Form **990-EZ**

Department of the Treasury

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Internal Revenue Service

Short Form 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form.

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

OMB No. 1545-1150

Open to Public Inspection

А	For the	2006 Calend	ar year	r, or tax year beginning	January 1	, 2006, and	enain	9	Decem	ber 2	1 , 20 08	
В	Check if a	use IRS label or National Association of Government Webmasters Inc 03						· .	loyer identification number 0578994			
H	Name cha	-	ange print or Number and street (or P.O. box. if mail is not delivered to street address) Room/suite E Tele							one n	umber	
H	Initial retu Termination		type. See	86 Woodstone Road					(973)	627-0526	
H	Amended		Specific	City or town state or count	try, and ZIP + 4				F Group	-		
	Applicatio	Instruction pending lockaway NJ 07866 F Gro								er	· •	
	Section	ion 501(c)(3)	-	zations and 4947(a)(1) none mpleted Schedule A (Form	•	trusts must attach	G		unting me (specify)		✓ Cash	
	Websit			.NAGW.org			_ H	requir	ed to atta	if the organization is not ach Schedule B (Form 990,		
J	Organiz	zation type (d	heck or	nly one)- <a>✓ 501(c) (6) <	l (insert no.)	947(a)(1) or 🗌 527	,	990-E	Z, or 990	-PF).		
	not requ	uired, but if th	e organ	on is not a section 509(a)(3) s nization chooses to file a retu	rn, be sure to file a	complete return.					nan \$25,000. A return is	
				ine 9 to determine gross receip						▶ \$		
Р	art I	Revenue,	Expe	enses, and Changes in	n Net Assets o	r Fund Balance	s (Se	e the	instructi	ons f	or Part I.)	
	1	Contributio	ns, gifts	s, grants, and similar amou	unts received					1	00.00	
	2		_	revenue including govern		ontracts				2	\$ 97,592.00	
	3	_		s and assessments						3	\$ 16,800.00	
	4	Investment	•							4	\$ 326.00	
	5a	Gross amo	ount fro	om sale of assets other th	nan inventory	5a						
	b			er basis and sales expens	-	5b						
	C			sale of assets other than in		line 5h from line 5s	ı) (atta	ich sch	edule)	5c	00.00	
ne	6		,	tivities (complete applicable parts	• (, ,					
Revenue	ے ا						CHICCH	. Holo				
ě	a	a Gross revenue (not including \$ of contributions reported on line 1)										
-		•		•	ng ovnonoo	6b						
	b	Less: direct expenses other than fundraising expenses Net income or (loss) from special events and activities (Subtract line 6b from line 6a)							6c	00.00		
	_							00				
	7a	a drose sales of inventory, loss retains and anovarious										
	b	2 Less. Gost of goods sold							7.0	00.00		
								7c	00.00			
	8	,)	8	\$114,718.00	
_										9		
	10			ar amounts paid (attach s	chedule)					10	00.00	
	11	Benefits paid to or for members								11	00.00	
penses	12	Salaries, other compensation, and employee benefits								12	00.00	
en	13	Professional fees and other payments to independent contractors								13	00.00	
Exp	14	Occupancy, rent, utilities, and maintenance								14	00.00	
ш	15	Printing, publications, postage, and shipping								15	\$ 4,158.00	
	16	Other expenses (describe Conference, General & Mgmt Expenses, Membership Exp.								16	\$109,520.00	
	17	Total expe	enses.	Add lines 10 through 16						17	\$113,677.00	
ts	18	Excess or	(deficit	t) for the year (Subtract lir	ne 17 from line 9)					18	\$ 1,041.00	
Assets	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with							ee with		A	
Ä		end-of-year figure reported on prior year's return)								19	\$ 50,545.00	
Net	20	5							20	00.00		
_	21									21	\$ 51,586.00	
Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 in												
			(5	See the instructions for Pa	art II.)				ginning of y		(B) End of year	
22	2 Casl	h, savings, a	and inv	vestments					\$50,545.		· · · · · · · · · · · · · · · · · · ·	
23	3 Land	d and buildi	ngs							00 23		
24	4 Othe	er assets (de	escribe	· • •)			00 24		
2		al assets							\$50,545.			
26	6 Tota	al liabilities (describ	be ▶)			00 26		
2								\$50,545.	00 27			
_											000 E7	

Form 990-EZ (2008)					Page 2
Part III Statement of Program Service Acco	mplishments (See the inst	tructions for Part	III.)		Expenses
What is the organization's primary exempt purpose?	Provide education/resource	es to local gov't	webmasters	(Rec	uired for 501(c)(3)
Describe what was achieved in carrying out the organ		(4) organizations 4947(a)(1) trusts;			
describe the services provided, the number of persons I					onal for others.)
28 National Conference attended by 237 local gov	ernment webmasters. Thre	e days of session	ıs in 3		
tracks were provided. All attendees received co					
(Grants \$) If this amount in	cludes foreign grants, check	, here	•	28a	\$ 105,268.00
29 Pre-Conference Courses - 170 pre-conference	session seat were filled wit	h local gov't web	masters		+ 100,2000
who benefitted from in-depth, single subject, h					
	,,g				
(Grants \$) If this amount in	cludes foreign grants, check	r hara		29a	(included in 28)
Website - Maintenance and expansion of our w			website	250	(
provides access to a broad spectrum of docum					
perform their jobs. The listserv is a problem se	-	billiaotoro ficca t	<u> </u>		
	cludes foreign grants, check	r here	▶ □	30a	\$ 1,761.00
31 Other program services (attach schedule)	cludes loreign grants, check	THEIE		Jua	Ψ 1,7 01.00
, -	cludes foreign grants, check	, horo	N	31a	\$ 517.00
32 Total program service expenses (add lines 28a		Chere		32	ψ 317.00
Part IV List of Officers, Directors, Trustees, and Ke	,	en if not compensate	d (See the in		one for Part IV \
List of Officers, Directors, Trustees, and Re	(b) Title and average	(c) Compensation	(d) Contribution		(e) Expense
(a) Name and address	hours per week	(If not paid,	employee benefit	plans &	account and
Chris Audens	devoted to position	enter -0)	deferred compe	nsation	other allowances
Chris Audano	President 8.0				
17390 W 15th Terrace; Olathe KS 66062		0		0	U
Carol A. Spencer	Treasurer 5.0			•	
86 Woodstone Road; Rockaway NJ 07866		0		0	C
Susan Christophersen	Secretary 3.0				
1244 Banner Circle; Erie CO 80516		0		0	C
Chris Matthews	Director			_	_
PO Box 51326; Sparks NV 89435-1326	3.0	0		0	0
Matt Harrington	Director & Webmaster				
5631 SW Redtop Place; Corvallis OR 97333	4.0	0		0	C
Ron Pringle	Director & Conf Chair				
605 Main Street; Batavia, IL 60510	8.0	0		0	0
MJ Simpson	Director				
1125 Moody Bridge Road, Cleveland SC 29635	3.0	0		0	C
Chad Ostroff	Director				
913 Peden Street; Houston TX 77006	3.0	0		0	
Nicole Maillet	Director				
13912 Seattle Slew Lane; Midlothian VA 23113	3.0	0		0	0

Par	t V Other Information (Note the statement requirements in the instructions for	r Part VI \						
ı aı	Cuter information (Note the statement requirements in the instructions for	rait vi.j		Yes	No			
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," at description of each activity	tach a detailed	33		~			
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes							
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7 not reported on Form 990-T, attach a statement explaining your reason for not reporting the income							
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033 and proxy tax requirements?	B(e) notice, reporting,	35a		~			
b	If "Yes," has it filed a tax return on Form 990-T for this year?		35b		~			
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N							
	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ Did the organization file Form 1120-POL for this year?	37a 00.00	37b		~			
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or ke any such loans made in a prior year and still unpaid at the start of the period covered by If "Yes," complete Schedule L, Part II and enter the total amount involved		38a		V			
	Section 501(c)(7) organizations. Enter:							
	Initiation fees and capital contributions included on line 9	39a						
b	Gross receipts, included on line 9, for public use of club facilities	39b						
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the section 4911 ▶; section 4912 ▶; section 4955 ▶							
b	b Section 501(c)(3) and (4) organizations. 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," complete Schedule L, Part I							
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958							
d	Enter amount of tax on line 40c reimbursed by the organization							
е	All organizations. At any time during the tax year, was the organization a party to a prohib transaction? If "Yes," complete Form 8886-T.	pited tax shelter	40e		V			
41	List the states with which a copy of this return is filed. ▶		` -	27-05				
42a	The books are in care of ▶ Carol A. Spencer Telephone no. ▶ (973) Located at ▶ 86 Woodstone Road: Rockaway NJ 07866							
	Located at ▶ 86 Woodstone Road; Rockaway NJ 07866 ZIP + 4 ▶							
b	At any time during the calendar year, did the organization have an interest in or a signature over a financial account in a foreign country (such as a bank account, securities account account)?		42b	Yes	No 🗸			
	If "Yes," enter the name of the foreign country:							
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Repo and Financial Accounts.	rt of Foreign Bank						
С	At any time during the calendar year, did the organization maintain an office outside of the fireyes," enter the name of the foreign country: ▶		42c					
43								
	and enter the amount of tax-exempt interest received or accrued during the tax year	▶ 43						
				Yes	No			
44	Did the organization maintain any denor advised funded if "Vee" Form 000 must be seen	plotod instand of		163	140			
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ							
45	Is any related organization a controlled entity of the organization within the meaning of s	ection 512(b)(13)? If	45		~			
	"Yes," Form 990 must be completed instead of Form 990-EZ							
		F	orm 99 0)-EZ	(2008)			

Par	Sec and	complete the tables for lines		(c)(3) organı	zations mu	st answer quest	ions 46	3–49	
46	Did the ora	anization engage in direct or indi	rect political campaign	activities on b	ehalf of or i	n opposition to		Yes	No
		for public office? If "Yes," compl			onan or or i	орросии и	46		
47	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II								
48	Is the organ	nization operating a school as des	scribed in section 170(b)(1)(A)(ii)? If "`	Yes," comple	ete Schedule E	48		
49a	Did the orga	anization make any transfers to a	an exempt non-charitabl	e related orga	anization?		49a 49b		
	If "Yes," was the related organization(s) a section 527 organization?								
		nis table for the five highest compe ed more than \$100,000 of compe					y emplo	yees)) who
	(a) Name an	d address of each employee paid more than \$100,000	(b) Title and ave hours per wee devoted to posi	ek ` '	Compensation	(d) Contributions to employee benefit plans & deferred compensation	acco	Expens ount an allowar	nd
Total	number of o	ther employees paid over \$100,00	00 ▶						
		nis table for the five highest compon from the organization. If there		contractors w	ho each rece	eived more than \$	100,000	of	
	(a) Nar	ne and address of each independent conti	ractor paid more than \$100,00	0	(b) Ty	rpe of service	(c) Con	npensa	tion
					-				
					_				
Fotal		other independent contractors ea		<u> </u>	L				
	Unde and b	r penalties of perjury, I declare that I have belief, it is true, correct, and complete. De	eclaration of preparer (other the	g accompanying nan officer) is bas	schedules and sed on all inforr	statements, and to the mation of which prepare	best of m er has an	y knov y know	vledge vledge.
Sign		law	la spencer						
Here	′ ′ `					Date			
		arol A. Spencer, Treasurer				May 1, 2009			
	Ту	pe or print name and title.		Data	Check if	Desperate Identity	. Normalis and	Dan to st	
Paid Prepa	Prepa signat	ture		Date	self- employed ▶		i Number (S	ee instr	uctions)
Use C	nly if self-	s name (or yours employed), ss, and ZIP + 4				Phone no. ► ()			
May		cuss this return with the preparer	shown above? See ins	tructions		•	Y	es 🗌	No

Part I, Line 16 – Other Expenses

NAGW runs a National Conference each year. Certain expenses are incurred for insurance, state reporting, and general management. We purchased membership software in 2008 and paid credit card fees for membership transactions.

Summary:

National Conference Expenses\$	105,268.00
General and Management Expenses\$	1,761.00
Membership Expenses\$	517.00

Part III, Line 31 – Other program services

Memberships – NAGW members benefitted from reduced conference fees, networking with other local government webmasters, an on-line listserv for problem-solving and resource sharing. Members were eligible for discounts from industry software and education vendors. NAGW's membership at the end of 2008 was 270 local government webmasters.