COMMITTEE ON NATURAL RESOURCES

Disclosure Form

As required by and provided for in House Rule XI, clause 2(g) and the Rules of the Committee on Natural Resources

Legislative Hearing on: H.R. 4381 (Tipton), "Planning for American Energy Act" H.R. 4382 (Coffman), "Providing Leasing Certainty for American Energy Act" H.R. 4383 (Lamborn), "Streamlining Permitting of American Energy Act" H.R. 4402 (Amodei), "National Strategic and Critical Minerals Production Act of 2012" H.R. 1192 (Lummis), "Soda Ash Royalty Extension, Job Creation, and Export Enhancement Act of 2011" and H.R. 2176 (Heinrich), "Clean Energy Promotion Act"

April 26, 2012

For Individuals:
1. Name:
2. Address:
3. Email Address:
4. Phone Number:
* * * *
For Witnesses Representing Organizations:
1. Name: Harold P. Quinn, Jr.
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: webmaster@nma.org
5. Business Phone Number: (202) 463-2600

Name/Organization: <u>Harold P. Quinn, Jr. /National Mining Association</u>
Title/Date of Hearing: <u>Legislative Hearing on H.R. 4381, H.R. 4382, H.R. 4383, H.R. 4402, H.R. 1192 and H.R. 2176 / April 26, 2012</u>

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, United States Energy Association and the Rocky Mountain Mineral Law Foundation. 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 <u>Department of the Interior</u> (<u>and /or other agencies invited</u>) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None.

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

None.

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

Quinn brings more than 20 years of experience to his current position. He has represented mining's interests before the executive, legislative and judicial branches of government in a number of positions, including as NMA's Executive Vice President, as its Senior Vice President for legal and regulatory affairs and as General Counsel. He was General Counsel of the National Coal Association prior to the formation of NMA through the merger in 1995 of the American Mining Congress and the National Coal Association.

Name/Organization: Harold P. Quinn, Jr. /National Mining Association

Title/Date of Hearing: <u>Legislative Hearing on H.R. 4381, H.R. 4382, H.R. 4383, H.R. 4402, H.R. 1192 and H.R. 2176 / April 26, 2012</u>

In addition, for witnesses representing organizations:

g. 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

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

None.

i. 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 (11th 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 (6th 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 (4th 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 (9th 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)

j. A list of any countries from which the organization(s) you represent at the hearing have received foreign donations and the total amount of donations received from each country, for the current year and the previous four years, by each organization.

None.

k. 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.

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)

OMB No. 1545-0047 Open to Public

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

Inspection

_	roi ui	e 20 i i calendar year, or tax year beginning	and	enumg		
В	Check if applicab	C Name of organization			D Employer ide	entification number
	Addre		ON			
	Name	Doing Business As			52	2-1916480
	Initial	Number and street (or P.O. box if mail is not delivered	to street address)	Room/suite	E Telephone nu	ımber
_	Termi			500E		2-463-2600
$\overline{\Gamma}$	Amen	ded O:			G Gross receipts \$	33,951,065
7	return Apple	WASHINGTON, DC 20001-213	12			
	⊥tiòn pendi	0.0			H(a) Is this a gro	
		F Name and address of principal officer:HAROLI	OCTMM		for affiliates	
_	-	SAME AS C ABOVE			H(b) Are all affiliate	es included? Yes No
			nsert no.) 4947(a)(1)	or 527	If "No," atta	ch a list. (see instructions)
		te: ► WWW.NMA.ORG	January Company			nption number 🕨
K	Form o	organization: X Corporation Trust Associat	ion Other	L Year	of formation: 199	5 M State of legal domicile: DI
P	art I	Summary				
6)	1	Briefly describe the organization's mission or most signi	ficant activities: TO Pi	ROMOTE	THE GENE	RAL WELFARE
Activities & Governance	1	OF THE PRODUCERS OF COAL AND	MINERALS, R	EPRESE	NT THE CO	AL AND
2	2	Check this box if the organization discontinue	ed its operations or dispos	sed of more	than 25% of its n	et assets
Ve		Number of voting members of the governing body (Part	· · · · · · · · · · · · · · · · · · ·	ALCOHOL:		3 74
Ğ		Number of independent voting members of the governir				4 74
ବ୍ଦି ଓ		Total number of individuals employed in calendar year 2				5 38
itie						6
ξį			(O) E- 10		······	
A		Total unrelated business revenue from Part VIII, column				7a 0 .
_	D	Net unrelated business taxable income from Form 990-T	, line 34			ب نوان النام
		0 17 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			Prior Year	Current Year
ne		Contributions and grants (Part VIII, line 1h)			1,493,74	The second secon
/en		Program service revenue (Part VIII, line 2g)			14,247,71	
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and			705,80	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 1	Oc, and 11e)		111,03	
	12	Total revenue - add lines 8 through 11 (must equal Part \	/III, column (A), line 12)		16,558,29	
	13	Grants and similar amounts paid (Part IX, column (A), line	es 1·3)			0.
	14	Benefits paid to or for members (Part IX, column (A), line	4)			0. 0.
8	15	Salaries, other compensation, employee benefits (Part I)	(, column (A), lines 5-10)		7,142,46	
in S	16a	Professional fundraising fees (Rart IX, column (A), line 11	е)			0.
Expenses		Total fundraising expenses (Part IX, column (D), line 25)	•	0.		
iii		Other expenses (Part IX, column (A), lines 11a-11d, 11f-2	(4e)		9,980,79	5. 10,474,901.
		Total expenses. Add lines 13-17 (must equal Part IX, colo			17,123,25	5. 17,783,802.
		Revenue less expenses. Subtract line 18 from line 12		CANTELLA .	-564,95	
or es					ginning of Current Y	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)			27,440,46	
Ass	21	Total liabilities (Part X, line 26)	***************************************		7,924,77	
Eet	22	Net assets or fund balances. Subtract line 21 from line 2	 n		19,515,69	
		Signature Block	·		13,313,03	0. 15,051,550.
		Ities of perjury, I declare that I have examined this return, includ	ing accompanying schedules	and stateme	ente and to the heet	of my knowledge and helief, it is
		t, and complete. Declaration of preparer (other than officer) is ba			•	or my knowledge and belief, it is
		A source source of property (early than entery) to be	ioos on an anomation of an	non proparor	nao any knowledge.	
Sigr	,	Signature of officer			Date	
Her		ROGER ROBERTS, TREASURER/	SVP FINANCE			
1101	•	Type or print name and title	211 11111102			
		Print/Type preparer's name Prepa	rer's signature	10	ate Check	PTIN
Paid		Frepa	ror o olynature		il	· 🖵 [
Prep		Firm's name JOHNSON LAMBERT & C	O. T.T.P			mployed 52-1446779 ►
	Only				Firm's EIN	74-1440117
300	Jiny	Firm's address 700 SPRING FOREST R RALEIGH, NC 27609	OWD' SIE 113		Db	010_710 6400
					1 Phone no.	919-719-6400
way	tne II	S discuss this return with the preparer shown above? (s	ee instructions)			X Yes No

NATIONAL MINING ASSOCIATION

52-1916480

Form 990 (2011)

Form 990 (2011)

Form 990 (2011) NATIONAL MIN Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		х
2	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			-
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	ľ		
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> X</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	_ =	х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	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? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
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? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			37
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		$\frac{x}{x}$
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
J	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
•-	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		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? If "Yes," complete Schedule F, Parts III and IV	16		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? If "Yes," complete Schedule G, Part I	17		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? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? /f "Yes,"	[
	complete Schedule G, Part III	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	1	

Form 990 (2011) NATIONAL MINING AS Part IV Checklist of Required Schedules (continued)

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

Form 990 (2011)
Part V Sta Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

	Check it Schedule O contains a response to any question in this Part V		0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	Scotton :		
.		1.	l 67		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	57			
b	***************************************		<u> </u>			
Ç	Did the organization comply with backup withholding rules for reportable payments to vendors and				v	
0-	(gambling) winnings to prize winners? Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1++5++++	1	10	X	
Za			38			
h	filed for the calendar year ending with or within the year covered by this return		 		х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returned. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction			2b	Λ	
30	Did the examination have unrelated hydrone green income of \$4,000 as more during the unit	•		0-		х
	tense at the same to be a second to the same to the sa			3a 3b		Α
	At any time during the calendar year, did the organization have an interest in, or a signature or other		dtu ovor o	30		<u> </u>
Tu	financial account in a foreign country (such as a bank account, securities account, or other financial			4a		х
h	If "Yes," enter the name of the foreign country:	accou	***************************************	44		**
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accou	nte			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?		***************************************	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		**
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to					
	any contributions that were not tax deductible?			6a	х	
b	If "Yes," did the organization include with every solicitation an express statement that such contribu					
	were not tax deductible?	MM 09	_	6b	x	
7	Organizations that may receive deductible contributions under section 170(c).		7,723			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices p	rovided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w					
	to file Form 8282?	· · · · · · · · · · · · · · · · · · ·		7c		
d	If 'Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contri	ract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. D					
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tim	e during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?		******************	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b	_	
0	Section 501(c)(7) organizations. Enter:	1 1	_			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
1	Section 501(c)(12) organizations. Enter:	المدا				
a	Gross income from members or shareholders	11a				
D	Gross income from other sources (Do not net amounts due or paid to other sources against	445				
22	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	11b		40-	1	
		12b	ŀ	12a		
3	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
	Is the organization licensed to issue qualified health plans in more than one state?		ŀ	13a	-	
-	Note. See the instructions for additional information the organization must report on Schedule O.	*********		ioa		
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule			14b	\neg	

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

Sec	Check if Schedule O contains a response to any question in this Part VI tion A. Governing Body and Management			X
-	ton At devening body and management		Yes	N
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 74		1.00	
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 74			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	<u> </u>	1	
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	X	
_	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	H		-
	more members of the governing body?	7a	x	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	<u>' "</u>	<u> </u>	
-		7b		X
В	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	75		
	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	X	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD		-
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
ec:	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	1 8	-	
	1711 D. F. Choloc (17115 Geotion & Fequesis information about policies het required by the Internal Nevende Code.)		V	NL
าจ	Did the organization have local chanters, branches, or effiliates?	40-	Yes	No.
	Did the organization have local chapters, branches, or affiliates? If "Yes, did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10a		
D		401		
۱.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	_
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Δ	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			v
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		-
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c		-
3	Did the organization have a written whistleblower policy?	13		X
4	Did the organization have a written document retention and destruction policy?	14	X	
5	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?			
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	100		
3a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
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?	16b		
ect	ion C. Disclosure			
•	List the states with which a copy of this Form 990 is required to be filed ► NONE			
3	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	le	
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X Upon request			
)	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
	State the name, physical address, and telephone number of the person who possesses the books and records of the organizat	ion: 🕨	•	
	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

X

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.

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

- 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.

(A)	(B)			- ((C)			(D)	(E)	(F)
Name and Title	Average	(de	note	Pos heck	ition	l than	one	Reportable	Reportable	Estimated
	hours per	box	i, unle	ss pe	rson	is bot	th an	1	compensation	amount of
	week	\vdash	1	1		1	100,	from	from related	other
	(describe hours for	Brect		1	l	_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	o aa	Stee		l	nsate		(W-2/1099-MISC)	(11 2/ 1000 11/100)	organization
	organizations	trust	la tr		oyee	ed mo				and related
	in Schedule	individual trustee or director	Institutional trustee	O#ficer	Key employee	Highest compensated employee	Former	00 04		organizations
(1) GREGORY H. BOYCE	O)	를	≝	₿	Ke	물 등	5	7		
CHAIRMAN	1.00	X		X	4			0.	0.	0.
(2) FRANCIS R MCALLISTER	1.00			-	- 1	N. 405		70		
VICE CHAIRMAN	1.00	x		X				0.	0.	0.
(3) ALI ALAVI		1	4		19					
DIRECTOR	1.00	x			N			0.	0.	0.
(4) DAN ALLAN				1	9	-	1			
DIRECTOR (TO MAY '11)	1.00	X		V	M			0.	0.	0.
(5) JACK ATWATER	486	All		4						
DIRECTOR	1.00	X	-	-				0.	0.	0.
(6) PHILLIPS S. BAKER, JR.		1	in-							
DIRECTOR	1.00	X	7					0.	0.	0.
(7) JANPETER BEKKERING			ĺ	ĺĺ		l				
DIRECTOR (TO JUL '11)	1.00	X		Щ		L		0.	0.	0.
(8) ROBERT L. BENSON		١					ĺ			
DIRECTOR	1.00	X	_	Щ		_	_	0.	0.	0.
(9) JOHN BLASCHAK	1 00	٠,,								•
DIRECTOR	1.00	X		Н			\vdash	0.	0.	0.
(10) ALEX C. BOULTON DIRECTOR	1 00	x						0.	0	0
(11) FRANK CALANDRA, JR.	1.00	Δ		-	_		_	0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(12) JOSEPH A. CARRABBA	1.00		-				_	0.	0.	<u> </u>
DIRECTOR	1.00	X						0.	0.	0.
(13) NICK CARTER							_			
DIRECTOR	1.00	x						0.	0.	0.
(14) KEITH CLARK				\neg	\neg	\neg				
DIRECTOR (FROM SEP '11)	1.00	X						0.	0.	0.
(15) RED CONGER										
DIRECTOR	1.00	X						0.	0.	0.
(16) JOSEPH W. CRAFT, III				一	\neg	\neg				
DIRECTOR	1.00	X						0.	0.	0.
(17) CINDY CRANE										·
DIRECTOR	1.00	X						0.	0.	0.

Part VII Section A. Officers, Direct		mple	оуеє			High	est					
(A)	(B)			Pos	C) itior	•		(D)	(E)		(F)	
Name and title	Average			check	more	than		Reportable	Reportable		stimat	
	hours per week			ss pe rd a d				compensation from	compensation from related	а	mount other	
	(describe hours for related organizations in Schedule O)		institutional trustee	Officer	Key employee	Highest compensated employee	ırmer	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or	mpensi from the ganizated rela ganizat	ation ne tion ted
(18) KEVIN CRUTCHFIELD		투	투	Ö	3,	Ξ 53	3					-
DIRECTOR	1.00	$ _{\mathbf{X}}$						0.	0.	100		0.
(19) JOHN DISHAROON		 	\vdash	H	\vdash	1					-	-
DIRECTOR (FROM AUG '11)	1.00	X						0.	0.			0.
(20) GENE B. DIXON		 		H	\vdash	t						
DIRECTOR	1.00	X						0.	0.			0.
(21) GARRY N. DRUMMOND				П								
DIRECTOR	1.00	X						0.	0.			0.
(22) MARK DUNN				П								
DIRECTOR	1.00	X						0.	0.			0.
(23) ROBERT L. EVANS				П		П						
DIRECTOR	1.00	X						0.	0.			0.
(24) DAVID FARNSWORTH								0 11 11				
DIRECTOR (TO OCT '11)	1.00	X		Ш		L	4	0.	0.			0.
(25) CLIFF FORREST	4 00	l		Ш		4	-		•			
DIRECTOR	1.00	X			. (2	0.	0.			0.
(26) JAC FOURIE DIRECTOR	1.00	$ \mathbf{x} $					1	0.	0.			0.
1b Sub-total			A				7	0.	0.			0.
c Total from continuation sheets to	Part VII Section A		9	·	*		M	4,056,264.	0.	84	0,7	
d Total (add lines 1b and 1c)				- No.		V		4,056,264.	0.		0,7	
2 Total number of individuals (includin						_	no re		000 of reportable			
compensation from the organization				1	"	,						19
	-	1									Yes	No
3 Did the organization list any former												
line 1a? If "Yes," complete Schedule										3	ļ	X
4 For any individual listed on line 1a, is			-						-			
and related organizations greater th	**************************************									4	X	
5 Did any person listed on line 1a received rendered to the organization? If "Yes										5		x
randarad to the organization? If Tes	s, somplete scriedur	J U //	ui al	1011 F	7012	wii.				J		

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.

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

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (B) (C) (D) (F) (E) Name and title Position Average Reportable Reportable Estimated (check all that apply) hours compensation compensation amount of from per from related other week organizations the compensation Highest compensated employee organization (W-2/1099-MISC) from the Individual trustee or director (W-2/1099-MISC) organization Institutional trustee and related Key employee organizations Officer (27) JOHN GALASSINI DIRECTOR (TO JUN '11) 1.00 X 0. 0. 0. (28) DAVID P. GARDNER 1.00 DIRECTOR (FROM JUN '11) X 0. 0 0. (29) TIM GITZEL DIRECTOR 1.00 | x0. 0. 0. (30) DAVID W. GODLEWSKI DIRECTOR 1.00 X 0. 0. 0. (31) GARY J. GOLDBERG DIRECTOR (TO NOV '11) 1.00 X 0. 0. 0. (32) BENJAMIN GUENTHER DIRECTOR 1.00 | X 0. 0. 0. (33) LEROY G. HAGENBUCH DIRECTOR 1.00 X 0. 0. 0. (34) PETER T. HALPIN DIRECTOR 1.00 | X 0. 0. 0. (35) GARY HALVERSON 1.00 x 0. DIRECTOR (FROM DEC '11) 0. 0. (36) JOHN HAMRICK 1.00 DIRECTOR (TO AUG '11) X 0. 0. 0. (37) DOUGLAS R. HARDMAN 0. DIRECTOR 1.00 X 0. 0 (38) J. BRETT HARVEY DIRECTOR 1.00 X 0. 0. 0. (39) BENNETT HATFIELD DIRECTOR (TO JUN '11) 1.00 X 0. 0. 0. (40) RON F. HOCHSTEIN 1.00 X 0. DIRECTOR 0. 0. (41) ROBERT F. HOGAN, JR. DIRECTOR 1.00 | x0. 0. 0. (42) CHARLES A. JEANNES DIRECTOR 1.00 X 0. 0. 0. (43) TONY JENSEN DIRECTOR 1.00 X 0. 0. 0. (44) GREG JESSEE DIRECTOR (FROM SEP '11) 1.00 | X 0. 0. 0. (45) KEITH B. KIMBLE DIRECTOR 1.00 | X 0. 0. 0. (46) JOHN KING DIRECTOR (FROM AUG '11) 1.00 X 0. 0. 0. Total to Part VII, Section A, line 1c

Part VII Section A. Officers, Directors, Tr (A)	(B)	T	Oye	16 10	C)	nığı	1031	(D)	(E)	(5)
Name and title	Average			Pos		,		Reportable	Reportable	(F) Estimated
	hours	(hec	k all t			ily)	compensation	compensation	amount of
	per week	individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W·2/1099·MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(47) MITCHELL J. KREBS		П								
DIRECTOR (FROM SEP '11)	1.00	X	L					0.	0.	0
(48) PAUL KRIVOKUCA										,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
DIRECTOR (FROM SEP '11)	1.00	X		Ш				0.	0.	0
(49) GREG LANG										
DIRECTOR (TO NOV '11)	1.00	X						0.	0.	0
(50) GUY L. LEBLANC	1 00									
DIRECTOR	1.00	X	_					0.	0.	0
(51) STEVEN F. LEER	1 00									
DIRECTOR (52) KEVIN LOUGHREY	1.00	X		$\vdash \vdash$	\square			0.	0.	0
DIRECTOR	1.00	x								
(53) PETER LUTHIGER	1.00	<u> </u>					4	0.	0.	0
DIRECTOR (FROM SEP '11)	1.00	X				1		0.	0.	0
(54) TOM MACKALL	1.00	12		\dashv	- 4			U.	<u> </u>	0
DIRECTOR	1.00	x			7			0.	0.	0 .
(55) COLIN MARSHALL		9.5	7.3		\dashv	-	7		- 0.	0.
DIRECTOR	1.00	X	4	P	100			0.	0.	0
(56) JAMES M. MATTERN		V	7		4	P				
DIRECTOR	1.00	X			P	- 0		0.	0.	0
(57) MARK MCCORMICK		70		V	M)				
DIRECTOR	1.00	X		1	3			0.	0.	0 .
(58) MICHAEL W. MCLANAHAN	-	1		9	\neg		\neg			
DIRECTOR	1.00	X	100					0.	0.	0.
(59) ROBERT E. MURRAY	The same of		1				Ī			
DIRECTOR	1.00	X		\dashv	_	$ \bot $	_	0.	0.	0.
(60) RICHARD O'BRIEN	400					- [
DIRECTOR	1.00	X		\dashv	_	4	4	0.	0.	0.
(61) TONY PANCHYSHYN	1 00	, l		- 1		I				
DIRECTOR (62) BAXTER PHILLIPS	1.00	Δ		\dashv	\dashv	\dashv	-	0.	0.	0.
DIRECTOR (TO JUN '11)	1.00									0
(63) DAVID POTTER	1.00	Δ	-	-	-	\dashv	-	0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
(64) MARK PREMO	1.00		\dashv	\dashv	\dashv	+	-	0.	0.	0.
DIRECTOR	1.00	$ \mathbf{x} $			- 1			0.	0.	0.
(65) JOHN W. RICH, JR.			\dashv	\top	\dashv	+	+	•		<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
(66) DUANE L. RICHARDS				+	\top	\top	1			
DIRECTOR	1.00	\mathbf{x}						0.	0.	0.

Part VII Section A. Officers, Directors, Tru (A)	(B)		Oyou		C)	iigi	031	(D)	(E)	(F)
Name and title	Average hours	(0	hecl	Pos	ition		ily)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key empioyee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W·2/1099·MISC)	other compensation from the organization and related organizations
(67) LAUREN ROBERTS										
DIRECTOR (FROM JUL '11)	1.00	X						0.	0.	0 .
(68) BRYAN RONCK	1									
DIRECTOR	1.00	X	_				ļ	0.	0.	0 .
(69) KELLY SANDERS	1 1 00									•
DIRECTOR (FROM DEC '11)	1.00	X	 	\vdash	ļ	_	<u> </u>	0.	0.	0
(70) WALT SCHELLER DIRECTOR	1.00	x						0.	0.	0.
(71) GARY SELF	1.00	Α	-	-	-	-		0.	· ·	
DIRECTOR (FROM SEP '11)	1.00	x						0.	0.	0.
(72) MARK A. SMITH	1.00	-		Н	-	┢			0.	0.
DIRECTOR	1.00	X						0.	0.	0.
(73) RICHARD L. SMITH		 					A	70 00		-
DIRECTOR	1.00	X				d	7	0.	0.	0.
(74) VICTOR P. STABIO					- 6					
DIRECTOR	1.00	X						0.	0.	0.
(75) ROBERT J. STENGER			A	1			4			
DIRECTOR	1.00	X,		N.	63	1		0.	0.	0.
(76) MICHAEL W. SUTHERLIN			1	6	A				-	
DIRECTOR	1.00	X		W	1	-0		0.	0.	0.
(77) WILLIAM TATE	- 40			. A	M					
DIRECTOR (TO JUN '11)	1.00	X	100	nd.	1	3		0.	0.	0.
(78) CHARLES C. UNGUREAN	4 00			-						
DIRECTOR	1.00	X	0					0.	0.	0.
(79) JOSEPH E. USIBELLI, JR.	1 00	77							0	
DIRECTOR (80) RANDY K. VRANES	1.00	Α		\dashv		-	_	0.	0.	0.
DIRECTOR (FROM NOV '11)	1.00	v						0.	0.	0.
(81) DENNIS WHEELER	1.00	<u> </u>	Н	-		\vdash	-	0.	0.	0.
DIRECTOR (TO AUG '11)	1.00	x						0.	0.	0.
(82) RICHARD M. WHITING	1.00			\dashv				•		0.
DIRECTOR	1.00	$ _{\mathbf{x}} $					-	0.	0.	0.
(83) DONNA WICHERS										
DIRECTOR (FROM SEP '11)	1.00	x						0.	0.	0.
(84) JAY WILEMAN										
DIRECTOR (TO JUL '11)	1.00	X						0.	0.	0.
(85) MIKE WILLIAMS										
DIRECTOR	1.00	X						0.	0.	0.
(86) DAVID WILLICK				\Box						
DIRECTOR (FROM AUG '11)	1.00	ΙXΙ		- 1				0.	0.	0.

Part VII Section A. Officers, Directors, Tru								Compensated Employ	DA-191	0400
(A)	(B)	T	Оув		C)	nıyı	1021	(D)	(E)	(F)
Name and title	Average hours	(с	hec		sitior		oly)	Reportable compensation	Reportable compensation	Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(87) HAROLD QUINN, JR.										
PRESIDENT & CEO	35.00		ļ	X	ļ	<u> </u>		1,218,360.	0.	100,598
(88) ROGER ROBERTS				l						
TREASURER/SVP FINANCE	35.00			X		ļ	ļ	199,950.	0.	42,267
(89) MARY SWEENEY							ļ			
ASST SECY/GEN COUNSEL	35.00	<u> </u>	ļ	X	<u> </u>	_		233,125.	0.	64,278
(90) BRUCE WATZMAN	35 00	ļ						250 501		100 055
SECRETARY/SVP LEGAL & REG	35.00	ļ	_	X		ļ		350,701.	0.	100,075
(91) DANIEL GERKIN	35.00	1			Ţ			201 226	0	120 607
SVP POLITICAL (92) MERLYN NOLAN	35.00	├			X	<u> </u>		281,326.	0.	139,607
SVP GOVERNMENT AFFAIRS	35.00				x			408,470.	0.	72 005
(93) MOYA PHELLEPS	33.00	-	⊢		^	(m)	A	400,470.	0.	73,905
SVP MEMBERSHIP SERVICES	35.00				х	1	P	184,898.	0.	57,039
(94) CAROL RAULSTON	33.00		\vdash	\vdash	6			104,050.		31,033
SVP COMMUNICATIONS	35.00				x	d	04	305,689.	0.	73,624
(95) GLENN KELLY							7			,
VP GOVERNMENT AFFAIRS	35.00		4			X		233,870.	0.	19,860
(96) KAREN BENNETT		1			1	P	389			
VP ENVIRONMENTAL AFFAIRS	35.00			W		X		188,616.	0.	39,750
(97) LUKE POPOVICH	- 4	10		V	14	0				
VP COMMUNICATIONS	35.00	All		1	1	X		165,205.	0.	48,372
(98) TAWNY BRIDGEFORD	0.6	-		_						
ASSOC GEN COUNSEL	35.00	2	6			Х		153,710.	0.	31,888
(99) BRADFORD FRISBY ASSOC GEN COUNSEL	35.00					x		132,344.	0.	49,493
ASSOC GEN COUNSEL	33.00			Н	Н	Λ		132,344.	0.	43,433
	~									
						-				
		Щ								
		- 11					Ŧ	4 055 554		040 555
otal to Part VII, Section A, line 1c			ii.					4,056,264.		840,756

01-23-12

NATIONAL MINING ASSOCIATION Statement of Revenue

Part VIII (A) (B) (D) (C) Revenue excluded from Total revenue Related or Unrelated tax under sections 512, exempt function business revenue revenue 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a Membership dues 1b c Fundraising events 10 d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 15,000. g Noncash contributions included in lines 1a-1f: S 15,000. h Total. Add lines 1a-1f **Business Code** 2 a MEMBERSHIP DUES & ASSE 900099 14461787. 14461787. Program Service Revenue b CONVENTIONS, CONFERENC 900099 201,132. 201,132. PUBLICATIONS 900099 3,445. 3,445 d f All other program service revenue 14666364. Total. Add lines 2a-2f Investment income (including dividends, interest, and 403,402. other similar amounts) 403,402. Income from investment of tax-exempt bond proceeds Royalties 5 (i) Real (ii) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other 18653703 assets other than inventory b Less cost or other basis 17880600 6,566 and sales expenses c Gain or (loss) 773,103. -6,566.766,537. 766,537. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 201,110 11 a SUBLEASE 900099 201,110. **b MISCELLANEOUS** 11,486. 11,486. 900099 d All other revenue 212,596. Total. Add lines 11a-11d 16063899. 14465232. 0. 1583667. Total revenue. See instructions.

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												
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses								
1	Grants and other assistance to governments and				1 1								
	organizations in the United States. See Part IV, line 21												
2	Grants and other assistance to individuals in												
	the United States. See Part IV, line 22												
3	Grants and other assistance to governments,												
	organizations, and individuals outside the												
	United States. See Part IV, lines 15 and 16												
4	Benefits paid to or for members												
5	Compensation of current officers, directors,												
	trustees, and key employees	3,833,915.											
6	Compensation not included above, to disqualified												
	persons (as defined under section 4958(f)(1)) and	į į											
	persons described in section 4958(c)(3)(B)												
7	Other salaries and wages	2,429,144.											
8	Pension plan accruals and contributions (include												
	section 401(k) and section 403(b) employer contributions)	308,315.	100										
9	Other employee benefits	452,991.	- 4										
10	Payroll taxes	284,536.	100										
11	Fees for services (non-employees):		110										
a	Management												
b	Legal	21,584.	-										
С	Accounting	38,419.											
d	Lobbying	3,096,723.											
9	Professional fundraising services. See Part IV, line 17	19,587.											
f	Investment management fees	3,645,230.											
g	Other	666,123.	,										
12	Advertising and promotion	248,558.											
13 14	Office expenses	142,086.											
15	Information technology	142,000.			-								
16	Royalties Occupancy	1,264,646.											
17	Travel	236,308.											
18	Payments of travel or entertainment expenses			1									
	for any federal, state, or local public officials												
19	Conferences, conventions, and meetings	403,988.											
20	Interest												
21	Payments to affiliates												
22	Depreciation, depletion, and amortization	55,394.											
23	Insurance	80,750.											
24	Other expenses. Itemize expenses not covered												
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)												
	amount, list line 24e expenses on Schedule O.)												
	DUES & SUBSCRIPTIONS	510,401.											
b	BAD DEBT	33,250.											
C	TRAINING	11,559.											
d	TAXES & LICENSES	295.											
	All other expenses	17 702 000											
25_	Total functional expenses. Add lines 1 through 24e	17,783,802.											
26	Joint costs. Complete this line only if the organization												
	reported in column (B) joint costs from a combined	1											
	educational campaign and fundralsing solicitation. Check here if following SOP 98-2 (ASC 958-720)												
	n following SOP 98-2 (ASC 958-720)												

Form 990 (2011)
Part X Balance Sheet

			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	1,000.	1	1,000.
	2	Savings and temporary cash investments	4,452,077.	2	2,024,200
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	67,289.	4	398,667
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing		. 3	
1		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
2225	8	Inventories for sale or use		8	
.	9	Prepaid expenses and deferred charges	983,338.	9	1,705,107
	10a	Land, buildings, and equipment: cost or other			
- 1		basis. Complete Part VI of Schedule D 10a 760, 798.			
١	b	Less: accumulated depreciation 10b 562,351.	60,779.	10c	198,447
-	11	Investments - publicly traded securities	21,790,680.	11	25,483,433
1	12	Investments - other securities. See Part IV, line 11		12	
1	13	Investments - program-related. See Part IV, line 11	0.0	13	
-	14	Intangible assets		14	***************************************
	15	Other assets. See Part IV, line 11	85,305.	15	139,390
	16	Total assets. Add lines 1 through 15 (must equal line 34)	27,440,468.	16	29,950,244
П	17	Accounts payable and accrued expenses	1,270,072.	17	991,662
	18	Grants payable	7	18	
1	19	Deferred revenue	3,757,479.	19	10,063,190
1	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees,			
		highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
- 1	23	Secured mortgages and notes payable to unrelated third parties		23	
1	24	Unsecured notes and loans payable to unrelated third parties		24	
1	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of		- !	
1		Schedule D	2,897,219.	25	3,203,434.
	26	Total liabilities. Add lines 17 through 25	7,924,770.	26	14,258,286.
		Organizations that follow SFAS 117, check here			
		lines 27 through 29, and lines 33 and 34.		- 1	
-1	27	Unrestricted net assets	19,154,343.	27	15,691,958.
П	28	Temporarily restricted net assets	361,355.	28	0.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here			
1		complete lines 30 through 34.			
4	30	Capital stock or trust principal, or current funds		30	
		Paid in or capital surplus, or land, building, or equipment fund		31	
		Retained earnings, endowment, accumulated income, or other funds		32	
		Total net assets or fund balances	19,515,698.	33	15,691,958.
- 1		Total liabilities and net assets/fund balances	27,440,468.	34	29,950,244.

Form 990 (2011)

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) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 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 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 Part XIII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII 1 Accounting method used to prepare the Form 990: 1 Accounting method used to prepare the Form 990: 1 Cash X Accrual Other 1 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.	_	1100 (2011)	<u> </u>	<u> </u>	- 00	Pa	ge 12
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 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 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 7 Part XIII Financial Statements and Reporting 7 Check if Schedule O contains a response to any question in this Part XII 8 Accounting method used to prepare the Form 990: 9 Cash X Accrual Other 9 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 9 Were the organization's financial statements compiled or reviewed by an independent accountant? 9 Were the organization's financial statements and selection of an independent accountant? 9 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 9 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. Both consolidated and separate basis	Pa	rt XI Reconciliation of Net Assets					
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Other changes in net assets or fund balances (explain in Schedule O) 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 Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 7 Part XIII Financial Statements and Reporting 7 Check if Schedule O contains a response to any question in this Part XII 8 Accounting method used to prepare the Form 990: 9 Cash X Accrual Other 9 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 9 Were the organization's financial statements compiled or reviewed by an independent accountant? 9 Were the organization's financial statements and selection of an independent accountant? 9 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 9 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. Both consolidated and separate basis		Check if Schedule O contains a response to any question in this Part XI					X
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 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, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis							
Total expenses (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 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, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	1	Total revenue (must equal Part VIII, column (A), line 12)	1	16	,06	3,8	99.
Revenue less expenses. Subtract line 2 from line 1 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant? 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. 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: X Separate basis Consolidated basis Both consolidated and separate basis	2	Total expenses (must equal Part IX, column (A), line 25)	2	17	,78	3,8	02.
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	3		3	-1	,71	9,9	03.
Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII. Check if Schedule O contains a response to any question in this Part XII. Accounting method used to prepare the Form 990:	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	19	,51	5,6	98.
Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) 6 15, 691, 958 Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII. Check if Schedule O contains a response to any question in this Part XII. Accounting method used to prepare the Form 990:	5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2	,10	3,8	37.
Check if Schedule O contains a response to any question in this Part XII Check if Schedule O contains a response to any question in this Part XII 1 Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis		Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	15	, 69	1,9	58.
Accounting method used to prepare the Form 990: CashX Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 2bX 2b X c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X 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 separate basis, consolidated basis, or both: 8bh consolidated and separate basis	Pa	rt XII Financial Statements and Reporting					
Accounting method used to prepare the Form 990: CashX Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X b Were the organization's financial statements audited by an independent accountant? 2bX 2b X c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c X 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 separate basis, consolidated basis, or both: 8bh consolidated and separate basis		Check if Schedule O contains a response to any question in this Part XII	*********				
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 2 2 b Were the organization's financial statements audited by an independent accountant? 2b X 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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis							No
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a 2 2 b Were the organization's financial statements audited by an independent accountant? 2b X 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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	1	Accounting method used to prepare the Form 990: Cash X Accrual Other		- [
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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis			0.				
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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	2a				2a		X
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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	b	Were the organization's financial statements audited by an independent accountant?			2b	X	
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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,				
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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis					2c	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: X Separate basis Consolidated basis Both consolidated and separate basis		If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O				
separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis	d			1			
		Separate basis Consolidated basis Both consolidated and separate basis					
	За		igle Aud	dit			
					за		X
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red auc	lit			
or audits, explain why in Schedule O and describe any steps taken to undergo such audits.					3b		

Schedule E (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2011

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480 Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 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, total 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 total 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 Part I, 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) (2011)

Name of organization Employer identification number

NATIONAL MINING ASSOCIATION

52-1916480

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Name, address, and 217 + 4	\$ 15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
23452 01-23-1			

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

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.

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 (Prox	y Tax), or Form 990-EZ	, Part V, line 35c (Proxy 1	ax), then
 Section 501(c)(4), (5), or (6) 	organizations: Complete Part III.		•	
Name of organization			Emp	oyer identification numbe
NAT	TIONAL MINING ASSOCIA	MOITA		52-1916480
Part I-A Complete if	the organization is exempt und	der section 501(c)	or is a section 527 o	rganization.
2 Political expenditures	e organization's direct and indirect politi			
Part I-B Complete if	the organization is exempt und	der section 501(c)(3	3).	
	cise tax incurred by the organization un			
2 Enter the amount of any ex	cise tax incurred by organization manag	ers under section 4955	▶ \$	
3 If the organization incurred	l 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	1.			
	the organization is exempt und		ALCOHOL: THE STATE OF THE STATE	
	expended by the filing organization for se			0
	ng organization's funds contributed to o	1000 A000 A000		0
			▶\$	0
•	enditures. Add lines 1 and 2. Enter here a		•	
4 Did the filing examination f	ile Form 1120-POL for this year?	and an annual and an annual and an		Yes No
5 Enter the names, addresse made payments. For each contributions received that	es and employer identification number (El organization listed, enter the amount pai were promptly and directly delivered to PAC). If additional space is needed, prov	IN) of all section 527 poli id from the filing organiza a separate political orgal	tical organizations to whic ition's funds. Also enter th nization, such as a separa	h the filing organization e amount of political
(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
	WASHINGTON, DC			
COALPAC	20001	52-1322749	0.	12,612.
MINEPAC	WASHINGTON, DC 20001	52-1939409	0.	14,038.
		i		

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

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990-EZ) 2011 NA	TIONAL MI	NING ASSOCI	ATION	52-	1916480 Page 2
Part II-A Complete if the organ (election under section		npt under section	n 501(c)(3) and file	ed Form 5768	
A Check if the filing organization expenses, and share o	belongs to an affil f excess lobbying e	expenditures).		group member's nai	me, address, EIN,
	n Lobbying Expen	ditures		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence	ce public opinion (g	rass roots lobbying)			
b Total lobbying expenditures to influence	ce a legislative bod	y (direct lobbying)			
c Total lobbying expenditures (add lines	1a and 1b)				
d Other exempt purpose expenditures					
 Total exempt purpose expenditures (a 	dd lines 1c and 1d				
f Lobbying nontaxable amount. Enter th	e amount from the	following table in both	n columns.		
If the amount on line 1e, column (a) or (b)) is: The lobb	ying nontaxable amo	ount is:		
Not over \$500,000	20% of t	he amount on line 1e.			
Over \$500,000 but not over \$1,000,00	0 \$100,000	plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,500,0	000 \$175,000	plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000	,000 \$225,000	plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	00.			
			470		
g Grassroots nontaxable amount (enter	25% of line 1f)				
h Subtract line 1g from line 1a. If zero or	1	***************************************	- 100	9	,
i Subtract line 1f from line 1c. If zero or l	less, enter -0				
j If there is an amount other than zero o					
reporting section 4911 tax for this year	?				Yes No
	ns that made a se		Section 501(h) do not have to compl s 2a through 2f on pag		
	Lobbying Expend	ditures During 4-Year	r Averaging Period		-
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(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 expanditures					

Schedule C (Form 990 or 990-EZ) 2011 NATIONAL MINING ASSOCIATION 52-191648 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity)	(b)	
of the lobbying activity.	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i Other activities?				
j Total. Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912	İ			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), section 5	501(c)(5), or se	ection	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		Х
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section \$501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No	501(c)(2 3 5), or se		
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Ne answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 politic expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) 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; Part II-his part for any additional information. PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORI	501(c)(c)(c) OR	2 3 5), or se (b) Part 1 2a 2b 2c 3 4 5	4,728 -207 4,772 -207 4,772	e 3, is .,787 .,784 .,507 .,277 .,390
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Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "Neanswered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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? Taxable amount of lobbying and political expenditures (see instructions) 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; Part II-his part for any additional information. PART I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INFORDATION.	501(c)(c)(c) OR	2 3 5), or se (b) Part 1 2a 2b 2c 3 4 5	4,728 -207 4,772 -207 4,772	e 3, is .,787 .,784 .,507 .,277 .,390

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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

Pa	rt 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 wri	ting that the assets held in donor advised t	unds
	are the organization's property, subject to the organization's ex	clusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advi		
	for charitable purposes and not for the benefit of the donor or d		•
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the organ	ization 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 edu	cation) Preservation of an historic	cally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified	conservation contribution in the form of a	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		
b			
C	Number of conservation easements on a certified historic struct		
d	The second secon		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, release	sed, extinguished, or terminated by the org	anization during the tax
	year >		
4	Number of states where property subject to conservation easen	nent is located	
5	Does the organization have a written policy regarding the period	ic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it ho	lds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and	d enforcing conservation easements during	the year
7	Amount of expenses incurred in monitoring, inspecting, and enfo	orcing conservation easements during the	year ▶ \$
8	Does each conservation easement reported on line 2(d) above s	atisfy 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 stat	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	's financial statements that describes the o	organization's accounting for
	conservation easements.		-
Par	t III Organizations Maintaining Collections of A		r 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 9	58), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibit	ion, education, or research in furtherance of	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 9	58), to report in its revenue statement and	balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, education	ation, or research in furtherance of public s	ervice, 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 treasur	res, or other similar assets for financial gair	n, provide
	the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		▶ \$

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

Schedule D (Form 990) 2011

198,447.

1. (a) Description of liability	(b) book value
(1) Federal income taxes	
(2) DUE TO RELATED PARTY	81,768.
(3) CAPITAL LEASE	52,846.
(4) ACCRUED PENSION OBLIGATION	2,972,718.
(5) DEFERRED COMPENSATION LIABILITY	96,102.
(6)	
(7)	
(8)	
(9)	
(10)	24
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.)	3,203,434.

Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 NATIONAL MINING ASSOCIATION	52-1916480 Page 5
Part XIV Supplemental Information (continued)	
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.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	354,789.
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

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

Compensated Employees
Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

➤ Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

NATIONAL MINING ASSOCIATION 52-1916480 Part I **Questions Regarding Compensation** Yes No

			103	140
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
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	1b		X
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	X	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
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			
а	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:			
а	The organization?	6a		
	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	1	
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 Regulations 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		\neg	
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2011

SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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 NATI	ONAL MINING ASSO	OCIATION	Employer identification number 52-1916480
COMPARABLE TRADE A	SSOCIATIONS. NAT	FIONAL MINING ASSOCIATION	N'S GOAL WHEN
SETTING SALARIES F	OR ALL EMPLOYEES	S IS TO HAVE THEIR COMPE	NSATION AT THE
75TH PERCENTILE OF	COMPARABLE TRAI	DE ASSOCIATIONS USING TH	E RESULTS FROM
THIS SURVEY. FURTH	ERMORE, THE PRES	SIDENT AND CEO'S SALARY	IS NEGOTIATED VIA
CONTRACT WITH THE	FOLLOWING BOARD	MEMBERS: CHAIRMAN, VICE	CHAIRMAN, AND
CHAIRMAN OF THE AU	DIT AND FINANCE	COMMITTEE.	
FORM 990, PART VI,	SECTION C, LINE	19: THE ORGANIZATION D	OES NOT GENERALLY
MAKE ITS GOVERNING	DOCUMENTS AND I	FINANCIAL STATEMÊNTS AVA	ILABLE TO THE
PUBLIC.	and the factories of Toronto.		
		A V	
FORM 990, PART XI,	LINE 5, CHANGES	IN NET ASSETS:	
NET UNREALIZED LOS	SES ON INVESTMEN	VTS:	-924,402.
FAS 158 ADJUSTMENT			-818,080.
REFUND OF ABANDONE	D MINE LAND INIT	IATIVE	-361,355.
TOTAL TO FORM 990,	PART XI, LINE 5		-2,103,837.
FORM 990, PART VII			
HOURS PER WEEK DEV	OTED TO RELATED	ORGANIZATIONS	
HAROLD QUINN	2.0 HRS PER WEE	K (AMERICAN COAL F	OUNDATION)
ROGER ROBERTS	2.0 HRS PER WEE	K (AMERICAN COAL F	OUNDATION)
		-	

Department of the Treasury internal Revenue Service SCHEDULE R Form 990)

Name of the organization

Part

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.

2011 Open to Public Inspection

OMB No 1545-0047

NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

Schedule R (Form 990) 2011 (g) Section 512(b)(13) ž × × × controlled entity? Direct controlling Yes entity 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 Direct controlling entity End-of-year assets N/A A/A MA **e** status (if section Public charity 501(c)(3)) 11-II Total income Exempt Code T section DISTRICT OF COLUMBIA 501(C)(3) POLITICAL ACTION COMMITTEE DISTRICT OF COLUMBIA | 527 POLITICAL ACTION COMMITTEE DISTRICT OF COLUMBIA 527 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) EDUCATIONAL FOUNDATION Primary activity Primary activity 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. AMERICAN COAL FOUNDATION - 52-1236554 organizations during the tax year.) Name, address, and EIN Name, address, and EIN of related organization CONSTITUTION AVE STE 525E STE 525E STE 525E of disregarded entity 101 CONSTITUTION AVE, WASHINGTON DC 20001 20001 101 CONSTITUTION AVE, WASHINGTON, DC 20001 MINEPAC - 52-1939409 COALPAC - 52-1322749 WASHINGTON DC Part II 101

Page 2

52-1916480

Schedule R (Form 990) 2011 NATIONAL MINING ASSOCIATION

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

	ctivity Legal Direct controlling related, unrelated rount in tax under country) Legal Direct controlling (related, unrelated, resign country) Sections 512-514) Ctivity Legal Commode entity (related, unrelated, resign country) Sections 512-514) (I) (I) (I) (I) (I) (I) (I) (or more related of Percentage ownership	use it had one of the description of the descriptio	IV, line 34 becal income	to Form 990, Part (e) Type of entity (C corp, S corp, or trust)	on answered "Yes" (d) Direct controlling entity	olete if the organization (c) Legal dominion (state or rough) country)	ration or Trust (Compean.) (b) Primary activity	s a Corpo	anizations Taxable a	identification of Related Orgonizations treated as a corganizations treated as a corganization of related organization
reation of Palared Organizations Trastle as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990. Part IV, line 34 because it had one or more related address and EIN (a) (b) (c) (d) (d) (d) (d) (d) (d) (d	Primary activity conveys conveys and the controlling Person and Endometrial from the Code Vull State of total accessions and Code Vull State of total accessions accession acces						100				
Cation of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related attributes and EIN Firming activity (Corp.) State of Percentage and of related organization. Priming activity (Corp.) State of Percentage and Of related organization and Of related organization and Office an	Primary activity Control of Primary activity (2, or 10, or										
cation of Relative Organizations Taxable as a Comporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related at a corporation or trust during the tax year.) (c)	Primay activity contains the factor of the contains and the control of the contains and the										
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Page 3

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.			9	×	Yes No
a Receipt of (ii) interest (iii) annuities (iii) novalties or (iv) rent from a controlled entitied antities.	ans with one or more i	related organizations listec	ın Parts II-IV?	1.	Þ
Gift, grant, or capital contribution to related organization(s)				e ;	4 >
c Giff, grant, or capital contribution from related organization(s)			THE COLUMN TWO IS NOT THE PERSON OF THE PERS	01	4 >
			CONTRACTOR DESCRIPTION OF THE PROPERTY OF THE	2	4 :
	***************************************		The contract of the contract o	P	×
e Loans or loan guarantees by related organization(s)		*		9	×
Colo of contract of colors of colors of colors		4			
Cale of assets to related organization(s)	***************************************			#	×
g Purchase of assets from related organization(s)				10	×
h Exchange of assets with related organization(s)			**************************************	n t	
i Lease of facilities, equipment, or other assets to related organization(s)				F	×
					4
j Lease of facilities, equipment, or other assets from related organization(s)	-			ï	Þ
k Performance of services or membership or fundraising solicitations for related prognitivate)	nanization(e)			= ;	4 >
Performance of services or membership or fundamining conjugate to the performance of services or membership or fundaminings	ganization(s)		Control of the Contro	¥	4 :
Chaire of the little of the li	Janization(s)			=	×
	rtion(s)	(constitution of the constitution)		1m X	<u> </u>
n Sharing of paid employees with related organization(s)				1n X	
		2			
o Reimbursement paid to related organization(s) for expenses				5	_
p Reimbursement paid by related organization(s) for expenses	5			+	×
		A CONTRACT OF THE PARTY OF THE			4
q Other transfer of cash or property to related organization(s)				•	Þ
r Other transfer of cash or property from related organization(s)			The state of the s	5 ,	4 >
2 If the answer to any of the above is "Yes." see the instructions for information on who mist complete this line including covered relationships and transcration the above is "Yes."	who must complete t	he line including covered	relationships and transconting the solution	=	4
	and most compacte	Ties mile, modeling covered	Telationships and transaction inresholds		
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved		
1)					
62					
(3)					
				-	1
4)					
2)					
2012 04 100 40					1
21-52-10 50125			Schedu	Schedule R (Form 990) 2011	90) 2011

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Schedule R (Form 990) 2011 NATIONAL MINING ASSOCIATION

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

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

Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	Predominant income Are all Predominant income (related, unrelated, 501(c)(3) excluded from tax ons?	(e) Are all partners sec. 501(c)(3) 0.00s.?	(f) Share of total income	(g) Share of end-of-year assets	Oisproportionate allocations?	Code V-UBI General or Percentage amount in box 20 partner? ownership (Form 1065)	General or partner?	(k) Percenta ownersh
					4					
				Y	X					
			5	S						
			1							
			b							

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)

benefit trust or private foundation)

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

2010
Open to Public Inspection

ΑΙ	ror the	e 2010 calendar year, or tax year beginning a	ina enaing		
В	Check if applicable	C Name of organization		D Employer identifi	cation number
	Addre	NATIONAL MINING ASSOCIATION			
	Name chang	Doing Business As		52-1	916480
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite		
	Termir ated	101 CONSTITUTION AVENUE NW	500E	202-	463-2600
	Ameno return	City or town, state or country, and ZIP + 4		G Gross receipts \$	17,876,199.
	Applic tion	WASHINGTON, DC 20001-2133		H(a) Is this a group r	eturn
	pendir	F Name and address of principal officer:HAROLD QUINN		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	cluded? Yes No
Τ.	Tax-exe	empt status: \square 501(c)(3) \square 501(c)(6) \blacktriangleleft (insert no.) \square 4947(a)	(1) or 52	7 If "No," attach a	list. (see instructions)
		e: ► WWW.NMA.ORG		H(c) Group exemption	n number 🕨
ĸ	Form of	organization: X Corporation Trust Association Other	∟ Year	r of formation: 1995 $_{ m I}$	y State of legal domicile: DE
P	art I	Summary			
ģ	1	Briefly describe the organization's mission or most significant activities: $ extstyle extst$	PROMOT	E THE GENERA	L WELFARE
Activities & Governance		OF THE PRODUCERS OF COAL AND MINERALS,	REPRES	ENT THE COAL	AND
ž	2	Check this box $lacktriangle$ if the organization discontinued its operations or dis	sposed of mor	re than 25% of its net a	
8	3	Number of voting members of the governing body (Part VI, line 1a)		3	73
ه ص	4	Number of independent voting members of the governing body (Part VI, line 1	b)		73
es	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)		5	38
ΞĘ	6	Total number of volunteers (estimate if necessary)			0
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
				Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		1,467,473.	
Revenue		Program service revenue (Part VIII, line 2g)		13,119,897.	
ě		Investment income (Part VIII, column (A), lines 3, 4, and 7d)		522,521.	705,807.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		15,589.	111,031.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)	15,125,480.	16,558,296.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		7,867,052.	
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ă	b	Total fundraising expenses (Part IX, column (D), line 25)	<u> </u>		
ш	1/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		8,098,044.	
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,965,096.	
		Revenue less expenses. Subtract line 18 from line 12		-839,616.	-564,959.
Net Assets or Fund Balances			В	eginning of Current Year	End of Year
Sset	20	Total assets (Part X, line 16)		23,459,850.	27,440,468.
at A	21	Total liabilities (Part X, line 26)		5,381,539.	7,924,770.
		Net assets or fund balances. Subtract line 21 from line 20		18,078,311.	19,515,698.
	art II	Signature Block			
		Ities of perjury, I declare that I have examined this return, including accompanying sched			ly knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information o	n wnich prepare	er nas any knowledge.	
۵.		Signature of officer		I Date	
Sig		ROGER ROBERTS, TREASURER/SVP FINANCE	7	Date	
He	re	Type or print name and title	<u> </u>		
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	d	Trinivity proparer a maine Freparer a signature		if self-employ	
	u parer	Firm's name JOHNSON LAMBERT & CO. LLP		Firm's EIN	· · ·
	Only	Firm's address 700 SPRING FOREST ROAD, STE 11	_5	THIHSLIN	
550	- Carry	RALEIGH, NC 27609		Phone no. 9	19-719-6400
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)		1. 110110 110.	X Yes No

Pai	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
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program 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 ▶

Form 990 (2010) NATIONAL MIN Part IV Checklist of Required Schedules

NATIONAL MINING ASSOCIATION

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	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? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
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? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	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)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			v
40	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals	40		Х
47	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some Form 990 filers that			
	operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Form 990 (2010) NATIONAL MINING AS Part IV Checklist of Required Schedules (continued)

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

Form 990 (2010) NATIONAL MINING ASSOCIATION Part V Statements Regarding Other IRS Filings and Tax Compliance

Series the number reported in Box 3 of Form 1006. Enter 0- if not applicable 1a 4.9		Check if Schedule O contains a response to any question in this Part V				
b Enter the number of Forms W2Cs included in line 1a. Enter 0-if not applicable					Yes	No
b Enter the number of Forms W-26 included in line 1a. Enter 0-if not applicable	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 49			
Dit the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to pize winners? 2 Enter the number of employees reported on Form W.3, Transmittal of Wage and Tax Statements, flied for the calendar year ending with on within the year covered by this return. 3 B If all tests one is reported on line 2t, did the organization flied eliquided devial employment tax returns? 3 B If the organization have unrelated business greater than 250, you may be required to e-file (see instructions) 3 B If the visual properties is the part of the visual properties of e-filed (see instructions) 3 B If the visual properties is the part of the visual properties of e-filed (see instructions) 3 B If Visa, has it filed a Form 990-T for this year? If No., *provide an explanation in Schedule O 3 B If Visa, *properties of the visual part of th	b		1b 0			
2a Enter the number of employees reported on Form W/3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a Is the organization have unrelated business gross income of \$1,000 or more during the year? 3a Is X b If "Yes," has if filed a Form 990 T for this year? If "No." provide an explanation in Schedule O 3b Is a A ran yrite enduring the calendary year, did the organization have an interest in, or a singulative or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? 5b If "Yes," an interest the name of the foreign country? 5c is instructions for filing requirements for Form 10 F 90.22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibeted tax wheter transaction at any tax be prohibeted tax shelter transaction? 5c if "Yes," to line 5a or 5b, did the organization file Form 8886 1? 6c if "Yes," to line 5a or 5b, did the organization file Form 8886 1? 6d if "Yes," to line 5a or 5b, did the organization file Form 8886 1? 6e if "Yes," to lide the organization file form 8886 1? 6e if "Yes," did the organization mould with every solicitation an express statement that such contributions or grifts were not tax deductible? 7e Organizations that may receive deductible contributions under section 170(c). 8e if "Yes," did the organization include with every solicitation an express statement that such contributions or grifts were not tax deductible? 7e Organizations that may receive deductible contributions under section 170(c). 8e if "Yes," did the organization neceive any funds, directly or indirectly, to pay premium on a personal benefit contract? 7e if the organization organization and the se	С		eportable gaming			
tiled for the calendary year ending with or within the year covered by this return. 2a 38		(gambling) winnings to prize winners?		1c	X	
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 3	2a					
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-ffe, (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b I "Ves, 'has it filed a Form 900-Ti or this year? If "No,' provide an explanation in Schedule O 3b I A at any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a I A say time the mane of the foreign country ► See instructions for filling requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b I "Yes, 'to line 5a or 5b, did the organization file Form 888617? 6c I "Yes,' to line 5a or 5b, did the organization file Form 888617? 6d Does the organization with a were not tax deductible? 6d If "Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9 If "Yes,' did the organization include with every solicitation and partly for goods and services provided to the payor? 7 To organizations that many receive deductible contributions under section 170(c). 9 If If "Yes,' did the organization notity the donor of the value of the goods or services provided? 9 Did the organization receive a payment in excess of \$7 made partly as a contribution of qualified intellectual property, did the organization free Porms 8282? filed during the year 9 Did the organization received a payment in excess of \$7 made partly as a contribution of the property for which it was required 10 Did the organization received a contribution of qualified intellectual property, did the organization foreive and contribution of qualified i		filed for the calendar year ending with or within the year covered by this return	2a 38			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes, 'has it filed a Form 990 F for this year? If 'No, 'provide an explanation in Schedule O 4b 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, or a count of the relation of the foreign country). See instructions for filing requirements for Form TD F 902.21, Report of Foreign Bank and Financial Accounts. 5a Was the organization of the foreign country to a prohibited tax shelter transaction? 5b Was the organization of the organization that it was or is a party to a prohibited tax shelter transaction? 5c If 'Yes, 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If 'Yes, 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If 'Yes, 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5c If 'Yes, 'to line 5a or 5b, did the organization his Form 3896-17 6a Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6a If Yes, 'to lid the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b If 'Yes,' indicate that may receive deductible contributions under section 170(c). 8c Did the organization receive a payment in excess if 35 made party as a contribution of prompty for which it was required to line Form 8282? 8c Did the organization receive a payment in excess if 35 made party as a contribution of prompty for which it was required to line Form 8282? 8c Did the organization received a contribution of unified ty, to pay premiums on a personal benefit contract? 7c Did the organization received a contribution of unified ty, to pay premium on a personal	b	·	ns?	2b	Х	
b if "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 4 At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 5 b if "Yes," enter the name of the foreign country: P 5 ce instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Was the organization a party to a prohibited tax shelter transaction? 5 b Was the organization aparty to a prohibited tax shelter transaction? 5 c Was the organization aparty to a prohibited tax shelter transaction? 5 c Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that terms on tax deductible? 6 b Was removed that the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6 b Was removed that organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 b Organizations that may receive deductible contributions under section 170(c). 8 b If "Yes," did the organization neceive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 b If "Yes," include the organization notify the donor of the value of the goods or services provided? 7 c Did the organization seceive any funds, directly or indirectly, or pay premiums on a personal benefit contract? 7 c Did the organization received a contribution of qualified intellectual property, did the organization file Form 18899 as required? 7 h If the organization make a distribution to a donor, donor advised fund analysis of the organization		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions	s)			
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. Sa Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X C If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c Did the organization shelt annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a X Did for organization that the value of the organization an express statement that such contributions or gifts were not tax deductible? 6b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Did the organization receive a payment in excess of \$75 made partly sa a contribution and partly for goods and services provided to the payor? 7c Did the organization receive a payment in excess of \$75 made partly sa a contribution of promoty or the organization or promoty and the donor of the value of the goods or services provided? 7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to the form 8282? 7c Did the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7e Did the organization exceived a contribution of cars, boats, airplance, or other vehicles, did the organization by the form 109.0 Promoty organization selecti	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
thrancial account in a foreign country (such as a bank account, securities account, or other financial account)? b if "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90.22.1, Report of Foreign Bank and Financial Accounts. 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any stable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X c if "Yes," to line Sa or Sb, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). a Did the organization to a gamment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7a Organization sall, exchange, or otherwise dispose of tangible personal property for which it was required to tile Form 8282? 7b If "Yes," indicate the number of Forms 8282 filed during the year 7c If Yes," indicate the number of Forms 8282 filed during the year 8 If the organization received a contribution of qualified intellectual property, did the organizations. Just the programization received a contribution of cars, boats, airpanes, or other vehicles, did the organizations. 9 If the organization make any taxable distributions under section 4966? 9 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the organization make any taxable distributions under section 4966? 9 Section 501(c)(7) organizations.	b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
b f "Yes," enter the name of the foreign country:	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
See instructions for filing requirements for Form TD F90-22.1, Report of Foreign Bank and Financial Accounts. 5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 a Vas the organization a party to a prohibited tax shelter transaction? 5 b X X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 c Vas or if Yes,** to line 5 a or 5b, did the organization file Form 8886-17 6 a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6 b If Yes,** did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible and the organization include with every solicitation and express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 5 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 6 Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received a contribution of qualified intellectual property, did the organization file a Form 1088-07 and 1 file form 1 file		financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		Х
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If Yes,* to line 5a or 5b, did the organization file Form 8886-f7? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6a X b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 5 If Yes,* did the organization notify the donor of the value of the goods or services provided? 5 If Yes,* did the organization notify the donor of the value of the goods or services provided? 7 If Yes,* did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 If Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If the organization received a contribution of qualified intelectual property, did the organization file Form 8999 as required? 8 Spensoring organizations maintaining donor advised funds and section 509(3) supporting organizations. Did the supporting organization received a contribution or qualified intelectual property, did the organization file Form 8999 as required? 9 Sponsoring organizations maintaining donor advised funds. 2 Did the organization make any taxable distribution under section 4966? 9 Sponsoring organization make any taxable distribution on under section 4966? 5 Did the organization make any taxable distribution on under section 4966? 5 Did the organization make any taxable distribution included on Port VIII, line 12. 6 Gross incom	b	If "Yes," enter the name of the foreign country: ▶				
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b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X	12a	7		12a		
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a X		·				
Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13b 14a X				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a X						
organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	b					
c Enter the amount of reserves on hand			13b			
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X	С					
				14a		Х
				14b		

NATIONAL MINING ASSOCIATION 52-1916480 Form 990 (2010) 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. X Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 73 1a Enter the number of voting members of the governing body at the end of the tax year **b** Enter the number of voting members included in line 1a, above, who are independent ______ Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision X of officers, directors or trustees, or key employees to a management company or other person? 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Х 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? X Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the Х governing body? 7a **b** Are any decisions of the governing body subject to approval by members, stockholders, or other persons? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the Х 9 organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Х 10a Does the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? X 11a **b** 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 Х 12a 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 Does the organization have a written whistleblower policy? X 13 13 Does the organization have a written document retention and destruction policy? X 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? Х a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a 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 NONE List the states with which a copy of this Form 990 is required to be filed 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. Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial

State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

Form 990 (2010)

20001

statements available to the public.

ROGER ROBERTS - 202-463-2600

101 CONSTITUTION AVE NW STE 500E, WASHINGTON,

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

Х

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.

(A) Name and Title Average hours per week (describe hours for related organizations in Schedule O) (A) Average hours per week (describe hours for related organizations in Schedule O) (B) Average hours per (check all that apply) Position (check all that apply) Pages induced by the compensation organization (w-2/1099-MISC) (C) Position (check all that apply) From the organization (w-2/1099-MISC) (W-2/1099-MISC)	ation ated tions	(F) Estimated amount of other compensation
hours per (check all that apply) compensation compens week (describe (describe)	ation ated tions	amount of other compensation
week to the from from relative to the from granization organization or	ated tions	other compensation
(describe $\frac{g}{2}$ the organiza	tions	compensation
hours for related sets of the control of the contro		
related relate		from the
lorganizational + 1 @ 1 1 & 15 1 1		organization
organizations first loss		and related
organizations in Schedule (mployee employee employee employee employee employee)		organizations
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	0	
DIRECTOR (TO OCT 10) 1.00 X 0.	0.	0.
DAN ALLAN DIRECTOR 1.00 X 0.	0.	_
	0.	0.
JACK ATWATER DIRECTOR 1.00 X 0.	0.	0.
PHILLIPS BAKER, JR.	<u> </u>	•
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	0	
DIRECTOR 1.00 X 0.	0.	0.
JAMES BOYD DIRECTOR (TO OCT 10) 1.00 X 0.	0.	0.
MICHAEL BROWN	<u> </u>	•
DIRECTOR 1.00 X 0.	0.	0.
FRANK CALANDRA, JR.		
DIRECTOR 1.00 X 0.	0.	0.

Form **990** (2010)

	L MINING							0	52-1916	480	Pa	age 8
Part VII Section A. Officers, Directors, (A)	(B)	mpic	oyee		<u>na i</u> C)	High	est	(D)	(E)		(F)	
Name and title	Average hours per week (describe hours for related organizations in Schedule O)	stee or director	heck	Pos	ition that			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	com fi org an	stimate nount other opensa rom the anizat d relati	of tion e ion ed
DAVID CAMPBELL												
DIRECTOR (TO OCT 10)	1.00	Х						0.	0.			0.
JOSEPH CARRABBA												
DIRECTOR	1.00	Х						0.	0.			0.
GERALD CARROLL								_	_			
DIRECTOR	1.00	Х						0.	0.			0.
NICK CARTER								_	_			
DIRECTOR	1.00	Х						0.	0.			0.
RED CONGER								_	_			
DIRECTOR	1.00	Х						0.	0.			0.
JOSEPH CRAFT, III												_
DIRECTOR	1.00	Х						0.	0.			0.
CINDY CRANE	1 00	l										^
DIRECTOR	1.00	Х						0.	0.			0.
KEVIN CRUTCHFIELD	1 00											^
DIRECTOR (FROM OCT 10)	1.00	Х						0.	0.			0.
CHRISTOPHER CURFMAN DIRECTOR (TO OCT 10)	1.00	x						0.	0.			0.
1b Sub-total						▶		0.	0.			0.
c Total from continuation sheets to Par	t VII, Section A					\blacktriangleright		3,261,842.	0.		1,9	
d Total (add lines 1b and 1c)						>		3,261,842.	0.	85	1,9	78.
2 Total number of individuals (including bu						e) wl	ho re	eceived more than \$100	0,000 in reportable			
compensation from the organization	•											13
											Yes	No
3 Did the organization list any former offic				-				•		•		Х
line 1a? If "Yes," complete Schedule J fo										3		
4 For any individual listed on line 1a, is the and related organizations greater than \$										4	Х	
and related organizations greater than \$	130,000 (11 168,	CO	πρι	ULC C	اان	Juul	. U 1	or sacri iriaiviaaa		4	43	

rendered to the organization? If "Yes," complete Schedule J for such person . Section B. Independent Contractors

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

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

(A)	(B)	(C)
Name and business address	Description of services	Compensation
WEBER MERRITT , 1331 H STREET NW, STE	ADVERTISING &	
1100, WASHINGTON, DC 20005	PROJECT MANAGEMENT	2,355,354.
PRESTON-OSBOURNE, 450 OLD VINE ST, STE	CAMPAIGN DIRECTORS,	
100, LEXINGTON, KY 40507	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,	GOVERNMENT AFFAIRS	
CHICAGO, IL 60601	CONSULTING	376,641.
2 Total number of independent contractors (including but not limited to those liste	ed above) who received more than	
\$100,000 in compensation from the organization > 21		

Х

Form 990 (52-191	0 4 0 0
Part VII	Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
	(A) Name and title	(B) Average hours			(C Pos	C) ition	١		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
		per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
GENE DIX	ON								_		
DIRECTOR		1.00	Х						0.	0.	0
GARY DRU									_	_	_
DIRECTOR		1.00	X						0.	0.	0
RAYMOND I	DUBOIS										
DIRECTOR	(TO OCT 10)	1.00	X						0.	0.	0
MARK DUN	N										
DIRECTOR		1.00	Х						0.	0.	0
ROBERT E			l								
DIRECTOR		1.00	Х						0.	0.	0
	RNSWORTH	1 00	,,								
DIRECTOR		1.00	Х						0.	0.	0
CLIFF FO		1 00	,,								
DIRECTOR		1.00	Х	-					0.	0.	0
JAC FOUR		1 00	3,							_	
	(FROM OCT 10)	1.00	Х						0.	0.	0
JOHN GAL		1.00	x						0.	0.	0
DIRECTOR TIM GITZ		1.00	^						0.	0.	U
DIRECTOR		1.00	X						0.	0.	0
DAVID GO		1.00	122							0.	•
DIRECTOR		1.00	X						0.	0.	0
JOHN GRI			Ħ								
DIRECTOR	(TO OCT 10)	1.00	x						0.	0.	0
	GUENTHER								-	_	
DIRECTOR		1.00	x						0.	0.	0
LEROY HA	GENBUCH										
DIRECTOR		1.00	X						0.	0.	0
PETER HA	LPIN										
DIRECTOR		1.00	X						0.	0.	0
JOHN HAM	RICK										
DIRECTOR		1.00	Х						0.	0.	0
DOUGLAS I	HARDMAN										
DIRECTOR		1.00	Х						0.	0.	0
J. BRETT	HARVEY										
DIRECTOR		1.00	X						0.	0.	0
BENNETT 1									_	ا ۔	_
DIRECTOR		1.00	Х		$ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ldsymbol{ld}}}}}}$				0.	0.	0
RON HOCH											_
DIRECTOR		1.00	X	l	l	l		l	0.	0.	0

	2010) NATIONAL									52-191	0 = 0 0
Part VII	Section A. Officers, Directors, Tru	ıstees, Key Eı	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
	(A) Name and title	(B) Average hours	rage Position Reportable Reportable compensation		(E) Reportable compensation	(F) Estimated amount of					
		per week	Individual trustee or director	In stitutio na l tru stee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
	OGAN, JR.	4 00									
DIRECTOR		1.00	Х						0.	0.	0
THOMAS J		1	l								•
	(TO OCT 10)	1.00	X						0.	0.	0
CHARLES 3	JEANNES	1	l								•
DIRECTOR		1.00	X						0.	0.	0
TONY JENS	SEN	1	l								•
DIRECTOR		1.00	Х						0.	0.	0
GLENN KEI		1 00	,,								0
	(TO OCT 10)	1.00	X	-					0.	0.	0
KEITH KI	WBLE	1 00	\ \							0	0
DIRECTOR	2	1.00	Х						0.	0.	0
GREG LANG DIRECTOR	J	1.00	x						0.	0.	0
GUY LEBLA	ANG	1.00	^						0.	0.	U
DIRECTOR	ANC	1.00	X						0.	0.	0
STEVEN LI	FFD	1.00	<u> </u>						0.	0.	0
DIRECTOR		1.00	x						0.	0.	0
KEVIN LO	UGHREY	1:00	1							•	•
DIRECTOR		1.00	x						0.	0.	0
TOM MACK	ALL								-	-	
DIRECTOR		1.00	x						0.	0.	0
COLIN MAI	RSHALL								-	_	
DIRECTOR	(FROM OCT 10)	1.00	X						0.	0.	0
JAMES MA	TTERN										
DIRECTOR	(FROM OCT 10)	1.00	X						0.	0.	0
MICHAEL 1	MCLANAHAN										
DIRECTOR		1.00	Х						0.	0.	0
ROBERT M	URRAY										
DIRECTOR		1.00	Х						0.	0.	0
FRED NELS	SON										
DIRECTOR		1.00	X						0.	0.	0
RICHARD (O'BRIEN								_	_	_
DIRECTOR		1.00	X						0.	0.	0
DAVID PO	TTER										_
DIRECTOR		1.00	X						0.	0.	0
MICHAEL (-	1 1 1 1									_
	(TO OCT 10)	1.00	Х	<u> </u>				_	0.	0.	0
JOHN RICI		1 1 1 1								_	•
DIRECTOR		1.00	X	l	l			l	0.	0.	0

Form 990 (2010) NATIONAL Part VII Section A Officers Directors T								<u> </u>	52-191	6480
Part VII Section A. Officers, Directors, T (A)		mplo	yee			ligh	est	Compensated Employ (D)	rees (continued) (E)	(F)
Name and title	(B) Average hours	(C) Position (check all that apply)					ly)	Reportable compensation	Reportable compensation from related	Estimated amount of other
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
DUANE RICHARDS										
DIRECTOR	1.00	Х						0.	0.	0.
GEORGE RICHMOND									_	_
DIRECTOR (TO OCT 10)	1.00	Х						0.	0.	0.
DANIEL ROLING										
DIRECTOR	1.00	Х						0.	0.	0.
BRYAN RONCK										
DIRECTOR	1.00	Х						0.	0.	0.
WALT SCHELLER										
DIRECTOR (FROM OCT 10)	1.00	Х						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	Х						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	Х						0.	0.	0.
MICHAEL SUTHERLIN										
DIRECTOR	1.00	Х						0.	0.	0.
WILLIAM TATE										
DIRECTOR	1.00	Х						0.	0.	0.
CHARLES UNGUREAN										
DIRECTOR	1.00	Х						0.	0.	0.
JOSEPH USIBELLI, JR.										
DIRECTOR	1.00	Х						0.	0.	0.
DENNIS WHEELER										
DIRECTOR	1.00	Х						0.	0.	0.
RICHARD WHITING										
DIRECTOR	1.00	Х						0.	0.	0.
JAY WILEMAN										
DIRECTOR (FROM OCT 10)	1.00	Х			L	L	L	0.	0.	0.
MIKE WILLIAMS										
DIRECTOR (FROM OCT 10)	1.00	Х						0.	0.	0.
HAROLD QUINN, JR.										
PRESIDENT & CEO	35.00			Х				517,539.	0.	99,727.

Form 990 (2010) NATIONAL									52-191	0400
Part VII Section A. Officers, Directors, Tro	ustees, Key E	mple	oyee	es, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours				C) ition	ı		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ROGER ROBERTS TREASURER/SVP FINANCE	35.00			x				184,006.	0.	39,543
MARY SWEENEY	33.00	-					-	104,000.	0.	37,343
ASST SECY/GEN COUNSEL	35.00			X				215,765.	0.	63,794
BRUCE WATZMAN	33.00	┢		^			\vdash	213,703.	0.	05,194
SECRETARY/SVP LEGAL & REG	35.00			Х				313,586.	0.	105,225
DANIEL GERKIN	33.00							313,300.	<u> </u>	103,223
SVP POLITICAL	35.00				х			281,426.	0.	139,147
MERLYN NOLAN									•	
SVP GOVERNMENT AFFAIRS	35.00				х			380,510.	0.	74,259
MOYA PHELLEPS										
SVP MEMBERSHIP SERVICES	35.00				Х			191,953.	0.	56,813
CAROL RAULSTON										
SVP COMMUNICATIONS	35.00				Х			305,744.	0.	73,504
KAREN BENNETT									_	
VP ENVIRONMENTAL AFFAIRS	35.00					Х		176,173.	0.	59,974
TAWNY BRIDGEFORD								400 545		
ASSOC GEN COUNSEL	35.00					Х		133,547.	0.	30,283
JULIA GUSTAFSON DIRECTOR, CONGRESSIONAL AF	35.00					х		164,683.	0.	33,911
GLENN KELLY	33.00	<u> </u>						101,003.	0.	33,711
VP GOVERNMENT AFFAIRS	35.00					Х		231,650.	0.	28,191
LUKE POPOVICH	33.00							231,0301	•	20/131
VP COMMUNICATIONS	35.00					Х		165,260.	0.	47,607
Total to Part VII, Section A, line 1c		<u> </u>			<u> </u>		<u> </u>	3,261,842.		851,978

Page 9

Pa	rt VII	Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	b c d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contributed) All other contributions, gifts, grants similar amounts not included about the contributions included in lines	1b 1c 1d 1d 1tions) 1e 1ts, and 1f 1,	493,748.				
a S	•	Total. Add lines 1a-1f			1,493,748.			
	2 a b c	MEMBERSHIP DUES	S & ASSE	Business Code 900099 900099 900099		14049072.		197,128.
Program Service Revenue	d e		enue					
\dashv	g	Total. Add lines 2a-2f			14247710.			
	3	Investment income (including other similar amounts) Income from investment of ta	x-exempt bond p	proceeds	612,224.			612,224.
	5 6 a	Royalties	(i) Real	(ii) Personal				
	С	Rental income or (loss) Net rental income or (loss)						
		Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities 1411486 .	(ii) Other				
		and sales expenses Gain or (loss) Net gain or (loss)		-2,779.	93,583.			93,583.
Other Revenue		Gross income from fundraising including \$ contributions reported on line Part IV, line 18	ng events (not of e 1c). See					
Othe	С	Less: direct expenses Net income or (loss) from fundamental from gaming and are sent and the sent are sent and the sent are sent and the sent are sent are sent and the sent are sent	bdraising events	>				
	С	Part IV, line 19 Less: direct expenses Net income or (loss) from gan	bning activities					
		Gross sales of inventory, less and allowances Less: cost of goods sold	а					
Į	С	Net income or (loss) from sale	es of inventory					
ļ		Miscellaneous Revenu	ıe	Business Code				110 010
		SUBLEASE		900099	110,819.			110,819.
		MISCELLANEOUS		300033	414.			414.
	c							
		All other revenue Total. Add lines 11a-11d			111,031.			
	40 40	Total. Add lines 11a-11d		·····		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).

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		схреносо	general expenses	СХРОПОСО
•	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)	_, = _, = = ,			
Ū	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):				
''	Management				
b		47,128.			
C	Legal	38,858.			
	Accounting	1,380,793.			
u	Lobbying Professional fundraising services. See Part IV, line 17	1/300//330			
f	Investment management fees				
		3,069,553.			
g 12	Other	739,757.			
13	Advertising and promotion	246,136.			
14	Office expenses	122,503.			
15	Information technology	122/3031			
16	Royalties	1,280,153.			
17	Occupancy	181,834.			
	Travel	101/031			
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials Conferences, conventions, and meetings	381,366.			
19	, , , ,	301,300.			
20	Interest Payments to offiliates				
21 22	Payments to affiliates	34,650.			
23		72,699.			
23	Other expenses, Itemize expenses not covered	, 2, 000			
24	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 0.)				
_	FACES OF COAL	1,482,161.			
d L	DUES & SUBSCRIPTIONS	858,183.			
b	TRAINING	26,950.			
ن بہ	BAD DEBT	17,400.			
u	TAXES & LICENSES	671.			
e •		0,10			
75	All other expenses	17,123,255.			
<u>25</u> 26	Joint costs. Check here if following SOP	±1,123,233•			
20	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				Farra 000 (0010

Form **990** (2010)

Part X | Balance Sheet (B) (A) Beginning of year End of year 1,000. 1,000. 1 1 Cash - non-interest-bearing 4,452,077. 849,288. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 969,186. 67,289. 4 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 6 7 Notes and loans receivable, net 7 8 Inventories for sale or use 8 Prepaid expenses and deferred charges 365,444. 983,338. 9 9 10a Land, buildings, and equipment: cost or other 612,386. basis. Complete Part VI of Schedule D ______ 10a 551,607. 81,224. 60,779. b Less: accumulated depreciation 10b 10c 21,130,668. 21,790,680. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 63,040. 85,305. Other assets. See Part IV, line 11 15 15 23,459,850. 27,440,468. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 1,270,072. 1,156,582. Accounts payable and accrued expenses _____ 17 17 18 18 Grants payable 3,757,479. 7,100. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 iabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties _____ 24 24 Other liabilities. Complete Part X of Schedule D 4,217,857. 2,897,219. 25 25 7,924,770. 5,381,539. 26 **Total liabilities.** Add lines 17 through 25 26 Organizations that follow SFAS 117, check here

X and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 17,718,570. 19,154,343. 27 27 Unrestricted net assets Temporarily restricted net assets 359,741. 361,355. 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 19,515,698. 18,078,311. Total net assets or fund balances 33 33 23,459,850. 27,440,468. 34 Total liabilities and net assets/fund balances

Form **990** (2010)

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

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.

Act and OMB Circular A-133?

Part XI Reconciliation of Net Assets Check if Schedule O contains a response to any question in this Part XI 16,558,296. 1 Total revenue (must equal Part VIII, column (A), line 12) 17,123,255. 2 Total expenses (must equal Part IX, column (A), line 25) 2 -564,959. 3 3 Revenue less expenses. Subtract line 2 from line 1 18,078,311. Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 4 Other changes in net assets or fund balances (explain in Schedule O) 2,002,346. 5 19,515,698. Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII Yes No Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Х Were the organization's financial statements audited by an independent accountant? 2b X If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit. Х review, or compilation of its financial statements and selection of an independent accountant? 2c 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 separate basis, consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis

Form 990 (2010)

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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.

NATIONAL MINING ASSOCIATION

OMB No. 1545-0047

2010

Name of the organization

Employer identification number

52-1916480

Organiza	ation type (check or	ne):				
Filers of	:	Section:				
Form 99	0 or 990-EZ	X 501(c)(6) (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 99	0-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					
X	For an organization contributor. Comple	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.				
Special	Rules					
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections o)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
	aggregate contribu)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, tions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III.				
	contributions for us If this box is checked purpose. Do not co	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, see <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. The ed, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., implete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year.				

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)

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).

Employer identification number

NATIONAL MINING ASSOCIATION

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

Employer identification number

NATIONAL MINING ASSOCIATION

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 X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	C&M GIANT TIRE 980 W NEW CIRCLE LEXINGTON, KY 40511	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	CENTRAL OIL COMPANY 148 BRISTOL EAST RD BRISTOL, VA 24202	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	COAL OPERATORS & ASSOCIATES, INC PO BOX 3158 PIKEVILLE, KY 41502	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
11	COLE & CRANE 7265 KENWOOD RD CINCINNATI, OH 45236	\$18,750.	Person X Payroll
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
12	CONSOL ENERGY, INC CNX CENTER 1000 CONSOL ENERGY DR CANONSBURG, PA 15317	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
023452 12-2	3-10	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2010)

Page 3 of 9 of Part I

Name of organization

Employer identification number

NATIONAL MINING ASSOCIATION

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 X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
14	CUMBERLAND RESOURCES CORPORATION 152 WEST VALLEY ST ABINGDON, VA 24210	\$ 25,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
15	DINGESS RUM PROPERTIES 723 KANAWHA BLVD, E UNION BLDG, 14TH FL CHARLESTON, WV 25301	\$ <u>12,500.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	, ,	00 0	, , , , , , , , , , , , , , , , , , ,
16	INTERNATIONAL COAL GROUP, INC 300 CORPORATE CENTER DR SCOTT DEPOT, WV 25560	\$	Person X Payroll
(a) No.	300 CORPORATE CENTER DR	\$ 75,000.	Payroll Noncash (Complete Part II if there
(a)	300 CORPORATE CENTER DR SCOTT DEPOT, WV 25560 (b)	(c)	Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	300 CORPORATE CENTER DR SCOTT DEPOT, WV 25560 (b) Name, address, and ZIP + 4 INTERNATIONAL RESOURCE PARTNERS POST OFFICE DRAWER D	(c) Aggregate contributions	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there
(a) No. 17	300 CORPORATE CENTER DR SCOTT DEPOT, WV 25560 (b) Name, address, and ZIP + 4 INTERNATIONAL RESOURCE PARTNERS POST OFFICE DRAWER D GILBERT, WV 25621 (b)	(c) Aggregate contributions \$ 25,000.	Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

NATIONAL MINING ASSOCIATION

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 X Payroll Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
20	JENMAR CORPORATION 258 KAPPA DR PITTSBURG, PA 15238	\$15,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
21	JOY GLOBAL, INC 177 THORN HILL RD WARRENDALE, PA 15086	\$ 7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
22	KENNAMETAL, INC 1600 TECHNOLOGY WAY LATROBE, PA 15650	\$5,001.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
23	KENTUCKY OIL & REFINING 156 KY OIL VILLAGE BETSY LAYNE, KY 41605	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
24	KENTUCKY RIVER PROPERTIES, LLC 250 W MAIN ST, STE 1823 LEXINGTON, KY 40507	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

NATIONAL MINING ASSOCIATION

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 X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
26	MARSHALL MILLER & ASSOCIATES 534 INDUSTRIAL PARK RD BLUEFIELD, VA 24605	\$ 7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
27	MASSEY ENERGY COMPANY 300 MORGAN MASSEY DR, PO BOX 621 JULIAN, WV 25526	\$ 75,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
28	MCDONALD LAND COMPANY PO BOX 1706 LOGAN, WV 25601	\$ 5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
29	MEPCO, LLP 308 DENTS RUN RD MORGANTOWN, WV 26501	\$ 12,500 .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
30	MMD MINERAL SIZING, INC 41 EXCELLENCE WAY VONORE, TN 37885	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)

Employer identification number

NATIONAL MINING ASSOCIATION

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

Page 7 of 9 of Part I

Employer identification number

NATIONAL MINING ASSOCIATION

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 X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
38	PETROLUEM PRODUCTS 200 VISCOE RD NITRO, WV 25143	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
39	PINEY LAND COMPANY 130 MAIN ST BECKLEY, WV 25801	\$6,250.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
40	PRITCHARD MINING COMPANY, INC PO BOX 3311 CHARLESTON, WV 25333	\$\$	Person X Payroll Noncash (Complete Part II if there
			is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			(d)
No.	Name, address, and ZIP + 4 RALEIGH MINE & INDUSTRIAL SUPPLY PO BOX 72	Aggregate contributions	(d) Type of contribution Person X Payroll Noncash (Complete Part II if there
No. 41 (a)	Name, address, and ZIP + 4 RALEIGH MINE & INDUSTRIAL SUPPLY PO BOX 72 MOUNT HOPE, WV 25880 (b)	\$5,000.	(d) Type of contribution Person X Payroll

Employer identification number

NATIONAL MINING ASSOCIATION

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

Page 9 of 9 of Part

Name of organization

Employer identification number

NATIONAL MINING ASSOCIATION

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 X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
50	WALKER MACHINERY PO BOX 2427 CHARLESTON, WV 25314	\$15,000.	Person X Payroll Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
51	WHAYNE SUPPLY COMPANY PO BOX 35900 LOUISVILLE, KY 40232	\$7,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
52	WVCA ALLIANCE - FRIENDS OF COAL PO BOX 3923 CHARLESTON, WV 25339	\$\$ <u></u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

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.

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

Niaman af amazaria atian	itions. Compiete Fart III.		E	
Name of organization	T MINITUG AGGOCTA	штом	Emple	oyer identification number
Part I-A Complete if the org	L MINING ASSOCIA ganization is exempt und	TION	via a costion FO7 o	52-1916480
Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politic	al campaign activities in	Part IV > \$	
Part I-B Complete if the org	ganization is exempt und	ler section 501(c)(3	3).	
 Enter the amount of any excise tax Enter the amount of any excise tax If the organization incurred a section Was a correction made? If "Yes," describe in Part IV. 	incurred by organization managon 4955 tax, did it file Form 4720	ers under section 4955 for this year?	▶ \$	Yes No
Part I-C Complete if the org	ganization is exempt und	ler section 501(c),	except section 501(
Enter the amount directly expended Enter the amount of the filing organ exempt function activities	nization's funds contributed to ot	her organizations for sec	ction 527	0.
 Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and er made payments. For each organization contributions received that were prolitical action committee (PAC). If 	1120-POL for this year? mployer identification number (El ation listed, enter the amount pair omptly and directly delivered to	nd on Form 1120-POL, N) of all section 527 polid from the filing organizate separate political organ	tical organizations to whic tion's funds. Also enter th nization, such as a separa	Yes X No h the filing organization le amount of political
(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.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. SEE PART IV FOR CONTINUATION Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010 NATIONAL MINING ASSOCIATION 52-1916480 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). if the filing organization belongs to an affiliated group. A Check ► B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a 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) 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 -0i Subtract line 1f from line 1c. If zero or less, enter -0j 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? ່ Yes 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 (b) 2008 (a) 2007 (c) 2009 (d) 2010 (e) Total (or fiscal year beginning in) 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))

Schedule C (Form 990 or 990-EZ) 2010

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)	(k	o)
		Yes	No	Amo	ount
1 [ouring the year, did the filing organization attempt to influence foreign, national, state or				
lo	ocal legislation, including any attempt to influence public opinion on a legislative matter				
O	r referendum, through the use of:				
a ∨	olunteers?				
b F	aid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	fedia advertisements?				
	failings to members, legislators, or the public?				
e F	ublications, or published or broadcast statements?				
f G	Frants to other organizations for lobbying purposes?				
g [Firect contact with legislators, their staffs, government officials, or a legislative body?				
h F	allies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
iC	Other activities? If "Yes," describe in Part IV				
	otal. Add lines 1c through 1i				
	old the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If	"Yes," enter the amount of any tax incurred under section 4912				
c If	"Yes," enter the amount of any tax incurred by organization managers under section 4912				
	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	on 501(c)	(5), or se	ection	
	501(c)(6).				1
				Yes	No
	Vere substantially all (90% or more) dues received nondeductible by members?				X
2 [olid the organization make only in-house lobbying expenditures of \$2,000 or less?				X
	old the organization agree to carryover lobbying and political expenditures from the prior year?			X	
Part					_
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part "Yes."	rt III-A, li	ne 3 is a	nswered	i
1 0	lues, assessments and similar amounts from members		1	14,049	7,284
2 8	ection 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic	cal			
е	xpenses for which the section 527(f) tax was paid).				
a (Current year		2a		1,895
	Sarryover from last year				3,560
	otal			2,883	3,335
	ggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			3,090	0,842
4 11	notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	oes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
е	xpenditure next year?		4		
	axable amount of lobbying and political expenditures (see instructions)		5	-205	7,507
Part	V Supplemental Information				
Comple	ete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar	d Part II-B,	line 1i. Als	o, complete	this part
for any	additional information.				
	I I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INF	ORMAT:	ION:		
COAT					

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.

2010
Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

Pai	organizations Maintaining Donor Advised organization answered "Yes" to Form 990, Part IV, line		s or Accounts. Complete if the
	organization answered Tes to Point 990, Part IV, line	(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 w	riting that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's e	_	
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		
Pai	t II Conservation Easements. Complete if the orga		
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a		
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year ▶		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	and enforcing conservation easements	during the year 🕨
7	Amount of expenses incurred in monitoring, inspecting, and e	nforcing conservation easements durin	g the year > \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 17	0(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expens	se statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes	s the organization's accounting for
	conservation easements.		
Paı	t III Organizations Maintaining Collections of	Art, Historical Treasures, or C	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue state	ment and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	bition, education, or research in further	ance of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describ	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statemer	nt and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of p	ublic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
			> \$
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b			

	t III Organizations Maintaining C	Collections of A				or Othe	r Simil		ts (cont		.gc –
3	Using the organization's acquisition, accessi				-						
Ū	(check all that apply):	on, and other record	30, 01100K	arry or the	Tollowing the	at are a si	grimoarie	450 01 115	CONCOLIO	11101110	•
а	Public exhibition	,	ı 🗆 L	oan or eve	hange progra	ame					
b	Scholarly research	6			riarige progra						
	Preservation for future generations	•	0	/II lei							
C	· ·	alla akiawa awal awalai	اه ها		h			in Dav	+ VIV		
4	Provide a description of the organization's co							ose in Par	t XIV.		
5	During the year, did the organization solicit of								٦,,		١
Do	to be sold to raise funds rather than to be ma								<u></u> Yes		No
Pai	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the (organizatio	n answered	"Yes" to I	-orm 990), Part IV,	line 9, or		
	<u>`</u>										
1a	Is the organization an agent, trustee, custod								٦.,		١
	on Form 990, Part X?							∟	Yes		No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing ta	able:							
									Amoun	!	
	Beginning balance										
	Additions during the year										
е	Distributions during the year										
f	Ending balance						1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	21?					L	∐ Yes		No
	If "Yes," explain the arrangement in Part XIV.										
Pai	t V Endowment Funds. Complete i	f the organization ar	nswered "	Yes" to Fo	1						
		(a) Current year	(b) Pri	ior year	(c) Two year	rs back (d) Three y	ears back	(e) Four	years l	oack
1a	Beginning of year balance										
b	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the year		as:		ı						
	Board designated or quasi-endowment		%								
b	Permanent endowment ▶	%									
	-	<u></u> /°									
	Are there endowment funds not in the posse		ation that	are held a	nd administe	ered for th	e organi:	zation			
ou	by:	obolori or the organiz	ation that	. uro riola u	na aaniiniote	5100 101 111	o organii	Lation	[Yes	No
	•								3a(i)	103	140
	(**)								3a(ii)		
h	If "Yes" to 3a(ii), are the related organizations	listed as required a									
4	Describe in Part XIV the intended uses of the								_ GD		
Pai	t VI Land, Buildings, and Equipm										
ı aı		1				(-) A-			(a) Da a		
	Description of investment	(a) Cost or o			or other (other)		cumulate reciation		(d) Boo	k value	;
	Land	`	none)	Dasis	(Otrior)	uep	Colation				
	Land		+								
	Buildings		+	1	1,600.		33,6	50	-	7,94	11
	Leasehold improvements				$\frac{1,800.}{4,352.}$	Л	78,3		2	6,03	3.2
	Equipment		-		$\frac{4,352.}{6,434.}$	4					
	Other						39,6	40.		6,80	
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	: X, columi	n (B), line 1	U(C).)				р	0,75	19.

Schedule D (Form 990) 2010

(2) Closely-held equity interests	Part VII Investments - Other Securities. S	ee Form 990, Part X, I	ine 12.		
(2) Cosely-heid equity interests (3) Other (4) (8) (9) (9) (10) (10) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (19) (10) (10) (10) (10) (10) (10) (10) (10		(b) Book value	Cos		
(3) Other (4) (6) (7) (8) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	(1) Financial derivatives				
(3) Other (4) (6) (7) (8) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10	(2) Closely-held equity interests				
(B) (C) (C) (D) (C) (D) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(3) Other				
(C) (D) (E) (E) (F) (G) (G) (H) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(A)				
(D) (E) (E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(B)				
(E) (F) (G) (H) (D) (D) (D) (D) (E) (E) (E) (E) (E) (E) (E) (E) (E) (E	(C)				
(F) (G) (G) (P) (G) (P) (P) (Dotal. (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶ Part VIII Investments - Program Related. See Form 990, Part X, line 13. (c) Method of valuation: Cost or end-of-year market value (I) (2) (3) (4) (5) (6) (9) (10) (10) (10) (10) (11) (2) (2) (3) (4) (5) (6) (9) (10) (10) (10) (10) (10) (10) (10) (10	(D)				
(G) (H) (H) (H) (H) (H) (H) (H) (H) (H) (H	(E)				
(t)	(F)				
Cotat. (Cot (b) must equal Form 990, Part X, cot (8) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13. Cot or end-of-year market value	(G)				
Total (Cold (b) must equal Form 990, Part X, col (B) line 12.) Part VIII Investments - Program Related. See Form 990, Part X, line 13.	(H)				
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 (i) Cost or end-of-year market value (ii) Cost or end-of-year market value (iii) Cost or end-of-year market value (b) Book value (c) Book value (d) Cost or end-of-year market value (d) Cost or end-of-year market value (e) Cost or end-of-year market value (f) Book value (iii) Cost of end-of-year market value (b) Book value (b) Book value (b) Book value (b) Book value (c) Book value (d) Cost of end-of-year market value (d) Cost of end-of-year market value (e) Cost of end-of-year market value (f) Book value (i) Cost of end-of-year market value (b) Book value (c) Book value (d) Cost of end-of-year market v					
(a) Description of investment type (b) Book value (c) (a) (b) (b) (b) must equal form 990, Part X, col (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15. (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	Part VIII Investments - Program Related.	See Form 990, Part X,	line 13.		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Col(b) must equal Form 990, Part X, col (β) line 13.) ▶ (10) (11) (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	(a) Description of investment type	(b) Book value	Co		
(3) (4) (5) (6) (7) (8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, col (B) line 15.) (6) (7) (8) (9) (10) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, col (B) line 15.) (1) Federal income taxes (2) DUE TO RELATED PARTY (3) CAPITAL LEASE (4) ACCRUED PENSION OBLIGATION (5) DEFERRED COMPENSATION LIABILITY (6) (7) (8) (9) (10) (11)	(1)				
(4) (5) (6) (7) (8) (9) (10) Total, (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part X Other Assets. See Form 990, Part X, line 15. (2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (11) Federal income taxes (2) DUE TO RELATED PARTY (3) DEFERRED COMPENSATION LIABILITY (5) DEFERRED COMPENSATION LIABILITY (6) DEFERRED COMPENSATION LIABILITY (7) (8) (9) (10) (10) (10) (10) (10) (11)	(2)				
(5) (6) (7) (8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (8) line 13.) ▶ Part IX	(3)				
(6) (7) (8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (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 2,558,791. (5) DEFERRED COMPENSATION LIABILITY 85,305. (6) (7) (8) (9) (10)	(4)				
(7) (8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX	(5)				
(8) (9) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX	(6)				
(9) (10) (10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶ Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (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)					
(10) Total. (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶					
Total. (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					
(a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (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)		<u> </u>			
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col (B) line 15.) Part X Other Liabilities. See Form 990, Part X, line 25. (1) Federal income taxes (2) DUE TO RELATED PARTY (3) CAPITAL LEASE (4) ACCRUED PENSION OBLIGATION (5) DEFERRED COMPENSATION LIABILITY (6) (7) (8) (9) (10) (11)					(le) De els velve
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (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)		Description			(b) Book value
(3) (4) (5) (6) (7) (8) (9) (10) Total. (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)					
(4) (5) (6) (7) (8) (9) (10) Total. (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)					
(5) (6) (7) (8) (9) (10) Total. (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)					
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Part X Other Liabilities. See Form 990, Part X, line 25. (a) Description of liability (b) Amount		- 45)			
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)				>	
(1) Federal income taxes (2) DUE TO RELATED PARTY (3) CAPITAL LEASE (4) ACCRUED PENSION OBLIGATION (5) DEFERRED COMPENSATION LIABILITY (8) (9) (10) (11)	(15)	., iine ∠5.	(b) Amount		
(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) Amount		
(3) CAPITAL LEASE 147,598. (4) ACCRUED PENSION OBLIGATION 2,568,791. (5) DEFERRED COMPENSATION LIABILITY 85,305. (6) (7) (8) (9) (10) (11)			05 525		
(4) ACCRUED PENSION OBLIGATION 2,568,791. (5) DEFERRED COMPENSATION LIABILITY 85,305. (6) (7) (8) (9) (10) (11)					
(5) DEFERRED COMPENSATION LIABILITY 85,305. (6) (7) (8) (9) (10) (11)	ACCRITED DESIGNATION OF TOWN	ON .			
(6) (7) (8) (9) (10) (11)	The state of the s				
(7) (8) (9) (10) (11)		טרדחדדן	03,303.		
(8) (9) (10) (11)					
(9) (10) (11)					
(10) (11)					
(11)					
Find 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		20.25)	2 807 210		
	Fin 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote	to the organization's financia	Statements that reports the organ	zation's liability for uncerta	in tax positions under

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 t	o Audited	Financial	State	men	ts	
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)					17,123	,255.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3			-564	<u>,959.</u>
4	Net unrealized gains (losses) on investments						
5	Donated services and use of facilities						
6	Investment expenses						
7	Prior period adjustments						
8	Other (Describe in Part XIV.)					2,002	,346.
9	Total adjustments (net). Add lines 4 through 8					2,002	,346.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 a					1,437	,387.
Pa	t XII Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue	oer R	eturı	n	
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:						
а	Net unrealized gains on investments	2a	973,0	46.			
b	Donated services and use of facilities						
С	Recoveries of prior year grants						
	Other (Describe in Part XIV.)						
	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:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
	Other (Describe in Part XIV.)		-2,7	79.			
	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.
Pa	rt XIII Reconciliation of Expenses per Audited Financial Stater				Retu	ırn	
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:						
а	Donated services and use of facilities	2a					
b	Prior year adjustments						
	Other losses						
	Other (Describe in Part XIV.)		1,029,3	00.			
	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:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV.)	4b	-2,7	79.			
С	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.
Pa	rt XIV Supplemental Information						
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	: III, lines 1a a	and 4; Part IV,	lines 1	o and	2b; Part V, line	4; Part
X, lin	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also con	nplete this pa	art to provide a	ny ado	ditiona	l information.	
PAI	RT X, LINE 2: MANAGEMENT HAS CONCLUDED THA	AT THE	ASSOCIA	TIO	NΗ	AS	
MA:	INTAINED ITS EXEMPT STATUS; ALL REVENUE W	ITHIN T	HE STAT	EME	NT	OF	
AC'	TIVITIES HAS BEEN PROPERLY CLASSIFIED FOR	THE YE	CARS END	ED	DEC	EMBER 3	1,
20	10 AND 2009 AND DOES NOT HAVE ANY UNCERTA	IN TAX	POSITIO	NS	THR	OUGH	
DE	CEMBER 31, 2010.						
PA1	RT XI, LINE 8 - OTHER ADJUSTMENTS:						
						1 222	200
다시	C 150 ADTICOMMENTO					1 020	3 17 17

Schedule D (Form 990) 2010 NATIONAL MINING ASSOCIATION Part XIV Supplemental Information (continued)	52-1916480 Page 5
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.
	<u> </u>
PART XIII, LINE 4B - OTHER ADJUSTMENTS:	
RECLASS OF GAIN (LOSS) ON SALE OF ASSETS	-2,779.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service 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.

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

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 ASSOCIATIO	N'S GOAL WHEN						
SETTING SALARIES FOR ALL EMPLOYEES IS TO HAVE THEIR COMPENSATION AT THE							
75TH PERCENTILE OF COMPARABLE TRADE ASSOCIATIONS USING TH	E 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 D	OES NOT GENERALLY						
MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVA	ILABLE 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 FOUN	DATION)						
ROGER ROBERTS 2.0 HRS PER WEEK (AMERICAN COAL FOUN	DATION)						

SCHEDULE R (Form 990) Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► 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.

2010
Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

(a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN of disregarded entity	me, address, and EIN Primary activity Legal domicile (state or Total			ome End-of-yea	•			
Part II Identification of Related Tax-Exempt Organizations during the tax year.)	anizations (Complete if the organization	answered "Yes" to Form 990), Part IV, line 34 b	ecause it had one	or more related tax-exe	empt		
(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	cont	512(b)(13) trolled tity?	
AMERICAN COAL FOUNDATION - 52-1236554						165	INO	
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		Х	

Page 2

Identification of Related Organizations Tayable as a Partnership (Complete if the organization answered "Ves" to Form 990. Part IV, line 34 because it had one or more related

organizations treated as a pa	rtnership during the ta	x year.)	ersinp (complete in	trie organi	zation answe	ered res toronn	330, raitiv, iiie	04 DC	cause ii	Thad one of more	relate	u				
(a)	(b)	(c)	(d)		(e)	(f)	(g)	(I	h)	(i)	(j)	(k)				
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	(related, excluded fi	nant income , unrelated, rom tax under s 512-514)	Share of total income	Share of end-of-year assets	Disproportion- ate allocations?		ate allocations?		ate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin partner?	Jownership
	Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)															
(a)			(b)		(c)	(d)	(e)		(f)	(g)	(h)				
Name, address, and E of related organization			Primary activ	vity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp		hare of tincom		-year	Percentage ownership				

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)					
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership					
	7	7]	7	7]						

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

Not	te. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?							Х	
а	a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity							
b	Gift, grant, or capital contribution to other organization(s)				1b		X	
С	Gift, grant, or capital contribution from other organization(s)				1c		Х	
d	Loans or loan guarantees to or for other organization(s)				1d		X	
е	e Loans or loan guarantees by other organization(s)							
f	f Sale of assets to other organization(s)							
g	Purchase of assets from other organization(s)				1g		X	
h	Exchange of assets				1h		X	
i	Lease of facilities, equipment, or other assets to other organization(s)				1i		X	
	, 11 ,							
i	Lease of facilities, equipment, or other assets from other organization(s)				1i		X	
, k	Performance of services or membership or fundraising solicitations for other organization(s)				1k		X	
	Performance of services or membership or fundraising solicitations by other organization(s)				11		Х	
	n Sharing of facilities, equipment, mailing lists, or other assets				1m	Х		
	Sharing of paid employees				1n	Х		
	onaling of paid omployees							
0	Reimbursement paid to other organization for expenses				10	X		
n	Reimbursement paid by other organization for expenses				1p		X	
P	Theiribursentent paid by other organization for expenses				·ΙΡ			
a	Other transfer of cash or property to other organization(s)				1q		X	
ч r	Other transfer of cash or property from other organization(s)				1r		X	
	If the answer to any of the above is "Yes," see the instructions for information on who must cor							
	•	ilpicte t						
	(a) (b) Name of other organization Transac	tion	(c) Amount involved	(d) Method of determining				
	type (a		7	amount involved				
(1)								
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(2)								
(-)								
(3)								
(0)								
(4)								
17)	'							
(5)	5)							
(0)			 					
(6)								
(0)				Online della D	/ =	- 0001	0040	

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

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

(a)	(b)	(c)	(d)		(e)		f)	(g)	(ł	h)			
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Legal domicile (state or foreign		Legal domicile (state or foreign		oartners 501(c)(3) ations?	Share of end-of- year assets	Dispropor- tionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	eral or aging tner?
		country)	Yes	No		Yes	No	(Form 1065)	Yes	No			
										<u> </u>			
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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)

OMB No. 1545-0047

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

Open to Public Inspection

Α	For the	e 2009 calendar year, or tax year beginning a	nd ending		
В	Check if applicable	le: Please use IRS C Name of organization		D Employer identific	cation number
	Addre	ess label or print or NATIONAL MINING ASSOCIATION			
	Name chang	Doing Business As		52-1	916480
F	Initial return Termi	Number and street (0f P.U. DOX IT MAII IS NOT DELIVERED TO STREET ADDRESS SPECIFIC 101 CONTEMPT TO A TREATURE NEW	Room/suite 500E	E Telephone number	463-2600
F	ated Amen	ded tions.	БООБ	G Gross receipts \$	18,814,630.
F	return Applio			H(a) Is this a group re	
	—Ition pendi			for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	
$\overline{}$	Tax-ex		27	1 ` ´	list. (see instructions)
		te: WWW.NMA.ORG		H(c) Group exemption	·
		f organization: X Corporation Trust Association Other	L Year		State of legal domicile: DE
	art I	Summary	, –		<u>. </u>
_	T 1	Briefly describe the organization's mission or most significant activities: TO	PROMOTE	THE GENERA	L WELFARE
Governance		OF THE PRODUCERS OF COAL AND MINERALS,	REPRESE	NT THE COAL	AND
rna	2	Check this box if the organization discontinued its operations or dis	posed of more	than 25% of its net as	ssets.
Š.	3	Number of voting members of the governing body (Part VI, line 1a)		3	76
<u>ھ</u>	4	Number of independent voting members of the governing body (Part VI, line 1	b)		76
Activities &	5	Total number of employees (Part V, line 2a)			40
ΣΞ	6	Total number of volunteers (estimate if necessary)			76
Act	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12			0.
_	b	Net unrelated business taxable income from Form 990-T, line 34	······		0.
				Prior Year	Current Year
ne	8	Contributions and grants (Part VIII, line 1h)		32,604,756.	1,467,473.
Revenue	9	Program service revenue (Part VIII, line 2g)		-66,165.	522,521.
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		5,399.	15,589.
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		32,543,990.	15,125,480.
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		32,343,330.	13,123,400.
'n	1	Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-1		7,456,762.	7,867,052.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		,,130,,7021	7,007,0021
per	h	Total fundraising expenses (Part IX, column (D), line 25)			
Ж	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		14,812,662.	8,098,044.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		22,269,424.	15,965,096.
	19			10,274,566.	-839,616.
200	3	·	Ве	ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		23,309,610.	23,459,850.
t As	21	Total liabilities (Part X, line 26)		7,280,131.	5,381,539.
캺	22	Net assets or fund balances. Subtract line 21 from line 20		16,029,479.	18,078,311.
P	art II	Signature Block			
		Under penalties of perjury, I declare that I have examined this return, including accompanying schedule and complete. Declaration of preparer (other than officer) is based on all information of which preparer I	s and statements, as any knowledge.	and to the best of my knowledo	ge and belief, it is true, correct,
				1	
Sig	yn	Signature of officer		l Date	
He	re	l' · · ·		Date	
		ROGER ROBERTS, TREASURER/SVP FINANCE Type or print name and title	ı		
_		I Doto	I Ch	eck if Prepare	er's identifying number
Paid Preparer's signature Preparer's signature					
Pre	parer's	Firm's name (or JOHNSON LAMBERT & CO. LLP	I ell	EIN >	
Use	e Only	yours if self-employed), 700 SPRING FOREST ROAD, STE 11	5	LIIV	
		address, and ZIP + 4 RALEIGH, NC 27609	. –	Phone no ▶ 9	19-719-6400
— Ma	v the II	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
	''				

Form **8453-EO**

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2009, or tax year beginning	, 2009, and ending

2009

OMB No. 1545-1879

Department of the Treasury Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868 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 on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line for the return for which you are filing this or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the more than one line in Part I.	form was blank, then leave line 1b, 2b, 3b, 4b
1a Form 990 check here Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 1512548
2a Form 990-EZ check here b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here ▶ □ b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here b Tax based on investment income (Form 990-PF, Part VI, II	ine 5) 4b
5a Form 8868 check here ▶ □ b Balance due (Form 8868, line 3c)	
Part II Declaration of Officer I authorize the U.S. Treasury and its designated Financial Agent to initiate an ACH electronic further financial institution account indicated in the tax preparation software for payment of the organic and the financial institution to debit the entry to this account. To revoke a payment, I must con 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize processing of the electronic payment of taxes to receive confidential information necessary to the payment. If a copy of this return is being filed with a state agency(ies) regulating charities as part of the If executed the electronic disclosure consent contained within this return allowing disclosure by the second of the electronic disclosure consent contained within this return allowing disclosure by the second of the electronic disclosure consent contained within this return allowing disclosure by the second of the electronic disclosure consent contained within this return allowing disclosure by the second of the electronic disclosure consent contained within this return allowing disclosure by the second of the electronic disclosure consent contained within this return allowing disclosure by the electronic disclo	ization's federal taxes owed on this return, tact the U.S. Treasury Financial Agent at thorize the financial institutions involved in the answer inquiries and resolve issues related to
(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 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 electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization acknowledgement of receipt or reason for rejection of the transmission, (b) an indication of any refund offset, (c) the reason for any delay in providing the service provider.	is the amount shown on the copy of the organization's
Here 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 continuously a collector, I am not responsible for reviewing the return and only declare that this return. The organization officer will have signed this form before I submit the return. I will give the officer a filed with the IRS, and have followed all other requirements in Pub. 4163. Modernized e-file (MeF) Information	form accurately reflects the data on the copy of all forms and information to be

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.

Check if Check ERO's SSN or PTIN also paid if self-FRO's ERO's employed signature Use Firm's name (or JOHNSON LAMBERT LLP & CO. EIN yours if self-employed), address, and ZIP code Only 700 SPRING FOREST ROAD, Phone no. RALEIGH, NC 27609 919-719-6400

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.

Paid Preparer's **Use Only**

er is based on an innormation	or which the preparer has any knowledge.			
Preparer's signature		Date	Check if self- employed	Preparer's SSN or PŢIN
Firm's name (or yours if self-employed), address, and ZIP code				EIN
address, and ZIP code				Phone no.



e-Postmark: 11/15/2010 2:41:54 PM Name: National Mining Association IRS Center: OGDEN

FEIN: 52-1916480 Refund: \$0.00 Notification:

Return History													
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											

Form **8868**

(Rev. April 2009) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

	The desputate application for each retain.		
	are filing for an Automatic 3-Month Extension, complete only Part I and check this box		
	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this complete Part II unless you have already been granted an automatic 3-month extension on a previously fi		
Part I			
	ation required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	▶ □
All other to file inc	corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an come tax returns.	exter	nsion of time
noted be (not auto you mus	lic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensic flow (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic matic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or context submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file gov/efile and click on e-file for Charities & Nonprofits.	cally i nsolid	f (1) you want the additional ated Form 990-T. Instead.
Type or	Name of Exempt Organization	Emp	loyer identification number
print	NATIONAL MINING ASSOCIATION	5	2-1916480
File by the due date for filling your return. See	Number, street, and room or suite no. If a P.O. box, see instructions. 101 CONSTITUTION AVENUE NW, NO. 500E		
Instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20001-2133		
Check ty	pe of return to be filed(file a separate application for each return):		
Fo	m 990	27 69	
Teleph If the o	ROGER ROBERTS books are in the care of 101 CONSTITUTION AVE NW, STE. 500E - WAS none No. 202-463-2600 FAX No. borganization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this . If it is for part of the group, check this box and attach a list with the names and EINs of all results.	s is fo	r the whole group, check this
is fe	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until \overline{AUGUST} 16, 2010 , to file the exempt organization return for the organization named at or the organization's return for: \overline{X} calendar year $\overline{2009}$ or $\overline{1000}$, and ending, and ending		The extension
2 If th	nis tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any arefundable credits. See instructions.	За	\$
	nis application is for Form 990-PF or 990-T, enter any refundable credits and estimated	<u> </u>	<u> </u>
	payments made. Include any prior year overpayment allowed as a credit.	3b	\$
dep	ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, posit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).	3c	\$ N/A
	7, 171 171 171	<u>~</u>	Ψ 247,22

orm 8868 (Rev. 4-2009)			Page Page
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this			▶ X
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously file	d Form	1 8868.	
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1). Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no			
A second of the congress of th			
Type or Name of Exempt Organization	Em	oloyer ide	ntification numbe
rint NATIONAL MINING ASSOCIATION	9	52-191	L6480
Number, street, and room or suite no. If a P.O. box, see instructions. 101 CONSTITUTION AVENUE NW, NO. 500E	For	IRS use or	nly
trum. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20001-2133			
Check type of return to be filed (File a separate application for each return): X Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Form 8876
TOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	usiy fil	ed Form 8	3868.
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 it is for part of the group, check this box I request an additional 3-month extension of time until For calendar year 2009, or other tax year beginning If this tax year is for less than 12 months, check reason: State in detail why you need the extension ADDITIONAL TIME IS NECESSARY TO FILE A COMPLETE AND A	nis is fo	or the whole pers the ex Change in	e group, check thi tension is for.
	-		
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	00	s	
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated	8a	3	
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
previously with Form 8868.	8b	s	
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit	. 8c	\$	N/A
Balance Due. 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			
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions Signature and Verification			
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions		f my knowle	edge and belief,
with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions Signature and Verification der penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the		_	edge and belief,

Pai	rt 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?
	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.
	anocations 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 \$)
710	HELD SPECIALIZED SEMINARS, WORKSHOPS, MINEXPO INTERNATIONAL, AND OTHER
	SIGNIFICANT MEETINGS AND EVENTS.
	SIGNIFICANI MEETINGS AND EVENIS.
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 \$)
40	Total program carving expanses • C

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)?			х					
	If "Yes," complete Schedule A								
2	2 Is the organization required to complete Schedule B, Schedule of Contributors?								
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I								
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4							
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	Х						
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to								
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X					
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,								
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X					
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х					
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide								
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X					
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V								
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X								
	as applicable	11	X						
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,								
	Part VI.								
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total								
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.								
•	• Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total								
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.								
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 162 If "Ves." complete Schedule D. Part IX. Part X P								
	Part X, line 16? If "Yes," complete Schedule D, Part IX. Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.								
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses								
_	the organization's separate or consolidated imarious statements for the tax year include a roothote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.								
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete								
	Schedule D, Parts XI, XII, and XIII.	12	Х						
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No								
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional								
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х					
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х					
	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? If "Yes," complete Schedule F, Part I	14b		Х					
15									
	or entity located outside the United States? If "Yes," complete Schedule F, Part II								
16									
	located outside the United States? If "Yes," complete Schedule F, Part III								
17									
column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I									
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			77					
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X					
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v					
00	complete Schedule G, Part III	19		X					
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Δ					

Part IV Checklist of Required Schedules (continued)

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

009) NATIONAL MINING ASSOCIATION Statements Regarding Other IRS Filings and Tax Compliance Part V

10 Enter the number reported in Box 3 of Form 1986, Annual Summary and Transmittal of U.S. Information Returns. Enter of in ent applicable 15 Enter the number of Forms W26 included in line 1a. Enter 0-if not applicable (gambling) with the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, filed for the calendary year anding with or within the year covered by this return. 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2c Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements, filed or five seal and 2 is greater than 250, you may be required to e-fifth is return, (see instructions). 3b If we call the same of the calendar year, did the organization file all required federal employment tax returns? 3c Diff the organization have unrelated business gross income of \$1.000 or more during the year covered by this return? 3c Diff we 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 accountit? 3c Diff wes, 'enter the name of the foreign country. 3c Diff wes, 'enter the name of the foreign country. 3c Diff wes, 'enter the name of the foreign country. 3c Diff wes, 'enter the name of the foreign country. 3c Diff wes, 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 3c Diff wes, 'to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 3c Diff wes, 'to line 5a or 5b, did the organization file Form 8886*T, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction? 4c Diff wes, 'to line 5a or 5b, did the organization in clude with every solicitation an expr				Yes	No				
be Effect the number of Forms W2G included in line 1e. Enter-O-if not applicable 15b 00 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambing) winnings to prize winners? 2e. Enter the number of employees reported on Form W3-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2 2a 40 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b X Note. If the sum of lines 1 and 2a is greater than 250, you may be required to effectal employment tax returns? 2b X Note. If the sum of lines 1 and 2a is greater than 250, you may be required to effectal employment tax returns? 3a X 3b If "Yes," and 1st titled a Form 990-Tro fro the year If "Na," provide an exploration in Schedule 0 4d 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, 17km, "provide an exploration in Schedule 0 4d 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. 17km, "provide an exploration in Schedule 0 5d W If "Yes," and the foreign country of the organization flore foreign country or the provided to the organization floreign country or the provided tax shelter transaction? 5d W If "Yes," to line Sa or Sb, did the organization that it was or is a party to a prohibited tax shelter transaction? 5d Did any taxable party notify the organization file Form 88861, Disclosure by Tax Exempt Entity Regarding Prohibited Tax Shelter Transaction? 5d Did the organization house annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible? 6d Did the organization house annual gross receipts that are normally greater than \$10	1a								
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	12a		12a						
			u						

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

Sec	tion A. Governing Body and Management								
						Yes	No		
1a	Enter the number of voting members of the governing body	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?								
3									
	of officers, directors or trustees, or key employees to a management company or other person?				3		X		
4	Did the organization make any significant changes to its organizational documents since the prior Fo				4		X		
5	Did the organization become aware during the year of a material diversion of the organization's asse				5		Х		
6	Does the organization have members or stockholders?				6	Х			
7a	Does the organization have members, stockholders, or other persons who may elect one or more me					37			
	governing body?				7a	X	37		
_	Are any decisions of the governing body subject to approval by members, stockholders, or other per				7b		X		
8	Did the organization contemporaneously document the meetings held or written actions undertaken	durin	g the year						
	by the following:					v			
	The governing body?				8a	X			
	Each committee with authority to act on behalf of the governing body?				8b	X			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be really in the control of				•		v		
200	organization's mailing address? If "Yes," provide the names and addresses in Schedule O				9		X		
sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ie Coae.)			V	N		
40-	December a was in the contract of the contract			1	10-	Yes	No X		
	Does the organization have local chapters, branches, or affiliates?				10a				
b	If "Yes," does the organization have written policies and procedures governing the activities of such 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 f		 ho form?		11		X		
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	iii ig t	ne ionii:						
	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a		Х		
	Are officers, directors or trustees, and key employees required to disclose annually interests that con				ıza				
b	to conflicts?	-			12b				
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If				120				
Ŭ	in Schedule O how this is done				12c				
13	Does the organization have a written whistleblower policy?				13		X		
14	Does the organization have a written document retention and destruction policy?				14	Х			
15	Did the process for determining compensation of the following persons include a review and approve								
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		•						
а	The organization's CEO, Executive Director, or top management official				15a	Х			
	Other officers or key employees of the organization				15b	Х			
	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 arrange	ment	with a						
	taxable entity during the year?				16a		X		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to eva-	aluate	its participatio	n					
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the org	aniza	tion's						
	exempt status with respect to such arrangements?				16b				
Sec	tion 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 990-7	Γ (501	(c)(3)s only) av	ailable	for				
	public inspection. Indicate how you make these available. Check all that apply.								
	Own website Another's website X Upon request								
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, or	conflic	t of interest po	olicy, ar	nd fina	ncial			
	statements available to the public.								
20	State the name, physical address, and telephone number of the person who possesses the books a	nd re	cords of the or	ganizat	ion:				
	ROGER ROBERTS - 202-463-2600	200	101						
	101 CONSTITUTION AVE NW STE 500E, WASHINGTON, DC	200	1 O T						

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."

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

- 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.

(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average		Position				Reportable	Reportable	Estimated	
	hours per	H	neck	all t	that	app	ly)	compensation from	compensation from related	amount of other
	week	irector						the	organizations	compensation
		ee or d	stee			nsated		organization	(W-2/1099-MISC)	from the
		al frus	nal tr		loyee	compe		(W-2/1099-MISC)		organization and related
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
KEITH ALESSI										
DIRECTOR	1.00	Х						0.	0.	0.
DAN ALLAN										_
DIRECTOR	1.00	Х						0.	0.	0.
JACK ATWATER									_	_
DIRECTOR	1.00	Х						0.	0.	0.
PHILLIPS BAKER, JR.	1 00								0	0
DIRECTOR	1.00	Х						0.	0.	0.
ROBERT BENSON	1 00	37							0	0
DIRECTOR	1.00	Х						0.	0.	0.
DON BLANKENSHIP	1.00	x						0.	0.	0
DIRECTOR JOHN BLASCHAK	1.00	_						0.	0.	0.
DIRECTOR	1.00	x						0.	0.	0.
C. BOLTON, JR.	1.00							0.	0.	
DIRECTOR	1.00	x						0.	0.	0.
ALEX BOULTON										
DIRECTOR	1.00	х						0.	0.	0.
JAMES BOYD										
DIRECTOR	1.00	Х						0.	0.	0.
MICHAEL BROWN										
DIRECTOR	1.00	Х						0.	0.	0.
FRANK CALANDRA, JR.								_	_	_
DIRECTOR	1.00	Х						0.	0.	0.
DAVID CAMPBELL										
DIRECTOR	1.00	Х						0.	0.	0.
JOSEPH CARRABBA	1 00								0	0
DIRECTOR	1.00	Х						0.	0.	0.
GERARD CARROLL DIRECTOR	1.00	х						0.	0.	0.
NICK CARTER	1.00	^						0.	0.	
DIRECTOR	1.00	X						0.	0.	0.
RED CONGER		T								
DIRECTOR	1.00	Х					L	0.	0.	0.

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Part VII Section A. Officers, Directors, T	rustees, Key E							Compensated Employ	rees (continued)	1 00	Г	age o
(A) (B) (C) (D) (E)									(F)			
Name and title	Average			Pos	itior	1		Reportable	Reportable	E	stimate	∍d
	hours	(c	hecl	k all	that	арр	ly)	compensation	compensation	ar	nount	
	per	ctor						from the	from related		other pensa	
	week	ndividual trustee or director	au au			ited		organization	organizations (W-2/1099-MISC)		om th	
		nstee (truste		gy.	benss		(W-2/1099-MISC)	(= ,,		anizat	
		lual tr	tional		nploye	st com	_				d relat	
		Individ	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			org	anizati	ons
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	1	l										_
DIRECTOR	1.00	X						0.	0.			0.
RAYMOND DUBOIS	1 00	١										_
DIRECTOR	1.00	Х						0.	0.			0.
MARK DUNN	1 00	١,,										^
DIRECTOR	1.00	Х				-		0.	0.			0.
ROBERT EVANS DIRECTOR	1 00	٠,						0.	0.			^
DAVID FARNSWORTH	1.00	X						0.	0.			0.
DIRECTOR	1.00	X						0.	0.			0.
CLIFF FORREST	1.00	1						0.	•			<u> </u>
DIRECTOR	1.00	_v						0.	0.			0.
1b Total	1 1.00	1 22				┢		3,961,448.	0.	83	0,7	
2 Total number of individuals (including but	not limited to th	nose	liste	ed a	bov	e) wł	no r	eceived more than \$100	0,000 in reportable			
compensation from the organization								·	, , , , , , , , , , , , , , , , , , ,			15
											Yes	No
3 Did the organization list any former office												
line 1a? If "Yes," complete Schedule J for	such individual									3	Х	

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 Х 4

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

Section B. Independent Contractors

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		
•	PR MANAGEMENT	1,104,450.
CROWELL & MORING, 1001 PENNSYLVANIA AVE		
NW, NO. 11, WASHINGTON, DC 20004	LEGAL CONSULTANT	458,953.
COMMUNITY STRATEGIES	GRASSROOTS	
915 S COLUMBIA ST, ALEXANDRIA, VA 22314	CONSULTANT	197,050.
INFRASTRUCTURE DEVELOPMENT STRATEGIES, 444	GOVERNMENT AFFAIRS	
N CAPITOL ST, NO. 216, WASHINGTON, DC	CONSULTANT	176,700.
RAFFANIELLO & ASSOCIATES, 1099 NEW YORK	GOVERNMENT AFFAIRS	
AVE NW, STE 635, WASHINGTON, DC 20001	CONSULTANT	175,000.
2 Total number of independent contractors (including but not limited to those liste \$100,000 in compensation from the organization.	d above) who received more than	
AVE NW, STE 635, WASHINGTON, DC 20001	CONSULTANT	175,00

Х

Pa	rt VII	II Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Irar	b	Membership dues	1b					
s, g	С	Fundraising events						
Contributions, gifts, grants and other similar amounts			1d					
ıs, mil	е	Government grants (contribut						
ion r si		All other contributions, gifts, gran	<i>'</i>					
bul		similar amounts not included abo		467,473.				
ntri	g			•				
Co		Total. Add lines 1a-1f	-		1,467,473.			
				Business Code				
ø	2 a	MEMBERSHIP DUES	S & ASSE	900099	12982248.	12982248.		
Program Service Revenue	b	CONTITUTE COME		900099	137,420.			
Ser		PUBLICATIONS		900099	1,004.	1,004.		
E Š	d	DVIIIDIM CDACE I	RENTAL	900099	-775.	-775.		
Re	u 0			300033	,,,,,	,,,,,		
Prc	f	All other program service reve	20110					
	'	Total. Add lines 2a-2f			13119897.			
	3	Investment income (including			131130370			
	3	other similar amounts)			635,257.			635,257.
	4				000,20,0			000,20,0
	5	Income from investment of tax-exempt bond prodRoyalties		•				
	3	noyaities	(i) Real	(ii) Personal				
	6 -	Gross Rents	24,150.	(II) Personal				
	_	***************************************	8,561.					
	b		15,589.					
	C	٠ ,			15,589.			15,589.
		Net rental income or (loss) .	(i) Can witing		13,303.			13,303.
	/ a	Gross amount from sales of	(i) Securities 3567853.	(ii) Other	-			
		assets other than inventory	3307033.					
	D	Less: cost or other basis	3680589.					
		and sales expenses	11000					
		Gain or (loss)		I .	-112,736.			-112,736.
	a	Net gain or (loss)		>	-112,730.			-112,730.
ne	8 a	Gross income from fundraisin						
ven		including \$						
Other Revenue		contributions reported on line						
her		Part IV, line 18						
oŧ		Less: direct expenses						
		Net income or (loss) from fund		>				
	9 a	Gross income from gaming ac						
		Part IV, line 19						
		Less: direct expenses						
		Net income or (loss) from gan	-	D				
	10 a	Gross sales of inventory, less						
		and allowances						
		Less: cost of goods sold						
	С	Net income or (loss) from sale						
		Miscellaneous Revenu	ıe	Business Code				
	11 a							
	b							
	С							
		All other revenue						
	е	Total. Add lines 11a-11d Total revenue . See instructions.			15105400	12110000	^	F20 110
	12	Total revenue. See instructions.			1514548U -	13119897.	I U .	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). (A) Total expenses (C) Management and general expenses (B) **(D)** Fundraising Do not include amounts reported on lines 6b. Program service 7b. 8b. 9b. and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. 3,145,429. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 3,145,755. 7 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 848,253. Other employee benefits 443,645. 9 283,970. Payroll taxes 10 Fees for services (non-employees): Management 39,978. Legal 205,460. Accounting 283,802. Lobbying Professional fundraising services. See Part IV. line 17 7,766. Investment management fees _____ 2,371,118. Other Advertising and promotion 1,119,862. 12 245,327. Office expenses 13 47,309. 14 Information technology 15 Royalties 1,290,057. 16 Occupancy 117,202. Travel 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 381,865. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 30,288. Depreciation, depletion, and amortization 22 83,568. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.) 1,469,061. FACES OF COAL DUES & SUBSCRIPTIONS 332,647. BAD DEBT 38,306. 31,895. TRAINING 1,887.**MISCELLANEOUS** 646. f All other expenses 15,965,096. Total functional expenses. Add lines 1 through 24f 25 Joint costs. Check here
if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Balance Sheet Part X (B) (A) Beginning of year End of year 1,000. 1,000. 1 Cash - non-interest-bearing 1 12,029,435. 849,288. 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 1,897,405. 969,186. 4 Accounts receivable, net 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 of Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L 7 Notes and loans receivable, net 7 Inventories for sale or use 8 341,717. 365,444. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment; cost or other 941,643. basis. Complete Part VI of Schedule D 10a 860,419. 97,331. 10c 81,224. b Less: accumulated depreciation 10b 8,936,746. 21,130,668. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 Intangible assets 14 14 5,976. 63,040. 15 Other assets. See Part IV, line 11 15 23,309,610. 23,459,850. 16 Total assets. Add lines 1 through 15 (must equal line 34) ... 16 996,173. 1,156,582. 17 17 Accounts payable and accrued expenses 18 18 Grants payable 7,100. 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 iabilities Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 6,283,958. Other liabilities. Complete Part X of Schedule D 25 4,217,857. 25 7,280,131. 5,381,539. 26 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here

X

and complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 17,718,570. 15,596,487. Unrestricted net assets 27 27 359,741. 432,992. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 16,029,479. 18,078,311. Total net assets or fund balances 33 33 23,309,610. 23,459,850. 34 Total liabilities and net assets/fund balances 34

Form 990 (2009) NATIONAL MINING Part XI Financial Statements and Reporting NATIONAL MINING ASSOCIATION 52-1916480 Page **12**

			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,			
	review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a			
	consolidated basis, separate basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit			
	Act and OMB Circular A-133?	За		Х
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.	3b		

SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

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.

- 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.

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

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

Name of organization	L MINING ASSOCIA	ПТОМ	Empi	52-1916480
Part I-A Complete if the org			nr is a section 527 o	
Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politic	al campaign activities in	Part IV.	
Part I-B Complete if the org	ganization is exempt und	ler section 501(c)(3	3).	
1 Enter the amount of any excise tax	incurred by the organization und	der section 4955	> \$	
2 Enter the amount of any excise tax	incurred by organization manage	ers under section 4955	▶\$	
3 If the organization incurred a section				
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV. Part I-C Complete if the org	anization is exempt und	er section 501(c).	except section 501(c)(3).
Enter the amount directly expended				
2 Enter the amount of the filing organ exempt function activities	nization's funds contributed to ot	her organizations for sec	ction 527	
3 Total exempt function expenditures line 17b4 Did the filing organization file Form			▶\$	Yes No
5 Enter the names, addresses and er For each organization listed, enter that were promptly and directly del (PAC). If additional space is needed	the amount paid from the filing o ivered to a separate political orga	rganization's funds. Also anization, such as a sep	enter the amount of politi arate segregated fund or a	ical contributions received a political action committee
(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.
	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. LHA

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 NATIONAL MINING ASSOCIATION 52-1916480 Page 2 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). if the filing organization belongs to an affiliated group. A Check ► B Check ▶ if the filing organization checked box A and "limited control" provisions apply. (a) Filing (b) Affiliated group Limits on Lobbying Expenditures organization's totals (The term "expenditures" means amounts paid or incurred.) totals 1a 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) 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 -0i Subtract line 1f from line 1c. If zero or less, enter -0j 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? ່ Yes 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 (d) 2009 (a) 2006 (b) 2007 (c) 2008 (e) Total (or fiscal year beginning in) 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))

Schedule C (Form 990 or 990-EZ) 2009

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2009 NATIONAL MINING ASSOCIATION 52-191648 | 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	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities? If "Yes," describe in Part IV				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Dor	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(4).	on 501/o)//	E) or o	otion	
rai	501(c)(6).	JII 50 I (C)(oj, ur se	CLIOII	
	33.1(3)(3).			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		Х
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?				X
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			Х	
	t III-B Complete if the organization is exempt under section 501(c)(4), section			ection	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Pa" "Yes."	rt III-A, lin	e 3 is a	nswered	
1	Dues, assessments and similar amounts from members		1	12,982	248.
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a	2,839	,899.
	Carryover from last year				,038.
	Total			3,945	,937.
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues			4,024	.,497.
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p	oolitical			
	expenditure next year?		4		
	Taxable amount of lobbying and political expenditures (see instructions)		5	-78	3,560.
Par	t IV Supplemental Information				
Com	plete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; ar	nd Part II-B, li	ne 1i. Als	o, complete	this part
	ny additional information.				
PAI	RT I-C CONTINUATION FOR INCOMPLETE NAME/ADDRESS INF	ORMATI	ON:		
COZ	ALPAC				
<u>10</u> 1	CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001				
MIN	NEPAC				

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.

2009
Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

Pa			Is or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(4) 2 61161 4411664 141146	(a) i amad ama daner addeamid
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4			
5	Aggregate value at end of year	witing that the assets held in donor adv	ised funds
•	are the organization's property, subject to the organization's	-	
6	Did the organization inform all grantees, donors, and donor ac		
U	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		
Pa	t II Conservation Easements. Complete if the organization		
1	Purpose(s) of conservation easements held by the organization		1 (11)
•	Preservation of land for public use (e.g., recreation or pl		istorically important land area
	Protection of natural habitat	· —	rtified historic structure
	Preservation of open space	Treservation of a cer	Timed Historic structure
2	Complete lines 2a through 2d if the organization held a qualific	ad conservation contribution in the form	of a conservation easement on the last
2	day of the tax year.	ed conservation contribution in the form	TOTA CONSERVATION EASEMENT ON THE IAST
	day of the tax year.		Held at the End of the Tax Year
•	Total number of concernation eacoments		
a b	Total number of conservation easements Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic stru		
c C	Number of conservation easements included in (c) acquired a		
d 3	Number of conservation easements included in (c) acquired a Number of conservation easements modified, transferred, rele		
3	year	eased, extinguished, or terminated by tr	le organization during the tax
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the period		· •
Ŭ	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, a		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above		
•			
9	In Part XIV, describe how the organization reports conservation		
Ŭ	include, if applicable, the text of the footnote to the organizati	·	
	conservation easements.	on a mandar statements that describes	s the organization o accounting for
Pa	t III Organizations Maintaining Collections of	Art, Historical Treasures, or 0	Other Similar Assets.
	Complete if the organization answered "Yes" to Form 9	-	
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, ed		
	the footnote to its financial statements that describes these it		,,,
b	If the organization elected, as permitted under SFAS 116, to r		nce sheet works of art, historical treasures.
-	or other similar assets held for public exhibition, education, or	·	
	these items:		,,g ag asaries rolating to
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
			> \$
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under SFAS 11		3, p
а	Revenues included in Form 990, Part VIII, line 1		> \$
	,		

Par	t III Organizations Maintaining C	ollections of A	rt, Hist	torical Tı	reasures, o	or Othe	r Simil	ar Asse	ts (cont	inued,)
3	Using the organization's acquisition, accession	on, and other record	ls, checl	any of the	following tha	at are a si	gnificant	use of its	collectio	n item	ıs
	(check all that apply):										
а	Public exhibition	d	ı <u> </u>	Loan or exc	change progra	ams					
b	Scholarly research	е		Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	llections and explai	n how th	ey further t	the organizati	ion's exer	npt purp	ose in Par	t XIV.		
5	During the year, did the organization solicit or	receive donations	of art, hi	storical trea	asures, or oth	er similar	assets		_		_
	to be sold to raise funds rather than to be ma	intained as part of t	the orga	nization's c	ollection?				Yes		☐ No
Par	t IV Escrow and Custodial Arrang	gements. Comple	ete if org	anization a	nswered "Ye	s" to Forr	n 990, Pa	ırt IV, line	9, or		
	reported an amount on Form 990, Par	t X, line 21.									
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for	contributio	ns or other as	ssets not	included		_		_
	on Form 990, Part X?							L	Yes		J No
b	If "Yes," explain the arrangement in Part XIV a										
									Amount	t	
С	Beginning balance						. 1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?					L	Yes		No
	If "Yes," explain the arrangement in Part XIV.										
Par	t V Endowment Funds. Complete if	the organization an	swered	"Yes" to Fo	orm 990, Part	IV, line 1	0.				
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d) Three y	ears back	(e) Four	years	back
1a	Beginning of year balance										
b	Contributions										
	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities										
	and programs										
f	Administrative expenses										
	End of year balance										
2	Provide the estimated percentage of the year	end balance held a	as:								
а	Board designated or quasi-endowment		%								
	Permanent endowment	%	_								
		 '									
	Are there endowment funds not in the posses	ssion of the organiz	ation tha	at are held a	and administe	ered for th	ne organiz	zation			
	by:						9		ſ	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations										
b	If "Yes" to 3a(ii), are the related organizations	listed as required o	n Sched	lule R?					3b		
4	Describe in Part XIV the intended uses of the								00		
	t VI Investments - Land, Building). Part X. line	10.					
	Description of investment	(a) Cost or o			t or other		cumulate	ed le	(d) Boo	k valu	
	2000 Paori di Invodiment	basis (investr			(other)		reciation	·	(4) 500	. valu	_
	Land				. ,						
	Buildings										
	Leasehold improvements				39,239.		29,1	56.	1	0.0	83.
	Equipment				2,758.	5	99,6				73.
	Other				9,646.		31,5				68.
	. Add lines 1a through 1e. (Column (d) must ed		X. colun		-	_	. , -				24.

Schedule D (Form 990) 2009

ΝΆΦΤΩΝΆΤ.	MTNTNC	ASSOCTATION

Part VII	Investments - Other Securities.	See Form 990, Part X, I	ine 12.		
(a) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua st or end-of-year mar	
Financial d	erivatives				
Closely-hel	d equity interests				
Other					
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
	Investments - Program Related.		line 13.		
	(a) Description of investment type	(b) Book value		(c) Method of valua	
				or or one or your man	Not value
Tatal (Cal (h) would sould Form 000 Port V and (D) line 10)				
Part IX	b) must equal Form 990, Part X, col (B) line 13.)				
Part IX	, ,	a) Description			(b) Book value
		a) Description			(b) Dook value
- (0 . /	(a) a a d a a a d E a a a 000 B a d V a a d (D)	' 4E\			
Part X	umn (b) must equal Form 990, Part X, col (B) of Other Liabilities. See Form 990, Part			>	
	(a) Description of liability	A, IIIIe 25.	(b) Amount		
<u>1.</u>			(b) Amount	-	
Federal inc	OMETAXES D RELATED PARTY		82,800.	-	
	AL LEASE		220,666.	-	
	ED PENSION OBLIGATION		3,853,224.	_	
	RED COMPENSATION LIABIL	TMV	61,167.		
NEL EKI	VED COMPENSATION DIABIL	ITTI	01,10/.		
				-	
<u> </u>	(A)	(05)	/)17 OF7		
i otal. (Colu	umn (b) must equal Form 990, Part X, col (B) I	ıne 25.) ▶	4,217,857.		

2. FIN 48 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.

	dule D (Form 990) 2009 NATIONAL MINING ASSOCIATION		ad Einana	ial Stat		1916480 Page 4
	TXI Reconciliation of Change in Net Assets from Form 990 to				emen	15,125,480.
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		-839,616
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3		2,368,028
4	Net unrealized gains (losses) on investments			4		2,300,020
5	Donated services and use of facilities			5		
6	Investment expenses			6		
7	Prior period adjustments			7		520,420.
8	Other (Describe in Part XIV.)			8		2,888,448
9	Total adjustments (net). Add lines 4 through 8			9		2,048,832.
10 Date	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and t XII Reconciliation of Revenue per Audited Financial Stateme			10 Le per F	Patur	
					1	17,502,069
1	Total revenue, gains, and other support per audited financial statements				1	17,302,009
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ما	2 369	2 028		
	Net unrealized gains on investments		4,300	3,028	4	
	Donated services and use of facilities				4	
	Recoveries of prior year grants) FC1	4	
	Other (Describe in Part XIV.)	2d		3,561	_	2 276 500
е	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:					
	Investment expenses not included on Form 990, Part VIII, line 7b				4	
b	Other (Describe in Part XIV.)	4b				
	Add lines 4a and 4b				4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	····	<u></u>		5	15,125,480.
Pai	t XIII Reconciliation of Expenses per Audited Financial Stateme				Retu	
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:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIV.)	2d	528	3,981.	<u>.</u>	
е	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:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIV.)	4b				
С	Add lines 4a and 4b				4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	15,965,096
Pai	rt XIV Supplemental Information					
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part II	I, lines 1	a and 4; Par	t IV, lines	1b and	2b; Part V, line 4; Part
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp					
	RT X: MANAGEMENT HAS CONCLUDED THAT THE ASS					
MA:	INTAINED ITS EXEMPT STATUS; ALL REVENUE WIT	THIN	THE ST	CATEMI	ENT	OF
AC:	TIVITIES HAS BEEN PROPERLY CLASSIFIED FOR T	THE Y	YEAR EN	IDED I	DECE	MBER 31,
200	9 AND DOES NOT HAVE ANY UNCERTAIN TAX POS	ITIOI	NS AS C	OF DEC	CEMB	ER 31,
200	09.					
	RT XI, LINE 8 - OTHER ADJUSTMENTS:					
LVI	(I AI, DIME O - OTHER ADOUGHENIS:					

FAS 158 ADJUSTMENT: 520420.

Department of the Treasury

Internal Revenue Service

Part I

Compensation Information

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

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

➤ Attach to Form 990. ► See separate instructions. OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Questions Regarding Compensation

NATIONAL MINING ASSOCIATION

Employer identification number 52-1916480

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

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

Schedule J (Form 990) 2009

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-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F)
		(i) Base	(ii) Bonus &	(iii) Other	other deferred	benefits	(B)(i)-(D)	Compensation reported in prior
(A) Name		compensation	incentive	reportable	compensation	2011011110	(-)(-)	Form 990 or
			compensation	compensation				Form 990-EZ
	(i)	424,518.	253,000.	39,673.	65,523.	27,071.	809,785.	0.
HAROLD QUINN, JR.	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	141,170.	28,000.	9,765.	24,401.	12,547.	215,883.	0.
ROGER ROBERTS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	159,180.	35,000.	16,260.	31,941.	25,596.	267,977.	0.
MARY SWEENEY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	217,930.	70,000.	23,918.	64,048.	32,374.	408,270.	0.
BRUCE WATZMAN	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	137,880.	22,900.	23,173.	40,296.	11,388.	235,637.	0.
MOYA PHELLEPS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	207,990.	38,000.	25,366.	103,605.	25,814.	400,775.	0.
DANIEL GERKIN	(ii)	0.	0.	0.	0.	0.	0.	0.
WEDT IN 1101 111	(i)	273,430.	80,000.	17,010.	36,173.	35,069.	441,682.	0.
MERLYN NOLAN	(ii)	0.	0.	0.	0.	0.	0.	0.
CAROL RAIL CHON	(i)	218,170.	50,000.	27,504.	55,851.	13,895.	365,420.	0.
CAROL RAULSTON	(ii)	~ • ₁	0.	0.	0.	0.	• • •	0.
EXDENI DENNIEMM	(i)	140,930.	25,000.	9,765.	28,710.	25,383. 0.	229,788.	0.
KAREN BENNETT	(ii)	134,872.	22,000.	15,331.	47,184.	21,066.	240,453.	0.
DAVID FINKENBINDER	(i)	134,072.	22,000.	0.	0.	21,000.	240,455.	0.
DAVID FINKENBINDEK	(ii)	157,978.	21,750.	9,384.	20,080.	12,718.	221,910.	0.
JULIA GUSTAFSON	(i)	0.	0.	9,304.	20,000.	0.	0.	0.
OULIA GODIALDON	(ii) (i)	200,170.	30,900.	31,410.	12,297.	12,982.	287,759.	0.
GLENN KELLY	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	118,170.	15,000.	25,128.	32,258.	12,496.	203,052.	0.
LUKE POPOVICH	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	0.	0.	463,823.	0.	0.	463,823.	0.
KRAIG NAASZ	(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

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

 $Employer\ Identification\ number\\ 52-1916480$

NATIONAL									52-191	
Part I Continuation of Officers, D	irectors, Tr	ust	tees	s, K	ey	Em	plo	yees, and Highes	t Compensated	Employees
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
		irecto				emp		organization	(W-2/1099-MISC)	from the
		e or d	tee			sated		(W-2/1099-MISC)		organization and related
		ruste	Itrus		ee,	nben				organizations
		dual t	tiona		nploy	st co i	_			organizations
		Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			
JOHN GALASSINI		 -	⊢		_	 	_			
DIRECTOR	1.00	x						0.	0.	0.
TIM GITZEL	1.00							0.	0.	•
DIRECTOR	1.00	Х						0.	0.	0.
DAVID GODLEWSKI	1.00							0.	0.	•
DIRECTOR	1.00	х						0.	0.	0.
JOHN GRISHAM	1.00	^						0.	0.	0.
	1 00							0.	0.	0
DIRECTOR	1.00	Х						0.	0.	0.
BENJAMIN GUENTHER	1 00	37							0	0
DIRECTOR	1.00	Х						0.	0.	0.
LEROY HAGENBUCH	1 00								0	•
DIRECTOR	1.00	Х						0.	0.	0.
PETER HALPIN	1	l								
DIRECTOR	1.00	Х						0.	0.	0.
JOHN HAMRICK									_	
DIRECTOR	1.00	Х						0.	0.	0.
DOUGLAS HARDMAN								_	_	_
DIRECTOR	1.00	Х						0.	0.	0.
J. BRETT HARVEY								_	_	_
DIRECTOR	1.00	Х						0.	0.	0.
BENNETT HATFIELD										
DIRECTOR	1.00	Х						0.	0.	0.
RON HOCHSTEIN										
DIRECTOR	1.00	Х						0.	0.	0.
ROBERT HOGAN, JR.										
DIRECTOR	1.00	Х						0.	0.	0.
THOMAS JANECK										
DIRECTOR	1.00	Х						0.	0.	0.
CHARLES JEANNES										
DIRECTOR	1.00	Х						0.	0.	0.
TONY JENSEN										
DIRECTOR	1.00	Х						0.	0.	0.
GLENN KELLOW										
DIRECTOR	1.00	X						0.	0.	0.
KEITH KIMBLE									_	
DIRECTOR	1.00	Х						0.	0.	0.
GREG LANG		t	T							, ,
DIRECTOR	1.00	x						0.	0.	0.
GUY LEBLANC		T	T							, ,
DIRECTOR	1.00	x						0.	0.	0.

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

Schedule J-2 (Form 990) 2009

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

(A) Name and title (B) Average hours per week (C) Position (check all that apply) again light of lig	ted t of r sation he
Name and title Average hours (check all that apply) per Average Position (check all that apply) per Reportable compensation compensation from related other	ted t of r sation he
hours (check all that apply) compensation compensation amount per from from related other	t of r sation he
per from from related other	r sation he
	ation he
week the organizations compen	he
g organization (W-2/1099-MISC) from	ation
organiz	امماد
and rei	
	110115
Long	
STEVEN LEER	
DIRECTOR 1.00 X 0. 0.	0.
KEVIN LOUGHREY	•
DIRECTOR 1.00 X 0.	0.
TOM MACKALL	<u> </u>
DIRECTOR 1.00 X 0.	0.
MICHAEL MCLANAHAN	0.
	0.
DIRECTOR 1.00 X 0. 0. ROBERT MURRAY	0.
	٥
	0.
FRED NELSON	^
DIRECTOR 1.00 X 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.

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

Schedule J-2 (Form 990) 2009

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

NATIONAL									52-191					
Part I Continuation of Officers, Di	rectors, Tr	ust	tees	s, K	<u>(ey</u>	Em	ple	oyees, and Highes	t Compensated	Employees				
(A) (B) (C) (D) (E) (F) Name and title Average Position Reportable Reportable compensation compensation amount of														
Name and title	Average								·	Estimated				
		(cl	heck	all t	that	app	ly)	· · ·	compensation	amount of				
	per							from	from related	other				
	week	.o.				ployee		the organization	organizations (W-2/1099-MISC)	compensation from the				
		direct				ma p		(W-2/1099-MISC)	(***2/1099*****100)	organization				
		ee or	stee			ınsate		(** = /* *******************************		and related				
		l frus	nal trı		oyee	du o				organizations				
		ndividual trustee or director	n stitutio nal trustee	Officer	Key employee	Highest compensated employee	Former							
		Pul	lus	JJO OH	Key	Hig	균							
MICHAEL SUTHERLIN									_					
DIRECTOR	1.00	Х						0.	0.	0.				
WILLIAM TATE								_	_	_				
DIRECTOR	1.00	Х						0.	0.	0.				
CHARLES UNGUREAN								_	_	_				
DIRECTOR	1.00	Х						0.	0.	0.				
JOSEPH USIBELLI, JR.														
DIRECTOR	1.00	Х						0.	0.	0.				
DENNIS WHEELER														
DIRECTOR	1.00	Х						0.	0.	0.				
RICHARD WHITING														
DIRECTOR	1.00	Х						0.	0.	0.				
GARY GOLDBERG														
CHAIRMAN	1.00	Х		Х				0.	0.	0.				
GREGORY BOYCE														
VICE CHAIRMAN	1.00	Х		Х				0.	0.	0.				
FRANCIS MCALLISTER								_	_	_				
DIRECTOR	1.00	Х						0.	0.	0.				
HAROLD QUINN, JR.									_					
PRESIDENT & CEO	35.00			Х				717,191.	0.	92,594.				
ROGER ROBERTS									_					
TREASURER/SVP FINANCE	35.00			Х				178,935.	0.	36,948.				
MARY SWEENEY									_					
ASSISTANT SECRETARY	35.00			Х				210,440.	0.	57,537.				
BRUCE WATZMAN														
SECRETARY	35.00			Х				311,848.	0.	96,422.				
MOYA PHELLEPS								100 050		- 4 - 604				
SVP MEMBERSHIP	35.00				Х			183,953.	0.	51,684.				
DANIEL GERKIN								054 056		400 440				
SVP POLITICAL	35.00				Х			271,356.	0.	129,419.				
MERLYN NOLAN														
SVP GOVERNMENT AFFAIRS	35.00				Х			370,440.	0.	71,242.				
CAROL RAULSTON														
SVP COMMUNICATIONS	35.00				Х			295,674.	0.	69,746.				
KAREN BENNETT														
DIRECTOR, WATER QUALITY	35.00					Х	_	175,695.	0.	54,093.				
DAVID FINKENBINDER						₋			_					
VP CONGRESSIONAL AFFAIRS	35.00			Ш		Х		172,203.	0.	68,250.				
JULIA GUSTAFSON								400 445	_	00 -00				
DIRECTOR, CONGRESSIONAL	35.00					Х		189,112.	0.	32,798.				

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

Schedule J-2 (Form 990) 2009

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

Department of the Treasury Internal Revenue Service

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												
Part I Continuation of Officers, Di	rectors, Tr	ust	ees	s, K	ey	Em	plo	yees, and Highes	t Compensated	Employees		
(A) (B) (C) (D) (E) (F)												
Name and title								Reportable	Reportable	Estimated		
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		e or	stee			sate		(W 2) 1000 WIIOO)		and related		
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		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former					
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LUKE POPOVICH												
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KRAIG NAASZ												
FORMER PRESIDENT & CEO	0.00						Х	463,823.	0.	0.		
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SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

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 0

(Form 990)

Supplemental Information to Form 990

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Attach to Form 990. Inspection Internal Revenue Service **Employer identification number** Name of the organization 52-1916480 NATIONAL MINING ASSOCIATION 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: FORTY DIRECTORS ELECTED BY, AND REPRESETING AS A CLASS, COAL PRODUCER MEMBERS; AND FORTY DIRECTORS ELECTED BY, AND REPRESENTING AS A CLASS, MINERAL PRODUCER MEMBERS; AND FOURTEEN DIRECTORS ELECTED BY, AND REPRESENTING AS A CLASS, MANUFACTURERS AND SERVICES MEMBERS; AND

THE PRESIDENT OF THE ASSOCIATION, EX OFFICIO.

SCHEDULE 0

(Form 990)

Supplemental Information to Form 990

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

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 ANNU	AL MEETING OF THE
ASSOCIATION.	
FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEW	ED BY SENTOR
MANAGEMENT AND GENERAL COUNSEL AND ANY CHANGES ARE COMMUN	
OUTSIDE ACCOUNTANTS PRIOR TO FILING THE RETURN.	
FORM 990, PART VI, SECTION B, LINE 15: THE ORGANIZATION U	TILIZES A
COMPENSATION CONSULTANT TO PERFORM A BI-ANNUAL COMPENSATI	ON SURVEY OF
COMPARABLE TRADE ASSOCIATIONS. NATIONAL MINING ASSOCIATION	N'S GOAL WHEN
SETTING SALARIES FOR ALL EMPLOYEES IS TO HAVE THEIR COMPE	NSATION AT THE
75TH PERCENTILE OF COMPARABLE TRADE ASSOCIATIONS USING TH	E 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 D	OES NOT GENERALLY
MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVA	ILABLE TO THE
PUBLIC.	

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

 OMB No. 1545-0047

2009
Open to Public Inspection

Employer identification number Name of the organization 52-1916480 NATIONAL MINING ASSOCIATION Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part I (a) (b) (c) (d) (e) (f) Name, address, and EIN Primary activity Legal domicile (state or Total income End-of-vear assets Direct controlling of disregarded entity entity foreign country) 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 Part II organizations during the tax year.) (a) (b) (c) (d) (e) (f) Legal domicile (state or Public charity Direct controlling Name, address, and EIN Primary activity **Exempt Code** of related organization status (if section section entity foreign country) 501(c)(3)) AMERICAN COAL FOUNDATION - 52-1236554 101 CONSTITUTION AVE. STE 525E WASHINGTON DC 20001 N/A EDUCATIONAL FOUNDATION DISTRICT OF COLUMBIA 501(C)(3) 11-II 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

Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(ł	1)	(i)	(j)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year	Dispropate alloc		Code V-UBI amount in box 20 of Schedule	General or managing partner?	
g-		foreign		excluded from tax under		assets	ate alloc		20 of Schedule		
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes No	
										$\Box \Box$	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

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

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

Not	e. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a		Х
b	Gift, grant, or capital contribution to other organization(s)			1b		X
С	Gift, grant, or capital contribution from other organization(s)			1c		X
d	Loans or loan guarantees to or for other organization(s)			1d		X
е	Loans or loan guarantees by other organization(s)			1e		X
f	Sale of assets to other organization(s)			1f		X
g	Purchase of assets from other organization(s)			1g		X
h	Exchange of assets			1h		X
i	Lease of facilities, equipment, or other assets to other organization(s)			1i		X
j	Lease of facilities, equipment, or other assets from other organization(s)			1j		X
k	Performance of services or membership or fundraising solicitations for other organization(s)			1k		X
	Performance of services or membership or fundraising solicitations by other organization(s)			11		X
m	Sharing of facilities, equipment, mailing lists, or other assets			1m	Х	
	Sharing of paid employees			1n	Х	
0	Reimbursement paid to other organization for expenses			10	Х	
р	Reimbursement paid by other organization for expenses			1 p		X
q	Other transfer of cash or property to other organization(s)			1q		X
	Other transfer of cash or property from other organization(s)			1r		X
	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 tra					
	(a) Name of other organization(s)	(b) Transaction type (a-r)	Am	(c) ount ir		d
(1)						
(2)						
(3)						
(4)						
(4)						
(5)						
,						
(6)						
		0-1		/E	0001	0000

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

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

(a)	(b)	(c)		d)	(e)		f)	(g)	(ł	h)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all properties and all properties are all prope	oartners 501(c)(3) ations?	tners 1(c)(3) ons? Share of end-of- year assets		ropor- nate itions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		eral or aging tner?
		country)	Yes			Yes	No	(Form 1065)	Yes	No
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