

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

*“Strategic and Critical Minerals Policy: Domestic Minerals Supplies and Demands in a time of Foreign
Supply Disruptions.”*
May 24, 2011

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: [Information redacted for privacy]
5. Business Phone Number: (202) 463-2600

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

Title/Date of Hearing: Subcommittee on Energy and Mineral Resources oversight hearing entitled "*Strategic and Critical Minerals Policy: Domestic Minerals Supplies and Demands in a time of Foreign Supply Disruptions.*" Tuesday, May 24, 2011, at 9:00 a.m., in Room 1334 Longworth House Office Building

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 Department of the Interior (and /or other agencies invited) that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

None.

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

None.

f. 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.

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

None.

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.

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

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

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

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NATIONAL MINING ASSOCIATION Doing Business As		D Employer identification number 52-1916480
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 101 CONSTITUTION AVENUE NW 500E		E Telephone number 202-463-2600
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001-2133		G Gross receipts \$ 18,814,630.
		F Name and address of principal officer: HAROLD QUINN SAME AS C ABOVE		H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶

I Tax-exempt status: 501(c) (6) (insert no.) 4947(a)(1) or 527
J Website: ▶ WWW.NMA.ORG
K Form of organization: Corporation Trust Association Other ▶ **L Year of formation:** 1995 **M State of legal domicile:** DE

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO PROMOTE THE GENERAL WELFARE OF THE PRODUCERS OF COAL AND MINERALS, REPRESENT THE COAL AND		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	76
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	76
	5 Total number of employees (Part V, line 2a)	5	40
	6 Total number of volunteers (estimate if necessary)	6	76
	7a Total gross 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.	
Revenue	8 Contributions and grants (Part VIII, line 1h)		1,467,473.
	9 Program service revenue (Part VIII, line 2g)	32,604,756.	13,119,897.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-66,165.	522,521.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	5,399.	15,589.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,543,990.	15,125,480.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		
	14 Benefits paid to or for members (Part IX, column (A), line 4)		
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	7,456,762.	7,867,052.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		
	b Total fundraising expenses (Part IX, column (D), line 25) ▶		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	14,812,662.	8,098,044.	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	22,269,424.	15,965,096.	
19 Revenue less expenses. Subtract line 18 from line 12	10,274,566.	-839,616.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 23,309,610.	End of Year 23,459,850.
	21 Total liabilities (Part X, line 26)	7,280,131.	5,381,539.
	22 Net assets or fund balances. Subtract line 21 from line 20	16,029,479.	18,078,311.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Signature of officer _____ Date _____
 ▶ **ROGER ROBERTS, TREASURER/SVP FINANCE**
 Type or print name and title

Paid Preparer's Use Only
 Preparer's signature ▶ _____ Date _____ Check if self-employed Preparer's identifying number (see instructions) _____
 Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ **JOHNSON LAMBERT & CO. LLP**
700 SPRING FOREST ROAD, STE 115
RALEIGH, NC 27609 EIN ▶ _____ Phone no. ▶ **919-719-6400**

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

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2009, or tax year beginning _____, 2009, and ending _____, 20__

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

2009

Department of the Treasury
Internal Revenue Service

▶ **See instructions.**

Name of exempt organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

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

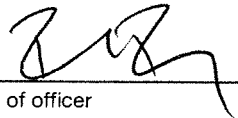
1a Form 990 check here	▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>15125480</u>
2a Form 990-EZ check here	▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a Form 1120-POL check here	▶ <input type="checkbox"/>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

Part II Declaration of Officer

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

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

Sign Here



Signature of officer

11-15-10
Date

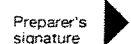
TREASURER/SVP FINANCE
Title

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

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

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

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

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



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

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

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	

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

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

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

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

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

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

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

Type or print	Name of Exempt Organization NATIONAL MINING ASSOCIATION	Employer identification number 52-1916480
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 101 CONSTITUTION AVENUE NW, NO. 500E	
	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):

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

ROGER ROBERTS

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

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

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

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

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

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

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

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

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

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

ROGER ROBERTS

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

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

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

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

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

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

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.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c 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.	8c	\$ N/A

Signature and Verification

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

Signature **▶** *[Signature]* Title **▶** *CPA* Date **▶** *7/14/2010*

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION
NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL
SUPPORT FOR THE MINING INDUSTRY AND TO HELP THE NATION REALIZE THE
ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING
CAPABILITY. OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE THE PUBLIC

2 Did the organization undertake any significant program services during the year which were not listed on
the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

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

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

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

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

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

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

4e Total program service expenses \$

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	X	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		
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? <i>If "Yes," complete Schedule C, Part III</i>	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
	<ul style="list-style-type: none"> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i> 		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i>		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
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? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
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? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	X	
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		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.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	1a 40		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	1b 0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 40		
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 this return. (see instructions)	X	
	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
	3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
	4a		
b	If "Yes," enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
	4b		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
	5a		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
	5b		
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	5c		
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?		X
	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.	Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
	8		
9 Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?		
	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		
	9b		
10 Section 501(c)(7) organizations.	Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
11 Section 501(c)(12) organizations.	Enter:		
a	Gross income from members or shareholders		
	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	11b		
12a Section 4947(a)(1) non-exempt charitable trusts.	Is the organization filing Form 990 in lieu of Form 1041?		
	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		

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

Section A. Governing Body and Management

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

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

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	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?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
11A	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed	NONE
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:	ROGER ROBERTS - 202-463-2600 101 CONSTITUTION AVE NW STE 500E, WASHINGTON, DC 20001

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

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

- List all of the organization's **current** key employees. See instructions for definition of "key employee."

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

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

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

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

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

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

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

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

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

- 3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual **3**

Yes	X	No
-----	---	----
- 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual **4**

Yes	X	No
-----	---	----
- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person **5**

Yes		No	X
-----	--	----	---

Section B. Independent Contractors

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

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

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

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

Part VIII Statement of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,467,473.			
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f		1,467,473.			
	Program Service Revenue	2 a MEMBERSHIP DUES & ASSE	Business Code 900099	12982248.	12982248.	
b CONVENTIONS, CONFERENC		900099	137,420.	137,420.		
c PUBLICATIONS		900099	1,004.	1,004.		
d EXHIBIT SPACE RENTAL		900099	-775.	-775.		
e						
f All other program service revenue						
g Total. Add lines 2a-2f			13119897.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		635,257.		635,257.	
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real	24,150.			
		(ii) Personal				
		b Less: rental expenses	8,561.			
	c Rental income or (loss)	15,589.				
	d Net rental income or (loss)		15,589.		15,589.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities	3567853.			
		(ii) Other				
		b Less: cost or other basis and sales expenses	3680589.			
		c Gain or (loss)	-112736.			
d Net gain or (loss)		-112,736.		-112,736.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
b Less: direct expenses	b					
c Net income or (loss) from fundraising events						
9 a Gross income from gaming activities. See Part IV, line 19	a					
b Less: direct expenses	b					
c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a					
b Less: cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code				
11 a						
b						
c						
d All other revenue						
e Total. Add lines 11a-11d						
12 Total revenue. See instructions.			15125480.	13119897.	0. 538,110.	

Part IX Statement of Functional Expenses

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

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

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

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	1,000.	1	1,000.	
	2 Savings and temporary cash investments	12,029,435.	2	849,288.	
	3 Pledges and grants receivable, net		3		
	4 Accounts receivable, net	1,897,405.	4	969,186.	
	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)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	341,717.	9	365,444.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 941,643.			
	b Less: accumulated depreciation	10b 860,419.	97,331.	10c 81,224.	
	11 Investments - publicly traded securities	8,936,746.	11	21,130,668.	
	12 Investments - other securities. See Part IV, line 11		12		
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	5,976.	15	63,040.	
16 Total assets. Add lines 1 through 15 (must equal line 34)	23,309,610.	16	23,459,850.		
Liabilities	17 Accounts payable and accrued expenses	996,173.	17	1,156,582.	
	18 Grants payable		18		
	19 Deferred revenue		19	7,100.	
	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		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities. Complete Part X of Schedule D	6,283,958.	25	4,217,857.	
	26 Total liabilities. Add lines 17 through 25	7,280,131.	26	5,381,539.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	15,596,487.	27	17,718,570.	
	28 Temporarily restricted net assets	432,992.	28	359,741.	
	29 Permanently restricted net assets		29		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30 Capital stock or trust principal, or current funds		30		
	31 Paid-in or capital surplus, or land, building, or equipment fund		31		
	32 Retained earnings, endowment, accumulated income, or other funds		32		
	33 Total net assets or fund balances	16,029,479.	33	18,078,311.	
34 Total liabilities and net assets/fund balances	23,309,610.	34	23,459,850.		

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

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

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:

Separate basis Consolidated basis Both consolidated and separate basis

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

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

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form **990** (2009)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2009

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 VI, line 46 (Political Campaign Activities), then

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

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

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

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

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

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

Part I-A	Complete if the organization is exempt under section 501(c) or is a section 527 organization.
1	Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2	Political expenditures ▶ \$ _____
3	Volunteer hours _____

Part I-B	Complete if the organization is exempt under section 501(c)(3).
1	Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year? <input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made? <input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV.

Part I-C	Complete if the organization is exempt under section 501(c), except section 501(c)(3).
1	Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____ 0.
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____ 0.
3	Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
4	Did the filing organization file Form 1120-POL for this year? <input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. SEE PART IV FOR CONTINUATION

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

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

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

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

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

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

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

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
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? If "Yes," describe in Part IV			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
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			
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 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		X
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?	X	

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

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).		
a Current year	2a	2,839,899.
b Carryover from last year	2b	1,106,038.
c Total	2c	3,945,937.
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	4,024,497.
4 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?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	-78,560.

Part IV Supplemental Information

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

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

COALPAC

101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001

MINEPAC

101 CONSTITUTION AVE NW STE 500E WASHINGTON, DC 20001

Schedule D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Form for Part II Conservation Easements, including questions 1-9 and a table for 'Held at the End of the Tax Year' with rows 2a-2d.

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

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

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a-2 and sub-questions (i) and (ii).

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items

(check all that apply):

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

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part XIV Supplemental Information

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

PART X: MANAGEMENT HAS CONCLUDED THAT THE ASSOCIATION HAS

MAINTAINED ITS EXEMPT STATUS; ALL REVENUE WITHIN THE STATEMENT OF

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

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

2009.

PART XI, LINE 8 - OTHER ADJUSTMENTS:

FAS 158 ADJUSTMENT: 520420.

Part XIV Supplemental Information *(continued)*

PART XII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL EXPENSES: 8561.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

FAS 158 ADJUSTMENT: 520420.

RENTAL EXPENSES: 8561.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

Part I Questions Regarding Compensation

	Yes	No								
<p>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.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input checked="" type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use	<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence	<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use									
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence									
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>		<input checked="" type="checkbox"/>								
<p>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?</p>	<input checked="" type="checkbox"/>									
<p>3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study	<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee				
<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study									
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> Approval by the board or compensation committee									
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p>	<input checked="" type="checkbox"/>									
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	<input checked="" type="checkbox"/>									
<p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>		<input checked="" type="checkbox"/>								
<p>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</p>										
<p>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:</p> <p>a The organization?</p>										
<p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p>										
<p>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:</p> <p>a The organization?</p>										
<p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p>										
<p>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</p>										
<p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>										
<p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>										

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

Part III Supplemental Information

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

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

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

PART I, LINE 4A:

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

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

NATIONAL MINING ASSOCIATION

Employer Identification number

52-1916480

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

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

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the Organization

NATIONAL MINING ASSOCIATION

Employer Identification number

52-1916480

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

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

SCHEDULE J-2

(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the Organization

NATIONAL MINING ASSOCIATION

Employer Identification number

52-1916480

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

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

SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

▶ See the Instructions for Form 990.

OMB No. 1545-0047

2009

Open to Public Inspection

Name of the Organization

NATIONAL MINING ASSOCIATION

Employer Identification number

52-1916480

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
GLENN KELLY VP GOVERNMENT AFFAIRS	35.00					X		262,480.	0.	25,279.
LUKE POPOVICH VP EXTERNAL COMMUNICATIO	35.00					X		158,298.	0.	44,754.
KRAIG NAASZ FORMER PRESIDENT & CEO	0.00						X	463,823.	0.	0.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public
Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

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

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

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

NMA SERVICES ITS MEMBERSHIP BY:

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

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

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

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

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

DEVELOP GENERAL INDUSTRY AND ISSUE SPECIFIC ADVERTISING CAMPAIGNS

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

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

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

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2009

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Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

PRODUCER MEMBERSHIP - ANY ORGANIZATION CORPORATION, PARTNERSHIP, COMPANY,
OR INDIVIDUAL ENGAGED IN THE MINING AND PRODUCTION OR COAL OR MINERALS.

PRODUCERS MEMBERS ARE DIVIDED INTO TWO SEPARATE CLASSES (I) COAL PRODUCER
MEMBERS AND (II) MINERAL PRODUCER MEMBERS.

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

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

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

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

3) THE PRESIDENT OF THE ASSOCIATION, EX OFFICIO.

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

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2009

Open to Public
Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

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

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

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

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

Related Organizations and Unrelated Partnerships

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

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

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

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

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

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

Part 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) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportion- ate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

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

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

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

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

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

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

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

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

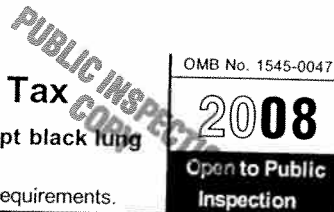
Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of- year assets	(f) Dispropor- tionate allocations?		(g) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	No

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)



Department of the Treasury
Internal Revenue Service

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

A For the 2008 calendar year, or tax year beginning , 2008, and ending , 20

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NATIONAL MINING ASSOCIATION Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite 101 CONSTITUTION AVENUE, N.W. 500 EAST City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001-2133	D Employer identification number 52-1916480
	F Name and address of principal officer: HAROLD QUINN 101 CONSTITUTION AVENUE, N.W WASHINGTON, DC 20001-2133	E Telephone number (202) 463-2600
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c) (06) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	G Gross receipts \$ 40,324,269. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "No," attach a list. (see instructions)
	J Website: ▶ WWW.NMA.ORG	L Year of formation: 1995 M State of legal domicile: DE K Type of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input checked="" type="checkbox"/> Association <input type="checkbox"/> Other ▶ H(c) Group exemption number ▶

Part I Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>TO PROMOTE THE GENERAL WELFARE OF THE PRODUCERS OF COAL AND MINERALS, REPRESENT THE COAL AND MINERAL INDUSTRY ON PUBLIC POLICY ISSUES BEFORE CONGRESS, EXECUTIVE BRANCH AND JUDICIARY.</u>		
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	73
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	73
	5	Total number of employees (Part V, line 2a)	5	42
	6	Total number of volunteers (estimate if necessary)	6	73
	7a	Total gross unrelated business revenue from Part VIII, line 12, column (C)	7a	
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8	Contribution and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	NONE	NONE
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	12,974,232.	32,604,756.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,188,575.	-66,165.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,422.	5,399.
	12		14,168,229.	32,543,990.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	NONE	NONE
	14	Benefits paid to or for members (Part IX, column (A), line 4)	NONE	NONE
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	5,983,390.	7,456,762.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	NONE	NONE
	b	Total fundraising expenses, Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	11,887,702.	14,812,662.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	17,871,092.	22,269,424.
	19	Revenue less expenses. Subtract line 18 from line 12	-3,702,863.	10,274,566.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year	End of Year
	21	Total liabilities (Part X, line 26)	25,586,979.	23,309,610.
	22	Net assets or fund balances. Subtract line 21 from line 20.	14,827,480.	7,280,131.
			10,759,499.	16,029,479.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer: _____ Date: _____

Type or print name and title: _____

Paid Preparer's Use Only	Preparer's signature: <i>Bond Beebe</i>	Date: 11/13/2009	Check if self-employed: <input type="checkbox"/>	Preparer's identifying number (see instructions):
	Firm's name (or yours if self-employed), address, and ZIP + 4: BOND BEEBE 4600 EAST-WEST HIGHWAY SUITE 900 BETHESDA, MD 20814-3423	EIN: ▶	Phone no.: ▶ 301-272-6000	

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

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

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization NATIONAL MINING ASSOCIATION	Employer identification number 52-1916480
	Number, street, and room or suite no. If a P.O. box, see instructions. 101 CONSTITUTION AVENUE, N.W.	For IRS use only
	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):

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

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

- The books are in the care of **BRENDA CORDOVA**
Telephone No. **202 463-2600** FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

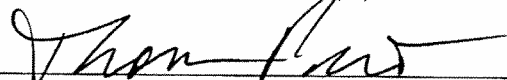
- I request an additional 3-month extension of time until **11/15/2009**.
- For calendar year **2008**, or other tax year beginning _____ and ending _____.
- If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- State in detail why you need the extension _____

ADDITIONAL TIME IS REQUIRED TO ASSEMBLE THE INFORMATION IN ORDER TO FILE A COMPLETE AND ACCURATE RETURN.

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.	8a \$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$
c 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.	8c \$

Signature and Verification

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

Signature  Title **CPA** Date **8/16/09**

BOND BEEBE
4600 EAST-WEST HIGHWAY SUITE 900
BETHESDA, MD 20814-3423

2008 990 Returns Found in Account 4817:

Report Date: 4/29/2009 10:49:52 AM

Locator	Taxpayer Name	Client Code	Alerts	Jurisdiction	Federal			Date Sent	Date Ack.	Federal Only		
					Service Center	Filing Type	Filing Status			DCN	Debts	PIN
131920	NATIONAL MINING ASSOCIATION	NA 4130		FED		EXT	Accepted	4/29/2009 6:09:00 AM	4/29/2009 6:30:00 AM			

1 record returned.

Next 250

Part III Statement of Program Service Accomplishments (see instructions)

1 Briefly describe the organization's mission:

SEE STATEMENT 1

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

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

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

If "Yes," describe these changes on Schedule O.

4 Describe the 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 \$ _____)

REPRESENTED THE INTERESTS 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 \$ _____)

PREPARED AND ISSUED A WEEKLY NEWSLETTER AS WELL AS STATISTICAL AND INFORMATIONAL PUBLICATIONS.

4d Other program services. (Describe in Schedule O.)

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

4e Total program service expenses ► \$ _____ (Must equal Part IX, Line 25, column (B).)

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Question text, Yes, No. Contains 27 rows of questions regarding organizational requirements and schedules.

Part IV Checklist of Required Schedules (continued)

		Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:		
a	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? <i>If "Yes," complete Schedule L, Part IV</i>		X
b	Have a family member who had a direct or indirect business relationship with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? <i>If "Yes," complete Schedule L, Part IV</i>		X
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 12b regarding IRS filings, employee reporting, foreign accounts, and charitable contributions.

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A. Governing Body and Management

		Yes	No
For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, process, or changes in Schedule O. See instructions.			
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?	X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	X	
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organizations contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9a	Does the organization have local chapters, branches, or affiliates?		X
9b	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?		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990		X
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies

		Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision:		
a	The organization's CEO, Executive Director, or top management official?	X	
b	Other officers or key employees of the organization?	X	
Describe the process in Schedule O. (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ▶
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶ ROGER ROBERTS 101 CONSTITUTION AVENUE, N.W., STE 500E WASHINGTON, DC 20001
202-463-2600

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
SEE SCHEDULE J-2										

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

Table with 6 main columns: (A) Name and title, (B) Average hours per week, (C) Position (check all that apply), (D) Reportable compensation from the organization, (E) Reportable compensation from related organizations, (F) Estimated amount of other compensation.

1b Total 3,994,267. NONE 870,647.
2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization 19

Table with 3 columns: Question, Yes, No. Contains questions 3, 4, and 5 regarding compensation reporting.

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.

Table with 3 columns: (A) Name and business address, (B) Description of services, (C) Compensation. Row 1 contains 'SEE STATEMENT 2'.

2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 13

Part VIII Statement of Revenue

52-1916480

			(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	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f: \$						
	h	Total. Add lines 1a-1f		NONE				
Program Service Revenue	2a	CONVENTIONS, CONFERENCES AND MEETINGS	900099	4,003,773.	4,003,773.			
	b	PUBLICATIONS	900099	3,443.	3,443.			
	c	MEMBERSHIP DUES & ASSESSMENTS	900099	14,291,315.	14,291,315.			
	d	EXHIBIT SPACE RENTAL	900099	14,306,225.	14,306,225.			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		32,604,756.				
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	STMT 3	435,177.		435,177.	
4		Income from investment of tax-exempt bond proceeds		NONE				
5		Royalties		NONE				
6a		Gross Rents	(i) Real	(ii) Personal				
			189,400.					
			b	Less: rental expenses	184,001.			
			c	Rental income or (loss)	5,399.			
d		Net rental income or (loss)		5,399.				
7a		Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
				7,094,936.				
			b	Less: cost or other basis and sales expenses	7,596,278.			
			c	Gain or (loss)	-501,342.			
d	Net gain or (loss)		-501,342.					
8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18.	a						
		b	Less: direct expenses					
		c	Net income or (loss) from fundraising events		NONE			
9a	Gross income from gaming activities. See Part IV, line 19.	a						
		b	Less: direct expenses					
		c	Net income or (loss) from gaming activities		NONE			
10a	Gross sales of inventory, less returns and allowances	a						
		b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory.		NONE			
Miscellaneous Revenue		Business Code						
11a								
b								
c								
d	All other revenue							
e	Total. Add lines 11a-11d		NONE					
12	Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e		32,543,990.	32,604,756.		435,177.		

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 . . .	NONE			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	NONE			
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	NONE			
4 Benefits paid to or for members	NONE			
5 Compensation of current officers, directors, trustees, and key employees	3,689,988.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . .	NONE			
7 Other salaries and wages	2,817,203.			
8 Pension plan contributions (include section 401 (k) and section 403(b) employer contributions). .	159,066.			
9 Other employee benefits	493,912.			
10 Payroll taxes	296,593.			
11 Fees for services (non-employees):				
a Management	NONE			
b Legal	220,686.			
c Accounting	49,187.			
d Lobbying	NONE			
e Professional fundraising services. See Part IV, line 17	NONE			
f Investment management fees	7,673.			
g Other	36,042.			
12 Advertising and promotion	NONE			
13 Office expenses	215,870.			
14 Information technology	27,025.			
15 Royalties	NONE			
16 Occupancy	1,234,505.			
17 Travel	217,699.			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	NONE			
19 Conferences, conventions, and meetings	5,379,067.			
20 Interest	NONE			
21 Payments to affiliates	NONE			
22 Depreciation, depletion, and amortization . . .	70,650.			
23 Insurance	NONE			
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a LEGAL & REGULATORY -----	1,417,966.			
b GOVERNMENT AFFAIRS -----	1,670,752.			
c COMMUNICATIONS -----	3,556,928.			
d MISCELLANEOUS -----	309,456.			
e DUES & CONTRIBUTIONS -----	142,688.			
f All other expenses -----	256,468.			
25 Total functional expenses. Add lines 1 through 24f	22,269,424.			
26 Joint Costs. Check here <input type="checkbox"/> If following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	735.	1	1,000.
	2	Savings and temporary cash investments	8,672,365.	2	12,029,435.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	2,156,225.	4	1,897,405.
	5	Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sales or use		8	
	9	Prepaid expenses and deferred charges	1,508,494.	9	341,717.
	10a	Land, buildings, and equipment: cost basis	10a 927,462.		
	b	Less: accumulated depreciation. Complete Part VI of Schedule D.	10b 830,131.		
	11	Investments - publicly traded securities	135,458.	10c	97,331.
	12	Investments - other securities. See Part IV, line 11	13,112,526.	11	8,936,746.
	13	Investments - program-related. See Part IV, line 11		12	
	14	Intangible assets		13	
	15	Other assets. See Part IV, line 11	1,176.	14	
16	Total assets. Add lines 1 through 15 (must equal line 34)	25,586,979.	15	5,976.	
Liabilities	17	Accounts payable and accrued expenses	2,146,546.	17	996,173.
	18	Grants payable		18	
	19	Deferred revenue	8,169,646.	19	NONE
	20	Tax-exempt bond liabilities		20	
	21	Escrow 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	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable.		24	
	25	Other liabilities. Complete Part X of Schedule D	4,511,288.	25	6,283,958.
	26	Total liabilities. Add lines 17 through 25.	14,827,480.	26	7,280,131.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	10,081,973.	27	15,596,487.
	28	Temporarily restricted net assets	677,526.	28	432,992.
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	10,759,499.	33	16,029,479.	
34	Total liabilities and net assets/fund balances	25,586,979.	34	23,309,610.	

Part XI Financial Statements and Reporting

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
b	Were the organization's financial statements audited by an independent accountant?	X	
c	If "Yes" to lines 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?	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
b	If "Yes," did the organization undergo the required audit or audits?		

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ To be completed by organizations described below.
▶ Attach to Form 990 or Form 990-EZ.

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

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

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

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

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

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

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

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.
See the instructions for Schedule C for details.

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

Part I-B To be completed by all organizations exempt under section 501(c)(3).
See the instructions for Schedule C for details.

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

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).
See the instructions for Schedule C for details.

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

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

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

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

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No" OR if Part III-A, question 3 is answered "Yes." See Schedule C instructions for details.

Table with 3 columns: Question, Yes, No. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid); 2a Current year; 2b Carryover from last year; 2c Total; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?; 5 Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)

Part IV Supplemental Information

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

Series of horizontal dashed lines for providing supplemental information.

Part IV Supplemental Information *(continued)*

Area with horizontal dashed lines for supplemental information.

Supplemental Financial Statements

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Name of the organization

Employer identification number

NATIONAL MINING ASSOCIATION

52-1916480

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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... Yes No, 6 Did the organization inform all grantees... Yes No.

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

Table with 2 columns: Description, Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a-2d if the organization held a qualified conservation contribution... 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Yes No, 6 Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? Yes No, 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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

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

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

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

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

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

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

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

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

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

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

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

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		39,239.	25,233.	14,006.
d Equipment		467,867.	404,595.	63,272.
e Other		420,356.	400,303.	20,053.
Total. Add lines 1a-1e. (Column (d) should equal Form 990, Part X, column (B), line 10(c).)				97,331.

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives and other financial products		
Closely-held equity interests		
Other _____		
Total. (Column (b) should equal Form 990, Part X, col. (B) line 12.) ▶		

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

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

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

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

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

(a) Description of liability	(b) Amount
Federal income taxes	
DUE TO RELATED PARTY	82,800.
CAPITAL LEASE	272,531.
ACCRUED PENSION OBLIGATION	5,928,627.
Total. (Column (b) should equal Form 990, Part X, col. (B) line 25.) ▶	6,283,958.

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.

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	32,543,990.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	22,269,424.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	10,274,566.
4	Net unrealized gains (losses) on investments	4	-2,122,932.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	-355,000.
8	Other (Describe in Part XIV)	8	-2,526,654.
9	Total adjustments (net). Add lines 4-8	9	-5,004,586.
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9.	10	5,269,980.

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

1	Total revenue, gains, and other support per audited financial statements	1	30,605,059.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-2,122,932.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	-2,122,932.
3	Subtract line 2e from line 1	3	32,727,991.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-184,001.
c	Add lines 4a and 4b	4c	-184,001.
5	Total revenue. Add lines 3 and 4c. (This should equal Form 990, Part I, line 12.)	5	32,543,990.

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

1	Total expenses and losses per audited financial statements	1	22,453,425.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	184,001.
e	Add lines 2a through 2d	2e	184,001.
3	Subtract line 2e from line 1	3	22,269,424.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)	5	22,269,424.

Part XIV Supplemental Information

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

SEE PAGE 5

Part XIV Supplemental Information (continued)

SCHEDULE D, PART XI

LINE 8 - OTHER

PENSION RELATED CHANGES (\$2,526,654)

SCHEDULE D, PART XI

LINE 7 PRIOR PERIOD ADJUSTMENTS

ACCRUED CONTRIBUTION TO RETIREMENT PLAN MADE AFTER 12/07 990 FILING

\$355,000

SCHEDULE D

PART XII, OTHER REVENUE ON RETURN, NOT ON FINANCIAL STATEMENTS

SUBTENANT RENTAL EXPENSES REPORTED ON LINE 6B (\$184,001)

SCHEDULE D

PART XIII, EXPENSES ON RETURN, NOT ON FINANCIAL STATEMENTS

SUBTENANT RENTAL EXPENSES REPORTED ON LINE 6B (\$184,001)

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

OMB No. 1545-0047

2008

Open to Public Inspection

Name of the organization

NATIONAL MINING ASSOCIATION

Employer identification number

52-1916480

Part I Questions Regarding Compensation

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.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If line 1a is 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

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?

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

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a:

- a** Receive a severance payment or change of control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only 501(c)(3) and 501(c)(4) organizations must complete lines 5-8.

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

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1a		
1b		X
2	X	
3		
4a	X	
4b		X
4c		X
5a		
5b		
6a		
6b		
7		
8		

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

Schedule J (Form 990) 2008

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

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(i) KRAIG NAASZ (THROUGH 9/08)	419,605.	NONE	327,609.	41,219.	21,191.	809,624.	NONE
(ii) KRAIG NAASZ (THROUGH 9/08)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) HAROLD QUINN JR	365,824.	184,000.	37,173.	84,945.	21,926.	693,868.	NONE
(ii) HAROLD QUINN JR	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) MOYA PHELLEPS	139,380.	46,900.	21,673.	57,798.	9,390.	275,141.	NONE
(ii) MOYA PHELLEPS	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) MARY SWEENEY	145,743.	34,000.	14,946.	49,301.	21,249.	265,239.	NONE
(ii) MARY SWEENEY	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) BRUCE WATZMAN	212,703.	50,500.	17,319.	97,053.	16,658.	394,233.	NONE
(ii) BRUCE WATZMAN	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) DANIEL GERKIN	214,703.	44,000.	17,693.	109,480.	16,104.	401,980.	NONE
(ii) DANIEL GERKIN	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) MERLYN NOLAN	259,643.	64,000.	16,010.	44,370.	21,926.	405,949.	NONE
(ii) MERLYN NOLAN	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) CAROL RAULSTON	209,883.	54,500.	25,767.	39,209.	10,577.	339,936.	NONE
(ii) CAROL RAULSTON	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) KAREN BENNETT	130,110.	28,000.	10,744.	39,764.	21,186.	229,804.	NONE
(ii) KAREN BENNETT	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) BRENDA CORDOVA	99,883.	103,261.	23,574.	10,852.	8,882.	246,452.	NONE
(ii) BRENDA CORDOVA	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) DAVID FINKENBINDER	136,503.	28,000.	11,947.	39,349.	15,493.	231,292.	NONE
(ii) DAVID FINKENBINDER	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) GLENN KELLY	200,383.	31,900.	510.	28,188.	9,661.	270,642.	NONE
(ii) GLENN KELLY	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) LUKE POPOVICH	119,883.	27,000.	23,628.	16,896.	9,327.	196,734.	NONE
(ii) LUKE POPOVICH	NONE	NONE	NONE	NONE	NONE	NONE	NONE
(i) _____	_____	_____	_____	_____	_____	_____	_____
(ii) _____	_____	_____	_____	_____	_____	_____	_____
(i) _____	_____	_____	_____	_____	_____	_____	_____
(ii) _____	_____	_____	_____	_____	_____	_____	_____
(i) _____	_____	_____	_____	_____	_____	_____	_____
(ii) _____	_____	_____	_____	_____	_____	_____	_____

Part III Supplemental Information

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

SCHEDULE J

PART I, LINE 4

LINE 4A KRAIG NAASZ - \$210,937 SEVERANCE PAYMENT

SCHEDULE J (FORM 990)

PART 1A

THREE SENIOR STAFF WERE PROVIDED ANNUAL SOCIAL CLUB DUES AS PART OF THEIR

COMPENSATION PACKAGE. THE PURPOSE IS TO PROVIDE THE APPROPRIATE

ATMOSPHERE WHEN MEETING WITH MEMBERS AND CONGRESSIONAL STAFFERS.

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the Organization

Employer Identification number

NATIONAL MINING ASSOCIATION

52-1916480

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KEITH ALESSI DIRECTOR	1.	X					NONE	NONE	NONE	
JACK ATWATER DIRECTOR	1.	X					NONE	NONE	NONE	
PHILLIPS BAKER JR DIRECTOR	1.	X					NONE	NONE	NONE	
ROBERT BENSON DIRECTOR	1.	X					NONE	NONE	NONE	
DON BLANKENSHIP DIRECTOR	1.	X					NONE	NONE	NONE	
JOHN BLASCHAK DIRECOTR	1.	X					NONE	NONE	NONE	
ALEX BOULTON DIRECTOR	1.	X					NONE	NONE	NONE	
JAMES BOYD DIRECTOR	1.	X					NONE	NONE	NONE	
MICHAEL BROWN DIRECTOR	1.	X					NONE	NONE	NONE	
FRANK CALANDRA JR DIRECTOR	1.	X					NONE	NONE	NONE	
DAVID CAMPBELL DIRECTOR	1.	X					NONE	NONE	NONE	
JOSEPH CARRABBA DIRECTOR	1.	X					NONE	NONE	NONE	
GERARD CARROLL DIRECTOR	1.	X					NONE	NONE	NONE	
JOSPEH CRAFT III DIRECTOR	1.	X					NONE	NONE	NONE	
CHRISTOPHER CURFMAN DIRECTOR	1.	X					NONE	NONE	NONE	
GENE DIXON DIRECTOR	1.	X					NONE	NONE	NONE	
GARRY DRUMMOND DIRECTOR	1.	X					NONE	NONE	NONE	
RAYMOND DUBOIS DIRECTOR	1.	X					NONE	NONE	NONE	
MARK DUNN DIRECTOR	1.	X					NONE	NONE	NONE	
ROBERT EVANS DIRECTOR	1.	X					NONE	NONE	NONE	
DONALD EWIGLEBEN DIRECTOR	1.	X					NONE	NONE	NONE	

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

Schedule J-2 (Form 990) 2008

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SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the Organization

Employer Identification number

NATIONAL MINING ASSOCIATION

52-1916480

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID FARNSWORTH DIRECTOR	1.	X					NONE	NONE	NONE	
CLIFF FORREST DIRECTOR	1.	X					NONE	NONE	NONE	
JOHN GALASSINI DIRECTOR	1.	X					NONE	NONE	NONE	
TIM GITZEL DIRECTOR	1.	X					NONE	NONE	NONE	
JOHN GRISHAM DIRECTOR	1.	X					NONE	NONE	NONE	
LEROY HAGENBUCH DIRECTOR	1.	X					NONE	NONE	NONE	
PETER HALPIN DIRECTOR	1.	X					NONE	NONE	NONE	
JOHN HAMRICK DIRECTOR	1.	X					NONE	NONE	NONE	
DOUGLAS HARDMAN DIRECTOR	1.	X					NONE	NONE	NONE	
J. BRETT HARVEY DIRECTOR	1.	X					NONE	NONE	NONE	
BENNETT HATFIELD DIRECTOR	1.	X					NONE	NONE	NONE	
RON HOCHSTEIN DIRECTOR	1.	X					NONE	NONE	NONE	
ROBERT HOGAN JR DIRECTOR	1.	X					NONE	NONE	NONE	
DOUG HORSWILL DIRECTOR	1.	X					NONE	NONE	NONE	
THOMAS JANECK DIRECTOR	1.	X					NONE	NONE	NONE	
CHARLES JEANNES DIRECTOR	1.	X					NONE	NONE	NONE	
TONY JENSEN DIRECTOR	1.	X					NONE	NONE	NONE	
ROBERT JORNAYVAZ DIRECTOR	1.	X					NONE	NONE	NONE	
GREG LANG DIRECTOR	1.	X					NONE	NONE	NONE	
GUY LEBLANC DIRECTOR	1.	X					NONE	NONE	NONE	
STEVEN LEER DIRECTOR	1.	X					NONE	NONE	NONE	

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

Schedule J-2 (Form 990) 2008

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

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service

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

Name of the Organization

Employer Identification number

NATIONAL MINING ASSOCIATION

52-1916480

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
RICHARD LITT DIRECTOR	1.	X					NONE	NONE	NONE	
KEVIN LOUGHREY DIRECTOR	1.	X					NONE	NONE	NONE	
TOM MACKALL DIRECTOR	1.	X					NONE	NONE	NONE	
MICHAEL MCLANAHAN DIRECTOR	1.	X					NONE	NONE	NONE	
ROBERT MURRAY DIRECTOR	1.	X					NONE	NONE	NONE	
FRED NELSON DIRECTOR	1.	X					NONE	NONE	NONE	
RICHARD O'BRIEN DIRECTOR	1.	X					NONE	NONE	NONE	
DAVID POTTER DIRECTOR	1.	X					NONE	NONE	NONE	
MICHAEL QUILLEN DIRECTOR	1.	X					NONE	NONE	NONE	
JOHN RICH JR DIRECTOR	1.	X					NONE	NONE	NONE	
DUANE RICHARDS DIRECTOR	1.	X					NONE	NONE	NONE	
GEORGE RICHMOND DIRECTOR	1.	X					NONE	NONE	NONE	
DANIEL ROLING DIRECTOR	1.	X					NONE	NONE	NONE	
BRYAN RONCK DIRECTOR	1.	X					NONE	NONE	NONE	
BILL SHARRER DIRECTOR	1.	X					NONE	NONE	NONE	
MARK SMITH DIRECTOR	1.	X					NONE	NONE	NONE	
MARK SNYDER DIRECTOR	1.	X					NONE	NONE	NONE	
ROBERT STENGER DIRECTOR	1.	X					NONE	NONE	NONE	
BRIAN SULLIVAN DIRECTOR	1.	X					NONE	NONE	NONE	
TIMOTHY SULLIVAN DIRECTOR	1.	X					NONE	NONE	NONE	
MICHAEL SUTHERLIN DIRECTOR	1.	X					NONE	NONE	NONE	

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

Schedule J-2 (Form 990) 2008

SCHEDULE J-2
(Form 990)

Continuation Sheet for Form 990

OMB No. 1545-0047

2008

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

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

Name of the Organization

Employer Identification number

NATIONAL MINING ASSOCIATION

52-1916480

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES UNGUREAN DIRECTOR	1.	X						NONE	NONE	NONE
JOSEPH USIBELLI JR DIRECTOR	1.	X						NONE	NONE	NONE
WAYNE WAGNER DIRECTOR	1.	X						NONE	NONE	NONE
DENNIS WHEELER DIRECTOR	1.	X						NONE	NONE	NONE
RICHARD WHITING DIRECTOR	1.	X						NONE	NONE	NONE
RED CONGER DIRECTOR	1.	X						NONE	NONE	NONE
GREGORY BOYCE VICE CHAIRMAN	1.	X		X				NONE	NONE	NONE
GARY GOLDBERG CHARIMAN, VICE CHAIRMAN	1.	X		X				NONE	NONE	NONE
FRANCIS MCALLISTER DIRECTOR	1.	X						NONE	NONE	NONE
JAMES ROBERTS IMMEDIATE PAST CHAIRMAN	1.	X						NONE	NONE	NONE
KRAIG NAASZ (THROUGH 9/08) PRESIDENT & CEO	35.			X				747,214.	NONE	62,410.
HAROLD QUINN JR PRESIDENT & CEO/SECRETARY	35.			X				586,997.	NONE	106,871.
MOYA PHELLEPS SVP MEMBERSHIP (TREASURER)	35.			X				207,953.	NONE	67,188.
ROGER ROBERTS TREASURER (SVP FINANCE)	35.			X				95,367.	NONE	8,653.
MARY SWEENEY ASSISTANT SECRETARY	35.			X				194,689.	NONE	70,550.
BRUCE WATZMAN SECRETARY	35.			X				280,522.	NONE	113,711.
DANIEL GERKIN SVP POLITICAL AFFAIRS	35.			X				276,396.	NONE	125,584.
MERLYN NOLAN SVP GOVERNMENT AFFAIRS	35.			X				339,653.	NONE	66,296.
CAROL RAULSTON SVP COMMUNICATIONS	35.			X				290,150.	NONE	49,786.
KAREN BENNETT VP ENVIRONMENTAL AFFAIRS	35.					X		168,854.	NONE	60,950.
BRENDA CORDOVA VP FINANCE	35.					X		226,718.	NONE	19,734.

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

Schedule J-2 (Form 990) 2008

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SCHEDULE J-2
(Form 990)

Department of the Treasury
Internal Revenue Service

Continuation Sheet for Form 990

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

OMB No. 1545-0047

2008

Open to Public
Inspection

Name of the Organization

Employer Identification number

NATIONAL MINING ASSOCIATION

52-1916480

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID FINKENBINDER VP CONGRESSIONAL AFFAIRS	35.					X		176,450.	NONE	54,842.
GLENN KELLY VP GOVERNMENT AFFAIRS	35.					X		232,793.	NONE	37,849.
LUKE POPOVICH VP EXTERNAL COMMUNICATIONS	35.					X		170,511.	NONE	26,223.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J-2 (Form 990) 2008

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

OMB No. 1545-0047

2008

**Open to Public
Inspection**

Employer identification number

NATIONAL MINING ASSOCIATION

52-1916480

FORM 990, PART VI

SECTION C. DISCLOSURE LINE 19

THE ORGANIZATION DOES NOT GENERALLY MAKE ITS GOVERNING DOCUMENTS AND

FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC.

Multiple horizontal dashed lines for text entry.

Name of the organization

Employer identification number

NATIONAL MINING ASSOCIATION

52-1916480

FORM 990, PART VI

SECTION B. POLICIES, LINE 15

THE ORGANIZATION UTILIZES A COMPENSATION CONSULTANT TO PERFORM A

BI-ANNUAL COMPENSATION SURVEY OF COMPARABLE TRADE ASSOCIATIONS. NATIONAL

MINING ASSOCIATION'S GOAL WHEN SETTING SALARIES FOR ALL EMPLOYEES IS TO

HAVE THEIR COMPENSATION AT THE 75TH PERCENTILE OF COMPARABLE TRADE

ASSOCIATIONS USING THE RESULTS FROM THIS SURVEY. FURTHERMORE, THE

PRESIDENT & CEO'S SALARY IS NEGOTIATED VIA CONTRACT WITH THE FOLLOWING

BOARD MEMBERS: CHAIRMAN, VICE CHAIRMAN, AND CHAIRMAN OF THE AUDIT AND

FINANCE COMMITTEE.

Name of the organization

Employer identification number

NATIONAL MINING ASSOCIATION

52-1916480

FORM 990, PART VI

SECTION A. GOVERNING BODY AND MANAGEMENT, LINE 6

ANY ORGANIZATION, CORPORATION, PARTNERSHIP, COMPANY OR INDIVIDUAL ENGAGED

IN OR CLOSELY ASSOCIATED WITH MINING ACTIVITIES SHALL BE ELIGIBLE FOR

MEMBERSHIP. MEMBERSHIP IN THE ASSOCIATION CONSISTS OF THE FOLLOWING

CLASSES:

PRODUCER MEMBERSHIP - ANY ORGANIZATION, CORPORATION, PARTNERSHIP, COMPANY

OR INDIVIDUAL ENGAGED IN THE MINING AND PRODUCTION OF COAL OR MINERALS.

PRODUCERS MEMBERS ARE DIVIDED INTO TWO SEPARATE CLASSES (I) COAL PRODUCER

MEMBERS AND (II) MINERAL PRODUCER MEMBERS.

MANUFACTURERS AND SERVICES MEMBERSHIP - ANY ORGANIZATION, CORPORATION,

PARTNERSHIP, COMPANY OR INDIVIDUAL ENGAGED IN THE MANUFACTURE OF MINING

MACHINERY, EQUIPMENT AND SUPPLIES, MINING RELATED SERVICES OR CLOSELY

ASSOCIATED WITH AND INTERESTED IN PROMOTING THE GENERAL WELFARE OF THE

MINING INDUSTRY, BUT NOT ENGAGED IN MINING.

Name of the organization

Employer identification number

NATIONAL MINING ASSOCIATION

52-1916480

FORM 990, PART VI

SECTION A. GOVERNING BODY AND MANAGEMENT, LINE 7A

THE BOARD OF DIRECTORS SHALL CONSIST OF DIRECTORS SELECTED AS FOLLOWS:

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

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

3) THE PRESIDENT OF THE ASSOCIATION, EX OFFICIO.

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

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

FORM 990, PART VI

SECTION A. GOVERNING BODY AND MANAGEMENT LINE 10

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 III, LINE 1 - ORGANIZATION'S MISSION
=====

NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL SUPPORT FOR THE MINING INDUSTRY AND TO HELP THE NATION REALIZE THE ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING CAPABILITY. OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE THE PUBLIC POLICY PROCESS ON THE MOST SIGNIFICANT AND TIMELY ISSUES THAT IMPACT OUR ABILITY TO LOCATE, PERMIT, MINE, PROCESS, TRANSPORT AND UTILIZE THE NATION'S VAST COAL AND MINERAL RESOURCES.

NMA SERVES ITS MEMBERSHIP BY:

PROMOTING THE PRODUCTION AND USE OF COAL AND MINERAL RESOURCES PRODUCED BY THE U.S. 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 U.S. MINING INDUSTRY;

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

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

=====

NAME AND ADDRESS -----	DESCRIPTION OF SERVICES COMPENSATION -----
WEBER MERRITT 1331 H STREET NW, SUITE 1100 WASHINGTON, DC 20005	PR MANAGEMENT 1,471,000.
LUNTZ MALANSKY 1101 KING STREET STE 110 ALEXANDRIA, VA 22314	STRATEGIC RESEARCH 313,015.
CMAC 2340 E TRINITY MILLS ROAD, STE 107 CARROLLTON, TX 75006	TRANSPORTATION SVC 294,100.
THE NICKLES GROUP 601 13TH ST NW WASHINGTON, DC 2005-3846	CONSULTANT 275,000.
TROUTMAN SANDERS 401 9TH STREET NW, SUITE 1000 WASHINGTON, DC 20004	LEGAL SERVICES 255,964.
TOTAL COMPENSATION	----- 2,609,079. =====

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST AND DIVIDENDS	435,177.			435,177.
TOTALS	435,177.			435,177.

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE
 =====

OTHER INCOME

SUBLEASE INCOME	189,400.

	189,400.
	=====

OTHER DEDUCTIONS

RENT	140,263.
RENT/CAM	29,644.
ALLOCATED DEPRECIATION	4,652.
STORAGE	1,442.
PARKING	8,000.

	184,001.
	=====

RENT AND ROYALTY SUMMARY

=====

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
-----	-----	-----	-----	-----
SUBTENANT INCOME	189,400.		184,001.	5,399.
	-----	-----	-----	-----
TOTALS	189,400.		184,001.	5,399.
	=====	=====	=====	=====

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION	ENDING BOOK VALUE	COST OR FMV
-----	-----	-----
MUTUAL FUNDS - EQUITIES	8,936,746.	FMV
TOTALS	----- 8,936,746. =====	

Description of Property

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Method	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
LEASEHOLD IMPROVEM	06/24/2002	37,240.	100.000			37,240.	20,792.	24,516.	SL		10.000				3,724.
LEASEHOLD IMPROVEM	06/30/2005	1,999.	100.000			1,999.	517.	717.	SL		10.000				200.
99-01 COMP SOFTWARE	1999-2001	180,232.	100.000			180,232.	180,232.	180,232.	SL		5.000				
02 COMP SOFTWARE	06/24/2002	21,337.	100.000			21,337.	21,337.	21,337.	SL		3.000				
02 COMPUT SOFTWARE	06/24/2002	20,620.	100.000			20,620.	11,513.	13,575.	SL		10.000				2,062.
BACKUP SOFTWARE	04/18/2006	1,642.	100.000			1,642.	557.	885.	SL		5.000				328.
DELL SM BUS LICENS	06/30/2006	4,424.	100.000			4,424.	1,327.	2,212.	SL		5.000				885.
DELL SERV SOFTWARE	06/02/2007	773.	100.000			773.	90.	245.	SL		5.000				155.
DELL 2007 OFFICE	11/27/2007	17,958.	100.000			17,958.	299.	3,891.	SL		5.000				3,592.
DELL 7 ACROBAT	01/27/2008	796.	100.000			796.		159.	SL		5.000				159.
DMI DELL SM BUS	05/27/2008	2,024.	100.000			2,024.		236.	SL		5.000				236.
PEACHTREE ACCTG	08/27/2008	878.	100.000			878.		73.	SL		5.000				73.
1995 COMP EQUIP	1995	6,273.	100.000			6,273.	6,273.	6,273.	SL		3.000				
1996 COMP EQUIPMEN	1996	11,737.	100.000			11,737.	11,737.	11,737.	SL		3.000				
1997 COMP EQUIPMEN	1997	809.	100.000			809.	809.	809.	SL		3.000				
1998 COMP EQUIPMEN	1998	14,926.	100.000			14,926.	14,926.	14,926.	SL		3.000				
1999 COMP EQUIPMEN	1999	7,170.	100.000			7,170.	7,170.	7,170.	SL		3.000				
2000 COMP EQUIPMEN	2000	43,064.	100.000			43,064.	43,064.	43,064.	SL		3.000				
2002 COMP EQUIPMEN	2002	19,660.	100.000			19,660.	19,660.	19,660.	SL		3.000				
Less: Retired Assets															
Subtotals															

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Accumulated amortization	Ending accumulated amortization	Code	Life	Current-year amortization
Less: Retired Assets							
Subtotals							
TOTALS							
TOTALS							

*Assets Retired
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2008

Description of Property

DEPRECIATION

Asset description	Date placed in service	Unadjusted Cost or basis	Bus. %	179 exp. reduction in basis	Basis Reduction	Basis for depreciation	Beginning Accumulated depreciation	Ending Accumulated depreciation	Method	Conv.	Life	ACRS class	MA CRS class	Current-year 179 expense	Current-year depreciation
2003 COMP EQUIPMEN	2003	16,576.	100.000			16,576.	16,576.	16,576.	SL		3.000				
2004 COMP EQUIPMEN	2004	22,699.	100.000			22,699.	22,699.	22,699.	SL		3.000				
2005 COMP EQUIPMEN	2005	20,791.	100.000			20,791.	20,213.	20,791.	SL		3.000				578.
2006 COMP EQUIPMEN	2006	16,774.	100.000			16,774.	6,084.	9,788.	SL		3.000				3,704.
2007 COMP EQUIP	2007	8,490.	100.000			8,490.	915.	2,613.	SL		5.000				1,698.
2008 COMP EQUIPMEN	03/27/2008	28,214.	100.000			28,214.		5,644.	SL		5.000				5,644.
1995-2002 FURN	1995-2002	14,598.	100.000			14,598.	14,598.	14,598.	SL		5.000				
2002 FURNITURE	06/02/2002	336,072.	100.000			336,072.	291,616.	336,072.	SL		6.000				44,456.
2002 FURNITURE	06/02/2002	2,938.	100.000			2,938.	1,641.	1,935.	SL		10.000				294.
1995 FURNITURE	1995	3,897.	100.000			3,897.	3,897.	3,897.	SL		3.000				
2000 FURNITURE	04/21/2000	1,586.	100.000			1,586.	1,586.	1,586.	SL		3.000				
2001 FURNITURE	04/21/2000	5,377.	100.000			5,377.	5,377.	5,377.	SL		3.000				
2002 FURNITURE	09/01/2002	18,741.	100.000			18,741.	17,180.	18,741.	SL		6.000				1,561.
2003 FURNITURE	02/25/2003	5,741.	100.000			5,741.	4,306.	5,263.	SL		6.000				957.
2005 FURNITURE	09/08/2005	2,099.	100.000			2,099.	1,632.	2,099.	SL		3.000				467.
2006 FURNITURE	2006	14,532.	100.000			14,532.	5,776.	7,901.	SL		5.000				2,125.
2007 FURNITURE	2007	7,648.	100.000			7,648.	430.	1,960.	SL		5.000				1,530.
2008 FURNITURE	2008	7,127.	100.000			7,127.		874.	SL		5.000				874.
Less: Retired Assets															
Subtotals		927,462.				927,462.	754,829.	830,131.							75,302.

Listed Property

Less: Retired Assets															
Subtotals		927,462.				927,462.	754,829.	830,131.							75,302.

AMORTIZATION

Asset description	Date placed in service	Cost or basis	Ending Accumulated amortization	Code	Life	Current-year amortization
TOTALS		927,462.	830,131.			75,302.

*Assets Retired
USA
8X9024 1.000

Return of Organization Exempt From Income Tax

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

A For the **2007** calendar year, or tax year beginning , 2007, and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type. See Specific Instructions.	C Name of organization NATIONAL MINING ASSOCIATION Number and street (or P.O. box if mail is not delivered to street address) Room/suite 101 CONSTITUTION AVENUE, N.W. 500 EAST City or town, state or country, and ZIP + 4 WASHINGTON, DC 20001-2133	D Employer identification number 52-1916480	E Telephone number (202) 463-9789	F Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ▶
		• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).	H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) If "Yes," enter number of affiliates ▶ H(c) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list. See instructions.) H(d) Is this a separate return filed by an organization covered by a group ruling? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No I Group Exemption Number ▶ M Check <input checked="" type="checkbox"/> if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).		
G Website: ▶ WWW.NMA.ORG		J Organization type (check only one) <input checked="" type="checkbox"/> 501(c) (06) ◀ (insert no.) 4947(a)(1) or 527			
K Check here <input type="checkbox"/> if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.		L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ 18,120,407.			

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Revenue	1	Contributions, gifts, grants, and similar amounts received:			
		a	Contributions to donor advised funds	1a	
		b	Direct public support (not included on line 1a)	1b	
		c	Indirect public support (not included on line 1a)	1c	
		d	Government contributions (grants) (not included on line 1a)	1d	
		e	Total (add lines 1a through 1d) (cash \$ _____ noncash \$ _____)	1e	
		2	Program service revenue including government fees and contracts (from Part VII, line 93)	2	1,641,924.
		3	Membership dues and assessments	3	11,332,308.
		4	Interest on savings and temporary cash investments	4	117,688.
		5	Dividends and interest from securities	5	1,171,533.
		6a	Gross rents	6a	207,433.
		6b	Less: rental expenses	6b	202,011.
	6c	Net rental income or (loss). Subtract line 6b from line 6a	6c	5,422.	
	7	Other investment income (describe ▶ _____)	7		
	8a	Gross amount from sales of assets other than inventory	(A) Securities 8a	3,649,521.	
	8b	Less: cost or other basis and sales expenses	(B) Other 8b	3,750,167.	
	8c	Gain or (loss) (attach schedule)	8c	-100,646.	
	8d	Net gain or (loss). Combine line 8c, columns (A) and (B)	8d	-100,646.	
	9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>			
	9a	Gross revenue (not including \$ _____ of contributions reported on line 1b)	9a		
	9b	Less: direct expenses other than fundraising expenses	9b		
	9c	Net income or (loss) from special events. Subtract line 9b from line 9a	9c		
	10a	Gross sales of inventory, less returns and allowances	10a		
	10b	Less: cost of goods sold	10b		
	10c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a	10c		
	11	Other revenue (from Part VII, line 103)	11		
	12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11	12	14,168,229.	
Expenses	13	Program services (from line 44, column (B))	13		
	14	Management and general (from line 44, column (C))	14		
	15	Fundraising (from line 44, column (D))	15		
	16	Payments to affiliates (attach schedule)	16		
	17	Total expenses. Add lines 16 and 44, column (A)	17	17,871,092.	
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12	18	-3,702,863.	
	19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	16,950,997.	
	20	Other changes in net assets or fund balances (attach explanation)	20	-2,488,635.	
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20	21	10,759,499.	

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

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

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

Section 501(c) corporations required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for section 501(c) corporations required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization	Employer identification number
	NATIONAL MINING ASSOCIATION	52-1916480
	Number, street, and room or suite no. If a P.O. box, see instructions.	
File by the due date for filing your return. See instructions.	101 CONSTITUTION AVENUE, N.W.	
	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):

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

• The books are in the care of ▶ BRENDA CORDOVA

Telephone No. ▶ 202 463-2600 FAX No. ▶ _____

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

1 I request an automatic 3-month (6 months for a section 501(c) corporation required to file Form 990-T) extension of time until 08/15, 2008, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year 2007 or
- ▶ tax year beginning _____, _____, and ending _____, _____.

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

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

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

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a	Grants paid from donor advised funds (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b	Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>				
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25a	Compensation of current officers, directors, key employees, etc. listed in Part V-A	1,277,268.			
25b	Compensation of former officers, directors, key employees, etc. listed in Part V-B				
25c	Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26	Salaries and wages of employees not included on lines 25a, b, and c	3,234,595.			
27	Pension plan contributions not included on lines 25a, b, and c	974,909.			
28	Employee benefits not included on lines 25a-27	496,618.			
29	Payroll taxes	241,459.			
30	Professional fundraising fees				
31	Accounting fees	48,810.			
32	Legal fees	41,245.			
33	Supplies				
34	Telephone	77,693.			
35	Postage and shipping	16,996.			
36	Occupancy	1,318,711.			
37	Equipment rental and maintenance	63,121.			
38	Printing and publications				
39	Travel	225,839.			
40	Conferences, conventions, and meetings	322,886.			
41	Interest				
42	Depreciation, depletion, etc. (attach schedule)	76,983.			
43	Other expenses not covered above (itemize):				
43a	a STMT 5	9,453,959.			
43b	b				
43c	c				
43d	d				
43e	e				
43f	f				
43g	g				
44	Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	17,871,092.			

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

<p>What is the organization's primary exempt purpose? ► <u>SEE STATEMENT 6</u></p> <p>All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)</p>	<p>Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)</p>
<p>a <u>REPRESENTED THE INTERESTS OF MINING BEFORE CONGRESS, THE ADMINISTRATION, FEDERAL AGENCIES, THE JUDICIARY, AND THE MEDIA.</u></p> <p>-----</p> <p>-----</p> <p>-----</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>b <u>HELD SPECIALIZED SEMINARS, WORKSHOPS, MINEXPO INTERNATIONAL, AND OTHER SIGNIFICANT MEETINGS AND EVENTS.</u></p> <p>-----</p> <p>-----</p> <p>-----</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>c <u>PREPARED AND ISSUED A WEEKLY NEWSLETTER AS WELL AS STATISTICAL AND INFORMATIONAL PUBLICATIONS.</u></p> <p>-----</p> <p>-----</p> <p>-----</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>d</p> <p>-----</p> <p>-----</p> <p>-----</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>e Other program services (attach schedule)</p> <p>(Grants and allocations \$ _____) If this amount includes foreign grants, check here ► <input type="checkbox"/></p>	
<p>f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►</p>	

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year	
Assets	45 Cash - non-interest-bearing		45	
	46 Savings and temporary cash investments	5,603,147.	46 8,673,100.	
	47a Accounts receivable	47a 2,167,062.		
	b Less: allowance for doubtful accounts	47b 10,837.	47c 2,156,225.	
	48a Pledges receivable	48a		
	b Less: allowance for doubtful accounts	48b	48c	
	49 Grants receivable		49	
	50a Receivables from current and former officers, directors, trustees, and key employees (attach schedule)		50a	
	b Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) (attach schedule)		50b	
	51a Other notes and loans receivable (attach schedule)	51a		
	b Less: allowance for doubtful accounts	51b	51c	
	52 Inventories for sale or use		52	
	53 Prepaid expenses and deferred charges	806,970.	53 1,508,494.	
	54a Investments - publicly-traded securities STMT 7	<input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	16,086,707.	54a 13,112,526.
	b Investments - other securities (attach schedule)	<input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
	55a Investments - land, buildings, and equipment: basis	55a		
	b Less: accumulated depreciation (attach schedule)	55b	55c	
	56 Investments - other (attach schedule)		56	
	57a Land, buildings, and equipment: basis	57a 890,909.		
b Less: accumulated depreciation (attach schedule)	57b 755,451.	173,866.	57c 135,458.	
58 Other assets, including program-related investments (describe ▶ STMT 8)		4,756.	58 1,176.	
59 Total assets (must equal line 74). Add lines 45 through 58		23,974,984.	59 25,586,979.	
Liabilities	60 Accounts payable and accrued expenses	4,131,070.	60 6,271,267.	
	61 Grants payable		61	
	62 Deferred revenue	2,508,927.	62 8,169,646.	
	63 Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a Tax-exempt bond liabilities (attach schedule)		64a	
	b Mortgages and other notes payable (attach schedule)		64b	
	65 Other liabilities (describe ▶ STMT 9)		383,990.	65 386,567.
66 Total liabilities. Add lines 60 through 65		7,023,987.	66 14,827,480.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.			
	67 Unrestricted	15,039,493.	67 10,081,973.	
	68 Temporarily restricted	1,911,504.	68 677,526.	
	69 Permanently restricted		69	
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.			
	70 Capital stock, trust principal, or current funds		70	
	71 Paid-in or capital surplus, or land, building, and equipment fund		71	
	72 Retained earnings, endowment, accumulated income, or other funds		72	
	73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)		16,950,997.	73 10,759,499.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73		23,974,984.	74 25,586,979.

National Mining Association
 12/31/2007
 EIN 52-1916480

Form 990, Part II, Line 42
 Form 990, Part IV, Line 57a & 57b

	<u>Assets</u>	
	<u>12/31/2006</u>	<u>12/31/2007</u>
Computer equipment	213,587	188,970
Computer software	228,256	246,986
Computer - CBGS	0	2,486
Furniture, fixtures and equipment	404,360	413,229
Leasehold improvements	39,239	39,239
Totals	<u>885,442</u>	<u>890,910</u>

	<u>Disposals</u>	<u>12/31/2007</u>
	33,107	170,128
	0	215,356
	0	621
	0	348,040
	0	21,309
Totals	<u>33,107</u>	<u>755,454</u>

Accumulated depreciation

	<u>12/31/2006</u>	<u>12/31/2007</u>
Computer equipment	189,968	13,267
Computer software	212,139	3,217
Computer - CBGS	0	621
Furniture, fixtures and equipment	292,086	55,954
Leasehold improvements	17,385	3,924
Totals	<u>711,578</u>	<u>76,983</u>

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions.)

a	Total revenue, gains, and other support per audited financial statements		a	14,020,768.
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		-349,472.
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify): _____	b4		
	Add lines b1 through b4		b	-349,472.
c	Subtract line b from line a		c	14,370,240.
d	Amounts included on Part I, line 12, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): <u>SEE STATEMENT 10</u>	d2		-202,011.
	Add lines d1 and d2		d	-202,011.
e	Total revenue (Part I, line 12). Add lines c and d		e	14,168,229.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	18,073,103.
b	Amounts included on line a but not on Part I, line 17:			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify): <u>SEE STATEMENT 11</u>	b4		202,011.
	Add lines b1 through b4		b	202,011.
c	Subtract line b from line a		c	17,871,092.
d	Amounts included on Part I, line 17, but not on line a :			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify): _____	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17). Add lines c and d		e	17,871,092.

Part V-A Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated.) (See the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 12		1,277,268.	155,944.	7,320.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

- 75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 76
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)
c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to the organization? See the instructions for the definition of "related organization."
d Does the organization have a written conflict of interest policy?

Table with 2 columns: Yes, No. Rows 75b, 75c, 75d with 'X' marks in the No column.

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits (If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation (if not paid, enter -0-), (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 shows -0- in columns B, C, D, and E.

Part VI Other Information (See the instructions.)

- 76 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes.
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?
b If "Yes," has it filed a tax return on Form 990-T for this year?
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?
b If "Yes," enter the name of the organization and check whether it is exempt or nonexempt
81a Enter direct and indirect political expenditures. (See line 81 instructions.) NONE
b Did the organization file Form 1120-POL for this year?

Table with 2 columns: Yes, No. Rows 76, 77, 78a, 78b, 79, 80a, 81a, 81b with 'X' marks in the No column.

Part VI Other Information (continued)

82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 82b N/A 83a Did the organization comply with the public inspection requirements for returns and exemption applications? 83b X 84a Did the organization solicit any contributions or gifts that were not tax deductible? 84b N/A 85a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members? 85b X 85c 11,332,308. 85d 4,228,839. 85e 3,399,692. 85f 829,147. 85g X 85h X 86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A b Gross receipts, included on line 12, for public use of club facilities 86b N/A 87 501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a N/A b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A 88a At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX 88a X b At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI 88b X 89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 N/A; section 4912 N/A; section 4955 N/A b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction 89b N/A c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 N/A d Enter: Amount of tax on line 89c, above, reimbursed by the organization N/A e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? 89e X f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract? 89f X g For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year? 89g X 90a List the states with which a copy of this return is filed DC, b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.) 90b 33 91a The books are in care of BRENDA CORDOVA Telephone no. 202-463-2600 Located at 101 CONSTITUTION AVENUE, N.W. WASHINGTON, DC ZIP + 4 20001-2133 b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 91b X If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

Part VI Other Information (continued)

Yes No

- c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X
- If "Yes," enter the name of the foreign country ▶ _____
- 92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here
 and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 92 | _____ N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a STMT 13					1,641,924.
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					11,332,308.
95 Interest on savings and temporary cash investments			14	117,688.	
96 Dividends and interest from securities			14	1,171,533.	
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	5,422.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	-100,646.	
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				1,193,997.	12,974,232.
105 Total (add line 104, columns (B), (D), and (E)) ▶					14,168,229.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No. ▼	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
	STMT 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
- Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13).

106 Did the reporting organization **make** any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

107 Did the reporting organization **receive** any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No
	N/A

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a				
b				
c				
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No
	N/A

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer _____ Date _____
 Type or print name and title _____

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: 8/13/2008 Check if self-employed:
 Preparer's name (or yours if self-employed), address, and ZIP + 4: BOND BEEBE, A PROFESSIONAL CORP.
1421 PRINCE ST, SUITE 240
ALEXANDRIA, VA 22314
 EIN: _____ Phone no.: 703-684-0600

RENT AND ROYALTY INCOME

Taxpayer's Name NATIONAL MINING ASSOCIATION	Identifying Number 52-1916480
---	---

DESCRIPTION OF PROPERTY

SUBTENANT INCOME

Yes	No	Did you actively participate in the operation of the activity during the tax year?
-----	----	--

RENTAL INCOME		
OTHER INCOME		
	207,433.	
TOTAL GROSS INCOME		207,433.
OTHER EXPENSES:		
LEGAL AND OTHER PROFESSIONAL FEES	2,114.	
TAXES	29,342.	
OTHER EXPENSES	170,555.	
DEPRECIATION (SHOWN BELOW)		
LESS: Beneficiary's Portion		
AMORTIZATION		
LESS: Beneficiary's Portion		
DEPLETION		
LESS: Beneficiary's Portion		
TOTAL EXPENSES		202,011.
TOTAL RENT OR ROYALTY INCOME (LOSS)		5,422.

Less Amount to

Rent or Royalty		
Depreciation		
Depletion		
Investment Interest Expense		
Other Expenses		
Net Income (Loss) to Others		
Net Rent or Royalty Income (Loss)		5,422.
Deductible Rental Loss (if Applicable)		

SCHEDULE FOR DEPRECIATION CLAIMED

(a) Description of property	(b) Cost or unadjusted basis	(c) Date acquired	(d) ACRS des.	(e) Bus. %	(f) Basis for depreciation	(g) Depreciation in prior years	(h) Method	(i) Life or rate	(j) Depreciation for this year
JSA Totals									

SUPPLEMENT TO RENT AND ROYALTY SCHEDULE
=====

OTHER INCOME

207,433.

207,433.
=====

OTHER DEDUCTIONS

RENT 121,458.
CAM 32,785.
ALLOCATED DEPRECIATION 5,582.
STORAGE 1,730.
PARKING 9,000.

170,555.
=====

RENT AND ROYALTY SUMMARY

=====

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
-----	-----	-----	-----	-----
SUBTENANT INCOME	207,433.		202,011.	5,422.
TOTALS	207,433.		202,011.	5,422.
	=====	=====	=====	=====

FORM 990, PART I - OTHER DECREASES IN FUND BALANCES
 =====

DESCRIPTION -----	AMOUNT -----
UNREALIZED LOSS ON INVESTMENTS	349,472.
EFFECT OF ADOPTION OF RECOGNITION AND MEASUREMENT PROVISIONS OF FASB NO. 158	2,139,163.
TOTAL	----- 2,488,635. =====

FORM 990, PART II - OTHER EXPENSES
=====

DESCRIPTION -----	TOTAL -----
PENSION ADMINISTRATION	34,600.
LEGAL & REGULATORY	2,414,404.
GOVERNMENT AFFAIRS	1,226,640.
COMMUNICATIONS	3,000,762.
SPECIAL PROJECTS	753,706.
DUES & CONTRIBUTIONS	137,205.
INFORMATION TECHNOLOGY	31,414.
OFFICE EXPENSES & SUPPLIES	87,328.
OTHER PROFESSIONAL FEES	403,947.
SUBSCRIPTIONS AND PUBLICATIONS	125,842.
PERSONAL PROPERTY/OTHER TAX	9,846.
TRAINING & SEMINARS	35,457.
MISCELLANEOUS	1,283.
COAL-BASED GEN. STAKEHOLDERS	1,287,389.
TEMPORARY HELP	106,147.
LESS AMOUNTS ALLOCATED TO	
SUBTENANT RENTAL REPORTED ON	
LINE 6B	
TOTALS	-202,011.

	9,453,959.
	=====

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

NMA'S MISSION IS TO CREATE AND MAINTAIN A BROAD BASE OF POLITICAL SUPPORT FOR THE MINING INDUSTRY AND TO HELP THE NATION REALIZE THE ECONOMIC AND NATIONAL SECURITY BENEFITS OF AMERICA'S DOMESTIC MINING CAPABILITY. OUR OBJECTIVE IS TO ENGAGE IN AND INFLUENCE THE PUBLIC POLICY PROCESS ON THE MOST SIGNIFICANT AND TIMELY ISSUES THAT IMPACT OUR ABILITY TO LOCATE, PERMIT, MINE, PROCESS, TRANSPORT AND UTILIZE THE NATION'S VAST COAL AND MINERAL RESOURCES.

NMA SERVES ITS MEMBERSHIP BY:

PROMOTING THE PRODUCTION AND USE OF COAL AND MINERAL RESOURCES PRODUCED BY THE U.S. 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 U.S. 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 IV - INVESTMENTS - PUBLICLY TRADED SECURITIES

=====

DESCRIPTION -----	ENDING BOOK VALUE -----	COST OR FMV -----
REAL ESTATE INVESTMENT TRUSTS	511,955.	FMV
FIXED INCOME MUTUAL FUNDS	7,571,707.	FMV
MUTUAL FUNDS - EQUITIES	5,028,864.	FMV
TOTALS	----- 13,112,526. =====	

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
OTHER RECEIVABLES	1,176.
TOTALS	----- 1,176.
	=====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
DUE TO RELATED PARTY CAPITAL LEASE	82,800. 303,767.
TOTALS	----- 386,567. =====

FORM 990, PART IV-A - OTHER REVENUE ON RETURN BUT NOT ON BOOKS

=====

DESCRIPTION

AMOUNT

EXPENSES ALLOCATED AGAINST
RENTAL INCOME

-202,011.

TOTAL

-202,011.

=====

FORM 990, PART IV-B - OTHER EXPENSES ON BOOKS BUT NOT ON RETURN

=====

DESCRIPTION

AMOUNT

EXPENSES ALLOCATED AGAINST
RENTAL INCOME

202,011.

TOTAL

202,011.

=====

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES
 =====

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
KRAIG R. NAASZ 101 CONSTITUTION AVENUE, N.W. 500 EAST WASHINGTON, DC 20001-2133	PRESIDENT & CEO 35.00	816,652.	61,299.	3,000.
HAROLD QUINN 101 CONSTITUTION AVENUE, N.W. 500 EAST WASHINGTON, DC 20001-2133	SR. VP & LEGAL SECRETARY 35.00	319,765.	61,560.	3,000.
MOYA PHELLEPS 101 CONSTITUTION AVENUE, N.W. 500 EAST WASHINGTON, DC 20001-2133	SR.VP ADMINISTRATION & FINANCE 35.00	140,851.	33,085.	1,320.
SEE ATTACHED LIST - NOT COMPENSATED		NONE	NONE	NONE
GRAND TOTALS		1,277,268.	155,944.	7,320.



**National Mining Association
Board of Directors
Effective September 19, 2007
Updated as of February 2008**

Chairman

James F. Roberts
Chairman & CEO
Foundation Coal Corporation
Term Expires: 2009

Vice Chairman

Gary J. Goldberg
President and CEO
Rio Tinto Minerals
Term Expires: 2009

MINERAL PRODUCERS

Richard C. Adkerson
CEO
Freeport-McMoRan Copper & Gold
Term Expires: 2009

Gene B. Dixon
President
Kyanite Mining Corporation
Term Expires: 2008

Phillips S. Baker, Jr.
President & CEO
Hecla Mining Company
Term Expires: 2008

Mark Dunn
Vice President
J.R. Simplot Company
Term Expires: 2009

Alex C. Boulton
President
Brush Resources Inc.
Term Expires: 2008

Donald Ewigleben
President & CEO
AngloGold Ashanti North America Inc.
Term Expires: 2008

Michael R. Brown
Vice President-Environmental
Affairs
Graymont Western US Inc.
Term Expires: 2008

David W. Farnsworth
Manager, Mineral Activities
Monsanto
Term Expires: 2009

Joseph A. Carrabba
Chairman & CEO
Cleveland-Cliffs Inc.
Term Expires: 2009

Tim Gitzel
Senior Vice President & COO
Cameco Corporation
Term Expires: 2009

Gerard P. Carroll
Senior Vice President
National Gypsum Company
Term Expires: 2008

Peter T. Halpin
Chief Executive Officer
World Resources Company
Term Expires: 2009

John Hamrick
Mill Manager
Cotter Corporation
Term Expires: 2009

Ron Hochstein
President & CEO
Denison Mines (USA) Corp.
Term Expires: 2008

Doug H. Horswill
Sr. V.P., Env. & Corp. Affairs
Teck Cominco Limited
Term Expires: 2008

Thomas E. Janeck
Sr. V.P., Env. Health & Safety
Horsehead Corporation
Term Expires: 2009

Charles Jeannes
Executive Vice President, Corporate
Development
Goldcorp Inc.
Term Expires: 2008

Tony Jensen
President & CEO
Royal Gold, Inc.
Term Expires: 2009

Robert P. Jornayvaz
Managing Partner
Intrepid Potash
Term Expires: 2008

Greg Lang
Vice President, North America Region
Barrick Gold of North America
Term Expires: 2009

Guy L. Leblanc
Vice President, Canadian Salt
Morton Salt Division
Term Expires: 2009

Kevin Loughrey
President & CEO
Thompson Creek Metals Company
Term Expires: 2009

Francis R. McAllister
Chairman & CEO
Stillwater Mining Company
Term Expires: 2008

Dorian Nicol
Director, President & CEO
Queenstake Resources Ltd.
Term Expires: 2008

Richard T. O'Brien
President & CEO
Newmont Mining Corporation
Term Expires: 2009

Roger D. Sharpe
Senior Staff Geologist
U.S. Gypsum Company
Term Expires: 2009

Bill Sharrer
Vice President, Business Advancement
Chevron Mining
Term Expires: 2009

Dennis E. Wheeler
Chairman & CEO
Coeur, The Precious Metals Co.
Term Expires: 2008

COAL PRODUCERS

Robert L. Benson
President & CEO
The North American Coal Corporation
Term Expires: 2008

Donald Blankenship
Chairman, President & CEO
Massey Energy Company
Term Expires: 2009

John Blaschak
President & CEO
Fisher Mining Company
Term Expires: 2008

Greg Boyce
Chairman & CEO
Peabody Energy Corporation
Term Expires: 2009

Michael J. Brandt
President
Lafayette Coal Company
Term Expires: 2009

Joseph W. Craft, III
President
Alliance Coal, LLC
Term Expires: 2009

Garry N. Drummond
Chairman, CEO & COO
Drummond Company, Inc.
Term Expires: 2008

Raymond G. DuBois
President & General Manager
Trapper Mining Inc.
Term Expires: 2008

Cliff Forrest
President
Rosebud Mining Company
Term Expires: 2008

Neil Getzelman
President
Interwest Mining Company
Term Expires: 2008

John C. Grisham
President
Buckeye Industrial Mining Co.
Term Expires: 2009

J. Brett Harvey
President & CEO
CONSOL Energy Inc.
Term Expires: 2008

Bennett K. Hatfield
President and CEO
International Coal Group, Inc.
Term Expires: 2008

Justin Jones
Senior Governmental Affairs Rep.
BHP Billiton New Mexico Coal
Term Expires: 2009

Steven F. Leer
Chairman and CEO
Arch Coal, Inc.
Term Expires: 2009

Tom Mackall
President
East Fairfield Coal Co.
Term Expires: 2008

Mike McCall
Chairman & CEO
TXU Power
Term Expires: 2008

Robert E. Murray
Chairman, President & CEO
Murray Energy Corporation
Term Expires: 2009

David Potter
Director, Metallurgical Sales
Clintwood Elkhorn Mining Co.
Term Expires: 2008

Michael J. Quillen
Chairman and CEO
Alpha Natural Resources, LLC
Term Expires: 2009

John W. Rich, Jr.
President
Reading Anthracite Company
Term Expires: 2008

Duane L. Richards
Chief Executive Officer
Western Fuels Association, Inc.
Term Expires: 2008

George R. Richmond
President & COO
Jim Walter Resources, Inc.
Term Expires: 2009

Daniel Roling
Chief Executive Officer
National Coal Corporation
Term Expires: 2009

Bryan Ronck
President
Berwind Natural Resources Corp.
Term Expires: 2008

Mark Smith
President and CEO
Chevron Mining
Term Expires: 2008

Mark A. Snyder
Corporate Secretary
State Industries, Inc.
Term Expires: 2008

Benjamin Statler
Executive Chairman
PinnOak Resources, LLC
Term Expires: 2008

Brian D. Sullivan
Vice President & Secretary
United Coal Company
Term Expires: 2009

Charles C. Ungurean
President
Oxford Mining Company, Inc.
Term Expires: 2009

Joseph E. Usibelli, Jr.
President & COO
Usibelli Coal Mine, Inc.
Term Expires: 2009

Paul Vining
Chief Executive Officer
Magnum Coal Company
Term Expires: 2009

MANUFACTURERS & SERVICES

James W. Boyd
Chairman
John T. Boyd Company
Term Expires: 2008

Frank Calandra, Jr.
President
Jennmar Corporation
Term Expires: 2008

Christopher C. Curfman
President-Global Mining
Caterpillar Inc.
Term Expires: 2008

Robert Evans
President
Norwest Corporation
Term Expires: 2008

LeRoy G. Hagenbuch
President
Philippi-Hagenbuch, Inc.
Term Expires: 2009

Douglas R. Hardman
President
J.H. Fletcher & Co.
Term Expires: 2009

Robert F. Hogan
President & CEO
AmerCable
Term Expires: 2008

Ronald Kaplan
President & CEO
Continental Global Group Corp.
Term Expires: 2009

Greg LeClaire
Industry Manager-Coal
DYNO NOBEL INC.
Term Expires: 2009

Michael W. McLanahan
Chairman/CEO
McLanahan Corporation
Term Expires: 2009

Jeff Schmaling
Acting Vice President/General Manager
Global Mining Marketing Division
Komatsu America Corporation
Term Expires: 2009

Robert J. Stenger
President
Cincinnati Mine Machinery Co.
Term Expires: 2008

Timothy W. Sullivan
President & CEO
Bucyrus International, Inc.
Term Expires: 2009

Michael Sutherlin
President & CEO
Joy Global Inc.
Term Expires: 2008

FORM 990, PART VII - PROGRAM SERVICE REVENUE
=====

DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
-----	----	-----	----	-----	-----
CONVENTIONS, CONFERENCES AND MEETINGS					951,837.
PUBLICATIONS					5,287.
ACGIH LITIGATION					524,800.
VOTER EDUCATION					50,000.
URANIUM MATTERS					110,000.
TOTALS					1,641,924.
					=====

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

=====

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
---	-----
93A	PROVIDES A FORUM WHEREBY INDUSTRY MEMBERS EXCHANGE INDUSTRY INFORMATION.
93B	SUPPORTS THE ASSOCIATION'S EDUCATIONAL FUNCTION OF KEEPING MEMBERS INFORMED ABOUT INDUSTRY DEVELOPMENTS.
93C	VOLUNTARY MEMBER SUPPORTED PROGRAM WHICH PROVIDES OUTSIDE COUNSEL SUPPORT FOR NMA'S PARTICIPATION IN LEGAL ACTION.
93D	SUPPORTS ESTABLISHING A STRONG PRESENCE IN THE NATION'S CAPITAL.
93E	VOLUNTARY MEMBER SUPPORTED PROGRAM WHICH PROVIDES OUTSIDE COUNSEL SUPPORT FOR GENERAL AND REGULATORY MATTERS SPECIFIC TO URANIUM MINING.
94	PROVIDES THE ASSOCIATION WITH THE ABILITY TO ACT AS ADVOCATE PROMOTING IMPROVED MINING KNOWLEDGE AND PRACTICE.

FEDERAL FOOTNOTES

=====

ATTACHMENT

FORM 990, PART I, LINE 8 (A)

THE ORGANIZATION SOLD SHARES OF PUBLICLY TRADED MUTUAL FUNDS. AS SPECIFIED IN THE INSTRUCTIONS FOR FORM 990, THE GROSS PROCEEDS, COST BASIS, AND NET REALIZED LOSS ARE REPORTED AS LUMP-SUM FIGURES.