? <b>Note.</b> Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) .....		

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

	Yes	No
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a 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> .....		
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	X	
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>a</b> Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ..... <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> 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 .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O response

Main table with columns for question number, description, sub-questions (1a-14b), Yes, and No. Includes questions about Form 1096, Form W-2G, Form W-3, and various tax compliance issues.

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year		
	<b>1a</b> 73		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> 73		
<b>2</b>	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?		X
<b>3</b>	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?		X
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
<b>6</b>	Does the organization have members or stockholders?	X	
<b>7a</b>	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
<b>b</b>	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	X	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	X	
<b>9</b>	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		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b>	Does the organization have local chapters, branches, or affiliates?		X
<b>b</b>	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
<b>11a</b>	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
<b>b</b>	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
<b>12a</b>	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
<b>b</b>	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
<b>c</b>	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
<b>13</b>	Does the organization have a written whistleblower policy?		X
<b>14</b>	Does the organization have a written document retention and destruction policy?	X	
<b>15</b>	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?		
<b>a</b>	The organization's CEO, Executive Director, or top management official	X	
<b>b</b>	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
<b>16a</b>	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
<b>b</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 the organization's exempt status with respect to such arrangements?		

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 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 interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ROGER ROBERTS - 202-463-2600**  
**101 CONSTITUTION AVE NW STE 500E, WASHINGTON, DC 20001**

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GARY GOLDBERG CHAIRMAN (TO OCT 10)	1.00	X		X				0.	0.	0.
GREGORY BOYCE CHAIRMAN (FROM OCT 10)	1.00	X		X				0.	0.	0.
FRANCIS MCALLISTER VICE CHAIRMAN (FROM OCT 10)	1.00	X		X				0.	0.	0.
ALI ALAVI DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
KEITH ALESSI DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
DAN ALLAN DIRECTOR	1.00	X						0.	0.	0.
JACK ATWATER DIRECTOR	1.00	X						0.	0.	0.
PHILLIPS BAKER, JR. DIRECTOR	1.00	X						0.	0.	0.
JANPETER BEKKERING DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
ROBERT BENSON DIRECTOR	1.00	X						0.	0.	0.
DON BLANKENSHIP DIRECTOR	1.00	X						0.	0.	0.
JOHN BLASCHAK DIRECTOR	1.00	X						0.	0.	0.
C. BOLTON, JR. DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
ALEX BOULTON DIRECTOR	1.00	X						0.	0.	0.
JAMES BOYD DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
MICHAEL BROWN DIRECTOR	1.00	X						0.	0.	0.
FRANK CALANDRA, JR. DIRECTOR	1.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID CAMPBELL DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
JOSEPH CARRABBA DIRECTOR	1.00	X						0.	0.	0.
GERALD CARROLL DIRECTOR	1.00	X						0.	0.	0.
NICK CARTER DIRECTOR	1.00	X						0.	0.	0.
RED CONGER DIRECTOR	1.00	X						0.	0.	0.
JOSEPH CRAFT, III DIRECTOR	1.00	X						0.	0.	0.
CINDY CRANE DIRECTOR	1.00	X						0.	0.	0.
KEVIN CRUTCHFIELD DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
CHRISTOPHER CURFMAN DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								3,261,842.	0.	851,978.
<b>d Total (add lines 1b and 1c)</b>								3,261,842.	0.	851,978.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **13**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
WEBER MERRITT, 1331 H STREET NW, STE 1100, WASHINGTON, DC 20005	ADVERTISING & PROJECT MANAGEMENT	2,355,354.
PRESTON-OSBOURNE, 450 OLD VINE ST, STE 100, LEXINGTON, KY 40507	CAMPAIGN DIRECTORS, DATABASE, FIELDWORK	619,621.
CROWELL & MORING, 1001 PENNSYLVANIA AVE NW, NO. 11, WASHINGTON, DC 20004	LEGAL CONSULTING	584,536.
GEI CONSULTANTS PO BOX 843005, BOSTON, MA 02284	LEGAL CONSULTING	432,627.
EDELMAN, INC., 200 E RANDOLPH DR, 63RD FL, CHICAGO, IL 60601	GOVERNMENT AFFAIRS CONSULTING	376,641.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **21**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GENE DIXON DIRECTOR	1.00	X						0.	0.	0.
GARY DRUMMOND DIRECTOR	1.00	X						0.	0.	0.
RAYMOND DUBOIS DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
MARK DUNN DIRECTOR	1.00	X						0.	0.	0.
ROBERT EVANS DIRECTOR	1.00	X						0.	0.	0.
DAVID FARNSWORTH DIRECTOR	1.00	X						0.	0.	0.
CLIFF FORREST DIRECTOR	1.00	X						0.	0.	0.
JAC FOURIE DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
JOHN GALASSINI DIRECTOR	1.00	X						0.	0.	0.
TIM GITZEL DIRECTOR	1.00	X						0.	0.	0.
DAVID GODLEWSKI DIRECTOR	1.00	X						0.	0.	0.
JOHN GRISHAM DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
BENJAMIN GUENTHER DIRECTOR	1.00	X						0.	0.	0.
LEROY HAGENBUCH DIRECTOR	1.00	X						0.	0.	0.
PETER HALPIN DIRECTOR	1.00	X						0.	0.	0.
JOHN HAMRICK DIRECTOR	1.00	X						0.	0.	0.
DOUGLAS HARDMAN DIRECTOR	1.00	X						0.	0.	0.
J. BRETT HARVEY DIRECTOR	1.00	X						0.	0.	0.
BENNETT HATFIELD DIRECTOR	1.00	X						0.	0.	0.
RON HOCHSTEIN DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										



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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ROBERT HOGAN, JR. DIRECTOR	1.00	X						0.	0.	0.
THOMAS JANECK DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
CHARLES JEANNES DIRECTOR	1.00	X						0.	0.	0.
TONY JENSEN DIRECTOR	1.00	X						0.	0.	0.
GLENN KELLOW DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
KEITH KIMBLE DIRECTOR	1.00	X						0.	0.	0.
GREG LANG DIRECTOR	1.00	X						0.	0.	0.
GUY LEBLANC DIRECTOR	1.00	X						0.	0.	0.
STEVEN LEER DIRECTOR	1.00	X						0.	0.	0.
KEVIN LOUGHREY DIRECTOR	1.00	X						0.	0.	0.
TOM MACKALL DIRECTOR	1.00	X						0.	0.	0.
COLIN MARSHALL DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
JAMES MATTERN DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
MICHAEL MCLANAHAN DIRECTOR	1.00	X						0.	0.	0.
ROBERT MURRAY DIRECTOR	1.00	X						0.	0.	0.
FRED NELSON DIRECTOR	1.00	X						0.	0.	0.
RICHARD O'BRIEN DIRECTOR	1.00	X						0.	0.	0.
DAVID POTTER DIRECTOR	1.00	X						0.	0.	0.
MICHAEL QUILLEN DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
JOHN RICH, JR. DIRECTOR	1.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c .....										

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DUANE RICHARDS DIRECTOR	1.00	X						0.	0.	0.
GEORGE RICHMOND DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
DANIEL ROLING DIRECTOR	1.00	X						0.	0.	0.
BRYAN RONCK DIRECTOR	1.00	X						0.	0.	0.
WALT SCHELLER DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
MARK SMITH DIRECTOR	1.00	X						0.	0.	0.
RICHARD SMITH DIRECTOR	1.00	X						0.	0.	0.
MARK SNYDER DIRECTOR (TO OCT 10)	1.00	X						0.	0.	0.
VICTOR STABIO DIRECTOR	1.00	X						0.	0.	0.
ROBERT STENGER DIRECTOR	1.00	X						0.	0.	0.
BRIAN SULLIVAN DIRECTOR	1.00	X						0.	0.	0.
MICHAEL SUTHERLIN DIRECTOR	1.00	X						0.	0.	0.
WILLIAM TATE DIRECTOR	1.00	X						0.	0.	0.
CHARLES UNGUREAN DIRECTOR	1.00	X						0.	0.	0.
JOSEPH USIBELLI, JR. DIRECTOR	1.00	X						0.	0.	0.
DENNIS WHEELER DIRECTOR	1.00	X						0.	0.	0.
RICHARD WHITING DIRECTOR	1.00	X						0.	0.	0.
JAY WILEMAN DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
MIKE WILLIAMS DIRECTOR (FROM OCT 10)	1.00	X						0.	0.	0.
HAROLD QUINN, JR. PRESIDENT & CEO	35.00			X				517,539.	0.	99,727.
Total to Part VII, Section A, line 1c .....										



**Part VIII 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	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	1,493,748.			
	g	Noncash contributions included in lines 1a-1f: \$					
	h	<b>Total.</b> Add lines 1a-1f		1,493,748.			
Program Service Revenue	2 a	MEMBERSHIP DUES & ASSE	Business Code 900099	14049072.	14049072.		
	b	CONVENTIONS, CONFERENC	900099	197,128.		197,128.	
	c	PUBLICATIONS	900099	1,510.	1,510.		
	d						
	e						
	f	All other program service revenue					
	g	<b>Total.</b> Add lines 2a-2f		14247710.			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		612,224.		612,224.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross Rents	(i) Real				
		Less: rental expenses	(ii) Personal				
		Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities	1411486.			
		Less: cost or other basis and sales expenses	(ii) Other	1315124.	2,779.		
		Gain or (loss)		96,362.	-2,779.		
		Net gain or (loss)			93,583.		93,583.
	8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a				
		Less: direct expenses	b				
		Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities. See Part IV, line 19	a				
Less: direct expenses		b					
Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	a					
	Less: cost of goods sold	b					
	Net income or (loss) from sales of inventory						
Miscellaneous Revenue			Business Code				
11 a	SUBLEASE	900099	110,819.		110,819.		
b	MISCELLANEOUS	900099	212.		212.		
c							
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d		111,031.				
12	<b>Total revenue.</b> See instructions.		16558296.	14050582.	0.	1013966.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	3,042,543.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	2,842,306.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	497,423.			
9 Other employee benefits .....	487,453.			
10 Payroll taxes .....	272,735.			
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	47,128.			
c Accounting .....	38,858.			
d Lobbying .....	1,380,793.			
e Professional fundraising services. See Part IV, line 17 .....				
f Investment management fees .....				
g Other .....	3,069,553.			
12 Advertising and promotion .....	739,757.			
13 Office expenses .....	246,136.			
14 Information technology .....	122,503.			
15 Royalties .....				
16 Occupancy .....	1,280,153.			
17 Travel .....	181,834.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....	381,366.			
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	34,650.			
23 Insurance .....	72,699.			
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) .....				
a <b>FACES OF COAL</b> .....	1,482,161.			
b <b>DUES &amp; SUBSCRIPTIONS</b> .....	858,183.			
c <b>TRAINING</b> .....	26,950.			
d <b>BAD DEBT</b> .....	17,400.			
e <b>TAXES &amp; LICENSES</b> .....	671.			
f All other expenses .....				
25 <b>Total functional expenses.</b> Add lines 1 through 24f .....	17,123,255.			
26 <b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation .....				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	1,000.	<b>1</b>	1,000.	
	<b>2</b> Savings and temporary cash investments .....	849,288.	<b>2</b>	4,452,077.	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>		
	<b>4</b> Accounts receivable, net .....	969,186.	<b>4</b>	67,289.	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>		
	<b>6</b> 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) .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	365,444.	<b>9</b>	983,338.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 612,386.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 551,607.			
		81,224.	<b>10c</b>	60,779.	
	<b>11</b> Investments - publicly traded securities .....	21,130,668.	<b>11</b>	21,790,680.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>		
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>		
	<b>14</b> Intangible assets .....		<b>14</b>		
<b>15</b> Other assets. See Part IV, line 11 .....	63,040.	<b>15</b>	85,305.		
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	23,459,850.	<b>16</b>	27,440,468.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	1,156,582.	<b>17</b>	1,270,072.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....	7,100.	<b>19</b>	3,757,479.	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	4,217,857.	<b>25</b>	2,897,219.	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	5,381,539.	<b>26</b>	7,924,770.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	17,718,570.	<b>27</b>	19,154,343.	
	<b>28</b> Temporarily restricted net assets .....	359,741.	<b>28</b>	361,355.	
	<b>29</b> Permanently restricted net assets .....		<b>29</b>		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
	<b>33</b> Total net assets or fund balances .....	18,078,311.	<b>33</b>	19,515,698.	
<b>34</b> Total liabilities and net assets/fund balances .....	23,459,850.	<b>34</b>	27,440,468.		

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	16,558,296.
2	Total expenses (must equal Part IX, column (A), line 25)	2	17,123,255.
3	Revenue less expenses. Subtract line 2 from line 1	3	-564,959.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	18,078,311.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	2,002,346.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	19,515,698.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?		X
2b	Were the organization's financial statements audited by an independent accountant?	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
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 separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2010**

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 6 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

**General Rule**

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

**Special Rules**

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

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

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

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)



Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ALLIANCE RESOURCE PARTNERS, LP PO BOX 22021 TULSA, OK 74121	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	ALPHA NATURAL RESOURCES 999 CORPORATE BLVD, STE 300 LINTHICUM, MD 21090	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3	ARCH COAL, INC 10 KENTON DR CHARLESTON, WV 25311	\$ 6,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4	AUSTIN POWDER COMPANY 25800 SCIENCE PARK DR CLEVELAND, OH 44122	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
5	BEAVER COAL COMPANY, LTD 115 1/2 SOUTH KANAWHA ST BECKLEY, WV 25801	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
6	BRIGHT MINING AND LAND COMPANY PO BOX 460 SUMMERSVILLE, WV 26651	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	BUCHANAN OIL COMPANY PO BOX 593 ABINGDON, VA 24212	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
8	C&M GIANT TIRE 980 W NEW CIRCLE LEXINGTON, KY 40511	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
9	CENTRAL OIL COMPANY 148 BRISTOL EAST RD BRISTOL, VA 24202	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
10	COAL OPERATORS & ASSOCIATES, INC PO BOX 3158 PIKEVILLE, KY 41502	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
11	COLE & CRANE 7265 KENWOOD RD CINCINNATI, OH 45236	\$ 18,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
12	CONSOL ENERGY, INC CNX CENTER 1000 CONSOL ENERGY DR CANONSBURG, PA 15317	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13	CONTIGA DEVELOPMENT COMPANY 8238 GERMANTOWN AVE PHILADELPHIA, PA 19118	\$ 56,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
14	CUMBERLAND RESOURCES CORPORATION 152 WEST VALLEY ST ABINGDON, VA 24210	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
15	DINGESS RUM PROPERTIES 723 KANAWHA BLVD, E UNION BLDG, 14TH FL CHARLESTON, WV 25301	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
16	INTERNATIONAL COAL GROUP, INC 300 CORPORATE CENTER DR SCOTT DEPOT, WV 25560	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
17	INTERNATIONAL RESOURCE PARTNERS POST OFFICE DRAWER D GILBERT, WV 25621	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
18	JACKSON KELLY, PLLC PO BOX 553 CHARLESTON, WV 25322	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
19	JAMES RIVER COAL COMPANY 301 E BYRD ST, STE 1600 RICHMOND, VA 23219	\$ 50,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
20	JENMAR CORPORATION 258 KAPPA DR PITTSBURG, PA 15238	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
21	JOY GLOBAL, INC 177 THORN HILL RD WARRENDALE, PA 15086	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
22	KENNAMETAL, INC 1600 TECHNOLOGY WAY LATROBE, PA 15650	\$ 5,001.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
23	KENTUCKY OIL & REFINING 156 KY OIL VILLAGE BETSY LAYNE, KY 41605	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
24	KENTUCKY RIVER PROPERTIES, LLC 250 W MAIN ST, STE 1823 LEXINGTON, KY 40507	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
25	LITTLE COAL LAND COMPANY 723 KANAWHA BLVD, E UNION BLDG, 14TH FL CHARLESTON, WV 25301	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
26	MARSHALL MILLER & ASSOCIATES 534 INDUSTRIAL PARK RD BLUEFIELD, VA 24605	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
27	MASSEY ENERGY COMPANY 300 MORGAN MASSEY DR, PO BOX 621 JULIAN, WV 25526	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
28	MCDONALD LAND COMPANY PO BOX 1706 LOGAN, WV 25601	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
29	MEPCO, LLP 308 DENTS RUN RD MORGANTOWN, WV 26501	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
30	MMD MINERAL SIZING, INC 41 EXCELLENCE WAY VONORE, TN 37885	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
31	<u>MOUNTAINEER INVESTIGATION &amp; SECURITY</u> <u>PO BOX 891</u> <u>ATHENS, WV 24712</u>	\$ <u>6,250.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
32	<u>N&amp;G HOLDINGS</u> <u>122 ROY CAMPBELL DR</u> <u>HAZARD, KY 41701</u>	\$ <u>12,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
33	<u>NATURAL RESOURCE PARTNERS</u> <u>5260 IRWIN RD</u> <u>HUNTINGTON, WV 25705</u>	\$ <u>75,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
34	<u>NELSON BROTHERS, LLC</u> <u>820 SHADES CREEK PKWY, STE 200</u> <u>BIRMINGHAM, AL 35209</u>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
35	<u>NORFOLK SOUTHERN/POCHAHONTAS LAND CORP</u> <u>PO BOX 1517</u> <u>BLUEFIELD, WV 24701</u>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
36	<u>PARDEE RESOURCES COMPANY</u> <u>1717 ARCH ST, 33RD FL</u> <u>PHILADELPHIA, PA 19103</u>	\$ <u>37,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
37	PATRIOT COAL 500 LEE ST E, STE 900 CHARLESTON, WV 25301	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
38	PETROLUEM PRODUCTS 200 VISCOE RD NITRO, WV 25143	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
39	PINEY LAND COMPANY 130 MAIN ST BECKLEY, WV 25801	\$ 6,250.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
40	PRITCHARD MINING COMPANY, INC PO BOX 3311 CHARLESTON, WV 25333	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
41	RALEIGH MINE & INDUSTRIAL SUPPLY PO BOX 72 MOUNT HOPE, WV 25880	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
42	RISH EQUIPMENT COMPANY PO BOX 330 BLUEFIELD, WV 24701	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
43	ROWLAND LAND COMPANY 405 CAPITAL ST, STE 609 CHARLESTON, WV 25304	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
44	SOUTHERN LAND/DICKINSON PROPERTIES 300 CAPITOL ST, STE 1401 CHARLESTON, WV 25301	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
45	SPELLMAN, THOMAS, & BATTLE PO BOX 273 CHARLESTON, WV 25321	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
46	TECO COAL COMPANY 200 ALLISON BLVD CORBIN, KY 40701	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
47	TRINITY COAL CORPORATION 4978 TEAYS VALLEY RD SCOTT DEPOT, WV 25560	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
48	UNITED CENTRAL INDUSTRIAL SUPPLY 1005 GLENWAY AVE BRISTOL, VA 24203	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)



Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
49	UNITED COAL COMPANY, LLC 110 SPRINT DR BLOUNTVILLE, TN 37617	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
50	WALKER MACHINERY PO BOX 2427 CHARLESTON, WV 25314	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
51	WHAYNE SUPPLY COMPANY PO BOX 35900 LOUISVILLE, KY 40232	\$ 7,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
52	WVCA ALLIANCE - FRIENDS OF COAL PO BOX 3923 CHARLESTON, WV 25339	\$ 175,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

**2010**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

**Open to Public Inspection**

▶ **See separate instructions.**

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

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

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

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

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

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

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

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

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_ 0.
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_ 0.
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_ 0.
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
COALPAC	WASHINGTON, DC 20001	52-1322749	0.	11,947.
MINEPAC	WASHINGTON, DC 20001	52-1939409	0.	14,893.

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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

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

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

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

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	14,049,284.
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	2,961,895.
<b>b</b> Carryover from last year .....	<b>2b</b>	-78,560.
<b>c</b> Total .....	<b>2c</b>	2,883,335.
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	3,090,842.
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	-207,507.

**Part IV Supplemental Information**

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

**PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:**

COALPAC

101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001

MINEPAC

101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001

**SCHEDULE D**  
**(Form 990)**

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.

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

	(a) Donor advised funds	(b) Funds 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 donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education)       Preservation of an historically important land area

Protection of natural habitat       Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1 .....

▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X .....

▶ \$ \_\_\_\_\_

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_

- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If "Yes," explain the arrangement in Part XIV and complete the following table:

	Amount
c Beginning balance	<b>1c</b>
d Additions during the year	<b>1d</b>
e Distributions during the year	<b>1e</b>
f Ending balance	<b>1f</b>

- 2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment  \_\_\_\_\_ %
- b Permanent endowment  \_\_\_\_\_ %
- c Term endowment  \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		41,600.	33,659.	7,941.
d Equipment		514,352.	478,320.	36,032.
e Other		56,434.	39,628.	16,806.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				<b>60,779.</b>

**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 valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely-held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2) DUE TO RELATED PARTY	95,525.
(3) CAPITAL LEASE	147,598.
(4) ACCRUED PENSION OBLIGATION	2,568,791.
(5) DEFERRED COMPENSATION LIABILITY	85,305.
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	2,897,219.

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).

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	16,558,296.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	17,123,255.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-564,959.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	2,002,346.
9	Total adjustments (net). Add lines 4 through 8	9	2,002,346.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	1,437,387.

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

1	Total revenue, gains, and other support per audited financial statements	1	17,534,121.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	973,046.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	973,046.
3	Subtract line 2e from line 1	3	16,561,075.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	-2,779.
c	Add lines 4a and 4b	4c	-2,779.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	16,558,296.

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

1	Total expenses and losses per audited financial statements	1	18,155,334.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	1,029,300.
e	Add lines 2a through 2d	2e	1,029,300.
3	Subtract line 2e from line 1	3	17,126,034.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	-2,779.
c	Add lines 4a and 4b	4c	-2,779.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	17,123,255.

**Part XIV Supplemental Information**

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

**PART X, LINE 2: MANAGEMENT HAS CONCLUDED THAT THE ASSOCIATION HAS**

**MAINTAINED ITS EXEMPT STATUS; ALL REVENUE WITHIN THE STATEMENT OF**

**ACTIVITIES HAS BEEN PROPERLY CLASSIFIED FOR THE YEARS ENDED DECEMBER 31,**

**2010 AND 2009 AND DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THROUGH**

**DECEMBER 31, 2010.**

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**FAS 158 ADJUSTMENT**

**1,029,300.**



**Part XIV** Supplemental Information (continued)

NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS 973,046.

TOTAL TO SCHEDULE D, PART XI, LINE 8 2,002,346.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF GAIN (LOSS) ON SALE OF ASSETS -2,779.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

FAS 158 ADJUSTMENT 1,029,300.

PART XIII, LINE 4B - OTHER ADJUSTMENTS:

RECLASS OF GAIN (LOSS) ON SALE OF ASSETS -2,779.

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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2010**

Open to Public  
Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

MINERAL INDUSTRY ON PUBLIC POLICY ISSUES BEFORE CONGRESS, THE EXECUTIVE  
BRANCH, AND THE JUDICIARY AND PREPARE AND DISTRIBUTE INFORMATION TO  
CARRY OUT THESE PURPOSES.

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

POLICY PROCESS ON THE MOST SIGNIFICANT AND TIMELY ISSUES THAT IMPACT  
OUR ABILITY TO LOCATE, PERMIT, MINE, PROCESS, TRANSPORT, AND UTILIZE  
THE NATION'S VAST COAL AND MINERAL RESOURCES.

NMA SERVICES ITS MEMBERSHIP BY:

-PROMOTING THE PRODUCTION AND USE OF COAL AND MINERAL RESOURCES  
PRODUCED BY THE US MINING INDUSTRY;

-ESTABLISHING A STRONG POLITICAL PRESENCE IN THE NATION'S CAPITAL ON  
BEHALF OF NMA'S MEMBERSHIP;

-SERVING AS THE INFORMATION CENTER FOR AND A SINGLE VOICE OF THE US  
MINING INDUSTRY;

-AND ADDRESSING THE CURRENT AND FUTURE NEEDS OF THE INDUSTRY, MINING  
EQUIPMENT MANUFACTURERS, AND SUPPORT SERVICES MEMBERS OF THE  
ASSOCIATION.

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

DEVELOP GENERAL INDUSTRY AND ISSUE SPECIFIC ADVERTISING CAMPAIGNS

FORM 990, PART VI, SECTION A, LINE 6: ANY ORGANIZATION, CORPORATION,

PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN OR CLOSELY ASSOCIATED WITH

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

MINING ACTIVITIES SHALL BE ELIGIBLE FOR MEMBERSHIP. MEMBERSHIP IN THE ASSOCIATION CONSISTS OF THE FOLLOWING CLASSES:

PRODUCER MEMBERSHIP - ANY ORGANIZATION CORPORATION, PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN THE MINING AND PRODUCTION OR COAL OR MINERALS. PRODUCERS MEMBERS ARE DIVIDED INTO TWO SEPARATE CLASSES (I) COAL PRODUCER MEMBERS AND (II) MINERAL PRODUCER MEMBERS.

MANUFACTURERS AND SERVICES MEMBERSHIP - ANY ORGANIZATION, CORPORATION PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN THE MANUFACTURE OF MINING MACHINERY, EQUIPMENT, AND SUPPLIES. MINING RELATED SERVICES OR CLOSELY ASSOCIATED WITH AND INTERESTED IN PROMOTING THE GENERAL WELFARE OF THE MINING INDUSTRY, BUT NOT ENGAGED IN MINING.

FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF DIRECTORS SHALL CONSIST OF DIRECTORS SELECTED BY, AND REPRESENTING AS CLASSES, COAL PRODUCER MEMBERS, MINERAL PRODUCER MEMBERS, MANUFACTURERS AND SERVICES MEMBERS. IN ADDITION, THE PRESIDENT OF THE ASSOCIATION SERVES AS AN EX OFFICIO MEMBER OF THE BOARD OF DIRECTORS. DIRECTORS ARE ELECTED BY A MAJORITY VOTE AT THE ANNUAL MEETING OF THE ASSOCIATION.

FORM 990, PART VI, SECTION B, LINE 11: FOR 990 IS PROVIDED TO THE BOARD OF DIRECTORS PRIOR TO FILING. FORM 990 IS REVIEWED BY SENIOR MANAGEMENT AND GENERAL COUNSEL AND ANY CHANGES ARE COMMUNICATED TO THE OUTSIDE ACCOUNTANTS PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION UTILIZES A COMPENSATION CONSULTANT TO PERFORM A BI-ANNUAL COMPENSATION SURVEY OF

Name of the organization NATIONAL MINING ASSOCIATION	Employer identification number 52-1916480
---	--

COMPARABLE TRADE ASSOCIATIONS. NATIONAL MINING ASSOCIATION'S GOAL WHEN SETTING SALARIES FOR ALL EMPLOYEES IS TO HAVE THEIR COMPENSATION AT THE 75TH PERCENTILE OF COMPARABLE TRADE ASSOCIATIONS USING THE RESULTS FROM THIS SURVEY. FURTHERMORE, THE PRESIDENT AND CEO'S SALARY IS NEGOTIATED VIA CONTRACT WITH THE FOLLOWING BOARD MEMBERS: CHAIRMAN, VICE CHAIRMAN, AND CHAIRMAN OF THE AUDIT AND FINANCE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

FAS 158 ADJUSTMENT	1,029,300.
NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS	973,046.
TOTAL TO FORM 990, PART XI, LINE 5	2,002,346.

FORM 990, PART VII

HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS

HAROLD QUINN 2.0 HRS PER WEEK (AMERICAN COAL FOUNDATION)

ROGER ROBERTS 2.0 HRS PER WEEK (AMERICAN COAL FOUNDATION)

**Related Organizations and Unrelated Partnerships**

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

Name of the organization **NATIONAL MINING ASSOCIATION** Employer identification number **52-1916480**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
AMERICAN COAL FOUNDATION - 52-1236554 101 CONSTITUTION AVE, STE 525E WASHINGTON, DC 20001	EDUCATIONAL FOUNDATION	DISTRICT OF COLUMBIA	501(C)(3)	11-II	N/A		X
MINEPAC - 52-1939409 101 CONSTITUTION AVE, STE 525E WASHINGTON, DC 20001	POLITICAL ACTION COMMITTEE	DISTRICT OF COLUMBIA	527		N/A		X
COALPAC - 52-1322749 101 CONSTITUTION AVE, STE 525E WASHINGTON, DC 20001	POLITICAL ACTION COMMITTEE	DISTRICT OF COLUMBIA	527		N/A		X



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

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

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

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

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

(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			





Form **990**

**Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

**2009**

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

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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

**A For the 2009 calendar year, or tax year beginning and ending**

<p><b>B</b> Check if applicable:</p> <p><input type="checkbox"/> Address change</p> <p><input type="checkbox"/> Name change</p> <p><input type="checkbox"/> Initial return</p> <p><input type="checkbox"/> Terminated</p> <p><input type="checkbox"/> Amended return</p> <p><input type="checkbox"/> Application pending</p>	<p>Please use IRS label or print or type.</p> <p>See Specific Instructions.</p>	<p><b>C</b> Name of organization</p> <p><b>NATIONAL MINING ASSOCIATION</b></p> <p>Doing Business As</p> <p>Number and street (or P.O. box if mail is not delivered to street address) Room/suite</p> <p><b>101 CONSTITUTION AVENUE NW 500E</b></p> <p>City or town, state or country, and ZIP + 4</p> <p><b>WASHINGTON, DC 20001-2133</b></p> <p><b>F</b> Name and address of principal officer: <b>HAROLD QUINN</b></p> <p><b>SAME AS C ABOVE</b></p>	<p><b>D</b> Employer identification number</p> <p><b>52-1916480</b></p> <p><b>E</b> Telephone number</p> <p><b>202-463-2600</b></p> <p><b>G</b> Gross receipts \$ <b>18,814,630.</b></p> <p><b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If "No," attach a list. (see instructions)</p> <p><b>H(c)</b> Group exemption number ▶</p>
<p><b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( <b>6</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</p>		<p><b>J</b> Website: ▶ <b>WWW.NMA.ORG</b></p>	
<p><b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</p>		<p><b>L</b> Year of formation: <b>1995</b> <b>M</b> State of legal domicile: <b>DE</b></p>	

**Part I Summary**

	<p><b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO PROMOTE THE GENERAL WELFARE OF THE PRODUCERS OF COAL AND MINERALS, REPRESENT THE COAL AND</b></p>		
	<p><b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.</p>		
Activities & Governance	<p><b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....</p>	<b>3</b>	76
	<p><b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....</p>	<b>4</b>	76
	<p><b>5</b> Total number of employees (Part V, line 2a) .....</p>	<b>5</b>	40
	<p><b>6</b> Total number of volunteers (estimate if necessary) .....</p>	<b>6</b>	76
	<p><b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12 .....</p>	<b>7a</b>	0.
	<p><b>b</b> Net unrelated business taxable income from Form 990-T, line 34 .....</p>	<b>7b</b>	0.
	Revenue	<p><b>8</b> Contributions and grants (Part VIII, line 1h) .....</p>	<b>Prior Year</b>
<p><b>9</b> Program service revenue (Part VIII, line 2g) .....</p>		32,604,756.	1,467,473.
<p><b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....</p>		-66,165.	522,521.
<p><b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....</p>		5,399.	15,589.
<p><b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....</p>		32,543,990.	15,125,480.
Expenses		<p><b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....</p>	
	<p><b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....</p>		
	<p><b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....</p>	7,456,762.	7,867,052.
	<p><b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....</p>		
	<p><b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶</p>		
	<p><b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) .....</p>	14,812,662.	8,098,044.
	<p><b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....</p>	22,269,424.	15,965,096.
	<p><b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....</p>	10,274,566.	-839,616.
Net Assets or Fund Balances	<p><b>20</b> Total assets (Part X, line 16) .....</p>	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<p><b>21</b> Total liabilities (Part X, line 26) .....</p>	23,309,610.	23,459,850.
	<p><b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....</p>	7,280,131.	5,381,539.
	<p><b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....</p>	16,029,479.	18,078,311.

**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.

<b>Sign Here</b>	<p>Signature of officer</p> <p><b>ROGER ROBERTS, TREASURER/SVP FINANCE</b></p> <p>Type or print name and title</p>	Date	
<b>Paid Preparer's Use Only</b>	<p>Preparer's signature ▶</p> <p>Firm's name (or yours if self-employed), address, and ZIP + 4</p> <p><b>JOHNSON LAMBERT &amp; CO. LLP</b></p> <p><b>700 SPRING FOREST ROAD, STE 115</b></p> <p><b>RALEIGH, NC 27609</b></p>	Date	<p>Check if self-employed <input type="checkbox"/></p> <p>Preparer's identifying number (see instructions)</p> <p>EIN ▶</p> <p>Phone no. ▶ <b>919-719-6400</b></p>

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

**Exempt Organization Declaration and Signature for Electronic Filing**

For calendar year 2009, or tax year beginning \_\_\_\_\_, 2009, and ending \_\_\_\_\_, 20\_\_

**For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868**

**2009**

Department of the Treasury  
Internal Revenue Service

▶ **See instructions.**

Name of exempt organization

**NATIONAL MINING ASSOCIATION**

Employer identification number

**52-1916480**

**Part I Type of Return and Return Information** (Whole Dollars Only)

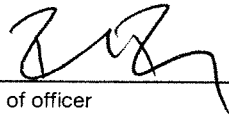
Check the box for the return for which you are using this Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<b>15125480</b>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, line 3c)	5b	

**Part II Declaration of Officer**

- 6  I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).


Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2009 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in processing the return or refund, and (d) the date of any refund.

Sign Here ▶  11-15-10 ▶ **TREASURER/SVP FINANCE**

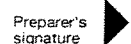
Signature of officer Date Title

**Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer** (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-file (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

<b>ERO's Use Only</b>	ERO's signature 	Date <u>11/15/10</u>	Check if also paid preparer <input checked="" type="checkbox"/>	Check if self-employed <input type="checkbox"/>	ERO's SSN or PTIN <u>P01059941</u>
	Firm's name (or yours if self-employed), address, and ZIP code	<b>JOHNSON LAMBERT &amp; CO. LLP</b>			EIN <b>52-1446779</b>
		<b>700 SPRING FOREST ROAD, STE 115</b>			Phone no. <b>919-719-6400</b>
		<b>RALEIGH, NC 27609</b>			

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

<b>Paid Preparer's Use Only</b>	Preparer's signature 	Date	Check if self-employed <input type="checkbox"/>	Preparer's SSN or PTIN
	Firm's name (or yours if self-employed), address, and ZIP code			
		EIN		
		Phone no.		

Name: National Mining Association    IRS Center: OGDEN  
FEIN: 52-1916480                      Refund: \$0.00

e-Postmark: 11/15/2010 2:41:54 PM  
Notification:

<b>Return History</b>			
DCN	DATE	TYPE OF ACTIVITY	UPDATED BY
	11/15/2010	Upload Started	
	11/15/2010	Released for Transmission - Validation in Progress	System
	11/15/2010	Ready to transmit - Validation Complete	
	11/15/2010	Transmitted to FD	
	11/15/2010	Accepted by FD	

# Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

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

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

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

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

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

**Electronic Filing (e-file).** Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit [www.irs.gov/efile](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

<b>Type or print</b>	Name of Exempt Organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. <b>101 CONSTITUTION AVENUE NW, NO. 500E</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>WASHINGTON, DC 20001-2133</b>	

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

- |  |   |                                    |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation)                 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL         | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ         | <input type="checkbox"/> Form 990-T (trust other than above)      | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF         | <input type="checkbox"/> Form 1041-A                              | <input type="checkbox"/> Form 8870 |

**ROGER ROBERTS**

• The books are in the care of ▶ **101 CONSTITUTION AVE NW, STE. 500E - WASHINGTON, DC 20001**  
 Telephone No. ▶ **202-463-2600** FAX No. ▶ \_\_\_\_\_

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

**1** I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 16, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:  
 ▶  calendar year **2009** or  
 ▶  tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

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

<b>3a</b> If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	<b>3a</b>	\$	
<b>b</b> If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	<b>3b</b>	\$	
<b>c Balance Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	<b>3c</b>	\$	<b>N/A</b>

**Caution.** If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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

<b>Part II Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).		
<b>Type or print</b>  <small>File by the extended due date for filing the return. See instructions.</small>	Name of Exempt Organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
	Number, street, and room or suite no. If a P.O. box, see instructions. <b>101 CONSTITUTION AVENUE NW, NO. 500E</b>	For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>WASHINGTON, DC 20001-2133</b>	

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

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

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

**ROGER ROBERTS**

• The books are in the care of **▶ 101 CONSTITUTION AVE NW STE 500E - WASHINGTON, DC 20001**  
 Telephone No. **▶ 2024632600**      FAX No. **▶**

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

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

**5** For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.

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

**7** State in detail why you need the extension  
**ADDITIONAL TIME IS NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

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

**Signature and Verification**

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

Signature **▶** *Juan Lee*      Title **▶** *CPA*      Date **▶** *7/14/2010*

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL
SUPPORT FOR THE MINING INDUSTRY AND TO HELP THE NATION REALIZE THE
ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING
CAPABILITY. OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE 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? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
PRESENTED THE INTEREST OF MINING BEFORE CONGRESS, THE ADMINISTRATION,
FEDERAL AGENCIES, THE JUDICIARY, AND THE MEDIA.

4b (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
HELD SPECIALIZED SEMINARS, WORKSHOPS, MINEXPO INTERNATIONAL, AND OTHER
SIGNIFICANT MEETINGS AND EVENTS.

4c (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )
THE FEDERATION FOR AMERICAN COAL, ENERGY AND SECURITY (FACES OF COAL)
IS AN ALLIANCE OF PEOPLE FROM ALL WALKS OF LIFE WHO ARE JOINING FORCES
TO EDUCATE LAWMAKERS AND THE GENERAL PUBLIC ABOUT THE IMPORTANCE OF
COAL AND COAL MINING TO LOCAL AND NATIONAL ECONOMIES AND TO THE
NATION'S ENERGY SECURITY. IN ADDITION TO KEEPING TENS OF THOUSANDS OF
PEOPLE EMPLOYED IN GOOD-PAYING JOBS, COAL IS THE LIFEBLOOD OF THE U.S.
DOMESTIC ENERGY SUPPLY, GENERATING HALF THE ELECTRICITY CONSUMED IN THE
UNITED STATES TODAY.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses \$

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? .....		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....	X	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> .....		
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> .....	X	
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? <i>If "Yes," complete Schedule D, Part I</i> .....		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> .....	X	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
	• 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>		
	• 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>		
	• 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>		
	• 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? <i>If "Yes," complete Schedule D, Part X.</i>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> .....	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? .....		X
14b	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> .....		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> .....		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> .....		X
17	Did the organization report 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</i> .....		X
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> .....		X
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> .....		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X

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

	Yes	No
<b>21</b> 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? <i>If "Yes," complete Schedule I, Parts I and II</i> .....		X
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> 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? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a 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> .....		
<b>b</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? <i>If "Yes," complete Schedule L, Part I</i> .....		
<b>26</b> Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>c</b> 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? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> .....	X	
<b>35</b> Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> 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. ....	X	



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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a	40	
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b	0	
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
	1c		
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a	40	
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
	2b		
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
	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		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
	4a		
<b>b</b>	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	4b		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	5a		
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	5b		
<b>c</b>	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>6a</b>	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?		X
	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		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>a</b>	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>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	7b		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
	7c		
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
	7e		
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
	7f		
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
	7g		
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
	7h		
<b>8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b>	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		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
	9a		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
	9b		
<b>10 Section 501(c)(7) organizations.</b>	Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
<b>11 Section 501(c)(12) organizations.</b>	Enter:		
<b>a</b>	Gross income from members or shareholders		
	11a		
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	11b		
<b>12a Section 4947(a)(1) non-exempt charitable trusts.</b>	Is the organization filing Form 990 in lieu of Form 1041?		
	12a		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		

**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.

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body		
1a			76
b	Enter the number of voting members that are independent		
1b			76
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10b			
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12b			
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
12c			
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
15a			
b	Other officers or key employees of the organization	X	
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?		X
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 the organization's exempt status with respect to such arrangements?		
16b			

**Section C. Disclosure**

17 List the states with which a copy of this Form 990 is required to be filed **NONE**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 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 interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **ROGER ROBERTS - 202-463-2600**  
**101 CONSTITUTION AVE NW STE 500E, WASHINGTON, DC 20001**

**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 compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KEITH ALESSI DIRECTOR	1.00	X					0.	0.	0.	
DAN ALLAN DIRECTOR	1.00	X					0.	0.	0.	
JACK ATWATER DIRECTOR	1.00	X					0.	0.	0.	
PHILLIPS BAKER, JR. DIRECTOR	1.00	X					0.	0.	0.	
ROBERT BENSON DIRECTOR	1.00	X					0.	0.	0.	
DON BLANKENSHIP DIRECTOR	1.00	X					0.	0.	0.	
JOHN BLASCHAK DIRECTOR	1.00	X					0.	0.	0.	
C. BOLTON, JR. DIRECTOR	1.00	X					0.	0.	0.	
ALEX BOULTON DIRECTOR	1.00	X					0.	0.	0.	
JAMES BOYD DIRECTOR	1.00	X					0.	0.	0.	
MICHAEL BROWN DIRECTOR	1.00	X					0.	0.	0.	
FRANK CALANDRA, JR. DIRECTOR	1.00	X					0.	0.	0.	
DAVID CAMPBELL DIRECTOR	1.00	X					0.	0.	0.	
JOSEPH CARRABBA DIRECTOR	1.00	X					0.	0.	0.	
GERARD CARROLL DIRECTOR	1.00	X					0.	0.	0.	
NICK CARTER DIRECTOR	1.00	X					0.	0.	0.	
RED CONGER DIRECTOR	1.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOSEPH CRAFT III DIRECTOR	1.00	X					0.	0.	0.	
CINDY CRANE DIRECTOR	1.00	X					0.	0.	0.	
CHRISTOPHER CURFMAN DIRECTOR	1.00	X					0.	0.	0.	
GENE DIXON DIRECTOR	1.00	X					0.	0.	0.	
GARY DRUMMOND DIRECTOR	1.00	X					0.	0.	0.	
RAYMOND DUBOIS DIRECTOR	1.00	X					0.	0.	0.	
MARK DUNN DIRECTOR	1.00	X					0.	0.	0.	
ROBERT EVANS DIRECTOR	1.00	X					0.	0.	0.	
DAVID FARNSWORTH DIRECTOR	1.00	X					0.	0.	0.	
CLIFF FORREST DIRECTOR	1.00	X					0.	0.	0.	
<b>1b Total</b>							<b>3,961,448.</b>	<b>0.</b>	<b>830,766.</b>	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **15**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
WEBER MERRITT STRATEGIES, 414 N WASHINGTON STREET, STE 301, ALEXANDRIA, VA 22314	PR MANAGEMENT	1,104,450.
CROWELL & MORING, 1001 PENNSYLVANIA AVE NW, NO. 11, WASHINGTON, DC 20004	LEGAL CONSULTANT	458,953.
COMMUNITY STRATEGIES 915 S COLUMBIA ST, ALEXANDRIA, VA 22314	GRASSROOTS CONSULTANT	197,050.
INFRASTRUCTURE DEVELOPMENT STRATEGIES, 444 N CAPITOL ST, NO. 216, WASHINGTON, DC	GOVERNMENT AFFAIRS CONSULTANT	176,700.
RAFFANIELLO & ASSOCIATES, 1099 NEW YORK AVE NW, STE 635, WASHINGTON, DC 20001	GOVERNMENT AFFAIRS CONSULTANT	175,000.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **8**

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

Part VIII 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	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,467,473.			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		1,467,473.			
	Program Service Revenue	2 a MEMBERSHIP DUES & ASSE	Business Code 900099	12982248.	12982248.	
b CONVENTIONS, CONFERENC		900099	137,420.	137,420.		
c PUBLICATIONS		900099	1,004.	1,004.		
d EXHIBIT SPACE RENTAL		900099	-775.	-775.		
e						
f All other program service revenue						
g Total. Add lines 2a-2f			13119897.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		635,257.		635,257.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real	24,150.			
		(ii) Personal				
		b Less: rental expenses	8,561.			
	c Rental income or (loss)	15,589.				
	d Net rental income or (loss)		15,589.		15,589.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	3567853.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	3680589.			
		c Gain or (loss)	-112736.			
d Net gain or (loss)		-112,736.		-112,736.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
b Less: direct expenses	b					
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.		15125480.	13119897.	0.	538,110.	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	3,145,429.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	3,145,755.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	848,253.			
9 Other employee benefits .....	443,645.			
10 Payroll taxes .....	283,970.			
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	39,978.			
c Accounting .....	205,460.			
d Lobbying .....	283,802.			
e Professional fundraising services. See Part IV, line 17 .....				
f Investment management fees .....	7,766.			
g Other .....	2,371,118.			
12 Advertising and promotion .....	1,119,862.			
13 Office expenses .....	245,327.			
14 Information technology .....	47,309.			
15 Royalties .....				
16 Occupancy .....	1,290,057.			
17 Travel .....	117,202.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .....				
19 Conferences, conventions, and meetings .....	381,865.			
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	30,288.			
23 Insurance .....	83,568.			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) .....				
a <b>FACES OF COAL</b> .....	1,469,061.			
b <b>DUES &amp; SUBSCRIPTIONS</b> .....	332,647.			
c <b>BAD DEBT</b> .....	38,306.			
d <b>TRAINING</b> .....	31,895.			
e <b>MISCELLANEOUS</b> .....	1,887.			
f All other expenses .....	646.			
25 <b>Total functional expenses.</b> Add lines 1 through 24f .....	15,965,096.			
26 <b>Joint costs.</b> Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	1,000.	<b>1</b>	1,000.	
	<b>2</b> Savings and temporary cash investments .....	12,029,435.	<b>2</b>	849,288.	
	<b>3</b> Pledges and grants receivable, net .....		<b>3</b>		
	<b>4</b> Accounts receivable, net .....	1,897,405.	<b>4</b>	969,186.	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>		
	<b>6</b> 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 .....		<b>6</b>		
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>		
	<b>8</b> Inventories for sale or use .....		<b>8</b>		
	<b>9</b> Prepaid expenses and deferred charges .....	341,717.	<b>9</b>	365,444.	
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 941,643.			
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 860,419.	97,331.	<b>10c</b> 81,224.	
	<b>11</b> Investments - publicly traded securities .....	8,936,746.	<b>11</b>	21,130,668.	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>		
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>		
	<b>14</b> Intangible assets .....		<b>14</b>		
	<b>15</b> Other assets. See Part IV, line 11 .....	5,976.	<b>15</b>	63,040.	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	23,309,610.	<b>16</b>	23,459,850.		
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	996,173.	<b>17</b>	1,156,582.	
	<b>18</b> Grants payable .....		<b>18</b>		
	<b>19</b> Deferred revenue .....		<b>19</b>	7,100.	
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>		
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>		
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>		
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>		
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>		
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	6,283,958.	<b>25</b>	4,217,857.	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	7,280,131.	<b>26</b>	5,381,539.	
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	<b>27</b> Unrestricted net assets .....	15,596,487.	<b>27</b>	17,718,570.	
	<b>28</b> Temporarily restricted net assets .....	432,992.	<b>28</b>	359,741.	
	<b>29</b> Permanently restricted net assets .....		<b>29</b>		
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>		
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>		
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>		
	<b>33</b> Total net assets or fund balances .....	16,029,479.	<b>33</b>	18,078,311.	
<b>34</b> Total liabilities and net assets/fund balances .....	23,309,610.	<b>34</b>	23,459,850.		

**Part XI Financial Statements and Reporting**

**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? .....

**b** Were the organization's financial statements audited by an independent accountant? .....

**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? .....

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

**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ....

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

Form **990** (2009)



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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

For Organizations Exempt From Income Tax Under section 501(c) and section 527

**2009**

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.**

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

**Open to Public Inspection**

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

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

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

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

**If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then**

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

Name of organization <b>NATIONAL MINING ASSOCIATION</b>	Employer identification number <b>52-1916480</b>
--	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

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

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

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

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_ 0.
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_ 0.
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. **SEE PART IV FOR CONTINUATION**

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
COALPAC	WASHINGTON, DC 20001	52-1322749	0.	11,356.
MINEPAC	WASHINGTON, DC 20001	52-1939409	0.	15,118.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009 LHA

**Part II-A** Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

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

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	12,982,248.
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	2,839,899.
<b>b</b> Carryover from last year .....	<b>2b</b>	1,106,038.
<b>c</b> Total .....	<b>2c</b>	3,945,937.
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	4,024,497.
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	-78,560.

**Part IV Supplemental Information**

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

**PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORMATION:**

COALPAC

101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001

MINEPAC

101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001

Schedule D (Form 990)

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.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate contributions, aggregate grants, aggregate value, and questions about donor advisement.

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

Form for Part II Conservation Easements. Includes questions about purpose of easements, acreage restricted, and monitoring. Includes a table for 'Held at the End of the Tax Year' with rows 2a-2d.

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

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Includes questions about reporting works of art and historical treasures.

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment  \_\_\_\_\_ %
  - b Permanent endowment  \_\_\_\_\_ %
  - c Term endowment  \_\_\_\_\_ %
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes           | No |
|---|---------------|----|
| (i) unrelated organizations   | <b>3a(i)</b>  |    |
| (ii) related organizations  | <b>3a(ii)</b> |    |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | <b>3b</b>     |    |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		39,239.	29,156.	10,083.
d Equipment		642,758.	599,685.	43,073.
e Other		259,646.	231,578.	28,068.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				<b>81,224.</b>



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,125,480.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,965,096.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	-839,616.
4	Net unrealized gains (losses) on investments	4	2,368,028.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	520,420.
9	Total adjustments (net). Add lines 4 through 8	9	2,888,448.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	2,048,832.

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

1	Total revenue, gains, and other support per audited financial statements	1	17,502,069.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	2,368,028.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	8,561.
e	Add lines 2a through 2d	2e	2,376,589.
3	Subtract line 2e from line 1	3	15,125,480.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	15,125,480.

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

1	Total expenses and losses per audited financial statements	1	16,494,077.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	528,981.
e	Add lines 2a through 2d	2e	528,981.
3	Subtract line 2e from line 1	3	15,965,096.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	15,965,096.

**Part XIV Supplemental Information**

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

**PART X: MANAGEMENT HAS CONCLUDED THAT THE ASSOCIATION HAS**

**MAINTAINED ITS EXEMPT STATUS; ALL REVENUE WITHIN THE STATEMENT OF**

**ACTIVITIES HAS BEEN PROPERLY CLASSIFIED FOR THE YEAR ENDED DECEMBER 31,**

**2009 AND DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS AS OF DECEMBER 31,**

**2009.**

**PART XI, LINE 8 - OTHER ADJUSTMENTS:**

**FAS 158 ADJUSTMENT: 520420.**

**Part XIV** Supplemental Information (continued)

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES: 8561.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

FAS 158 ADJUSTMENT: 520420.

RENTAL EXPENSES: 8561.



**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**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

**2009**

Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

**Part I Questions Regarding Compensation**

	Yes	No
<p><b>1a</b> 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.</p> <p> <input type="checkbox"/> First-class or charter travel                     <input type="checkbox"/> Housing allowance or residence for personal use  <input type="checkbox"/> Travel for companions                     <input type="checkbox"/> Payments for business use of personal residence  <input type="checkbox"/> Tax indemnification and gross-up payments                     <input checked="" type="checkbox"/> Health or social club dues or initiation fees  <input type="checkbox"/> Discretionary spending account                     <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)                 </p>		
<p><b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....</p>		X
<p><b>2</b> 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? .....</p>	X	
<p><b>3</b> 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.</p> <p> <input type="checkbox"/> Compensation committee                     <input checked="" type="checkbox"/> Written employment contract  <input checked="" type="checkbox"/> Independent compensation consultant                     <input checked="" type="checkbox"/> Compensation survey or study  <input type="checkbox"/> Form 990 of other organizations                     <input checked="" type="checkbox"/> Approval by the board or compensation committee                 </p>		
<p><b>4</b> 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:</p> <p><b>a</b> Receive a severance payment or change-of-control payment? .....</p> <p><b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....</p> <p><b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	X	
	X	
		X
<p><b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b></p>		
<p><b>5</b> 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:</p> <p><b>a</b> The organization? .....</p> <p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>		
<p><b>6</b> 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:</p> <p><b>a</b> The organization? .....</p> <p><b>b</b> Any related organization? .....</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>		
<p><b>7</b> 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 .....</p>		
<p><b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III .....</p>		
<p><b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....</p>		

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
HAROLD QUINN, JR.	(i)	424,518.	253,000.	39,673.	65,523.	27,071.	809,785.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
ROGER ROBERTS	(i)	141,170.	28,000.	9,765.	24,401.	12,547.	215,883.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MARY SWEENEY	(i)	159,180.	35,000.	16,260.	31,941.	25,596.	267,977.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
BRUCE WATZMAN	(i)	217,930.	70,000.	23,918.	64,048.	32,374.	408,270.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MOYA PHELLEPS	(i)	137,880.	22,900.	23,173.	40,296.	11,388.	235,637.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DANIEL GERKIN	(i)	207,990.	38,000.	25,366.	103,605.	25,814.	400,775.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
MERLYN NOLAN	(i)	273,430.	80,000.	17,010.	36,173.	35,069.	441,682.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
CAROL RAULSTON	(i)	218,170.	50,000.	27,504.	55,851.	13,895.	365,420.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KAREN BENNETT	(i)	140,930.	25,000.	9,765.	28,710.	25,383.	229,788.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
DAVID FINKENBINDER	(i)	134,872.	22,000.	15,331.	47,184.	21,066.	240,453.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
JULIA GUSTAFSON	(i)	157,978.	21,750.	9,384.	20,080.	12,718.	221,910.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
GLENN KELLY	(i)	200,170.	30,900.	31,410.	12,297.	12,982.	287,759.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
LUKE POPOVICH	(i)	118,170.	15,000.	25,128.	32,258.	12,496.	203,052.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
KRAIG NAASZ	(i)	0.	0.	463,823.	0.	0.	463,823.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A: CLUB BENEFITS ARE AVAILABLE TO MEMBERS OF SENIOR MANAGEMENT ON AN AS-APPROPRIATE BASIS. FIVE OFFICERS OR KEY EMPLOYEES RECEIVED CLUB DUES AS A BENEFIT, WHICH WAS NONTAXABLE TO THE RECIPIENTS.

PART I, LINE 1B: NMA DOES NOT HAVE A WRITTEN POLICY CONCERNING CLUB DUES. THEY ARE APPROVED BY THE CEO ON A CASE-BY-CASE BASIS FOR SENIOR MANAGEMENT WITH A VALID BUSINESS PURPOSE AND ARE REIMBURSED BASED UPON ACTUAL COST.

PART I, LINE 4A:

KRAIG NAASZ	SEVERANCE PAYMENTS	463,823
HAROLD QUINN, JR.	NON-QUALIFIED RETIREMENT PLAN	16,500

**SCHEDULE J-2**

(Form 990)

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the Organization

**NATIONAL MINING ASSOCIATION**

Employer Identification number

**52-1916480**

**Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN GALASSINI DIRECTOR	1.00	X					0.	0.	0.	
TIM GITZEL DIRECTOR	1.00	X					0.	0.	0.	
DAVID GODLEWSKI DIRECTOR	1.00	X					0.	0.	0.	
JOHN GRISHAM DIRECTOR	1.00	X					0.	0.	0.	
BENJAMIN GUENTHER DIRECTOR	1.00	X					0.	0.	0.	
LEROY HAGENBUCH DIRECTOR	1.00	X					0.	0.	0.	
PETER HALPIN DIRECTOR	1.00	X					0.	0.	0.	
JOHN HAMRICK DIRECTOR	1.00	X					0.	0.	0.	
DOUGLAS HARDMAN DIRECTOR	1.00	X					0.	0.	0.	
J. BRETT HARVEY DIRECTOR	1.00	X					0.	0.	0.	
BENNETT HATFIELD DIRECTOR	1.00	X					0.	0.	0.	
RON HOCHSTEIN DIRECTOR	1.00	X					0.	0.	0.	
ROBERT HOGAN, JR. DIRECTOR	1.00	X					0.	0.	0.	
THOMAS JANECK DIRECTOR	1.00	X					0.	0.	0.	
CHARLES JEANNES DIRECTOR	1.00	X					0.	0.	0.	
TONY JENSEN DIRECTOR	1.00	X					0.	0.	0.	
GLENN KELLOW DIRECTOR	1.00	X					0.	0.	0.	
KEITH KIMBLE DIRECTOR	1.00	X					0.	0.	0.	
GREG LANG DIRECTOR	1.00	X					0.	0.	0.	
GUY LEBLANC DIRECTOR	1.00	X					0.	0.	0.	

**SCHEDULE J-2**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

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

▶ See the Instructions for Form 990.

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**2009**

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Inspection

Name of the Organization

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Employer Identification number

**52-1916480**

**Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
STEVEN LEER DIRECTOR	1.00	X						0.	0.	0.
KEVIN LOUGHREY DIRECTOR	1.00	X						0.	0.	0.
TOM MACKALL DIRECTOR	1.00	X						0.	0.	0.
MICHAEL MCLANAHAN DIRECTOR	1.00	X						0.	0.	0.
ROBERT MURRAY DIRECTOR	1.00	X						0.	0.	0.
FRED NELSON DIRECTOR	1.00	X						0.	0.	0.
RICHARD O'BRIEN DIRECTOR	1.00	X						0.	0.	0.
DAVID POTTER DIRECTOR	1.00	X						0.	0.	0.
MICHAEL QUILLEN DIRECTOR	1.00	X						0.	0.	0.
JOHN RICH, JR. DIRECTOR	1.00	X						0.	0.	0.
DUANE RICHARDS DIRECTOR	1.00	X						0.	0.	0.
GEORGE RICHMOND DIRECTOR	1.00	X						0.	0.	0.
DANIEL ROLING DIRECTOR	1.00	X						0.	0.	0.
BRIAN RONCK DIRECTOR	1.00	X						0.	0.	0.
MARK SMITH DIRECTOR	1.00	X						0.	0.	0.
RICHARD SMITH DIRECTOR	1.00	X						0.	0.	0.
MARK SNYDER DIRECTOR	1.00	X						0.	0.	0.
VICTOR STABIO DIRECTOR	1.00	X						0.	0.	0.
ROBERT STENGER DIRECTOR	1.00	X						0.	0.	0.
BRIAN SULLIVAN DIRECTOR	1.00	X						0.	0.	0.

**SCHEDULE J-2**

(Form 990)

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the Organization

**NATIONAL MINING ASSOCIATION**

Employer Identification number

**52-1916480**

**Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL SUTHERLIN DIRECTOR	1.00	X					0.	0.	0.	
WILLIAM TATE DIRECTOR	1.00	X					0.	0.	0.	
CHARLES UNGUREAN DIRECTOR	1.00	X					0.	0.	0.	
JOSEPH USIBELLI, JR. DIRECTOR	1.00	X					0.	0.	0.	
DENNIS WHEELER DIRECTOR	1.00	X					0.	0.	0.	
RICHARD WHITING DIRECTOR	1.00	X					0.	0.	0.	
GARY GOLDBERG CHAIRMAN	1.00	X		X			0.	0.	0.	
GREGORY BOYCE VICE CHAIRMAN	1.00	X		X			0.	0.	0.	
FRANCIS MCALLISTER DIRECTOR	1.00	X					0.	0.	0.	
HAROLD QUINN, JR. PRESIDENT & CEO	35.00			X			717,191.	0.	92,594.	
ROGER ROBERTS TREASURER/SVP FINANCE	35.00			X			178,935.	0.	36,948.	
MARY SWEENEY ASSISTANT SECRETARY	35.00			X			210,440.	0.	57,537.	
BRUCE WATZMAN SECRETARY	35.00			X			311,848.	0.	96,422.	
MOYA PHELLEPS SVP MEMBERSHIP	35.00				X		183,953.	0.	51,684.	
DANIEL GERKIN SVP POLITICAL	35.00				X		271,356.	0.	129,419.	
MERLYN NOLAN SVP GOVERNMENT AFFAIRS	35.00				X		370,440.	0.	71,242.	
CAROL RAULSTON SVP COMMUNICATIONS	35.00				X		295,674.	0.	69,746.	
KAREN BENNETT DIRECTOR, WATER QUALITY	35.00					X	175,695.	0.	54,093.	
DAVID FINKENBINDER VP CONGRESSIONAL AFFAIRS	35.00					X	172,203.	0.	68,250.	
JULIA GUSTAFSON DIRECTOR, CONGRESSIONAL	35.00					X	189,112.	0.	32,798.	



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

Department of the Treasury  
Internal Revenue Service

**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

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

MINERAL INDUSTRY ON PUBLIC POLICY ISSUES BEFORE CONGRESS, THE EXECUTIVE  
BRANCH, AND THE JUDICIARY AND PREPARE AND DISTRIBUTE INFORMATION TO  
CARRY OUT THESE PURPOSES.

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

POLICY PROCESS ON THE MOST SIGNIFICANT AND TIMELY ISSUES THAT IMPACT  
OUR ABILITY TO LOCATE, PERMIT, MINE, PROCESS, TRANSPORT, AND UTILIZE  
THE NATION'S VAST COAL AND MINERAL RESOURCES.

NMA SERVICES ITS MEMBERSHIP BY:

-PROMOTING THE PRODUCTION AND USE OF COAL AND MINERAL RESOURCES  
PRODUCED BY THE US MINING INDUSTRY;

-ESTABLISHING A STRONG POLITICAL PRESENCE IN THE NATION'S CAPITAL ON  
BEHALF OF NMA'S MEMBERSHIP;

-SERVING AS THE INFORMATION CENTER FOR AND A SINGLE VOICE OF THE US  
MINING INDUSTRY;

-AND ADDRESSING THE CURRENT AND FUTURE NEEDS OF THE INDUSTRY, MINING  
EQUIPMENT MANUFACTURERS, AND SUPPORT SERVICES MEMBERS OF THE  
ASSOCIATION.

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

DEVELOP GENERAL INDUSTRY AND ISSUE SPECIFIC ADVERTISING CAMPAIGNS

FORM 990, PART VI, SECTION A, LINE 6: ANY ORGANIZATION, CORPORATION,

PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN OR CLOSELY ASSOCIATED WITH



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

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

MINING ACTIVITIES SHALL BE ELIGIBLE FOR MEMBERSHIP. MEMBERSHIP IN THE  
ASSOCIATION CONSISTS OF THE FOLLOWING CLASSES:

PRODUCER MEMBERSHIP - ANY ORGANIZATION CORPORATION, PARTNERSHIP, COMPANY,  
OR INDIVIDUAL ENGAGED IN THE MINING AND PRODUCTION OR COAL OR MINERALS.  
PRODUCERS MEMBERS ARE DIVIDED INTO TWO SEPARATE CLASSES (I) COAL PRODUCER  
MEMBERS AND (II) MINERAL PRODUCER MEMBERS.

MANUFACTURERS AND SERVICES MEMBERSHIP - ANY ORGANIZATION, CORPORATION  
PARTNERSHIP, COMPANY, OR INDIVIDUAL ENGAGED IN THE MANUFACTURE OF MINING  
MACHINERY, EQUIPMENT, AND SUPPLIES. MINING RELATED SERVICES OR CLOSELY  
ASSOCIATED WITH AND INTERESTED IN PROMOTING THE GENERAL WELFARE OF THE  
MINING INDUSTRY, BUT NOT ENGAGED IN MINING.

FORM 990, PART VI, SECTION A, LINE 7A: THE BOARD OF DIRECTORS SHALL  
CONSIST OF DIRECTORS SELECTED AS FOLLOWS:

1) FORTY DIRECTORS ELECTED BY, AND REPRESENTING AS A CLASS, COAL PRODUCER  
MEMBERS; AND FORTY DIRECTORS ELECTED BY, AND REPRESENTING AS A CLASS,  
MINERAL PRODUCER MEMBERS; AND

2) FOURTEEN DIRECTORS ELECTED BY, AND REPRESENTING AS A CLASS,  
MANUFACTURERS AND SERVICES MEMBERS; AND

3) THE PRESIDENT OF THE ASSOCIATION, EX OFFICIO.

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

Department of the Treasury  
Internal Revenue Service

**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

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

DIRECTORS SHALL BE ELECTED BY A MAJORITY VOTE AT THE ANNUAL MEETING OF THE ASSOCIATION.

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY SENIOR MANAGEMENT AND GENERAL COUNSEL AND ANY CHANGES ARE COMMUNICATED TO THE OUTSIDE ACCOUNTANTS PRIOR TO FILING THE RETURN.

FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION UTILIZES A COMPENSATION CONSULTANT TO PERFORM A BI-ANNUAL COMPENSATION SURVEY OF COMPARABLE TRADE ASSOCIATIONS. NATIONAL MINING ASSOCIATION'S GOAL WHEN SETTING SALARIES FOR ALL EMPLOYEES IS TO HAVE THEIR COMPENSATION AT THE 75TH PERCENTILE OF COMPARABLE TRADE ASSOCIATIONS USING THE RESULTS FROM THIS SURVEY. FURTHERMORE, THE PRESIDENT AND CEO'S SALARY IS NEGOTIATED VIA CONTRACT WITH THE FOLLOWING BOARD MEMBERS: CHAIRMAN, VICE CHAIRMAN, AND CHAIRMAN OF THE AUDIT AND FINANCE COMMITTEE.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

**Name of the organization** NATIONAL MINING ASSOCIATION **Employer identification number** 52-1916480

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
AMERICAN COAL FOUNDATION - 52-1236554 101 CONSTITUTION AVE, STE 525E WASHINGTON, DC 20001	EDUCATIONAL FOUNDATION	DISTRICT OF COLUMBIA	501(C)(3)	11-II	N/A
MINEPAC - 52-1939409 101 CONSTITUTION AVE, STE 525E WASHINGTON, DC 20001	POLITICAL ACTION COMMITTEE	DISTRICT OF COLUMBIA	527		N/A
COALPAC - 52-1322749 101 CONSTITUTION AVE, STE 525E WASHINGTON, DC 20001	POLITICAL ACTION COMMITTEE	DISTRICT OF COLUMBIA	527		N/A



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

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

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

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

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

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

