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## 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)

OMB No 1545-1150

2008

Open to Public  
InspectionDepartment of the Treasury  
Internal Revenue Service

- Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other org.izations 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

A For the 2008 calendar year, or tax year beginning Jul 1, 2008, and ending Jun 30, 2009

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

AMERICAN ACADEMY OF AUDIOLOGY FOUNDATION

Number and street (or P O box, if mail is not delivered to street address)

11730 PLAZA AMERICA DRIVE

Room/suite

300

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

RESTON

VA 20190-4798

D Employer identification number

62-1356696

E Telephone number

(703) 790-8466

F Group Exemption Number

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts  
must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting method  Cash  Accrual  
Other (specify) ►

I Website: ► WWW.AUDIOLOGYFOUNDATION.ORG

J Organization type (check only one) —  501(c) ( 3 ) ▲ (insert no)  4947(a)(1) or  527

H Check ►  if the organization is not  
required to attach Schedule B (Form 990,  
990-EZ, or 990-PF)

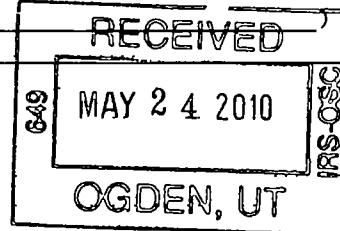
K Check ►  if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than  
\$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990  
instead of Form 990-EZ

► \$ 322,172.

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

1 Contributions, gifts, grants, and similar amounts received	1	276,995.
2 Program service revenue including government fees and contracts	2	0.
3 Membership dues and assessments	3	0.
4 Investment income	4	26,661.
5a Gross amount from sale of assets other than inventory	5a	0.
b Less: cost or other basis and sales expenses	5b	0.
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (att sch)	5c	0.
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ► <input type="checkbox"/>	6a	18,516.
a Gross revenue (not including \$ 19,595. of contributions reported on line 1)	6b	31,744.
b Less direct expenses other than fundraising expenses	6c	-13,228.
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	7a	
7a Gross sales of inventory, less returns and allowances	7b	
b Less: cost of goods sold	7c	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	8	
8 Other revenue (describe ► )	9	290,428.
9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c; 7c, and 8)	10	140,437.
10 Grants and similar amounts paid (attach schedule)	11	
11 Benefits paid to or for members	12	0.
12 Salaries, other compensation, and employee benefits	13	5,737.
13 Professional fees and other payments to independent contractors	14	
14 Occupancy, rent, utilities, and maintenance	15	12,284.
15 Printing, publications, postage, and shipping	16	68,800.
16 Other expenses (describe ► See Other Expenses Statement )	17	227,258.
17 Total expenses (add lines 10 through 16)	18	63,170.
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	19	515,139.
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	20	-57,811.
20 Other changes in net assets or fund balances (attach explanation) See L-20 Stmt	21	520,498.
21 Net assets or fund balances at end of year. Combine lines 18 through 20		



## Part II Balance Sheets. If Total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	431,692. 22	416,535.
23 Land and buildings	0. 23	0.
24 Other assets (describe ► See L-24 Stmt )	110,000. 24	136,000.
25 Total assets	541,692. 25	552,535.
26 Total liabilities (describe ► See L-26 Stmt )	26,553. 26	32,037.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	515,139. 27	520,498.

**Part III Statement of Program Service Accomplishments** (See the instructions.)**Expenses**What is the organization's primary exempt purpose? **SEE ATTACHMENT STATEMENT A**

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts, optional for others )

Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title

**28 SEE ATTACHED STATEMENT B**

(Grants \$ 140,437.) If this amount includes foreign grants, check here

28a

183,902.

29

(Grants \$ ) If this amount includes foreign grants, check here

29a

30

(Grants \$ ) If this amount includes foreign grants, check here

30a

31 Other program services (attach schedule)

(Grants \$ ) If this amount includes foreign grants, check here

31a

32 Total program service expenses (add lines 28a through 31a)

32

183,902.

**Part IV List of Officers, Directors, Trustees, and Key Employees.** (List each one even if not compensated. See the instrs )

(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 and deferred compensation	(e) Expense account and other allowances
CHERYL KREIDER CAREY 11430 PLAZA AMERICA DRIVE RESTON VA 20190	EXECUTIVE DIRECTOR 2.00	0.	0.	0.
BRAD STACH 11730 PLAZA AMERICA DRIVE RESTON VA 20190	BOARD CHAIR 2.00	0.	0.	0.
THOMAS POWERS 11730 PLAZA AMERICA DRIVE RESTON VA 20190	TREASURER 1.00	0.	0.	0.
DIANNE MEYER 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 2.00	0.	0.	0.
A.U. BANKAITIS 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
JUDITH BLUMSACK 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
SHARON FUJIKAWA BROOKS 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
RICHARD DANIELSON 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
RIEKO DARLING 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
PAMELA KEENAN 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
MICHAEL SANTUCCI 11730 PLAZA AMERICA DRIVE RESTON VA 20190	DIRECTOR 1.00	0.	0.	0.
See List of Officers, Directors, Trustees, & Key Employees Stmt				

## Part V Other Information (Note the statement requirement in General Instruction V.)

33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity

	Yes	No
33		X
34		X

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 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T

a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?

b If 'Yes,' has it filed a tax return on **Form 990-T** for this year?

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N

37a Enter amount of political expenditures, direct or indirect, as described in the instructions

► 37a | 0.

b Did the organization file **Form 1120-POL** for this year?

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

b If 'Yes,' complete Schedule L, Part II and enter the total amount involved

39 501(c)(7) organizations Enter

a Initiation fees and capital contributions included on line 9

b Gross receipts, included on line 9, for public use of club facilities

40a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under

section 4911 ► 0., section 4912 ► 0.; section 4955 ► 0.

b 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

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

► 0.

d Enter amount of tax on line 40c reimbursed by the organization

► 0.

e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T

41 List the states with which a copy of this return is filed ► \_\_\_\_\_

40e | X

42a The books are in care of ► THE ORGANIZATION Telephone no ► (703) 790-8466  
Located at ► 11730 PLAZA AMERICA DRIVE RESTON VA ZIP + 4 ► 20190

42b | Yes | No

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)?

If 'Yes,' enter the name of the foreign country ► \_\_\_\_\_

42c | Yes | No

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U.S.?

If 'Yes,' enter the name of the foreign country ► \_\_\_\_\_

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** – Check here and enter the amount of tax-exempt interest received or accrued during the tax year

► 43 |

43 | Yes | No

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

44 | Yes | No

45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

45 | Yes | No

**Part VI** **Section 501(c)(3) organizations only.** All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X
47		X
48		X
49a	X	
49b		X

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If 'Yes,' was the related organization(s) a section 527 organization?

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
<u>NONE</u>				
-----				
-----				
-----				
-----				
-----				
Total number of other employees paid over \$100,000 ►				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
<u>NONE</u>		
-----		
-----		
-----		
-----		
-----		
Total number of other independent contractors receiving over \$100,000 ►		

<b>Sign Here</b>	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	
	Signature of officer ► <u>Amy Benham</u>	Date ► <u>5/17/10</u>

► Amy Benham Sr. Director of Finance & Admin.

Type or print name and title

<b>Paid Preparer's Use Only</b>	Preparer's signature ► <u>Rob S. L.</u>	Date ► <u>5/17/10</u>	Check if self-employed ► <input checked="" type="checkbox"/>	Preparer's Identifying Number (See Instructions)
	Firm's name (or yours if self-employed). ► <u>Lane &amp; Company, CPAs</u>	EIN ►		

► 1920 N Street NW, Suite 320

DC 20036

Phone no ► (202) 463-6500

May the IRS discuss this return with the preparer shown above? See instructions

BAA

►  Yes  No

Form 990-EZ (2008)

## Public Charity Status and Public Support

**To be completed by all section 501 (c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.**

2008

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

AMERICAN JEW

AMERICAN ACADEMY OF AUDIOLOGY FOUNDATION  
P. O. Box 6100, Ballston Spa, NY 12020-6100

Employer identification number

**Part I** **Reason for Public Charity Status** (All organizations must complete this part.) (see instructions)

The organization is not a private foundation because it is (Please check only **one** organization )

1  A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.  
2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E )  
3  A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**. (Attach Schedule H )  
4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)** Enter the hospital's name, city, and state  
5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II )  
6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.  
7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II )  
8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II )  
9  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 exempt 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)**. (Complete Part III )  
10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**. (see instructions)  
11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)** See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h  
a  Type I      b  Type II      c  Type III – Functionally integrated      d  Type III – Other  
e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**  
f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box   
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

Yes	No

**h** Provide the following information about the organizations the organization supports

**Total**

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

**Schedule A (Form 990 or 990-EZ) 2008**

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 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						
<b>4 Total.</b> Add lines 1-3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	§§	§§	§§	§§	§§	
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>11 Total support.</b> Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					<b>12</b>	

**13 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ►

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	<b>15</b>	%
<b>16a 33-1/3 support test – 2008.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>b 33-1/3 support test – 2007.</b> If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test – 2008.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test – 2007.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I.)

**Section A. Public Support**

Calendar year (or fiscal yr beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	101,106.	193,110.	210,805.	247,800.	276,972.	1,029,793.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1-5	<b>101,106.</b>	<b>193,110.</b>	<b>210,805.</b>	<b>247,800.</b>	<b>276,972.</b>	<b>1,029,793.</b>
<b>7a</b> Amounts included on lines 1, 2, 3 received from disqualified persons	<b>24,000.</b>	<b>35,000.</b>	<b>85,000.</b>	<b>148,500.</b>	<b>192,100.</b>	<b>484,600.</b>
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
<b>c</b> Add lines 7a and 7b	<b>24,000.</b>	<b>35,000.</b>	<b>85,000.</b>	<b>148,500.</b>	<b>192,100.</b>	<b>484,600.</b>
<b>8 Public support</b> (Subtract line 7c from line 6)						
						<b>545,193.</b>

**Section B. Total Support**

Calendar year (or fiscal yr beginning in) ►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	101,106.	193,110.	210,805.	247,800.	276,972.	1,029,793.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	7,114.	7,131.	9,633.	26,465.	26,661.	77,004.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b	<b>7,114.</b>	<b>7,131.</b>	<b>9,633.</b>	<b>26,465.</b>	<b>26,661.</b>	<b>77,004.</b>
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV )						
<b>13 Total support.</b> (add lines 9, 10c, 11, and 12)						<b>1,106,797.</b>

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► **Section C. Computation of Public Support Percentage**

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f))	15	49.26 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g	16	61.50 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f))	17	6.96 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h	18	6.22 %

19a **33-1/3 support tests – 2008.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► b **33-1/3 support tests – 2007.** If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

**Part IV** **Supplemental Information.** Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

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

## **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No 1545 0047

2008

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Name of the organization

**Employer identification number**

**AMERICAN ACADEMY OF AUDIOLOGY FOUNDATION**

| 62-1356696

**Part I Fundraising Activities.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- Mail solicitations
- Email solicitations
- Phone solicitations
- In-person solicitations

- Solicitation of non-government grants
- Solicitation of government grants
- Special fundraising events

**2a** Did the organization have written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

Yes  No

**b** If 'Yes,' list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990EZ filers are not required to complete this table.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

**Part II Fundraising Events.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

	(a) Event #1 <u>SILENT AUCTION</u> (event type)	(b) Event #2 <u>ANNUAL DONOR EVENT</u> (event type)	(c) Other Events <u>NONE</u> (total number)	(d) Total Events (Add col. (a) through col (c))
REVENUE	1 Gross receipts	26,281.	10,305.	36,586.
	2 Less Charitable contributions	16,095.	3,500.	19,595.
	3 Gross revenue (line 1 minus line 2)	10,186.	6,805.	16,991.
DIRECT EXPENSES	4 Cash prizes			
	5 Non-cash prizes	16,095.	584.	16,679.
	6 Rent/facility costs			
	7 Other direct expenses	2,786.	12,279.	15,065.
	8 Direct expense summary Add lines 4- through 7 in column (d)			31,744.
	9 Net income summary Combine lines 3 and 8 in column (d)			-14,753.

**Part III Gaming.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col (c))
REVENUE	1 Gross revenue			
DIRECT EXPENSES	2 Cash prizes			
	3 Non-cash prizes			
	4 Rent/facility costs			
	5 Other direct expenses			
	6 Volunteer labor	<input type="checkbox"/> Yes ____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes ____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes ____ % <input type="checkbox"/> No
	7 Direct expense summary Add lines 2 through 5 in column (d)			►
	8 Net gaming income summary Combine lines 1 and 7 in column (d)			►

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

YES	NO
9a	

a Is the organization licensed to operate gaming activities in each of these states?

b If 'No,' Explain \_\_\_\_\_

9a	

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If 'Yes,' Explain \_\_\_\_\_

10a	

11 Does the organization operate gaming activities with nonmembers?

11	

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

12	

**13** Indicate the percentage of gaming activity operated in

- a** The organization's facility
- b** An outside facility

**14** Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**15a** Does the organization have a contact with a third party from whom the organization receives gaming revenue?

- b** If 'Yes,' enter the amount of gaming revenue received by the organization \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party \$ \_\_\_\_\_

- c** If 'Yes,' enter name and address

Name ► \_\_\_\_\_

Address ► \_\_\_\_\_

**16** Gaming manager information

Name ► \_\_\_\_\_

Gaming manager compensation ► \$ \_\_\_\_\_

Description of services provided. ► \_\_\_\_\_

Director/officer

Employee

Independent contractor

**17** Mandatory distributions

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

- b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: ► \$ \_\_\_\_\_

YES	NO
13a	%
13b	%

15a	
17a	

Name as Shown on Return

AMERICAN ACADEMY OF AUDIOLOGY FOUNDATION

Employer Identification No  
62-1356696

	Beginning of Year	End of Year
<b>Line 24 - Other Assets:</b>		
<u>ACCOUNTS RECEIVABLE</u>	<u>110,000.</u>	<u>136,000.</u>
<b>Totals to Form 990-EZ, Part II, line 24</b>	<b>110,000.</b>	<b>136,000.</b>
 <b>Line 26 - Total Liabilities:</b>	 Beginning of Year	 End of Year
<u>ACCOUNTS PAYABLE</u>	<u>26,553.</u>	<u>32,037.</u>
<b>Totals to Form 990-EZ, Part II, line 26</b>	<b>26,553.</b>	<b>32,037.</b>

Form 990-EZ, Part I, Line 16

**Other Expenses Statement**

Other expenses (describe)

<b>BANK FEES</b>	<b>1,855.</b>
<b>TRAVEL</b>	<b>18,465.</b>
<b>PRODUCTION COSTS</b>	<b>12,732.</b>
<b>MEALS &amp; ENTERTAINMENT</b>	<b>9,991.</b>
<b>HONORARIUMS</b>	<b>1,220.</b>
<b>PROMOTIONAL ITEMS</b>	<b>3,390.</b>
<b>MISCELLANEOUS</b>	<b>5,602.</b>
<b>APPLIED OVERHEAD</b>	<b>7,585.</b>
<b>DUES &amp; SUBSCRIPTIONS</b>	<b>462.</b>
<b>GIFTS</b>	<b>7,498.</b>
<b>Total</b>	<b><u>68,800.</u></b>

Form 990-EZ, Page 2, Part IV

**List of Officers, Directors, Trustees, & Key Employees Stmt**

<b>(a) Name and address</b>	<b>(b) Title and average hours per week devoted to position</b>	<b>(c) Compensation (if not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>(e) Expense account and other allowances</b>
Business <input type="checkbox"/> Person <input type="checkbox"/> <b>EDWARD SZUMOWSKI</b> <b>11730 PLAZA AMERICA DRIVE</b> <b>RESTON VA 20190</b>	Title <b>DIRECTOR</b>	Hours/Week <b>1.00</b>	0.	0.
Foreign city _____ Foreign country _____				
Business <input type="checkbox"/> Person <input type="checkbox"/> <b>THOMAS THUNDER</b> <b>11730 PLAZA AMERICA DRIVE</b> <b>RESTON VA 20190</b>	Title <b>DIRECTOR</b>	Hours/Week <b>1.00</b>	0.	0.
Foreign city _____ Foreign country _____				
Business <input type="checkbox"/> Person <input type="checkbox"/> <b>SUE WINDMILL</b> <b>11730 PLAZA AMERICA DRIVE</b> <b>RESTON VA 20190</b>	Title <b>DIRECTOR</b>	Hours/Week <b>1.00</b>	0.	0.
Foreign city _____ Foreign country _____				

Form 990-EZ, Part I, Line 10  
**Grants and Similar Amounts Paid**

## Purpose of Payment

SEE ATTACHED SCHEDULE OF GRANTS PAID

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
	Business <input type="checkbox"/> Person <input type="checkbox"/>		
			<u>140,437.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property \_\_\_\_\_  
Date of Gift \_\_\_\_\_

Book Value	How Book Value Determined
FMV	How FMV Determined

Form 990-EZ, Page 1, Part I, Line 20

**Other Changes in Net Assets or Fund Balances**

Description	Amount
<u>UNREALIZED LOSS ON INVESTMENTS</u>	<u>-57,811.</u>
Total	<u>-57,811.</u>

**American Academy of Audiology Foundation  
2008 Form 990-EZ  
Page 1, Line 10  
Schedule of Grants Paid  
Page 1 of 2**

**EIN#: 62-1356696**

**American Academy of Audiology**  
11730 Plaza America, #300  
Reston, VA 20190  
Amount Paid: \$25,000  
Purpose of Payment: Gold Standards Summit: Transforming Audiology Education

**American Board of Audiology**  
11730 Plaza America, #300  
Reston, VA 20190  
Amount Paid: \$41,740  
Purpose of Payment: Pediatric audiology practice analysis

**Accreditation Commission for Audiology Education**  
1718 M Street, NW #297  
Washington, DC 20036-4504  
Amount Paid: \$20,000  
Purpose of Payment: University recruitment for audiology program accreditation

**Northwestern University**  
Lauren Calandruccio, Ph.D., Jessica Levine  
Office of Sponsored Research  
633 Clark St, N Tower #2,  
Evanston, IL 60208  
Amount Paid: \$15,000  
Purpose of Payment: Research grant funding:

**American Academy of Audiology Foundation  
2008 Form 990-EZ  
Page 1, Line 10  
Schedule of Grants Paid  
Page 2 of 2**

**EIN#: 62-1356696**

**Research Foundation of State University of NY**  
Eric Bielefeld, Ph.D.)  
35 State Street  
Albany, NY 12207-2826  
Amount Paid: \$9,986  
Purpose of Payment: Research grant funding

**University of Texas at Dallas**  
Andrea Warner-Czyz, Ph.D.  
800 West Campbell Rd. MP13  
Richardson, TX 75080-3021  
Amount Paid: \$9,040  
Purpose of Payment: Research grant funding

American Academy of Audiology Foundation  
2008 FORM 990-EZ

EIN #: 62-1356696

**STATEMENT OF EXEMPT PURPOSE**

The mission of the American Academy of Audiology Foundation is to raise funds and support for programs of excellence in research, education, and public awareness in audiology and hearing science.

Page 2 – Part III – Statement of Program Service Accomplishments – (Grants of \$140,437; Total Expenses of \$183,902)

**Research Grants Program:** (Grants of \$42,326; Total Expenses of \$44,719.61) Fourteen grants were made in amounts ranging from \$10,000 to \$500 on research conducted on topics in the hearing and balance sciences. Several grants were made to PhDs working in university settings and others were made to graduate and undergraduate students. The objective of the grants and awards is to encourage next-generation researchers, and promote evidence-based practices in audiology. No revenue was generated for the Foundation from the research grants programs.

**Pediatric Audiology:** (Grants of \$41,740; Total Expenses of \$46,926.98) The objective of the Foundation's program in pediatric audiology is to fund various initiatives that enhance hearing care for infants and children. The Marion Downs Lecture in Pediatric Audiology provides an educational forum that features an annual presentation by a leading researcher in pediatric hearing science that is attended by several hundred audiologists. The ongoing practice analysis of pediatric audiology will develop an up-to-date description of the work of pediatric audiologists: what they do, tasks performed, types of patients treated, abnormalities/ailments observed and treated, conditions encountered, etc. This information will be used by the Foundation and other organizations as a resource when educational offerings are developed, reviewed and/or funded. The Hearing Assistance Technology DVD was developed to provide pediatric audiologists with step-by-step guidelines on remote microphone technologies for children and youth, and over 1,200 DVDs were distributed at no charge. Outreach to the National Education Association provided teachers with free materials about noise-induced hearing loss for use in classroom and other youth educational settings. No revenue was generated for the Foundation from the pediatric audiology program.

**Audiology Education:** (Grants of \$47,200; Expenses of \$73,589.89) The goal of the Foundation's programs in audiology support higher education in audiology. The *Gold Standards Summit 2009: Transforming Clinical Education in Audiology* was held in January 2009 in Orlando, Florida. Key stakeholders in audiology education met to address critical issues underlying the effectiveness, efficiency, and consistency of clinical audiology education. There were 164 participants with representatives from 65 of the 73 U.S. Doctor of Audiology (Au.D.) programs/consortia, in addition to representatives from preceptor sites, industry, licensing boards, accreditation bodies, certification bodies and other allied professional organizations. Meeting outcomes include: implementation of an education column in *Audiology Today* magazine, development of a clinical competencies document (in progress), development of a survey on PhD students/programs (in progress), development of a process/mechanism for sharing clinical education resources (in progress), development of a special supplement of the *Journal of the American Academy of Audiology*, the Academy's prestigious refereed scholarly journal, on evidence-based instruction (in progress). A grant to the Accreditation Commission for Audiology Education provided funding that supported university recruitment to the audiology accreditation process that recognizes, reinforces, and promotes the highest quality in Au.D.

educational programs through a rigorous verification process. No revenue is generated by these programs.

**Other:** (Grants of \$9,171; Total Expenses of \$18,665.05) Public awareness campaigns and member assistance programs.