

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)

2007

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning _____, **2007, and ending** _____, **20**

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

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

Number and street (or P.O. box if mail is not delivered to street address) Room/suite

City or town, state or country, and ZIP + 4

D Employer identification number

.....

E Telephone number

() ()

F Accounting method: Cash Accrual
 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? Yes No
- H(b)** If "Yes," enter number of affiliates ▶
- H(c)** Are all affiliates included? Yes No
(If "No," attach a list. See instructions.)
- H(d)** Is this a separate return filed by an organization covered by a group ruling? Yes No
- I** Group Exemption Number ▶
- M** Check if the organization is **not** required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

G Website: ▶

J Organization type (check only one) ▶ 501(c) () ◀ (insert no.) 4947(a)(1) or 527

K Check here 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 ▶

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
	3 Membership dues and assessments				3
	4 Interest on savings and temporary cash investments				4
	5 Dividends and interest from securities				5
	6a Gross rents	6a			
	b Less: rental expenses	6b			
c Net rental income or (loss). Subtract line 6b from line 6a				6c	
7 Other investment income (describe ▶)				7	
8a Gross amount from sales of assets other than inventory	(A) Securities		(B) Other		
		8a			
	b Less: cost or other basis and sales expenses.	8b			
	c Gain or (loss) (attach schedule)	8c			
d Net gain or (loss). Combine line 8c, columns (A) and (B)				8d	
9 Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>					
a Gross revenue (not including \$_____ of contributions reported on line 1b)	9a				
b Less: direct expenses other than fundraising expenses	9b				
c Net income or (loss) from special events. Subtract line 9b from line 9a				9c	
10a Gross sales of inventory, less returns and allowances	10a				
	b Less: cost of goods sold	10b			
c 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	
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	
Net Assets	18 Excess or (deficit) for the year. Subtract line 17 from line 12			18	
	19 Net assets or fund balances at beginning of year (from line 73, column (A))			19	
	20 Other changes in net assets or fund balances (attach explanation)			20	
	21 Net assets or fund balances at end of year. Combine lines 18, 19, and 20			21	

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.)

<i>Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.</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"/>	22a			
22b Other grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	22b			
23 Specific assistance to individuals (attach schedule)	23			
24 Benefits paid to or for members (attach schedule)	24			
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	25a			
b Compensation of former officers, directors, key employees, etc. listed in Part V-B	25b			
c 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)	25c			
26 Salaries and wages of employees not included on lines 25a, b, and c	26			
27 Pension plan contributions not included on lines 25a, b, and c	27			
28 Employee benefits not included on lines 25a – 27	28			
29 Payroll taxes	29			
30 Professional fundraising fees	30			
31 Accounting fees	31			
32 Legal fees	32			
33 Supplies	33			
34 Telephone	34			
35 Postage and shipping	35			
36 Occupancy	36			
37 Equipment rental and maintenance	37			
38 Printing and publications	38			
39 Travel	39			
40 Conferences, conventions, and meetings	40			
41 Interest	41			
42 Depreciation, depletion, etc. (attach schedule)	42			
43 Other expenses not covered above (itemize):				
a	43a			
b	43b			
c	43c			
d	43d			
e	43e			
f	43f			
g	43g			
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)–(D), carry these totals to lines 13–15)	44			

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? ►</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</p> <p>.....</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</p> <p>.....</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</p> <p>.....</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>.....</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		46
	47a Accounts receivable 47a		47c
	b Less: allowance for doubtful accounts 47b		
	48a Pledges receivable 48a		48c
	b Less: allowance for doubtful accounts 48b		
	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		51c
	b Less: allowance for doubtful accounts 51b		
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges		53
	54a Investments—publicly-traded securities <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54a
	b Investments—other securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54b
	55a Investments—land, buildings, and equipment: basis 55a		55c
	b Less: accumulated depreciation (attach schedule) 55b		
	56 Investments—other (attach schedule)		56
	57a Land, buildings, and equipment: basis 57a		57c
	b Less: accumulated depreciation (attach schedule) 57b		
58 Other assets, including program-related investments (describe ►)		58	
59 Total assets (must equal line 74). Add lines 45 through 58		59	
Liabilities	60 Accounts payable and accrued expenses		60
	61 Grants payable		61
	62 Deferred revenue		62
	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 ►)		65
66 Total liabilities. Add lines 60 through 65		66	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted		67
	68 Temporarily restricted		68
	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)		73	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73		74	

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	
b	Amounts included on line a but not on Part I, line 12:			
1	Net unrealized gains on investments	b1		
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	
c	Subtract line b from line a		c	
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):	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12). Add lines c and d ▶		e	

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

a	Total expenses and losses per audited financial statements		a	
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):	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	
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	

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
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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 ▶		Yes	No
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) . . .	75b		
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." ▶	75c		
If "Yes," attach a statement that includes the information described in the instructions.			
d Does the organization have a written conflict of interest policy?	75d		

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.)

(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
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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	76	Yes	No
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.	77		
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a		
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b		
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79		
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?	80a		
b If "Yes," enter the name of the organization ▶ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt	81a		
81a Enter direct and indirect political expenditures. (See line 81 instructions.)	81a		
b Did the organization file Form 1120-POL for this year?	81b		

Part VI Other Information (continued) Yes No

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?	82a			
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b			
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a			
b Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b			
84a Did the organization solicit any contributions or gifts that were not tax deductible?	84a			
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b			
85a 501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a			
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.	85b			
c Dues, assessments, and similar amounts from members	85c			
d Section 162(e) lobbying and political expenditures	85d			
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e			
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f			
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g			
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h			
86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12	86a			
b Gross receipts, included on line 12, for public use of club facilities	86b			
87 501(c)(12) orgs. Enter: a Gross income from members or shareholders	87a			
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b			
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			
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			
89a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶				
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			
c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶				
d Enter: Amount of tax on line 89c, above, reimbursed by the organization ▶				
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e			
f All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f			
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			
90a List the states with which a copy of this return is filed ▶				
b Number of employees employed in the pay period that includes March 12, 2007 (See instructions.)	90b			
91a The books are in care of ▶ Telephone no. ▶ (.)				
Located at ▶ ZIP + 4 ▶				
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	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 , 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** Yes No
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** |

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

	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 _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
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))					
105 Total (add line 104, columns (B), (D), and (E)) ▶					

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).

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
	(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
	(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?

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 _____ Date _____ Check if self-employed Preparer's SSN or PTIN (See Gen. Inst. X) _____

Firm's name (or yours if self-employed), address, and ZIP + 4 _____ EIN _____

Phone no. _____ () _____



New York State OM Association, Inc.

New York State OM Association, Inc. Federal ID #: 16-1321466

Supplemental page for form 990 for year 2007 - July 1, 2007 thru June 30, 2008

Part 1 - Revenue: Line 10c:

Revenue derived from sale of souvenirs = \$24,282.32

(Pins, mugs, pencils, pens, lanyards, T-shirts, Polo shirts, license plate frames, magnets, hats, mouse pads, tote bags, beanie babies, ...)

Part II - Statement of Functional Expenses

Line 22: Grants & Allocations:

Scholarship awards to 3 students @ \$500 each = \$1,500.00

Donations to associated Odyssey organizations = \$600.00

Line 43: Other Expenses not covered above

43(a): Insurance: event general liability, Directors & Officers Insurance (\$1,438.00)

43(b): Program Giveaways (\$3,644.02), Lost & Damaged Inventory costs (\$197.72)

43(c) : Fees paid: NYS Program filing fees, (\$50.00)

Part V-A – List of Officers, Directors, Trustees and Key Employees

Board of Directors, in excess of those already listed in Part V, and that do not receive any compensation.

William Everett, 4 Sawyer Lane, Spencerport, NY 14559, Director, Corp Secretary

Leon Frost, 611 West German St., Herkimer, NY 13350, Director

Jim Hoelscher, 19 Brentfield Cr., Rochester, NY 14617, Director

Wayne Otte, 1016 Peter Rd, Schenectady, NY 12303, Director

Rick Pray, 96 Lock St, Port Crane, NY 13833, Director

Lee Willbanks, 25723 NYS Rt 180, Dexter, NY 13634, Director

Paula Bianchi, 856 Cleveland Avenue, Schenectady, NY 12306, Director

Matthew Lopez, 28 Midline Road, Ballston Lake, NY 12019, Director

Part V-A -- Line 75b -- Key relationships of Officers & Board members

State Director (Jackie Otte) and one of the Directors (Wayne Otte) are married.

Registrar (LouAnn Pray) and one of the Directors (Rick Pray) are married.

18 Grand Erie Way, Fairport NY 14450

SCHEDULE A
(Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2007

Department of the Treasury
Internal Revenue Service

Supplementary Information—(See separate instructions.)
▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization New York State OM Association, Inc.	Employer identification number 16 1321466
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Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

Total number of other employees paid over \$50,000 . ▶

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of others receiving over \$50,000 for professional services ▶

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
None		

Total number of other contractors receiving over \$50,000 for other services ▶

Part III Statements About Activities (See page 2 of the instructions.)

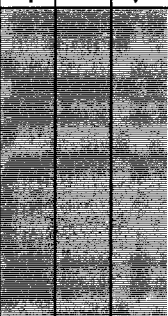
Yes No

1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)

1 Yes No

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.

2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)



a Sale, exchange, or leasing of property?

2a Yes No

b Lending of money or other extension of credit?

2b Yes No

c Furnishing of goods, services, or facilities?

2c Yes No

d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?

2d Yes No

e Transfer of any part of its income or assets?

2e Yes No

3a Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments.)

3a Yes No

b Did the organization have a section 403(b) annuity plan for its employees?

3b Yes No

c Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement

3c Yes No

d Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?

3d Yes No

4a Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g. If "No," complete lines 4f and 4g

4a Yes No

b Did the organization make any taxable distributions under section 4966?

4b Yes No

c Did the organization make a distribution to a donor, donor advisor, or related person?

4c Yes No

d Enter the total number of donor advised funds owned at the end of the tax year ► _____

0

e Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year ► _____

0

f Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts ► _____

0

g Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year ► _____

0

Part IV Reason for Non-Private Foundation Status (See pages 4 through 8 of the instructions.)

I certify that the organization is not a private foundation because it is: (Please check only **ONE** applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). **Enter the hospital's name, city, and state** ▶
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the **Support Schedule** in Part IV-A.)
- 11a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 11b A community trust. Section 170(b)(1)(A)(vi). (Also complete the **Support Schedule** in Part IV-A.)
- 12 An organization that normally receives: **(1) more than 33 1/3%** of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and **(2) no more than 33 1/3%** of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the **Support Schedule** in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and otherwise meets the requirements of section 509(a)(3). Check the box that describes the type of supporting organization:
 Type I Type II Type III-Functionally Integrated Type III-Other

Provide the following information about the supported organizations. (See page 8 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Employer identification number (EIN)	(c) Type of organization (described in lines 5 through 12 above or IRC section)	(d) Is the supported organization listed in the supporting organization's governing documents?		(e) Amount of support
			Yes	No	
Total					

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 8 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2005	(c) 2004	(d) 2003	(e) Total
15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.)	2,300.00	2,330.00	2,800.00	3,970.00	11,400.00
16 Membership fees received	73,840.00	67,024.00	69,874.00	49,245.00	259,983.00
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	56,688.27	55,033.54	57,647.51	87,496.04	256,865.36
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, income from similar sources, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	1,974.55	1,064.28	710.34	273.95	4,023.12
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	134,802.82	125,451.82	131,031.85	140,984.99	532,271.48
24 Line 23 minus line 17	78,114.55	70,418.28	73,384.34	53,488.95	275,406.12
25 Enter 1% of line 23	1,348.03	1,254.52	1,310.32	1,409.85	
26 Organizations described on lines 10 or 11:					
a Enter 2% of amount in column (e), line 24					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2003 through 2006 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts					26b
c Total support for section 509(a)(1) test: Enter line 24, column (e)					26c
d Add: Amounts from column (e) for lines: 18 _____ 19 _____ 22 _____ 26b _____					26d
e Public support (line 26c minus line 26d total)					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f %
27 Organizations described on line 12:					
a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year:					
(2006) _____ (2005) _____ (2004) _____ (2003) _____	1901	1530	1800	2250	
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11b, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year:					
(2006) _____ (2005) _____ (2004) _____ (2003) _____	0	0	0	0	
c Add: Amounts from column (e) for lines: 15 <u>11,400.00</u> 16 <u>259,983.00</u> 17 <u>256,865.36</u> 20 <u>0</u> 21 <u>0</u>					27c 528,248.36
d Add: Line 27a total <u>7481.00</u> and line 27b total <u>0</u>					27d 7,481.00
e Public support (line 27c total minus line 27d total)					27e 520,767.36
f Total support for section 509(a)(2) test: Enter amount from line 23, column (e)					27f 532,271.48
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g 97.8 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h 00.8 %

28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2003 through 2006, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 9 of the instructions.)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

		Yes	No
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) ----- ----- -----		
32	Does the organization maintain the following:		
a	Records indicating the racial composition of the student body, faculty, and administrative staff?		
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d	Copies of all material used by the organization or on its behalf to solicit contributions?		
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
33	Does the organization discriminate by race in any way with respect to:		
a	Students' rights or privileges?		
b	Admissions policies?		
c	Employment of faculty or administrative staff?		
d	Scholarships or other financial assistance?		
e	Educational policies?		
f	Use of facilities?		
g	Athletic programs?		
h	Other extracurricular activities?		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) ----- -----		
34a	Does the organization receive any financial aid or assistance from a governmental agency?		
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation		

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 11 of the instructions.)
 (To be completed **ONLY** by an eligible organization that filed Form 5768)

Check **a** if the organization belongs to an affiliated group. Check **b** if you checked "a" and "limited control" provisions apply.

Limits on Lobbying Expenditures		(a) Affiliated group totals	(b) To be completed for all electing organizations
(The term "expenditures" means amounts paid or incurred.)			
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table—		
	If the amount on line 40 is— The lobbying nontaxable amount is—		
	Not over \$500,000 20% of the amount on line 40		
	Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000	41	
	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	42	
42	Grassroots nontaxable amount (enter 25% of line 41).	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36.	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38.	44	

Caution: If there is an amount on either line 43 or line 44, you must file Form 4720.

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 45 through 50 on page 13 of the instructions.)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2007	(b) 2006	(c) 2005	(d) 2004	(e) Total
45 Lobbying nontaxable amount					
46 Lobbying ceiling amount (150% of line 45(e))					
47 Total lobbying expenditures					
48 Grassroots nontaxable amount					
49 Grassroots ceiling amount (150% of line 48(e))					
50 Grassroots lobbying expenditures					

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 14 of the instructions.)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:	Yes	No	Amount
a Volunteers	✓		
b Paid staff or management (Include compensation in expenses reported on lines c through h.)	✓		
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 other means	✓		
i Total lobbying expenditures (Add lines c through h.)			0

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 14 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Table with 3 columns: Question, Yes, No. Rows include: Transfers from the reporting organization to a noncharitable exempt organization of: (i) Cash, (ii) Other assets; Other transactions: (i) Sales or exchanges of assets with a noncharitable exempt organization, (ii) Purchases of assets from a noncharitable exempt organization, (iii) Rental of facilities, equipment, or other assets, (iv) Reimbursement arrangements, (v) Loans or loan guarantees, (vi) Performance of services or membership or fundraising solicitations; Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received:

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [] Yes [x] No

b If "Yes," complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship.



New York State OM Association, Inc.

New York State OM Association, Inc. Federal ID #: 16-1321466

Supplemental page for form 990 Schedule A for year 2007
July 1, 2007 thru June 30, 2008

Part III, 2d: See Part IV of Form 990 for value of Honorariums paid. Expenses incurred by individual Directors or Officers are reimbursed as provided by operating policies accompanied by detailed receipts and an expense report. Only direct expenses incurred are reimbursed

Part III, 3: Awarded Scholarships to 3 individuals

Selection is based on past involvement with the *Odyssey of the Mind* program, involvement with other extracurricular activities, recommendations from teachers and coaches and quality of responses to questions related to the *Odyssey of the Mind* program. Selection was conducted by a committee based on the above criteria using a weighted average calculation.

NYSOMA
Balance Sheet
As of June 30, 2008

	<u>Jun 30, 08</u>
ASSETS	
Current Assets	
Checking/Savings	
Operating Account	
Scholarship fund	2,295.25
Operating Account - Other	1,711.08
Total Operating Account	<u>4,006.33</u>
Savings Account - General	73,218.66
Total Checking/Savings	<u>77,224.99</u>
Accounts Receivable	
Accounts Receivable	167.75
Total Accounts Receivable	<u>167.75</u>
Other Current Assets	
Inventory	19,440.13
Total Other Current Assets	<u>19,440.13</u>
Total Current Assets	96,832.87
Fixed Assets	
Fixed Assets	
Accumulated Depreciation	-3,489.50
Fixed Assets - Other	3,489.50
Total Fixed Assets	<u>0.00</u>
Total Fixed Assets	<u>0.00</u>
TOTAL ASSETS	<u><u>96,832.87</u></u>
LIABILITIES & EQUITY	
Equity	
*Retained Earnings	52,867.74
Equity	32,896.27
Net Income	11,068.86
Total Equity	<u>96,832.87</u>
TOTAL LIABILITIES & EQUITY	<u><u>96,832.87</u></u>

NYSOMA
Profit & Loss Budget vs. Actual
 July 2007 through June 2008

	Jul '07 - Jun 08	Budget	\$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
Activities				
Creativity Fest	0.00	0.00	0.00	0.0%
Total Activities	0.00	0.00	0.00	0.0%
Donations				
Donated Expenses	275.80			
Donations - Other	1,805.00			
Total Donations	2,080.80			
Donations & Sponsorship				
Sponsorship	0.00	2,000.00	-2,000.00	0.0%
Total Donations & Sponsorship	0.00	2,000.00	-2,000.00	0.0%
Interest Income	3,234.20	2,000.00	1,234.20	161.7%
Membership Income				
Late Fee, Membership	600.00			
Membership Fees	37,882.50	36,000.00	1,882.50	105.2%
Refunds	-160.00			
Total Membership Income	38,322.50	36,000.00	2,322.50	106.5%
Rebate Income				
CCI Rebate	22,059.00	21,000.00	1,059.00	105.0%
Hotel Rebate	804.00	800.00	4.00	100.5%
Tournament Pictures	0.00	125.00	-125.00	0.0%
Total Rebate Income	22,863.00	21,925.00	938.00	104.3%
Regional Pin Service Income	214.80	100.00	114.80	214.8%
Returned Check Charges	0.00	0.00	0.00	0.0%
Sales				
Regional Sales	3,982.90	6,500.00	-2,517.10	61.3%
State Merchandise Sales				
CCI Consignment & Sales	0.00	6,000.00	-6,000.00	0.0%
PC/HJ Training Event Sales	0.00	1,300.00	-1,300.00	0.0%
Sales	15,890.95	8,500.00	7,390.95	187.0%
WF Merchandise Sales	0.00	300.00	-300.00	0.0%
Total State Merchandise Sales	15,890.95	16,100.00	-209.05	98.7%
Worlds Pin Sales	24,253.97	26,500.00	-2,246.03	91.5%
Worlds T-Shirt sales	3,482.00	3,100.00	382.00	112.3%
Total Sales	47,609.82	52,200.00	-4,590.18	91.2%
Scholarship				
Donations for Scholarship	500.00			
Silent Auction	1,032.25	1,200.00	-167.75	86.0%
Total Scholarship	1,532.25	1,200.00	332.25	127.7%
SF Registration Income	11,460.00	13,500.00	-2,040.00	84.9%
Silent Auction	0.00	500.00	-500.00	0.0%
Workshops Programs	0.00	2,800.00	-2,800.00	0.0%
Total Income	127,317.37	132,225.00	-4,907.63	96.3%
Expense				
Bank Fees	0.00	50.00	-50.00	0.0%
Board/Officer Expense				
Airfare	45.00	500.00	-455.00	9.0%
Food	1,242.25	1,400.00	-157.75	88.7%
Honorariums	13,000.00	13,000.00	0.00	100.0%
Lodging	1,762.95	2,200.00	-437.05	80.1%
Mileage	4,545.18	3,360.00	1,185.18	135.3%
Photocopying	40.00	75.00	-35.00	53.3%
Postage	299.45	100.00	199.45	299.5%
Shirts	1,174.00	500.00	674.00	234.8%
Supplies	232.94	450.00	-217.06	51.8%
Telephone	0.00	25.00	-25.00	0.0%
Total Board/Officer Expense	22,341.77	21,610.00	731.77	103.4%
Charitable Contributions				
Creative Opportunities Unlimite	500.00	500.00	0.00	100.0%
Charitable Contributions - Other	100.00			
Total Charitable Contributions	600.00	500.00	100.00	120.0%
Coach's Training				
Food	103.37	100.00	3.37	103.4%
Lodging	112.00	300.00	-188.00	37.3%
Mileage	222.48	280.00	-57.52	79.5%
Photocopy	0.00	25.00	-25.00	0.0%
Supplies	0.00	25.00	-25.00	0.0%
Total Coach's Training	437.85	730.00	-292.15	60.0%
Inventory Adjustment				
Inventory Lost & Broken	197.72	300.00	-102.28	65.9%
Purchases moved to Inventory	-7,041.15			
Total Inventory Adjustment	-6,843.43	300.00	-7,143.43	-2.281.1%

NYSOMA
Profit & Loss Budget vs. Actual
 July 2007 through June 2008

	Jul '07 - Jun 08	Budget	\$ Over Budget	% of Budget
Legal				
Accounting	0.00	100.00	-100.00	0.0%
Filing Fees	50.00	50.00	0.00	100.0%
Insurance	1,438.00	2,000.00	-562.00	71.9%
Memberships	0.00	100.00	-100.00	0.0%
Total Legal	1,488.00	2,250.00	-762.00	66.1%
Membership Expense				
Photocopy	0.00	50.00	-50.00	0.0%
Postage	88.00	75.00	13.00	117.3%
Supplies	0.00	75.00	-75.00	0.0%
Total Membership Expense	88.00	200.00	-112.00	44.0%
Officials Expense				
Banquet Facilities	445.00	300.00	145.00	148.3%
Food	1,785.38	1,800.00	-14.62	99.2%
Lodging	2,485.00	2,500.00	-15.00	99.4%
Mileage	801.50	500.00	301.50	160.3%
Officials Shirts	-104.00			
Photocopying	33.33	200.00	-166.67	16.7%
Postage	0.00	200.00	-200.00	0.0%
Supplies	154.42	200.00	-45.58	77.2%
Total Officials Expense	5,600.63	5,700.00	-99.37	98.3%
Program Growth				
Air Fare	0.00	300.00	-300.00	0.0%
Facilities	0.00	150.00	-150.00	0.0%
Food	322.28	750.00	-427.72	43.0%
Giveaways	0.00	50.00	-50.00	0.0%
Lodging	1,479.73	1,000.00	479.73	148.0%
Mileage	784.38	675.00	109.38	116.2%
Photocopying	0.00	25.00	-25.00	0.0%
Postage	0.00	25.00	-25.00	0.0%
Supplies	0.00	25.00	-25.00	0.0%
Total Program Growth	2,586.39	3,000.00	-413.61	86.2%
Regional Director's Expense				
Food	351.50	450.00	-98.50	78.1%
Lodging	94.99			
Mileage	131.14	150.00	-18.86	87.4%
Postage	0.00	25.00	-25.00	0.0%
Shirts	0.00	600.00	-600.00	0.0%
Total Regional Director's Expense	577.63	1,225.00	-647.37	47.2%
Sales Expense				
pins	16,686.15	5,000.00	11,686.15	333.7%
Postage	0.00	25.00	-25.00	0.0%
Promotions	98.55	400.00	-301.45	24.6%
Purchases for resale	6,466.93	5,000.00	1,466.93	129.3%
Shirts	2,502.40	1,200.00	1,302.40	208.5%
Stipends	0.00	300.00	-300.00	0.0%
Supplies	0.00	25.00	-25.00	0.0%
Total Sales Expense	25,754.03	11,950.00	13,804.03	215.5%
Scholarship Awards				
Awards	1,500.00	1,500.00	0.00	100.0%
Postage	0.00	50.00	-50.00	0.0%
Supplies	0.00	50.00	-50.00	0.0%
Total Scholarship Awards	1,500.00	1,600.00	-100.00	93.8%
Sponsorship				
Document Production	0.00	400.00	-400.00	0.0%
Giveaways	0.00	50.00	-50.00	0.0%
Postage	0.00	50.00	-50.00	0.0%
Supplies	0.00	50.00	-50.00	0.0%
Total Sponsorship	0.00	550.00	-550.00	0.0%
Summer Program				
Facilities	0.00	200.00	-200.00	0.0%
Food	0.00	800.00	-800.00	0.0%
Lodging	0.00	900.00	-900.00	0.0%
Mileage	0.00	700.00	-700.00	0.0%
Photocopying	0.00	50.00	-50.00	0.0%
Postage	0.00	125.00	-125.00	0.0%
Supplies	0.00	150.00	-150.00	0.0%
Total Summer Program	0.00	2,925.00	-2,925.00	0.0%

NYSOMA
Profit & Loss Budget vs. Actual
 July 2007 through June 2008

	Jul '07 - Jun 08	Budget	\$ Over Budget	% of Budget
Tournament Expense				
Awards	3,074.08	2,200.00	874.08	139.7%
Event Center	2,300.00	2,500.00	-200.00	92.0%
Food	9,758.38	9,700.00	58.38	100.6%
Lodging	11,588.08	11,000.00	588.08	105.3%
Mileage	0.00	160.00	-160.00	0.0%
Photocopying	0.00	50.00	-50.00	0.0%
Postage	41.00	25.00	16.00	164.0%
Printing	73.92	2,400.00	-2,326.08	3.1%
Shipping Support	144.08			
Shirts	1,751.94	1,400.00	351.94	125.1%
Site Use Expense	20,313.47	20,000.00	313.47	101.6%
Sound	400.00			
Supplies	915.34	600.00	315.34	152.6%
Transportation	550.00	1,300.00	-750.00	42.3%
Total Tournament Expense	50,910.29	51,335.00	-424.71	99.2%
Website Expense	860.18	400.00	460.18	215.0%
World Finals Expense				
Airfare	166.00			
Creativity Fest	0.00	600.00	-600.00	0.0%
Food	1,079.46	900.00	179.46	119.9%
Giveaways	644.80	4,000.00	-3,355.20	16.1%
Lodging	292.00			
Mileage	42.00	560.00	-518.00	7.5%
Pins	3,463.70	15,000.00	-11,536.30	23.1%
Postage/Shipping	294.27	500.00	-205.73	58.9%
Shirts				
Giveaways xfer	2,900.67			
Purchases	1,464.27	2,900.00	-1,435.73	50.5%
Total Shirts	4,364.94	2,900.00	1,464.94	150.5%
Supplies	0.00	400.00	-400.00	0.0%
Total World Finals Expense	10,347.17	24,860.00	-14,512.83	41.6%
Total Expense	116,248.51	129,185.00	-12,936.49	90.0%
Net Ordinary Income	11,068.86	3,040.00	8,028.86	364.1%
Net Income	11,068.86	3,040.00	8,028.86	364.1%