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DLN: 93493196009061

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the :	2009 са	lendar yea	r, or tax year beginning 09-0	01-2009 and ending 08-31	-2010				
B Ch	eck ıf a	pplicable	Please	C Name of organization CENTER FOR ASSOCIATION LEA	ADERSHIP			D Employer i	dentif	ication number
☐ Ad	Address change use IRS label or Doing Business As							52-13004 E Telephone		or
∏ Na	Name change							-		
Initial return Specific Number and street (or P O box if mail is not delivered to street address) I							Room/suite	(202) 326		
Г Те	mınate	d	tions.	1575 I STREET NW				G Gross receip	its \$ 13	,688,306
┌ Am	ended	return		City or town, state or country,	and ZIP + 4					
Гар	plication	pending		WASHINGTON, DC 20005						
			F Nan	ne and address of principal (officer		H(a) Is th	l Is a group reti	ırn for	-
			јони н	H GRAHAM IV		'	affilia		1111 101	┌ Yes 🔽 No
				STREET NW NGTON,DC 20005			11/1-> •			
				,		'	• •	l affiliates incl		Yes No
I Ta	x-exem	pt status	▼ 501(c)	(3) ◀ (insert no)	a)(1) or			o, attach a h ip exemption		
J W	ebsite	: ⊨ ww	/W asaecen	iter O RG			(-)			
K For	m of org	janızatıon	✓ Corporat	ion Trust Association Ot	her 🕨		L Year of fo	rmation 1983	M Sta	te of legal domicile DC
Pa	rt I	Sum	mary							_
Governance	1	THE CE STRAT RESPO	ENTER FOR EGIC RESE NSIBLE FO CASING OF	EARCH, AND KNOWLEDGE OR EDUCATION PROGRAM	HOST SIGNIFICANT ACTIVITIES SHIP IS THE PREMIER PRO RESOURCES FOR THE AS: IS AND EVENTS, LEARNIN LEADERS AND KNOWLEDGI	SOCIA G COM	TION COM	MUNITY TH S, AND IDEN	E CEI TIFIC	NTER IS ATION AND
	_							250/ 61		
න් ග			•		inued its operations or dispo			25% of its ne		
Activities	1		-	-	ody (Part VI, line 1a)					14 0
Ž.	1			_	governing body (Part VI, lir	ne Ib)		•		0
đ	1			nployees (Part V , line 2a)					<u> </u>	1,716
	6 Total number of volunteers (estimate if necessary)7a Total gross unrelated business revenue from Part VII					2			۰ ح	0
				ness taxable income from F			•		7а — 7b	0
							Prio	r Year		Current Year
	8	Contri	butions and	d grants (Part VIII, line 1h)				666,903		788,729
≗	9			revenue (Part VIII, line 2g)				11,454,506	 	11,045,585
Rayenue	10	-			ines 3, 4, and 7d)			-742,524		52,245
걆	11	Other	revenue (P	art VIII, column (A), lines !	5, 6d, 8c, 9c, 10c, and 11e)	ınd 11e)				1,034,934
	12 Total revenue—add lines 8 through 11 (must equal P									12.021.102
	42							12,109,599		12,921,493
	13 14				lumn (A), lines 1-3)	F				0
	15				umn (A), line 4)	H				<u>_</u>
\$	15	10)	es, other co	impensation, employee being	ents (Part IX, Column (A), m	iles 5-				0
Expenses	16a	Profes	sional fund	raising fees (Part IX, colum	n (A), line 11e)	. [0
ੜੀ	ь	Total fu	ndraising exp	enses (Part IX, column (D), line 2	5) ► 720,491					
	17	Other	expenses (Part IX, column (A), lines 1	1a-11d, 11f-24f)			14,263,333		13,750,565
	18	Total	expenses A	Add lines 13–17 (must equ	al Part IX, column (A), line 2	25)		14,263,333		13,750,565
	19	Reven	ue less exp	enses Subtract line 18 fro	m line 12			-2,153,734		-829,072
Net Assets or Fund Balances								g of Current 'ear		End of Year
i de la composition della comp	20	Total	assets (Par	t X, line 16)		}	·	19,688,379		20,586,028
t As	21			Part X, line 26)		.		11,047,059		11,366,174
\$ <u>E</u>	22		•	· · ·	1 from line 20	.		8,641,320		9,219,854
Pa	rt II		ature Blo						·	· · ·
Sigr Her	1	Under p and beli	enalties of pe lef, it is true, o *** ature of office	rjury, I declare that I have exami correct, and complete Declaration	ned this return, including accompa i of preparer (other than officer) is		n all informat			
			N H GRAHAM : e or print nam							
Paid Pren	arer's	Preparer signature	e DEBOR	AH G KOSNETT	Date	self-	ck if	Preparer's ide (see instruction		number
Use		ıf self-er	ame (or yours nployed),	P				EIN 🕨		
	~ y	address,	and ZIP + 4	2021 L Street NW Suite 400			_	Phone no	(202)	293-2200
				Washington, DC 20036				Phone no 🕨		
May	the IR	S discus	s this retu	rn with the preparer shown a	above? (see instructions) .				굣	Yes Γ No

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

ASAE & The Center help associations and association professionals transform society through the power of collaboration

2	Did the organization und the prior Form 990 or 9		ant program se	ervices during the year	which were not listed on	┌ Yes ┌ No
	If "Yes," describe these	new services on Sc	hedule O			
3	Did the organization ceaservices?	ase conducting, or n	nake significar	nt changes in how it cor	nducts, any program	┌ Yes ┌ No
	If "Yes," describe these	changes on Schedu	ıle O			
4		501(c)(4) organizati	ons and secti	on 4947(a)(1) trusts a	largest program services b re required to report the an ervice reported	•
4a	(Code) (Expenses \$	6,824,440	ıncludıng grants of \$) (Revenue \$	3,499,878)
	ALL EXPERIENCE LEVELS T	HESE LEARNING PROGRA	MS ARE HELD FA	CE-TO-FACE IN WASHINGTO		ALS AND BUSINESS PARTNERS AT UND THE COUNTRY, AS WELL AS T, AND THE TECHNOLOGY
4b	(Code) (Expenses \$	3,633,867	including grants of \$) (Revenue \$	5,052,218)
	SESSIONS WHERE MORE TH	HAN 8,000 (CUMULATIVE ION NOT OFTEN FOUND) ASSOCIATION E ELSEWHERE, SUC	EXECUTIVES LEARN THE LATE CH AS TECHNOLOGY APPLICA	EETING AND SPRINGTIME EXPO - EST ASSOCIATION MANAGEMENT ATIONS TO IMPROVE PRODUCTIV	
	(Code) (Expenses \$	1,494,628	maluding amorts of t) (Revenue \$	783,623)
4c	Learning Center Facilities T variety of events Both faci and International Trade Ce for educational seminars, p	The Center for Associatio lities are also used for th inter at 1300 Pennsylvani resentations, board mee ated a few blocks from the	n Leadership ope e Center's own e a Avenue, NW It tings, staff trainir ne White House	ducational programs The Ma coffers contemporary archite g and retreats, and other ev The conference center also p	n Washington, DC that are availa irriott Learning Complex is locate ecture and high tech features pro	ble for organizations to hold a d in the Ronald Reagan Building viding an atmosphere that is ideal at 1575 I Street, NW and is a full-
4d	Other program service	es (Describe in Sch	edule O) See	also Additional Data fo	or Description	
	(Expenses \$	1,239,476 inc	luding grants o	of\$) (Revenue \$	1,709,866)
4e	Total program service	expenses ► \$	13,192,41	.1		

art TV	Chack	list of	Deguired	Schedules
	CHECK	MISL OI	Reuulleu	Julieuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		No
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Νo
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		Νο
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Νo
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Νο
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Νo
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	Yes	

Part V	Statements Regarding Other IRS Filings and Tax Compliance	

			Yes	No				
la	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable							
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0	-						
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b						
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο				
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b						
la	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)?	4a		No				
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts							
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο				
c	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?							
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo				
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
1	Organizations that may receive deductible contributions under section 170(c).							
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes					
	file Form 8282?	7c		Νo				
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	1						
	benefit contract?	7e		Νo				
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No				
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		No				
n	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		Νo				
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8						
)	Sponsoring organizations maintaining donor advised funds.							
а	Did the organization make any taxable distributions under section 4966?	9a						
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b						
0	Section 501(c)(7) organizations. Enter							
	Initiation fees and capital contributions included on Part VIII, line 12 10a	-						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1						
.1	Section 501(c)(12) organizations. Enter							
	Gross income from members or shareholders	_						
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)							
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the							
	year T2D	_	, !					

1575 I Street NW Washington, DC 20005 (202) 326-9550

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

Se	ection A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body 1a 14						
b	Enter the number of voting members that are independent 1b 0						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1					
	other officer, director, trustee, or key employee?	2		Νo			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No			
6	Does the organization have members or stockholders?	6		No			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the						
	governing body?	7a	Yes				
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ection B. Policies (This Section B requests information about policies not required by the Internal						
Re	evenue Code.)						
			Yes	No			
	Does the organization have local chapters, branches, or affiliates?	10a		Νo			
Ь	b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?						
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form						
11A	11A Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	to conflicts?						
13	describe in Schedule O how this is done	12c	Yes				
14	Does the organization have a written document retention and destruction policy?	14	Yes				
15	Did the process for determining compensation of the following persons include a review and approval by		163				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	.	v				
	The organization's CEO, Executive Director, or top management official	15a 15b	Yes	Νο			
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)	130		1110			
	The state and by describe the process in schedule of (see instructions)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Νo			
Ь	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the						
	organization's exempt status with respect to such arrangements?	16b					
Se	ection C. Disclosure						
17	List the States with which a copy of this Form 990 is required to be filed▶						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table						
20	State the name, physical address, and telephone number of the person who possesses the books and records of th	ıe orga	nızatıor	n 🕨			
	heidi robey						

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

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

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

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

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

Check this box if the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	(C) Position (check all that apply)						(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Former Highest compensated employee Key employee Officer Institutional Trustee or director		Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations			
See add'l data										

- 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person

4	Yes	
5		No

No

Section B. Independent Contractors

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

(A)	(B)	(C)					
Name and business address	Description of services	Compensation					
Hargrove Inc One Hargrove Drive Lanham, MD 20706	Trade Show & Event Services	721,631					
PCI Communications 3015 Colvin Street Alexandria, VA 22314	Audo/Visual Services	387,710					
Projection Presentation Technology PO Box 890472 Charlotte, NC 28289	Event Production Services	379,133					
KUSHNER & ASSOCIATES 3444 CLOUDCROFT DRIVE Malibu, CA 90265	transportation services	135,721					
2 Total number of independent contractors (including but not limited to those listed above \$100,000 in compensation from the organization ►4	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization •4						

Form 990 (2009)										
Part V	/	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
#\$ #	1a	Federated camp	paigns 1a							
g a	ь	Membership du	es							
3,€	С	Fundraising eve	ents 1c	299,390						
ਜ਼ੁੱਧੂ ਜ਼ੁੱਧੂ	d		rations 1d							
Sign Sign	e	Government grants								
ž Ž	f	similar amounts no	ons, gifts, grants, and 1f ot included above	489,339						
きま	g		butions included in							
Contributions, gifts, grants and other similar amounts	h	lines 1a-1f \$ Total. Add lines	s 1a-1f	▶	788,729					
				Business Code						
mue	2a	meetings and expo		900,099	5,052,218	5,052,218				
Program Serwce Revenue	ь	professional develo	opme	900,099	3,499,878	3,499,878				
	c	sponsorships		900,099	1,709,431			1,709,431		
E.	d	learning center fac	ılı	900,099	783,623			783,623		
<u> </u>	e	magazines and jou	ırnal	900,099	435	435				
200	f	All other progra	am service revenue							
Ě	g	Total. Add lines	s 2a-2f		11,045,585					
	3	Investment inc	ome (including dividen	ds, interest						
	_		ar amounts)	⊢	392,445			392,445		
	5	Income from investment of tax-exempt bond pRoyalties		· · · · · · · · · · · · · · · · · · ·	1,197,564			1,197,564		
		Noyunnes .	(ı) Real	(II) Personal						
	6a	Gross Rents								
	ь	Less rental expenses								
	С	Rental income or (loss)								
	d		me or (loss)							
	_	Gross amount	(ı) Securities	(II) O ther						
	7a	from sales of assets other								
		than inventory	240, 200							
	Ь	Less cost or other basis and	340,200							
	c	sales expenses Gaın or (loss)	-340,200							
	d	Net gaın or (los	s)	▶	-340,200			-340,200		
άu	8a	Gross income for events (not inc								
Other Revenue		\$,390							
ě		of contributions See Part IV, lin	reported on line 1c)							
<u>.</u>			а	213,448						
Ţ,	Ь		penses b	426,613	212.165			212.165		
O	c 9a		loss) from fundraising from gaming activities	events F	-213,165			-213,165		
	-	See Part IV, lin								
	١.		a							
	р С		penses b (loss) from gaming activ	vities F						
		Gross sales of		Vicios I I I						
		returns and allo	owances .							
	ь	less cost of a	a oods sold b							
	c c		loss) from sales of inve	entory ►						
		Miscellaneous	s Revenue	Business Code						
	11a	MAILING LIST		900,099	50,535			50,535		
	ь									
	С	A.II								
	d e	All other revenu								
		rotal. A du lines	, 11a-11u		50,535					
	12	Total revenue.	See Instructions .	▶↑	12,921,493	8,552,531	0	3,580,233		

Part IX Statement of Functional Expenses

Do ne	ll other organizations must complete column (A) but are not required to ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising See Part IV, line 17				
f	Investment management fees	74,714	74,714		
g	Other	778,530	705,758	-7,500	80,272
12	Advertising and promotion	172,253	147,975		24,278
L3	Office expenses	2,395,621	2,338,897	-30,426	87,150
L4	Information technology	1,576	1,576		
L5	Royalties	2,329	2,329		
16	Occupancy	716,954			
17	Travel	231,143	212,054		19,089
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,906,571	2,568,295	4,220	334,056
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	230,847	195,267	35,580	
23	Insurance	38,989	36,076		2,913
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	PERSONNEL SALARY EXPENS	3,028,137	2,928,241	9,582	90,314
Ь	OVERHEAD ALLO CATION	2,230,111	2,179,715	2,962	47,434
С	PERSONNEL BENEFITS	654,638	514,713	124,032	15,893
d	HONORARIA	342,932	342,932		
e	CREDIT CARD EXPENSE	159,330	157,572		1,758
f	All other expenses	-214,110	195,169	-426,613	17,334
25	Total functional expenses. Add lines 1 through 24f	13,750,565	13,192,411	-162,337	720,491
26	Joint costs. Check here ► ☐ If following SOP 98-2				
	Complete this line only if the organization reported in column (B) joint costs from a combined educational				

Part X Balance Sheet (A) (B) Beginning of year End of year 1 1 Cash—non-interest-bearing 1,352,448 2 1,447,908 2 153,643 3 3 4 2.182.495 1.976.547 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net Inventories for sale or use 8 150,110 9 117,518 Land, buildings, and equipment cost or other basis Complete 1.921.721 10a 10a Part VI of Schedule D 10b 1.583.334 338.387 b Less accumulated depreciation 528,275 **10c** 15.321.408 16.705.668 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 19,688,379 16 20.586.028 399.191 17 645.614 17 Accounts payable and accrued expenses . 18 18 1,546,512 19 1,316,438 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 9.101.356 25 Other liabilities Complete Part X of Schedule D 25 9,404,122 26 **Total liabilities.** Add lines 17 through 25 11,047,059 11,366,174 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 8.587.356 9,165,890 27 Unrestricted net assets 27 28 53.964 28 53.964 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances 8,641,320 33 33 9,219,854 34 Total liabilities and net assets/fund balances 19.688.379 20.586,028 34

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization CENTER FOR ASSOCIATION LEADERSHIP

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

Attach to Form 990 or Form 990-EZ. See separate instructions.

Inspection **Employer identification number**

Par	-4 T	Dono	on for Dul	blic Charity Stat	um /All oro	anizations	must same	lata this na	52-130048			
				blic Charity Stat e foundation because						u ucuons		
1				on of churches, or as:					. ,			
2	<u>'</u>			in section 170(b)(1)				Λ±ΛΑΛ.).				
3	<u>'</u>			perative hospital serv				n 170(b)(1)(A)(iii)			
4	,			organization operate						NANIII) Ent	erthe	
-	•			cy, and state	sa m conjun	ction with a	nospital desc	in see	ion 17 0 (,(A, (III), 2 III	er tile	
5	Γ	An orga	ınızatıon ope	erated for the benefit	of a college	or universit	y owned or o	perated by a (governmenta	l unit describ	ed in	
		section	170(b)(1)(A	A)(iv). (Complete Pa	rt II)							
6		A feder	al, state, or	local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)	(A)(v).			
7	▽	describ	ed in	t normally receives a A)(vi) (Complete Pa		l part of its	support from	a government	tal unit or fro	m the genera	ıl public	:
8	Г			described in section		A)(vi) (Con	nplete Part II)				
9	Γ			t normally receives					itions, memb	ership fees,	and gro	SS
		receipt	from activi	ties related to its ex	empt functio	ns—subjec	t to certain ex	cceptions, an	d (2) no more	than 331/30	√of	
		ıts supp	ort from gro	ss investment incom	ne and unrel	ated busine	ss taxable in	come (less se	ection 511 ta	x) from busi	nesses	
		acquire	d by the org	anızatıon after June 3	30,1975 S	ee section 5	509(a)(2). (Co	omplete Part	III)			
10	Γ	Anorga	ınızatıon org	anızed and operated	exclusively	to test for p	oublic safety	See section 5	09(a)(4).			
11	Γ	one or i	nore publicly	anized and operated y supported organiza pes the type of suppo b Type II	tıons descri ortıng organı	bed in secti zation and o	on 509(a)(1)	or section 50 s 11e through	09(a)(2) See	section 509	(a)(3).	Check
e f	ı	other th section	ian foundatio 509(a)(2) rganization r	ox, I certify that the con managers and other	er than one	or more pub	licly supporte	ed organizatio	ons described	in section 5	09(a)(1) or
g		Since A		006, has the organiz	ation accep	ted any gıft	or contribution	on from any of	f the			
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithe	ralone or t	ogether with p	persons desc	rıbed ın (ıı)		Yes	No
		and (III)	below, the g	governing body of the	the suppor	ted organiza	ation?			11g(i)		
		• •	•	r of a person describ						11g(ii)	
		(iii) a 3	5% controll	ed entity of a person	described i	n (ı) or (ıı) a	bove?			11g(iii)	
h		Provide	the followin	g information about t	the supporte	d organizat	ion(s)					
9	(i) Name suppo ganiz	e of	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e lion in ted in erning	Did you no organiza col (i) o	otify the tion in f your	(vi) Is th organizat col (i) org	e Ion In Ianized	A m	vii) ount of oport?
				instructions))	Yes	No	Yes	No	Yes	No		
Tota												

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if yo	ou checked the	box on line 5,	7, or 8 of Part I.	.)			
	ection A. Public Support	1	_	 	Г			
Cale	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	3,543,08	9 3,605,549	1,047,534	666,903		788,729	9,651,804
	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	3,543,08	9 3,605,549	1,047,534	666,903		788,729	9,651,804
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							1,126,281
6	(f) Public Support. Subtract line 5 from line 4							8,525,523
S	ection B. Total Support		•					
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
-	beginning in) A mounts from line 4	3,543,089	806,923	1,047,534	666,903		788,729	9,651,804
7 8	Gross income from interest,	3,313,003	000,323	1,017,331	000,303		700,723	3,031,001
0	dividends, payments received on securities loans, rents, royalties and income from similar sources	797,211	806,923	630,635	1,232,567	1,	,590,009	5,057,345
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets		778					778
11	Total support (Add lines 7 through 10)							14,709,927
12	Gross receipts from related activiti	es, etc (See ins	tructions)			12		56,584,310
13	First Five Years If the Form 990 is check this box and stop here		·	, thırd, fourth, or fı	fth tax year as a	501(c)(3	3) organız	eation, ▶□
<u></u>	ection C. Computation of Pub Public Support Percentage for 2009			11 column (f))		44		E7 060 0
15	Public Support Percentage for 2008	•		co.u (1))		14		57 960 %
	33 1/3% support test—2009. If the	,	•	von line 12 li	no 14 to 22 4/20/	15 ar mara		63 620 %
	and stop here. The organization qua 33 1/3% support test—2008. If the box and stop here. The organization	alıfıes as a publıc ı organızatıon dıd	ly supported orga not check the bo	nization x on line 13 or 16:			,	► ✓
17a	10%-facts-and-circumstances test- is 10% or more, and if the organiza in Part IV how the organization mee	—2009. If the org tıon meets the "f	anization did not of acts and circums	check a box on line tances" test, chec	k this box and st	op here.	Explain	·
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the organ	nızatıon meets th	e "facts and circu	mstances" test, c	heck this box and	stop he	ere.	
18	Explain in Part IV how the organiza supported organization Private Foundation If the organizat							▶ □
	instructions		20,	, , , = . = .	,			▶ ┌

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	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						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **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. 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

Schedule A (Form 990 or 990-EZ) 2009

Additional Data

Software ID: Software Version:

EIN: 52-1300485

Name: CENTER FOR ASSOCIATION LEADERSHIP

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

	TII TITOGIUM SCIVICO	Accomplic	minema (see the insti	actions,	
4d. Other program	services				
(Code) (Expenses \$	25,695	including grants of \$) (Revenue \$	1,709,866)
ocus on critical fac executives and boa	tors to enhance their organiza	tions The Ce ed secondary,	nter implements and facilitate qualitative and quantitative m	nt by providing resources that versity is the application of research finethods. Thought provoking res	ndıngs by
(Code) (Expenses \$	790,846	including grants of \$) (Revenue \$)
oncern Industry p		t and understa	anding of the needs of the ass	essionals to interact on issues ociation professionals and the	
(Code) (Expenses \$	396,179	including grants of \$) (Revenue \$)
connect with one an receptions to compl	other in meaningful ways to a	dvance thems	elves both personally and prof	ofessionals in the Washington E fessionally From monthly netw I a community of peers, advanc	orkıng
(Code) (Expenses \$	2,810	including grants of \$) (Revenue \$)
orofession, providin association leaders	g a serious outlet for the explo The Journal of Association Le	oration of new adership cove	ideas, models and themes afforers all association manageme	genda-setting publication for t ecting the future of association nt and leadership topics, placir ategic leadership, and innovati	s and ng a particular
(Code) (Expenses \$	23,946	including grants of \$) (Revenue \$)
y providing though	t leadership on trends and iss	ues affecting t	the non-profit sector The prog	dvance knowledge in associatio gram focuses on identifying crit develop insights that will prom	ical issues in

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and 1	ndepende	ent Co	ntra	cto	rs					
(A) Name and Title	(B) Average hours per	Posi t	((tion (hat a	(che)		- I	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
ROBIN LOKERMAN CMM CHAIRMAN, center assn le	2 00	Х		х				0	0	0
velma r hart CAE chairman, asae	2 00	Х		х				0	0	0
peter J O'NEIL CAE seCRETARY/TREASURER	2 00	Х		х				0	0	0
paul pomerantz CAE ımmed past chrmn, center	2 00	Х						0	0	0
steVEN BERGER board member	2 00	Х						0	0	0
jeff DE CAGNA board member	2 00	Х						0	0	0
loretta DELUCA board member	2 00	Х						0	0	0
abe eshkenazı cscp fac board member	2 00	х						0	0	0
paul GANNON board member	2 00	Х						0	0	0
agathA JOHNSON MA CAE board member	2 00	х						0	0	0
janiCE LACHANCE board member	2 00	Х						0	0	0
luc MAENE board member	2 00	Х						0	0	0
lisa MULLINGS ESQ CAE board member	2 00	Х						0	0	0
susan neely cae board member	2 00	Х						0	0	0
john graham IV CEO	2 00			х				0	774,179	233,473
heidi robey vp FINANCE & cfo	2 00			х				0	160,599	29,445
susan robertson PRESIDENT, CENTER ASSN L	20 00			х				0	336,867	42,993
anne blouin chief learning officer	40 00				х			178,958	0	27,982
karl ely vp ADVERTISING & SPONSOR	18 00				х			80,771	98,721	35,819
greta kotler chief knowledge & strate	36 00				х			166,433	18,491	31,507
Reginald Henry chief Technology officer	2 00				х			0	176,588	36,900
Robert Skelton chief administrative off	2 00				х			0	174,234	46,816
John Lee IV VP MARKETING, COMM & BR	2 00					Х		0	141,760	17,421
Ronald McNally chief volunteer relation	4 00					Х		16,643	149,787	31,091
Monica Dignam VP of research	10 00					х		39,936	119,810	34,063

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours	l	(C) Position (check all that apply)				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other	
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
AMY LEDOUX SR VP, MEETINGS	34 00					х		117,499	20,735	18,119
MARK MILROY SR DIR, LEARNING	40 00					х		121,600	0	27,792
susan sarfatı FORMER EXEC VP	0 00						х	477,397	0	13,147
lorı derkay Former ad & sponsorship	0 00						х	157,333	0	7,955

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
meetings and expo	900,099	5,052,218	5,052,218		
professional developme	900,099	3,499,878	3,499,878		
sponsorships	900,099	1,709,431			1,709,431
learning center facili	900,099	783,623			783,623
magazınes and journal	900,099	435	435		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PERSONNEL SALARY EXPENS	3,028,137	2,928,241	9,582	90,314
OVERHEAD ALLOCATION	2,230,111	2,179,715	2,962	47,434
PERSONNEL BENEFITS	654,638	514,713	124,032	15,893
HONORARIA	342,932	342,932		
CREDIT CARD EXPENSE	159,330	157,572		1,758

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As Filed Data

DLN: 93493196009061

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public Inspection

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization CENTER FOR ASSOCIATION LEADERSHIP 52-1300485 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located 🛌 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 🕨 🛊 🔛 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

	i lecolus, check an	v of th	e foll	lowina th	at are	e a significa	ant u	se of its collec	tion	
tems (check all that apply)	,	•		_						
Public exhibition		d	Г	Loan or	rexch	nange prog	rams			
Scholarly research		e	Γ	Other						
Preservation for future generations										
	ollections and expla	ın hov	v the	y further	the o	rganızatıor	ı's ex	empt purpose	ın	
During the year, did the organization solicit (or receive donations	ofart	t, hıs	torical tr	easu	res or othe	rsım	ılar		
									•	No
						answere	d "Y	es" to Form 9	990, 	
ncluded on Form 990, Part X?					ons o	r other ass	ets r	not	┌ Yes	☐ No
.f "Yes," explain the arrangement in Part XI\	/ and complete the	follow	ıng ta	able		Γ		Aı	nount	
Beginning balance							1c			
Additions during the year							1d			
Distributions during the year							1e			
Ending balance							1f			
-	orm 990. Part X. lin	e 21?				L			□ Yes	
									,	,
		n ans	were	ed "Yes	" to F	orm 990	Par	t IV. line 10.		
Elias Willelle Fallasi Complete	(a)Current Year								(e)Four	r Years Back
Beginning of year balance	8,570,072		10),357,141						
Contributions										
Investment earnings or losses	983,737		-1	1,329,273						
Grants or scholarships										
Other expenditures for facilities	395,674			457,796						
Administrative expenses										
End of year balance	9,158,135		8	3,570,072						
Provide the estimated percentage of the yea	r end balance held a	as								
Board designated or quasi-endowment 🕨	100.000 %									
Permanent endowment 🕨 👤 0 %										
Term endowment 🕨 💮 0 %										
Are there endowment funds not in the posses organization by	ssion of the organiz	atıon t	hat a	are held a	and a	dmınıstere	d for	the	Ye	s No
(i) unrelated organizations								3a	(i)	Νο
(ii) related organizations								3a	ii)	Νο
								3	ь 📗	
VI Investments—Land, Buildings	s, and Equipme	nt. S	<u>ee F</u>	orm 99	0, Pa	rt X, line	10.			
Description of investment								· · ·	ed (d)	Book value
and										
uildings										
easehold improvements										
			$\overline{}$							
quipment										
quipment						1,92	1,721	1,583,	334	338,387
	Preservation for future generations Provide a description of the organization's content of the organization's content of the organization's content of the organization solicit of the organization solicit of the organization of the organization solicit of the organization and agent, trustee, custod included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV Beginning balance Additions during the year Distributions during the year Ending balance Of the organization include an amount on Formatic of the organization o	Scholarly research Preservation for future generations Provide a description of the organization's collections and explaint XIV During the year, did the organization solicit or receive donations issests to be sold to raise funds rather than to be maintained as IV Escrow and Custodial Arrangements. Comple Part IV, line 9, or reported an amount on Form 95 sthe organization an agent, trustee, custodian or other intermediculed on Form 990, Part X? f "Yes," explain the arrangement in Part XIV and complete the Beginning balance Additions during the year Distributions during the year Ending balance Oid the organization include an amount on Form 990, Part X, line f "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization of the organization in the properties of the organization of the organization by i) unrelated organizations f "Yes" to 3a(ii), are the related organizations listed as require properties of properties of the organization's endowned by the properties of the properties of the organization's endowned by the properties of the pr	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how cart XIV During the year, did the organization solicit or receive donations of an issest to be sold to raise funds rather than to be maintained as part of IV Escrow and Custodial Arrangements. Complete if Part IV, line 9, or reported an amount on Form 990, Part XIV Is the organization an agent, trustee, custodian or other intermediary included on Form 990, Part XIV If "Yes," explain the arrangement in Part XIV and complete the follow Beginning balance Additions during the year Ending balance Old the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV I Endowment Funds. Complete if the organization ans Geginning of year balance Ontributions Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Ord the estimated percentage of the year end balance held as Goard designated or quasi-endowment Ord organization by I unrelated organizations If "Yes" to 3a(II), are the related organizations listed as required on S Describe in Part XIV the intended uses of the organization's endowment of Investments—Land, Buildings, and Equipment. S Description of investment	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how the Part XIV During the year, did the organization solicit or receive donations of art, his sesets to be sold to raise funds rather than to be maintained as part of the Part IV, line 9, or reported an amount on Form 990, Part X s the organization an agent, trustee, custodian or other intermediary for concluded on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following to the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV In Endowment Funds. Complete if the organization answers (a) Current Year (b) Provided the organization include an amount on Form 990, Part X, line 21? In Yes," explain the arrangement in Part XIV In Endowment Funds. Complete if the organization answers (a) Current Year (b) Provided the expenditures for facilities and programs . In Yes the expenditures for facilities and programs . In Administrative expenses . In O % Permanent endowment o 0 % Permanent organizations o 0 o 0 o 0 o 0 o 0 o 0 o 0 o 0 o 0 o	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further var XIV Provide a description of the organization solicit or receive donations of art, historical triples and the organization solicit or receive donations of art, historical triples are triples and the organization and explain how they further var XIV Escrow and Custodial Arrangements. Complete if the organization Part IV, line 9, or reported an amount on Form 990, Part X, line 2: The step of the organization and agent, trustee, custodian or other intermediary for contribution cluded on Form 990, Part X? The step of the organization and the following table of the organization and the pear of the organization include an amount on Form 990, Part X, line 2: The stributions during the year or the organization answered "Yes or the organization include an amount on Form 990, Part X, line 2: The stributions during the year or the organization answered "Yes or the organization answered organization and the organization answered	Scholarly research Preservation for future generations Provide a description of the organization solicit or receive donations of art, historical treasuses to be sold to raise funds rather than to be maintained as part of the organization Part IV. In Escrow and Custodial Arrangements. Complete if the organization Part IV, line 9, or reported an amount on Form 990, Part X, line 21. In the organization an agent, trustee, custodian or other intermediary for contributions on cluded on Form 990, Part X? 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If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part 3, line 21? In the organization include an amount on Form 990, Part 3, line 21? In the organization include an amount on Form 990, Part 3, line 21? In description of lower Yes and the Additional answered "Yes" to Form 990, Part 3, line 10, 10000 % In the organization by 10000 %	Preservation for future generations Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose 'art XIV During the year, did the organization solicit or receive donations of art, historical treasures or other similar sizes to be sold to raise finds rather than to be maintained as part of the organization's collection? IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form '9 Part IV, line 9, or reported an amount on Form '990, Part X, line 21. Steen organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form '990, Part X? F'Yes, "explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Ending balance It In In It In In It	Preservation for future generations Torvide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV Puring the year, did the organization solicit or receive donations of art, historical treasures or other similar sasets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part X? Yes Press', explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year Distributions during the Press' explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance . (a)Cument Year (b)Pror Year (c)Two Years Back (d)Thise Years Back (e)Prou Seagnantian or scholarships . (a)Cument Year (b)Pror Year (c)Two Years Back (d)Thise Years Back (e)Prou Seagnantian or scholarships . (a)Cument Year (b)Pror Year (c)Two Years Back (d)Thise Years Back (e)Prou Seagnantian or scholarships . (a)Cument Year (b)Pror Year (c)Two Years Back (d)Thise Years Back (e)Prou Seagnantian or scholarships . 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Investments—Other Securities. See	Form 990, Part X, line 1 T	
(a) Description of security or category (including name of security)	(b)Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		,
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
		12
Part VIII Investments—Program Related. See	Form 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		dost of end of year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin	e 15.	
	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin	e 15. tion	
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	e 15. tion	(b) Book value
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip	e 15. tion 5.) , line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	e 15. tion	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Deferred rent	e 15. tion 5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	5.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Deferred rent	e 15. tion 5.) , line 25. (b) A mount	
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Deferred rent	e 15. tion 5.) , line 25. (b) A mount	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes Deferred rent	e 15. tion 5.) , line 25. (b) A mount	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	12,921,493
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	13,750,565
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-829,072
4	Net unrealized gains (losses) on investments	4	1,407,606
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	1,407,606
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	578,534
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	14,755,712
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 426,613		
e	Add lines 2a through 2d	2e	1,834,219
3	Subtract line 2e from line 1	3	12,921,493
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Ь	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	12,921,493
	Reconciliation of Expenses per Audited Financial Statements With Expenses	s per	
1	Total expenses and losses per audited financial statements	1	14,177,178
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
с	Other losses	1	
d	Other (Describe in Part XIV) 2d 426,613		
e	Add lines 2a through 2d	2e	426,613
3	Subtract line 2e from line 1	3	13,750,565
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	13,750,565

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

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

Ident if ier	Ret urn Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Board designated fund, the corpus of which is to remain intact and the investment income from which is to be used for research benefiting the association community. An established spending policy of 5-7% of the average of the portfolio as of December 31 for the prior 3 years is used to determine the annual budget submitted for board approval.
Part X	Description of Uncertain Tax Positions Under FIN 48	The Organization has adopted the accounting standard related to uncertain income tax positions. The standard requires that an uncertain income tax position must be more likely than not (i.e., greater than 50% likelihood of realization) before it is recognized in the consolidated financial statements. Furthermore, the standard requires that the amount recognized be the same as that which would be determined as a result of a review by tax authorities having all relevant information. During the year ended August 31, 2010, management performed a thorough analysis of all income tax positions and did not identify any that were deemed uncertain. At a minimum, the August 31, 2007 through 2010 tax years are open for examination by taxing authorities.
Part XII, Line 2d - Other Adjustments		special event expense 426613 Temp restricted contributions and special event revenue 0
Part XIII, Line 2d - Other Adjustments		special event expense 426613 Temp restricted contributions and special event revenue 0

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As Filed Data -

DLN: 93493196009061

2009

OMB No 1545-0047

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990. Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspect ion

Employer identification number Name of the organization CENTER FOR ASSOCIATION LEADERSHIP 52-1300485 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States Activites per Region (Use Schedule F-1 (Form 990) if additional space is needed) (d) Activities conducted in (e) If activity listed in (d) (f) Total expenditures (a) Region (b) Number of (c) Number of region (by type) (ie, is a program service, for region fundraising, program services, offices in the employees or describe specific type of grants to recipients located in region agents in region service(s) in region the region) NORTH AMERICA 97,506 PROGRAM SERVICES ınvıtatıonal forum on leadership and management STUDY MISSION 53,290 argentina and brazil program services INVITATIONAL FORUM

Part IV	, line 15, for an	sistance to Orgar y recipient who recensional	eived more than \$5	es Outside the Ur ,000. Check this box	nited States. Composite of the composite	plete if the organiza received more tha	tion answered "Yes' n \$5,000	'to Form 990, ► 厂
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2 Enter total n tax-exempt	number of recipions by the IRS, or f	ent organizations lis or which the grante	ted above that are e or counsel has pr	recognized as chari ovided a section 50	ties by the foreign o 1(c)(3) equivalency	country, recognized letter	as . ►	
3 Enter total n	umber of other	organizations or en	tities					: (Earm 990) 2009

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed. (c) Number of (b) Region (d) A mount of (e) Manner of cash (a) Type of grant or (f) A mount of (g) Description (h) Method of assistance cash grant disbursement of non-cash valuation recipients non-cash (book, FMV, assistance assistance appraisal, other)

Schedule F (Form 990) 2009

Identifier	ReturnReference	ın Part I, line 2, and any additional information. Explanation

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DLN: 93493196009061

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization CENTER FOR ASSOCIATION LEADERSHIP **Employer identification number**

					52-1300485	5
	Activities. Comple filers are not require			tion answered "Yes" is part.	to Form 990, Part IV	/, line 17.
1 Indicate whether the o	organization raised fund:	s through a	any of the	following activities Ch	eck all that apply	
a Mail solicitations			e	☐ Solicitation of no	n-government grants	
b Internet and e-ma	ıl solıcıtatıons	☐ Solicitation of go	vernment grants			
c Phone solicitation						
d In-person solicita	tions					
2a Did the organization h or key employees liste				dividual (including office ection with professional		Г _{Yes} Г N
b If "Yes," list the ten hi to be compensated at				ers) pursuant to agreem 0-EZ filers are not requ		
(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contribi	er have dy or rol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No		,	
			▶			
	ch the organization is re	gistered o	rlicense	d to solicit funds or has	been notified it is exem	pt from registration or
licensing						

			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Tot (Add col	(a) the	
			FOOD & WINE CLASSIC (event type)	(event type)	(total number)	col	(c))	
皇	1	Gross receipts	370,816	100,522	41,500		512	2,838
Reveilue	2	Less Charitable contributions	185,408	100,522	13,460		299	9,390
	3	Gross income (line 1 minus line 2)	185,408	3	28,040		213	3,448
	4	Cash prizes						
ဖ မ	5	Non-cash prizes	80		1,340		:	1,420
Expenses	6	Rent/facility costs						
<u>Š</u>	7	Food and beverages						
.	8	Entertainment						
اً ۵	9	Other direct expenses .	348,358	26,280	50,555		42!	5,193
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)			426	5,613
1	11	Net income summary Combine li	nes 3, column d, and line	10			-213	3,16
Part	1111	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pai	rt IV, line 19, or repo	rted more	e than	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col col	_	_
_	1	Gross revenue						
မွ	2	Cash prizes						
penses	3	Non-cash prizes						
മ്	4	Rent/facility costs						
Dieg Dieg	5	Other direct expenses						
	6	Volunteer labor	Г Yes	Г Yes	Г Yes%			
		Direct expense summary Add line						
	8	Net gaming income summary Com	bine lines 1, column d, ar	nd line 7	<u> </u>		Yes	No
				tuutiaa			163	140
9		er the state(s) in which the organiza he organization licensed to operate				· 9a	l I	
9 a	Is th					· 9a		
9 a b	Is th	he organization licensed to operate No," Explain e any of the organization's gaming	gaming activities in each	n of these states?		· 9a		
9 a b	Is th	he organization licensed to operate No," Explain	gaming activities in each	n of these states?				
9 a b .0a	Is th If "N Were If "Y	he organization licensed to operate No," Explain e any of the organization's gaming	gaming activities in each	n of these states?	the tax year?			

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter 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 contract 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			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
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 ▶ \$	1	

DLN: 93493196009061

Employer identification number

OMB No 1545-0047

Compensation Information

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

CEN	TER FOR ASSOCIATION LEADERSHIP		52-1300485			
Pa	rt I Questions Regarding Compensation					
					Yes	Νo
1a	Check the appropriate box(es) if the organization provide 990, Part VII, Section A, line 1a Complete Part III to					
	First-class or charter travel	\Box	Housing allowance or residence for personal use			
	Travel for companions	\Box	Payments for business use of personal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organ reimbursement orprovision of all the expenses describe		, , , , ,	1b		
2	Did the organization require substantiation prior to reim officers, directors, trustees, and the CEO/Executive Dir			2		
3	<u> </u>	ldde 스	y Written employment contract Compensation survey or study			
	Form 990 of other organizations	<u> </u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part or a related organization	VI:	I, Section A , line $f 1a$ with respect to the filing organization			
а	Receive a severance payment or change-of-control pay	mer	nt?	4a	Yes	
b	Participate in, or receive payment from, a supplemental	non	iqualified retirement plan?	4b	Yes	
c	Participate in, or receive payment from, an equity-based	d co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide	le th	ne applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must of For persons listed in form 990, Part VII, Section A, line compensation contingent on the revenues of					
а	The organization?			5a	Yes	
b	Any related organization?			5b	Yes	
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, line compensation contingent on the net earnings of	1a,	, did the organization pay or accrue any			
а	The organization?			6a	Yes	
b	Any related organization?			6b	Yes	
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, line payments not described in lines 5 and 6? If "Yes," desc			7		Νo
8	Were any amounts reported in Form 990, Part VII, paid subject to the initial contract exception described in Re in Part III			8		No
9	If "Yes" to line 8, did the organization also follow the rel	butt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation				
		compensation incentive report		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
john graham IV	(I) (II)	0 565,653	0 102,182	0 106,344	0 200,310	0 38,185	0 1,012,674	
heidi robey	(I) (II)	0 149,985	0 6,870	0 3,744	0 26,099	0 5,352	0 192,050	(
susan robertson	(I) (II)	0 289,239	0 40,470	0 7,158	0 37,950	0 11,877	0 386,694	(
anne blouin	(I) (II)	153,086 0	24,165 0	1,707 0	21,787 0	10,158 0	210,903	
karl ely	(ı) (ıı)	77,864 95,168	2,673 3,267	234 286	10,091 12,333	9,893 12,092		
greta kotler	(ı) (ıı)	156,131 17,347	7,952 883	2,350 261	20,104 2,234	14,108 1,568		
Reginald Henry	(ı) (ıı)	0 167,026	0 8,565	0 997	0 21,757	0 16,789	0 215,134	(
Robert Skelton	(ı) (ıı)	0 164,190	0 8,665	0 1,379	0 27,101	0 28,680	230,015	(
John Lee IV	(ı) (ıı)	0 134,720	0 6,475	0 565	0 16,221	0 2,486	0 160,467	(
Ronald McNally	(ı) (ıı)	15,746 141,718	803 7,227	94 842	2,043 18,390	1,521 13,692		
Monica Dignam	(ı) (ıı)	38,519 115,557	931 2,794	486 1,459	4,974 14,920	5,159 15,477		
AMY LEDOUX	(ı) (ıı)	111,533 19,682	5,491 969	475 84	13,973 2,466	2,542 448		
susan sarfatı	(ı) (ıı)	0	0	477,397 0	0	18,109	495,506	40,757
lorı derkay	(ı) (ıı)	0	0	157,333 0	3,839 0	6,633	167,805	25,449

Part III Supplemental Information

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

Ident if ier	Ret urn Ref erence	Explanation
	· ·	LORI DERKAY SEVERANCE PAY \$121,333 SUSAN SARFATI SEVERANCE PAY, \$365,560 SUSAN SARFATI 457F DISTRIBUTION, \$80 JOHN GRAHAM SERP FUNDING, \$178,561
		DETERMINATION OF ANNUAL INCENTIVE COMPENSATION FOR THE CENTER'S CEO IS DETERMINED AS FOLLOWS THE TARGET ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARATOR GROUP AS DESCRIBED IN THE ANSWER TO 990, PART VI, QUESTION 15 THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH THE CENTER AND OF ASAE, A RELATED ORGANIZATION THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS ANNUAL INCENTIVE PAY IS NOT DETERMINED AS A SPECIFIC PERCENTAGE OF REVENUES, RATHER, REVENUES ARE UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE
		DETERMINATION OF ANNUAL INCENTIVE COMPENSATION FORTHE CENTER'S CEO IS DETERMINED AS FOLLOWS THE TARGET ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARATOR GROUP AS DESCRIBED IN THE ANSWER TO 990, PART VI, QUESTION 15 THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH THE CENTER AND OF ASAE, A RELATED ORGANIZATION THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS ANNUAL INCENTIVE PAY IS NOT DETERMINED AS A SPECIFIC PERCENTAGE OF NET EARNINGS, RATHER, NET EARNINGS ARE UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE

DLN: 93493196009061

Schedule L

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

CENTER FOR ASSOCIATION LEADERSHIP

Employer identification number

52-1300485 **Part I** Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) Corrected? (a) Name of disqualified person (b) Description of transaction 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization		section 4958	•		•	•	•		•	•	•	•	•	•	•	•	•	•	•	•	•	•	-		>	
	3	Enter the amount of	tax,	ıfany	, on	line 2	2, ab	ove,	reım	burs	ed	by t	he o	rga	nıza	tıon	١.							•	\$	

Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to **(e)** In Approved (g)Written (a) Name of interested person and or from the (c)O riginal (d)Balance due default? by board or agreement? purpose organızatıon? principal amount committee? From Yes Yes No No

Dart IIII Crants or Assistar	 6:44	lana Tantana ataul F				
Total	 	> \$		·	·	

Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(b)Relationship between interested person and the organization	(c)A mount of grant or type of assistance

Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(b) Relationship between interested person and the (c) A mount of transaction (d) Description of transaction			organı	arıng of zatıon's nues?
organization			Yes	No
COMMON BOARD MEMBERS		PLEASE SEE SCHEDULE R FOR ALL REPORTABLE TRANSACTIONS BETWEEN THE CENTER AND THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES		No
BOARD MEMBER AND PRES/CEO OF DETROIT METRO CVB, AN ASAE INDUSTRY PARTNER	225,000	SPONSORSHIPS, ADVERTISING AND EXHIBIT REVENUE \$225,000 IN TOTAL TO ASAE AND THE CENTER FOR ASSOCIATION LEADERSHIP		No
BOARD MEMBER AND VP MARKETING OF TMA RESOURCES, AN ASAE INDUSTRY PARTNER	250,000	SPONSORSHIPS, ADVERTISING AND EXHIBIT REVENUE \$250,000 IN TOTAL TO ASAE AND THE CENTER FOR ASSOCIATION LEADERSHIP		No
BOARD MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS	,	· '		No
BOARD MEMBER AND CEO- INSTITUTIONAL DIV, MCI GROUP	,			No
	between interested person and the organization COMMON BOARD MEMBERS BOARD MEMBER AND PRES/CEO OF DETROIT METRO CVB, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND VP MARKETING OF TMA RESOURCES, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS BOARD MEMBER AND CEO-INSTITUTIONAL DIV,	between interested person and the organization COMMON BOARD MEMBERS BOARD MEMBER AND PRES/CEO OF DETROIT METRO CVB, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND VP MARKETING OF TMA RESOURCES, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS BOARD MEMBER AND CEO-INSTITUTIONAL DIV,	between interested person and the organization COMMON BOARD MEMBERS BOARD MEMBER AND PRES/CEO OF DETROIT METRO CVB, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND YSALES FOR HYATT HOTELS AND MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS BOARD MEMBER AND PRES/CEO OF The ASSOCIATION EXECUTIVES BOARD MEMBER AND SPONSORSHIPS, ADVERTISING AND EXHIBIT REVENUE \$225,000 IN TOTAL TO ASAE AND THE CENTER FOR ASSOCIATION LEADERSHIP BOARD MEMBER AND VP MARKETING OF TMA RESOURCES, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS BOARD MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS BOARD MEMBER AND SOCIATION LEADERSHIP, FOR DIVERSITY INITIATIVE FUNDING BOARD MEMBER AND SERVICES APPLIANCE OF TWO AS A SOCIATION LEADERSHIP, FOR DIVERSITY INITIATIVE FUNDING BOARD MEMBER AND SERVICES	between interested person and the organization COMMON BOARD MEMBERS BOARD MEMBER AND PRES/CEO OF TMA RESOURCES, AN ASAE INDUSTRY PARTNER BOARD MEMBER AND VP SALES FOR HYATT HOTELS AND RESORTS BOARD MEMBER AND PSALES FOR HYATT HOTELS AND MEMBER AND CEO-INSTITUTIONAL DIV, MISSION CONSULTING SERVICES (c) A mount of transaction organization of transaction organization organization of transaction organization organization organization organization organization organization of transaction organization organization of transaction organization organization organization of transaction organization or

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DLN: 93493196009061

OMB No 1545-0047

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Open to Public Inspection

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

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

▶ Attach to Form 990.

Name of the organization
CENTER FOR ASSOCIATION LEADERSHIP

Employer identification number 52-1300485

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 1		THE BOARD MEMBERS OF THE CENTER FOR ASSOCIATION LEADERSHIP ARE ALSO BOARD MEMBERS OF ITS RELATED SECTION 501(C)(6) ASSOCIATION, THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) AS SUCH, THE CENTER'S BOARD MEMBERS TECHNICALLY ARE NOT INDEPENDENT, AS ASAE IS CONSIDERED TO BE "AN ENTITY MORE THAN 35% OWNED" AND IS THEREFORE AN "INTERESTED PERSON" FOR SCHEDULE L REPORTING PURPOSES

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		Directors other than ex officio Directors (ASAE board chairman, president/CEO of ASAE) are nominated by the Leadership Committee and elected by the Board of Directors of ASAE

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The 990 returns are prepared by the 3rd party preparer working with the CFO and Director of Finance. Once the CFO is comfortable with the completeness and accuracy of the document, it is provided to the CEO for review and is uploaded into a secure restricted location within the organization's online system SharePoint prior to filling. Board members are notified that this document is available, for how long and when the return will be filed. The return will be filed as presented if no further adjustments are warranted. The board will receive notification of any additional changes prior to filling. The return is then signed by the CEO and filed appropriately

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Each Board Member and Executive Staff Member is required to annually complete and submit a Disclosure Form detailing any such 'other interests'. The individual also must update the Disclosure Form if any material changes or additions to the submitted information arise during the course of the year. A checklist is manitained and follow up is done until all forms are returned. Once all forms are received, the CEO reviews the disclosures. Any affirmative response deemed unusual or which may appear to constitute an actual, potential or appearent conflict of interest is referred to the Audit committee for determination. The Audit Committee may seek the guidance of counsel and make such determination without the prese nee of the individual whose involvement in such transaction or relationship is under consideration. Audit Committee provided that this determination should be made by the full Board of Directors of ASAE, The Center, or ABSI, and refer the matter shall be referred to the appropriate Board (with or without a recommendation from the Audit Committee) for its consideration, deliberation and resolution, with the assistance of legal counsel and without the presence of the individual whose involvement in such transaction or relationship is under consideration. The appropriate Board shall have final authority over the resolution, with the assistance of legal counsel and without the presence of the individual whose involvement in such insaction or relationship or transaction may represent an actual, potential or apparent conflict or interest, it shall first request additional information in from the individual in question detailing the nature of the relationship or transaction. When evaluating whether a particular transaction or relationship constituties an actual, potential or apparent conflict of interest, the Audit Committee shall consider the following of the activities an actual, potential or apparent conflict of interest, the original particular transaction or reparation for a proparation of a potential or

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		s that previously have been disclosed to, and w aived by, the Audit Committee or the Board of the relevant organization (a) The individual must disclose to the applicable Chairman in advance of any related action to be taken by the Board his/her intent to seek to provid e goods or services as a paid vendor to ASAE, The Center, or ABSI, or to receive a grant or contract from one of the three organizations, (b) The individual must recuse himself/her self from all deliberations and voting related to the contemplated action, (c) If the value of the transaction exceeds \$5,000, ASAE, The Center, or ABSI must, through a request for proposal process, have solicited proposals broadly from other qualified vendors / prospec tive grant or contract recipients and received (or attempted to receive) written bids from at least three such individuals / entities (including the individual in question), (d) The Board must determine (without the presence or participation of the individual) that the transaction is fair and in the best interests of ASAE, The Center, or ABSI based on all of the facts and circumstances, and such determination (including the fact that it was made in the absence of the individual) shall be documented as part of the relevant meeting minu tes (all competing bids received shall be retained as well), and (e) If selected, the individual may not participate in any process by which his/her performance as a vendor / grant or contract recipient is evaluated

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Inne 15a		The Center is staffed by ASAE employees. ASAE's compensation policy is defined in its boar dipolicy manual, and consists of the following. President & CEO Performance Evaluation and Compensation. This responsibility is vested with the ASAE Board of Directors. The ASAE Board of Directors is charged with ensuring that the annual evaluation is conducted and complementation established. A Compensation Committee consisting of the Immediate Past Chairman of the Board, Chairman of the Board, and Chairman-Bect will recommend compensation levels to the ASAE Board of Directors. It is these agreed upon objectives that are used to evaluate performance each year. CEO Compensation Philosophy The compensation package, view do as a whole, should prombe performance based results linked to the achievement of A SAE Bard policy and a strategic goals. The compensation program should encourage an entrepreneural and member service environment in collaboration with the voluniteer lead ership to determine, guide, and oversee the execution of ASAE & The Center's strategic goals and massion. Given the unique set of skills needed to accomplish the mission and goals set forth above, the total compensation – direct and indirect—should be targeted above the market median, yet be demonstrably reasonable relative to the total compensation offered by organizations comparable to ASAE & The Center. The compensation philosophy should be viewed periodically to ensure that it continues to be aligned with ASAEs strategic direction and financial limits and continues to be both reasonable and competitive CEO Compensation levels (including both annual cash compensation and supplemental be nefits) for highly competitive performance. Compensation is benchmarked against data developed by independent consultants using surveys comprised of organizations with similar individual membership and general non-profit organizations, both regional and national. These organizations with similar individual membership and general non-profit organizations is incentively

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, Ine 15a		rity of CEO. Staff compensation policy decisions take into consideration ASAE's overall fill nancial condition, equity within the organization, and competitive salary planning. ASAE's Human Resources Department is responsible for administration of and ongoing internal review of all compensation plans and policies. This compensation review helps ASAE maintain and administer a compensation plan that accurately and fairly reflects each individual's responsibilities and performance. ASAE's staff salary administration program(s) consist of the following. — Job Evaluation - This is a systematic method of determining the value of each job within the association, including review of skills, educational prerequisites and contribution to the organization. — Salary Structure. Positions are evaluated and positions with similar values are placed in a salary grade that is reviewed in terms of its comp etitiveness within the market and our organizational needs. Each grade has a minimum, which is the lowest recommended salary to be offered to an individual who meets the minimum quilifications of the position, a midpoint, representing the salary at which a fully qualified and experienced staff member who satisfactorily performs all the specifications of a position is paid within the marketplace, and a maximum, which is the upper limit of the salary range. A third party is engaged periodically to review the compensation package of the Executive Staff and/or full staff relative to base compensation, bonus and incentive programs comparative to market. — Salary Budget and Guidelines. ASAE's annual salary budget is developed annually in order to allocate monies needed to maintain staff member salaries at competitive levels, subject to budgetary limitations. An annual merit pool is developed and approved as part of the budget cycle. The Chief Administrative Officer is responsible for the administration of the program, and all increases are subject to the approval of the CEO.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Some governing documents are available on the wiebsite - Center Bylaw's, Strategic Framework - what wie do and our promise, Code of Conduct and Board Contact information. The Conflict of Interest Policy is currently not posted, but provided as a sample document upon request. Public inspection copies of the 990 are provided upon request.

ldentifier	Return Reference	Explanation
Form 990, Part XI, line 2c		the audit oversight process has remained unchanged from the prior year

ldentifier	Return Reference	Explanation
		THE CENTER FOR ASSOCIATION LEADERSHIP AND THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) ARE SECTION 501(C) ORGANIZATIONS THAT SHARE BOARD MEMBERS ALL CENTER BOARD MEMBERS ARE ALSO MEMBERS OF THE ASAE BOARD PLEASE SEE SCHEDULES L AND R FOR ADDITIONAL INFORMATION REGARDING BUSINESS TRANSACTIONS BETWEEN THE TWO ENTITIES

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DLN: 93493196009061

OMB No 1545-0047

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

	SSOCIATION LEADERSHIP	Employer ident	tification number			
					52-1300485	
Part I	Identification of Disregarded Entities (Con	/, line 33.)				
	(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Er	(e) id-of-year assets	(f) Direct controlling entity
Part II	Identification of Related Tax-Exempt Orga	nnizations (Complete if th	ne organization ar	nswered "Yes" on F	Form 990, Part	IV, line 34 because it had one
	or more related tax-exempt organizations durin	g the tax year.)				,
	(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity sta (if section 501(c)	atus Direct controlling entity
AMERICAN SC 1575 I ST NW WASHINGTON 53-0026940		membership organization and voice of the association profession	DC	501(c)(6)		
For Privacy	Act and Paperwork Reduction Act Notice, see the Instru	ctions for Form 990.	Cat No 5013	5Y		Schedule R (Form 990) 2009

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

			_	•	. ,								
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	· ·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener mana partn	al or ging ner?
							Yes	No		Yes	No		
1E7E EVE CEDEET NW	RENTAL OF HEADQUARTERS BUILDING	DC	N/A										
		· .							" = 000 B				

Part IV

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
ASAE BUSINESS SERVICES INC 1575 eye street nw washington, DC20005 52-1066386	insurance and other services	DC	N/A	С			
ASAE INSURANCE COMPANY 1575 eye street nw Washington, DC20005 03-0335958	INsurance and other services	DC	N/A	С			

(4) AM SOCIETY OF ASSN EXECUTIVES

(5) AM SOCIETY OF ASSN EXECUTIVES

(6)

					900						
Pa	rt V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV	, line 34, 35, or 36.)									
	Note. Complete line 1 if any entity is listed in Parts II, III or IV			Yes	No						
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-	IV?									
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity		1a		No						
ь	Gift, grant, or capital contribution to other organization(s)		1b		No						
c	c Gift, grant, or capital contribution from other organization(s)										
d	d Loans or loan guarantees to or for other organization(s)										
e	e Loans or loan guarantees by other organization(s)										
f	Sale of assets to other organization(s)		1f		No						
g	g Purchase of assets from other organization(s)										
h	Exchange of assets		1h		No						
i	Lease of facilities, equipment, or other assets to other organization(s)		1i		No						
j	Lease of facilities, equipment, or other assets from other organization(s)		1j		No						
k	Performance of services or membership or fundraising solicitations for other organization(s)		1k		No						
ı	Performance of services or membership or fundraising solicitations by other organization(s)		11		No						
n	Sharing of facilities, equipment, mailing lists, or other assets		1m		No						
n	Sharing of paid employees		1n		No						
0	Reimbursement paid to other organization for expenses		10	Yes							
р	Reimbursement paid by other organization for expenses		1p		No						
q	O ther transfer of cash or property to other organization(s)		1 q	Yes							
r	O ther transfer of cash or property from other organization(s)		1r	Yes							
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationsh	ups and transaction thres	holds								
	(a) Name of other organization	(b) Transaction type(a-r)	(Amount	c) ınvolve	·d						
(1) A	M SOCIETY OF ASSN EXECUTIVES	0		6,03	3,838						
(2) A	M SOCIETY OF ASSN EXECUTIVES	Q		44	7,239						
(3) A	(3) ASAE BUSINESS SERVICES INC										

24,270

18,775

С

R

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets		r) ortionate tions?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) eneral or lanaging partner?	
			Yes	No		Yes	No		Yes	N	
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Form 4562

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93493196009061

OMB No 1545-0172

Department of the Treasury ► See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service Name(s) shown on return Business or activity to which this form relates Identifying number CENTER FOR ASSOCIATION LEADERSHIP Form 990 Page 10 52-1300485 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 1 Maximum amount. See the instructions for a higher limit for certain businesses 1 250,000 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 800,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use (a) Description of property 6 (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 **10** Carryover of disallowed deduction from line 13 of your 2008 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2010 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 **15** Property subject to section 168(f)(1) election . . 15 **16** Other depreciation (including ACRS) 220,038 MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2009 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2009 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (a)Depreciation (e) Convention vear placed in (business/investment (f) Method deduction property period service use only—see instructions) 19a 3-year property **b** 5-year property c 7 - year property d 10-year property e 15-year property f 20-year property 27 5 yrs мм S/L h Residential rental property 27 5 yrs ММ S/L ΜМ i Nonresidential real 39 yrs S/L property MMS/L Section C—Assets Placed in Service During 2009 Tax Year Using the Alternative Depreciation System 20a Class life **b** 12-year 12 yrs **c** 40-year ММ S/L Part IV **Summary** (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 220,038 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V

Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other In	forma	tion (C	aution	: See t	the i	nstruc	tions	for lin	nits f	for pa	sseng	er au	tomot	iles.)
24a Do you have evider	nce to support	the business/inve	stment u	ise claimed	d? ┌ Yes	Гио		2	4b If "\	∕es," ıs	the ev	ıdence	written?	Гүе	sГN)
(a) Type of property (list vehicles first)	of property (list Date placed in investment Cost or		rother (husiness/investment				(f) Recover period	Recovery Method/			(h) Depreciation/ deduction			(i) Elected section 179 cost		
25 Special depreciation allo 50% in a qualified busi	•		y placed	ın service (during the	tax year	and u	ısed mor	e than	25						
26 Property used mor	e than 50%	ın a qualıfıed b	usıness	use										•		
		%									+					
		%														
27 Property used 50%	orless in a		ness us	е												
		%							S/L - S/L -		+			_		
		%							S/L -							
28 Add amounts in c	olumn (h), lır	nes 25 through	27 En	ter here a	and on lu	ne 21, բ	page	1 .	28							
29 Add amounts in c	olumn (ı), lın	e 26 Enter hei	re and o	n line 7,	page 1					•		29				
				_Infor												
Complete this section If you provided vehicles to														se vehic	les	
30 Total business/in	vestment mi	les driven duru	na the	_	a)	(t	-		(c)		(d	I)	1	=)		f)
year (do not inclu			•	Vehi	cle 1	Vehi	cle 2	V	ehicle	3	Vehic	cle 4	Vehi	cle 5	Vehi	cle 6
31 Total commuting	mıles drıven	during the yea	r .													
32 Total other person	nal(noncomn	nuting) miles d	rıven													
33 Total miles driver through 32	during the y		30													
34 Was the vehicle a				Yes	No	Yes	No	Yes	. N	vo v	Yes	No	Yes	No	Yes	No
during off-duty ho	urs? .															1
35 Was the vehicle u owner or related p		by a more tha	ın 5%													
36 Is another vehicle	avaılable fo	r personal use	?.													
		stions for E														
Answer these questio 5% owners or related				eption to	comple	tıng Se	ction	B for v	ehicle	s used	l by e	mploy	ees wh	o are	not mo	re tha
37 Do you maintain a employees?		cy statement tl											our.	Y	es	No
38 Do you maintain a	written polic	cy statement tl	nat prof	nibits per	sonal us	e of vel	hicle	s, exce	pt con	nmutın	g, by					
employees? See t						ers, dire	ector	s, or 1º	% or m	nore ov	vners	•				
39 Do you treat all us			-					•	•	•	•	•	• •			
40 Do you provide movehicles, and reta		•		oyees, ol	btaın ınfo	rmatioi •	n froi	m your	emplo •	yees a • •	bout •	the us •	e of the	e		
41 Do you meet the r	equirements	concerning qu	alıfıed a	automobi	le demor	nstratio	n us	e? (See	ınstrı	uctions	s) .					
Note: If your ansv	ver to 37, 38	, 39, 40, or 41	ıs "Yes	s," do not	t comple	te Sect	ion E	3 for the	cove	red vel	hicles	;				
Part VI Amorti	zation													I	· · · · · ·	
(a) Description of c	(a) (b) Date Description of costs amortization begins			(c) A mortizable amount			(d) Code section			(e) A mortiza period percent		. A m		(f) rtızatı hıs ye:		
42 A mortization of co	osts that bed		r 2009	tax vear	(see ins	truction	ns)		<u> </u>		- 9-					
				,		<u> </u>										
43 A mortization of co	sts that beg	an before your	2009 t	ax year							43					
44 Total. Add amoun	ts ın column	(f) See the ins	tructio	ns for wh	ere to re	port					44					