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Form **990**

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

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

C Name of organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Doing Business As

Number and street (or P O box if mail is not delivered to street address) 555 EAST WELLS

Room/suite 1100

City or town, state or country, and ZIP + 4 MILWAUKEE, WI 53202

D Employer identification number 39-6061326

E Telephone number (414) 272-6071

G Gross receipts $ 10,134,668.

F Name and address of principal officer KAY WHALEN
555 EAST WELLS ST, STE 1100 MILWAUKEE, WI 53202

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website ▶ WWW.AAAAI.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1943

M State of legal domicile WI

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE ADVANCEMENT AND PRACTICE OF ALLERGY AND IMMUNOLOGY THROUGH MEETINGS, EDUCATION, AND BY PROMOTING AND STIMULATING RESEARCH AND STUDY FOR OPTIMAL PATIENT CARE.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	16.
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	15.
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0.
6	Total number of volunteers (estimate if necessary)	6	15.
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	55,410.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	

Activities & Governance

SCANNED JAN 05 2012

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OGDEN, UT

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	2,604,377.	2,758,558.
9	Program service revenue (Part VIII, line 2g)	7,012,059.	6,680,787.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	467,578.	395,516.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	29,480.	93,277.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,113,494.	9,928,138.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,796,575.	1,572,160.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	37,000.	24,000.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	9,550,029.	8,040,580.
18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	11,383,604.	9,636,740.
19	Revenue less expenses Subtract line 18 from line 12	-1,270,110.	291,398.

Expenses

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	19,384,270.	21,588,192.
21	Total liabilities (Part X, line 26)	2,889,034.	3,426,924.
22	Net assets or fund balances Subtract line 21 from line 20	16,495,236.	18,161,268.

Net Assets or Fund Balances

Part II Signature Block

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

Sign Here

X Signature of officer — 5 Nov 2011 Date

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶ ☐	PTIN
James Blinka	James Blinka	11-3-11		P00053434

Firm's name ▶ BDO USA, LLP — Firm's EIN ▶ 13-5381590

Firm's address ▶ 330 E KILBOURN AVENUE, SUITE 950 MILWAUKEE, WI 53202 — Phone no 414-272-5900

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

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2010)

JSA
0E1010 1 000

Part III **Statement of Program Service Accomplishments**
Check if Schedule O contains a response to any question in this Part III . . . . . ☐

1 Briefly describe the organization's mission
THE ADVANCEMENT AND PRACTICE OF ALLERGY AND IMMUNOLOGY THROUGH MEETINGS, EDUCATION, AND BY PROMOTING AND STIMULATING RESEARCH AND STUDY FOR OPTIMAL PATIENT CARE.

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O

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

4a (Code _____) (Expenses $ 4,533,192 including grants of $ 403,523) (Revenue $ 4,082,412)
HOLDING VARIOUS SEMINARS, MEETINGS AND EDUCATIONAL ACTIVITIES TO EDUCATE AND SHARE THE LATEST ADVANCES IN THE RESEARCH, DIAGNOSIS AND TREATMENT OF ALLERGIC AND IMMUNOLOGIC DISEASE. THIS IS DONE THROUGH A NATIONAL ANNUAL MEETING, REGIONAL, LOCAL AND OTHER LIVE CONFERENCES; AND AN ARRAY OF WRITTEN, AUDIO, VIDEO AND MULTIMEDIA ENDURING MATERIALS.

4b (Code _____) (Expenses $ 1,152,410 including grants of $ 917,673) (Revenue $ _____)
RESEARCH AND TRAINING ACTIVITIES INCLUDING GRANTS FOR RESEARCH TO ENCOURAGE FURTHER DEVELOPMENT IN SPECIFIC AREAS OF ALLERGIC AND IMMUNOLOGIC DISEASE IN ADDITION TO GRANTS FOR FACULTY DEVELOPMENT IN ALLERGY/IMMUNOLOGY TRAINING PROGRAMS.

4c (Code _____) (Expenses $ 809,243 including grants of $ 136,714) (Revenue $ 2,384,694)
PUBLICATION OF JOURNAL OF ALLERGY AND CLINICAL IMMUNOLOGY AND OTHER NEWSLETTERS REGARDING DEVELOPMENTS IN THE ALLERGY AND IMMUNOLOGY FIELDS

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

4e **Total program service expenses** ▶ 6,494,845.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2	X	
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		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *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		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments—othersecurities 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*	11b		X
c	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*	11c		X
d	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*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	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 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16	X	
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	X	
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		X
20 a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24 a	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 lines 24b through 24d and complete Schedule K If "No," go to line 25*	24a		X
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		
25 a	**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		X
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		X
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c	X	
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		X
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		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ Yes ☒ No			
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		X
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		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response to any question in this Part V. ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	122		
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?	1c		X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X	
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b		X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X	
b	If "Yes," enter the name of the foreign country ▶ NETHERLANDS ANTILLES See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	13a			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

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

Check if Schedule O contains a response to any question in this Part VI X

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	16		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Does the organization have members or stockholders?	6		X	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ WI,

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ DAN NEMEC 555 EAST WELLS STREET, SUITE 1100 MILWAUKEE, WI 53202
414-272-6071

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

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

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

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

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PAUL A. GREENBERGER IMMEDIATE PAST-PRESIDENT	1.00	X		X				20,000.	0	0.
(2) MARK BALLOW PRESIDENT	10.00	X		X				0.	0	0.
(3) DENNIS K. LEDFORD PRESIDENT-ELECT	5.00	X		X				4,000.	0	0.
(4) DAVID B. PEDEN DIRECTOR	1.00	X						0.	0	0.
(5) ZUHAIR K. BALLAS DIRECTOR	1.00	X						0.	0	0.
(6) MICHAEL H. CLAYTON DIRECTOR	1.00	X						0.	0	0.
(7) A. WESLEY BURKS SECRETARY-TREASURER	3.00	X		X				0.	0	0.
(8) LINDA COX DIRECTOR	1.00	X						0.	0	0.
(9) CHARLOTTE CUNNINGHAM-RUNDLES DIRECTOR	1.00	X						0.	0	0.
(10) MARK S. DYKEWICZ DIRECTOR	1.00	X						0.	0	0.
(11) MARY BETH FASANO DIRECTOR	1.00	X						0.	0	0.
(12) DAVID P. HUSTON DIRECTOR	1.00	X						0.	0	0.
(13) ANNE-MARIE A. IRANI DIRECTOR	1.00	X						0.	0	0.
(14) RICHARD L. WASSERMAN DIRECTOR	1.00	X						0.	0	0.
(15) HUGH H. WINDOM DIRECTOR	1.00	X						0.	0	0.
(16) ROBERT A. WOOD DIRECTOR	1.00	X						0.	0	0.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17) THOMAS B. CASALE, MD, PAAAAI EXECUTIVE VICE PRESIDENT	5.00			X				0.	0.	0.
(18) KAY A. WHALEN EXECUTIVE DIRECTOR	40.00			X				0.	0.	0.
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total ▶								24,000.	0.	0.
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								24,000.	0.	0.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 1		

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

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b 1,594,228				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 1,164,330				
	g Noncash contributions included in lines 1a-1f $					
	h Total. Add lines 1a-1f		2,758,558			
Program Service Revenue		Business Code				
	2a ANNUAL MEETINGS	561499	4,082,412	4,082,412		
	b ACADEMY NEWSLETTER	323100	21,760		21,760	
	c JOURNAL OF ALLERGY	323100	2,362,934	2,362,934		
	d MISC PROGRAM SVS	561499	213,681	180,031	33,650.	
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		6,680,787			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ATTACHMENT 2		395,516			395,516
	4 Income from investment of tax-exempt bond proceeds		0			
	5 Royalties		0.			
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)		0			
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	156,512				
	b Less cost or other basis and sales expenses	156,512				
	c Gain or (loss)	0				
	d Net gain or (loss)		0			
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 a	143,295				
	b Less direct expenses b	50,018				
	c Net income or (loss) from fundraising events ATCH. 3.		93,277			
	9a Gross income from gaming activities See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities		0			
	10a Gross sales of inventory, less returns and allowances a					
	b Less cost of goods sold b					
	c Net income or (loss) from sales of inventory		0			
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d		0			
	12 Total revenue See instructions		9,928,138	6,625,377	55,410	395,516.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21	917,673.	917,673.		
2 Grants and other assistance to individuals in the U S See Part IV, line 22	613,237.	613,237.		
3 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	41,250.	41,250.		
4 Benefits paid to or for members	0.			
5 Compensation of current officers, directors, trustees, and key employees	24,000.	0.	24,000.	0.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.			
7 Other salaries and wages	0.			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	0.			
9 Other employee benefits	0.			
10 Payroll taxes	0.			
11 Fees for services (non-employees)				
a Management	3,139,944.	1,255,978.	1,883,966.	
b Legal	18,545.		18,545.	
c Accounting	29,000.		29,000.	
d Lobbying	108,027.	108,027.		
e Professional fundraising services See Part IV, line 17	0.			
f Investment management fees	74,328.		74,328.	
g Other	0.			
12 Advertising and promotion	9,484.		9,484.	
13 Office expenses	30,540.		30,540.	
14 Information technology	146,435.		146,435.	
15 Royalties	0.			
16 Occupancy	0.			
17 Travel	8,419.		8,419.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials	0.			
19 Conferences, conventions, and meetings	1,931,173.	1,744,135.	187,038.	
20 Interest	0.			
21 Payments to affiliates	0.			
22 Depreciation, depletion, and amortization	0.			
23 Insurance	7,970.		7,970.	
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a JOURNAL	778,001.	778,001.		
b PROGRAM SERVICE PROJECTS	474,846.	474,846.		
c COMMITTEE EXPENSES	295,719.	295,719.		
d ART FUND EXPENSES	222,039.	222,039.		
e BOARD OF DIRECTORS	176,106.		176,106.	
f All other expenses	590,004.	43,940.	546,064.	
25 Total functional expenses. Add lines 1 through 24f	9,636,740.	6,494,845.	3,141,895.	0.
26 Joint Costs. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	1,319,691.	1	1,466,131.
	2	Savings and temporary cash investments	505,470.	2	836,534.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	909,184.	4	955,214.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	612,269.	9	534,121.
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a			
	b	Less accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities ATCH 4	16,037,656.	11	17,632,638.
	12	Investments - other securities See Part IV, line 11		12	
	13	Investments - program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	0.	15	163,554.
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	19,384,270.	16	21,588,192.
Liabilities	17	Accounts payable and accrued expenses	318,013.	17	245,974.
	18	Grants payable		18	
	19	Deferred revenue	2,571,021.	19	3,180,950.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	2,889,034.	26	3,426,924.
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	7,337,943.	27	8,614,594.
	28	Temporarily restricted net assets	9,057,293.	28	9,446,674.
	29	Permanently restricted net assets	100,000.	29	100,000.
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	16,495,236.	33	18,161,268.
	34	Total liabilities and net assets/fund balances	19,384,270.	34	21,588,192.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,928,138.
2	Total expenses (must equal Part IX, column (A), line 25)	2	9,636,740.
3	Revenue less expenses Subtract line 2 from line 1	3	291,398.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,495,236.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,374,634.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	18,161,268.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	X	
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 separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
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		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)

9 ☒ An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Other

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box . . . . . ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i)	A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	11g(i)	X
(ii)	A family member of a person described in (i) above?	11g(ii)	X
(iii)	A 35% controlled entity of a person described in (i) or (ii) above?	11g(iii)	X

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 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						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc (see instructions) 12

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) . . . . . 14 %

15 Public support percentage from 2009 Schedule A, Part II, line 14 . . . . . 15 %

16a **33 1/3 % support test - 2010.** If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **33 1/3 % support test - 2009.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . ▶ ☐

17a **10%-facts-and-circumstances test - 2010.** If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . . . ▶ ☐

b **10%-facts-and-circumstances test - 2009.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organzation meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization . . . . . ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . . ▶ ☐

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,154,167	4,998,691	4,781,105	2,604,377	2,758,558.	19,296,898
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 purpose	9,372,934	9,462,839	9,230,428	7,085,760	6,728,034	41,879,995
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5	13,527,101	14,461,530	14,011,533	9,690,137	9,486,592	61,176,893
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	13,249	16,179	34,271	31,290	34,580	129,569
b 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	1,549,974	1,003,237	1,291,422	326,299	387,244	4,558,176.
c Add lines 7a and 7b	1,563,223	1,019,416.	1,325,693	357,589	421,824	4,687,745
8 **Public support** (Subtract line 7c from line 6)						56,489,148

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	13,527,101	14,461,530	14,011,533	9,690,137.	9,486,592	61,176,893
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	474,451	588,080	552,528	469,920	395,516	2,480,495
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	474,451	588,080	552,528.	469,920	395,516	2,480,495
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-191,874	-110,964	-8,114	-12,813	33,650	-290,115
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) ATCH 1	-80,861	20,131	0	0	0	-60,730
13 **Total support.** (Add lines 9, 10c, 11, and 12)	13,728,817	14,958,777	14,555,947	10,147,244	9,915,758	63,306,543

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2010 (line 8, column (f) divided by line 13, column (f))	15	89.23 %
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	89.05 %

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2010** (line 10c, column (f) divided by line 13, column (f))	17	3.92 %
18	Investment income percentage from **2009** Schedule A, Part III, line 17	18	3.58 %

19a **33 1/3 % support tests - 2010.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3 % support tests - 2009.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b, or Part III, line 12 Also complete this part for any additional information (See instructions).

ATTACHMENT 1

SCHEDULE A, PART III - OTHER INCOME

DESCRIPTION	2006	2007	2008	2009	2010	TOTAL
OTHER INVESTMENT INCOME	-80,861	20,131	0	0	0.	-60,730
TOTAL	-80,861	20,131	0	0	0	-60,730

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2010

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of organization	Employer identification number
THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY	39-6061326

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2 Political expenditures . . . . . ▶ $ NOT DETERMINABLE

3 Volunteer hours . . . . . SEE STATEMENT

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ $ 0.

2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ $ 0.

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . . ☐ Yes ☐ No

4a Was a correction made? . . . . . ☐ Yes ☐ No

b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b . . . . . ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? . . . . . ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount Enter the amount from the following table in both columns		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a If zero or less, enter -0-		
i Subtract line 1f from line 1c If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

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

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		X	
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i	Other activities? If "Yes," describe in Part IV		X	
j	Total Add lines 1c through 1i			
2 a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		X	

Part III-A **Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

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

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

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

SEE PAGE 4

Part IV Supplemental Information *(continued)*

LOBBYING ACTIVITY EXPLANATION

THE TAXPAYER PAYS A YEARLY FEE TO THE JOINT COUNCIL OF ALLERGY, ASTHMA AND IMMUNOLOGY (JCAAI). PART OF THE TAXPAYER'S YEARLY FEE TO THE JCAAI INCLUDES THE SERVICES OF CAPITOL ASSOCIATES, WHICH IS A LOBBYING FIRM. THE TAXPAYER PAYS A RETAINER FEE TO WASHINGTON HEALTH ADVOCATES (WHA). UNDER THE AGREEMENT, WHA ASSISTS IN PURSUING SPECIFIC OBJECTIVES WITH RESPECT TO NIH PEER REVIEW AND FUNDING OF RESEARCH RELATED TO ASTHMA AND ALLERGIC DISEASES. SOME LOBBYING ACTIVITIES PERFORMED BY WHA INCLUDE THE FOLLOWING:

-TARGET REPRESENTATIVES AND SENATORS ON THE HHS APPROPRIATIONS SUBCOMMITTEES FOR ADVOCACY EFFORTS, CONTINUING EFFORTS TO EXPAND CONGRESSIONAL AWARENESS OF AND SUPPORT FOR RESEARCH ON ANAPHYLAXIS AND THE ATOPIC MARCH.

-WHA WILL INVOLVE REPRESENTATIVES OF THE ACADEMY IN GRASSROOTS EFFORTS.

-DRAFT REPORT LANGUAGE FOR CONSIDERATION BY THE HHS APPROPRIATIONS SUBCOMMITTEES.

-TARGET KEY REPRESENTATIVES AND SENATORS TO SEEK CONGRESSIONAL INQUIRY WITH RESPECT TO THE NEED TO IMPROVE PEER REVIEW OF ALLERGY-RELATED RESEARCH APPLICATIONS.

-REMAIN IN REGULAR CONTACT WITH KEY STAFF FOR THE HOUSE AND SENATE HHS APPROPRIATIONS SUBCOMMITTEES AS WELL AS OTHER MEMBERS OF CONGRESS.

THE AMOUNT PAID UNDER THE CONTRACT CANNOT BE EASILY SPLIT BETWEEN THESE LOBBYING ACTIVITIES AND OTHER NON-LOBBYING ACTIVITIES.

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

2 Complete lines 2a through 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 Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $

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

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

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

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

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

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

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

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	100,000	100,000			
b Contributions					
c Net investment earnings, gains, and losses	364	441			
d Grants or scholarships	364.	441			
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	100,000	100,000			

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

a Board designated or quasi-endowment ▶ _____ %
b Permanent endowment ▶ 100.0000 %
c Term endowment ▶ _____ %

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

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

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

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

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

	(a) Description	(b) Book value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶		

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

1. (a) Description of liability	(b) Amount
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	9,928,138.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	9,636,740.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	291,398.
4	Net unrealized gains (losses) on investments	4	1,374,634.
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 through 8	9	1,374,634.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	1,666,032.

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

1	Total revenue, gains, and other support per audited financial statements			1	11,228,444.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	1,374,634.		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	1,374,634.
3	Subtract line 2e from line 1			3	9,853,810.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	74,328.		
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	74,328.
5	Total revenue Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12)*			5	9,928,138.

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

1	Total expenses and losses per audited financial statements			1	9,562,412.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	9,562,412.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	74,328.		
b	Other (Describe in Part XIV)	4b			
c	Add lines 4a and 4b			4c	74,328.
5	Total expenses Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18)*			5	9,636,740.

Part XIV Supplemental Information

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

Part XIV Supplemental Information *(continued)*

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.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b

1 **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 the grants or assistance? . . . . . [X] Yes [ ] No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Sub-total					
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . . ▶ ☐
Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ _____

3 Enter total number of other organizations or entities . . . . . ▶ _____

Schedule F (Form 990) 2010

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. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)	TRAVEL GRANT/FACULTY STIPEND	EUROPE/ICELAND/GREENLAND	21	31,000	CHECK/WIRE	0	N/A	N/A
(2)	TRAVEL GRANT/FACULTY STIPEND	NORTH AMERICA	1	1,000	CHECK/WIRE	0	N/A	N/A
(3)	TRAVEL GRANT/FACULTY STIPEND	EAST ASIA/PACIFIC	5	8,250	CHECK/WIRE	0	N/A	N/A
(4)	TRAVEL GRANT/FACULTY STIPEND	MIDDLE EAST/NORTH AFRICA	1	1,000	CHECK/WIRE	0	N/A	N/A
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
(18)								

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☒ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)*	☐ Yes	☒ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with respect to Certain Foreign Corporations (see Instructions for Form 5471)*	☐ Yes	☒ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*	☐ Yes	☒ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with respect to Certain Foreign Partnerships (see Instructions for Form 8865)*	☐ Yes	☒ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)*	☐ Yes	☒ No

Part V Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable Also complete this part to provide any additional information (see instructions)

SCHEDULE F PART I, LINE 2

THE AAAAI INTENTIONAL TRAVEL SCHOLARSHIP PROGRAM IS DESIGNED TO PROVIDE HOUSING AND TRAVEL GRANTS TO INTERNATIONAL IN-TRAINING MEMBERS TO ATTEND THE AAAAI ANNUAL MEETING.

APPLICANTS FOR THE PROGRAM MUST BE INTERNATIONAL IN-TRAINING MEMBERS OF THE AAAAI AND HAVE SUBMITTED A SCIENTIFIC ABSTRACT ACCEPTED FOR PRESENTATION AT THE ANNUAL MEETING.

APPLICANTS SUBMIT AN APPLICATION THAT INCLUDES THEIR ABSTRACT, CV, AND AN OUTLINE OF THEIR RESEARCH INTERESTS AND FUTURE CAREER PLANS IN ALLERGY/IMMUNOLOGY. THE APPLICATION MUST BE COUNTER SIGNED BY AN AAAAI FELLOW.

APPLICATIONS ARE REVIEWED BY THE LEADERSHIP OF THE INTERNATIONAL ASSEMBLY, A CONSTITUENCY GROUP OF THE AAAAI REPRESENTING INTERNATIONAL MEMBERS.

TO RECEIVE REIMBURSEMENT, INTERNATIONAL TRAVEL SCHOLARSHIP RECIPIENTS MUST PRESENT RECEIPTS FOR THEIR TRAVEL AND HOUSING EXPENSES. TRAVEL GRANT AMOUNTS VARY DEPENDING ON THE TRAVEL DISTANCE TO THE MEETING.

SCHEDULE G
(Form 990 or 990-EZ)
Department of the Treasury
Internal Revenue Service

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

OMB No 1545-0047
2010
Open To Public Inspection

Name of the organization: THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number: 39-6061326

Part I **Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Form 990-EZ filers are not required to complete this part

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

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes	(iii) No	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total ▶							

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

WI,

Part II **Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b List events with gross receipts greater than $5,000

		(a) Event #1 ART BENEFIT DIN (event type)	(b) Event #2 (event type)	(c) Other Events 0. (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	143,295.			143,295.
	2 Less Charitable contributions				
	3 Gross income (line 1 minus line 2)	143,295.			143,295.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	14,114.			14,114.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	35,904.			35,904.
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(50,018.)
	11 Net income summary Combine line 3, column (d), and line 10 ▶				93,277.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				( )
	8 Net gaming income summary Combine line 1, column d, and line 7 ▶				

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

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization operate gaming activities with nonmembers? . . . . . ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? . . . . . ☐ Yes ☐ No

13 Indicate the percentage of gaming activity operated in

a The organization's facility . . . . . 13a %

b An outside facility . . . . . 13b %

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

Name ▶ _____

Address ▶ _____

15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue? . . . . . ☐ Yes ☐ No

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 of the third party

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? . . . . . ☐ Yes ☐ No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable Also complete this part to provide any additional information (see instructions)

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

Part I General Information on Grants and Assistance

1 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 the grants or assistance? . . . . . [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000 Part II can be duplicated if additional space is needed . . . . . ▶[ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) BOARD OF REGENTS - UW-MADISON 21 NORTH PARK SUITE 6401 MADISON, WI 53715	39-1805963	501(C)(3)	75,000	0	N/A	N/A	FACULTY DEVELOPMENT
(2) CINCINNATI CHILDREN'S HOSPITAL 3333 BURNET AVENUE CINCINNATI, OH 45229	31-0537130	501(C)(3)	125,000	0	N/A	N/A	FACULTY DEVELOPMENT
(3) STANFORD UNIVERSITY 301 RAVENSWOOD AVE MENLO PARK, CA 94025	94-1156365	501(C)(3)	25,000	0	N/A	N/A	FACULTY DEVELOPMENT
(4) MOUNT SINAI SCHOOL OF MEDICINE 1 GUSTAVE L LEVY NEW YORK, NY 10029	13-6171197	501(C)(3)	90,832	0	N/A	N/A	FACULTY DEVELOPMENT
(5) BRIGHAM & WOMENS' HOSPITAL P O BOX 3149 BOSTON, MA 02115	04-2312909	501(C)(3)	62,500	0	N/A	N/A	SENIOR ALLERGY/IMMUN
(6) CHILDREN'S HOSPITAL BOSTON P O BOX 44413 BOSTON, MA 02241	04-2774441	501(C)(3)	57,500	0	N/A	N/A	FELLOWS CAREER DEVEL
(7) CHILDREN'S HOSPITAL OF PHILADELPHIA 3615 CIVIC CENTER PHILADELPHIA, PA 19104	23-1352166	501(C)(3)	25,000	0	N/A	N/A	FELLOWSHIP OF EXCELL
(8) CHILDREN'S SPECIALISTS FOUNDATION, INC 3860 CALLE FORTUNADA SAN DIEGO, CA 92123	81-0566710	501(C)(3)	25,000.	0	N/A	N/A	WOMEN IN ALLERGY JUN
(9) FLORIDA ALLERGY, ASTHMA & IMMUNOLOGY SOCIET 4909 LANNIE RD JACKSONVILLE, FL 32218	59-3374796	501(C)(6)	17,500	0	N/A	N/A	EDUCATIONAL MEETING
(10) JOHN'S HOPKINS UNIVERSITY 5501 HOPKINS BAYVIEW BALTIMORE, MD 21224	52-0595110	501(C)(3)	33,333	0	N/A	N/A	FACULTY K TO R BRIDG
(11) NORTHWESTERN UNIVERSITY 750 N LAKE SHORE DR CHICAGO, IL 60611	36-2167817	501(C)(3)	53,125	0	N/A	N/A	FELLOWS CAREER DEVEL
(12) THE MASSACHUSETTS GENERAL HOSPITAL PO BOX 3829 BOSTON, MA 02241	04-1564655	501(C)(3)	12,500	0	N/A	N/A	FELLOWS CAREER DEVEL

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3 Enter total number of other organizations . . . . . ▶

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ **Attach to Form 990.**

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization: THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number: 39-6061326

Part I General Information on Grants and Assistance

1 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 the grants or assistance? . . . ☐ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . ▶☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) UNIVERSITY OF ILLINOIS PO BOX 20787 SPRINGFIELD, IL 62708	37-6006007	501(C)(3)	56,250	0	N/A	N/A	GERIATRICS JUNIOR FA
(2) UNIVERSITY OF MICHIGAN 3003 SOUTH STATE STREET ANN ARBOR, MI 48109	38-6006309	501(C)(3)	50,000	0	N/A	N/A	FACULTY DEVELOPMENT
(3) UNIVERSITY OF PENNSYLVANIA 3400 SPRUCE ST. PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	50,000	0	N/A	N/A	UNDERSERVED FELLOWSH
(4) UNIVERSITY OF WASHINGTON 815 MERCER ST SEATTLE, WA 98109	94-3079432	501(C)(3)	37,000	0	N/A	N/A	EDUCATIONAL MEETING
(5) UTMB HEALTHCARE SYSTEMS, INC 301 UNIVERSITY BLVD GALVESTON, TX 77555	76-0682238	501(C)(3)	25,000	0	N/A	N/A	CLINICAL FELLOWSHIP
(6) WASHINGTON UNIVERSITY 700 ROSEDALE AVENUE ST LOUIS, MO 63122	43-0653611	501(C)(3)	25,000	0	N/A	N/A	FACULTY DEVELOPMENT
(7) UNIVERSITY OF CALIFORNIA - SAN DIEGO 9500 GILMAN DRIVE LA JOLLA, CA 92093	95-6006144	501(C)(3)	27,776	0	N/A	N/A	FACULTY K TO R BRIDG
(8) AMERICAN LUNG ASSOCIATION 14 WALL STREET NEW YORK, NY 10005	13-1632524	501(C)(3)	37,500	0	N/A	N/A	RESPIRATORY DISEASES
(9) UNIVERSITY OF TEXAS SOUTHWESTERN 5323 HARRY HINES BLVD DALLAS, TX 75390	75-6002868	501(C)(3)	45,000	0	N/A	N/A	TRAINING PROGRAM AWA
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations . . . ▶ 20.

3 Enter total number of other organizations . . . ▶ 1.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. **Schedule I (Form 990) (2010)**

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book FMV, appraisal, other)	(f) Description of non-cash assistance
1	TRAVEL GRANTS TO ANNUAL MEETING	266	249,073	0	N/A	N/A
2	JOURNAL EDITOR STIPENDS	16	136,714	0	N/A	N/A
3	ANNUAL MEETING PROGRAM COMMITTEE STIPEND	1.	30,000.	0	N/A	N/A
4	PRESIDENTIAL STIPEND	1.	20,000	0	N/A	N/A
5	WEBSITE EDITOR STIPEND	2	45,500	0.	N/A	N/A
6	ANNUAL MEETING FACULTY STIPEND	95	124,450	0	N/A	N/A
7	PRIMER EDITOR STIPEND	1	7,500	0	N/A	N/A

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information

MONITORING THE USE OF GRANTS:

THERE IS AN AD HOC REVIEW COMMITTEE, MADE UP OF INDIVIDUAL MEMBERS

WITHOUT ANY INSTITUTIONAL CONFLICTS, THAT MAKE SUGGESTIONS FOR

APPLICATION AND AWARD OBJECTIVE MODIFICATIONS. THESE CHANGES SUGGESTED

ARE THEN PRESENTED TO THE BOARD OF DIRECTORS FOR APPROVAL.

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open To Public Inspection

Name of the organization: THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number: 39-6061326

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

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected? Yes	(c) Corrected? No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 . . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . ▶ $

Part II 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

	(a) Name of interested person and purpose	(b) Loan to or from the organization? To	(b) Loan to or from the organization? From	(c) Original principal amount	(d) Balance due	(e) In default? Yes	(e) In default? No	(f) Approved by board or committee? Yes	(f) Approved by board or committee? No	(g) Written agreement? Yes	(g) Written agreement? No
(1)											
(2)											
(3)											
(4)											
(5)											
(6)											
(7)											
(8)											
(9)											
(10)											
Total	. . . . . ▶ $										

Part III Grants or Assistance Benefiting Interested Persons.

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

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			

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

	(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues? Yes	(e) Sharing of organization's revenues? No
(1)	EXECUTIVE DIRECTOR, INC	MANAGEMENT COMPANY	3,512,868	MANAGEMENT SERVICES		X
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						

Part V Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

SCHEDULE L PART IV

EXECUTIVE DIRECTOR, INC (EDI), AN ASSOCIATION MANAGEMENT COMPANY, PROVIDES OCCUPANCY, ACCOUNTING AND ADMINISTRATIVE SERVICES TO THE AMERICAN ACADEMY OF ALLERGY, ASTHMA & IMMUNOLOGY (AAAAI). EDI IS PARTIALLY OWNED BY THE EXECUTIVE DIRECTOR OF AAAAI WITH AN OWNERSHIP PERCENTAGE THAT EXCEEDS 35%. THE TOTAL AMOUNT OF PAYMENTS MADE TO EDI WAS $3,512,868 IN 2010.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

PART VI, SECTION A, LINE 3

AAAAI IS IN CONTRACT WITH EXECUTIVE DIRECTOR, INC., AN ASSOCIATION MANAGEMENT COMPANY.

PART VI, SECTION A, LINE 6

THE ACADEMY HAS THE FOLLOWING CLASSIFICATIONS OF MEMBERSHIP IN THE ORGANIZATION:

(A) FULL MEMBERS

(B) INTERNATIONAL MEMBERS

(C) FELLOWS

(D) INTERNATIONAL FELLOWS

(E) ALLIED HEALTH MEMBERS

(F) HONORARY FELLOWS

(G) EMERITUS MEMBERS

(H) EMERITUS FELLOWS

(I) IN-TRAINING MEMBERS

(J) DOCTORAL/POST DOCTORAL IN-TRAINING MEMBERS

(K) INTERNATIONAL IN-TRAINING MEMBERS

PART VI, SECTION A, LINE 7A

THE CLASSES OF MEMBERS OF THE ORGANIZATION ENTITLED TO VOTE SHALL BE FELLOWS, INTERNATIONAL FELLOWS, FULL MEMBERS AND INTERNATIONAL MEMBERS. ANY MATTER TO BE DECIDED BY A VOTE OF ELIGIBLE VOTING MEMBERS SHALL, EXCEPT AS OTHERWISE PROVIDED HEREIN OR AS PROVIDED IN CH. 181 OF THE

WISCONSIN STATUTES, BE DECIDED BY MAJORITY VOTE OF THESE MEMBERS PRESENT IN PERSON OR BY PROXY OR OTHERWISE BY MAILED OR ELECTRONIC BALLOT.

ALL DIRECTORS SHALL BE ELECTED BY THE ELIGIBLE VOTING MEMBERS AT AN ANNUAL MEETING OF THE ORGANIZATION IN ACCORDANCE WITH THE PROCEDURES SET FORTH IN ARTICLE VII OF THE BYLAWS.

PART VI, SECTION A, LINE 7B
BYLAWS MAY BE AMENDED, REPEALED OR ALTERED IN WHOLE OR IN PART BY AN AFFIRMATIVE VOTE OF A MAJORITY OF THE ELIGIBLE VOTING MEMBERS.

PART VI, SECTION B, LINE 11
THE 990 IS FIRST REVIEWED BY THE FINANCE COMMITTEE, WHICH IS COMPRISED OF THE OFFICERS OF THE ORGANIZATION. AFTER FULL REVIEW, IT IS PRESENTED TO THE REMAINING BOARD OF DIRECTORS FOR REVIEW AND APPROVAL. THE 990 IS THEN SIGNED BY AN OFFICER OF THE ORGANIZATION, TYPICALLY THE SECRETARY-TREASURER.

PART VI, SECTION B, LINE 12 B & C
DISCLOSURE MUST BE MADE IN WRITING THROUGH THE USE OF AN OFFICIAL DISCLOSURE FORM OR VIA AN ONLINE MANAGEMENT SYSTEM. THE COMPLETED FORMS MUST BE RETURNED PRIOR TO THE COMMENCEMENT OF AN OFFICE TERM, AND THESE FORMS MUST BE UPDATED WHENEVER CIRCUMSTANCES REQUIRE OR ONCE PER CALENDAR YEAR, WHICHEVER IS SOONER. ALL INFORMATION DISCLOSED IS REVIEWED TO IDENTIFY CONFLICTS OF INTEREST AND TO GUIDE THE RESOLUTION OF THOSE CONFLICTS.

Name of the organization	Employer identification number
THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY	39-6061326

FOR LEADERS, REVIEWS WILL BE COMPLETED BY AN APPROPRIATE AAAAI COMMITTEE OR EXECUTIVE BODY. FOR FACULTY, REVIEWS WILL BE COMPLETED BY THE CONTINUING MEDICAL EDUCATION COMMITTEE OR THE ANNUAL MEETING PROGRAM COMMITTEE, DEPENDING ON THE ACTIVITY IN WHICH THE FACULTY MEMBER WILL POTENTIALLY BE INVOLVED. FOR AUTHORS, REVIEWS WILL BE COMPLETED BY THE PRACTICE DIAGNOSTICS AND THERAPEUTICS COMMITTEE. IN ALL CASES, AN INDIVIDUAL'S DISCLOSURE WILL BE REVIEWED IN THE CONTEXT OF THE ACTIVITY IN WHICH S/HE WILL POTENTIALLY BE PARTICIPATING. IF A CONFLICT OF INTEREST IS IDENTIFIED, THE REVIEWERS WILL BE ASKED TO IDENTIFY AN APPROPRIATE MECHANISM FOR RESOLVING THE CONFLICT. THIS COULD POTENTIALLY INCLUDE ASKING THE INDIVIDUAL TO ALTER THE RELATIONSHIP WHICH CREATES THE CONFLICT, OR REMOVING THE INDIVIDUAL FROM INVOLVEMENT IN THE ACTIVITY. THE RESULTS OF EACH REVIEW WILL BE COMMUNICATED TO THE INDIVIDUAL AND THE ORGANIZATION PLANNING THE ACTIVITY TO FACILITATE THE RESOLUTION OF THE CONFLICT. THE INDIVIDUAL WILL BE EXPECTED TO DISCLOSE TO THE APPROPRIATE AUDIENCE ANY RELATIONSHIPS THAT WERE FOUND TO BE, OR TO PRESENT THE POTENTIAL FOR, CONFLICTS OF INTEREST BY THE REVIEWER.

PART VI, SECTION B, LINE 15 A & B

AAAAI IS MANAGED BY EXECUTIVE DIRECTOR, INC., A FOR-PROFIT MANAGEMENT COMPANY. AAAAI HAS NO OFFICIAL EMPLOYEES AS STAFF ASSIGNED TO AAAAI THAT ARE EMPLOYEES OF THE MANAGEMENT COMPANY. AAAAI ALSO DOES NOT HAVE ANYONE THAT FITS THE DESCRIPTION OF A KEY EMPLOYEE. THE CONTRACTED MANAGEMENT FEE IS REVIEWED YEARLY BY THE BOARD OF DIRECTORS.

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

PART VI, SECTION C, LINE 19

AAAAI MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FORM 990 AVAILABLE FOR PUBLIC INSPECTION UPON REQUEST. REQUESTED DOCUMENTS ARE PROVIDED WITHIN A REASONABLE TIME FRAME. SOME OR ALL OF THESE DOCUMENTS ARE CURRENTLY BEING PLANNED TO BE PLACED ON THE AAAAI WEBSITE IN THE FUTURE.

PART XI, LINE 5

THE AMOUNT ON THIS LINE REPRESENTS UNREALIZED GAINS.

PART VI, SECTION A, LINE 4

THE BYLAWS WERE CHANGED TO SUBSTITUTE "ELIGIBLE VOTING MEMBERS" FOR THE WORD "FELLOW" IN ALL REFERENCES TO VOTING ACTIVITIES TO ACCURATELY REFLECT THE CHANGES APPROVED THE PREVIOUS YEAR IN 2009 THAT EXTENDED VOTING RIGHTS BEYOND FELLOWS. IN ADDITION, ARTICLE IX WAS CHANGED TO ADD "ASSEMBLIES" TO THE ALREADY EXISTING "INTEREST SECTIONS AND COMMITTEES" IN REGARDS TO THE BOARD'S ABILITY TO CREATE, ORGANIZE, AND REORGANIZE AS IT MAY DETERMINE TO BE NECESSARY OR APPROPRIATE FROM TIME TO TIME.

ATTACHMENT 1

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

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
EXECUTIVE DIRECTOR, INC 555 EAST WELLS STREET, SUITE 1100 MILWAUKEE, WI 53202	MANAGEMENT	3,512,868.
WASHINGTON HEALTH ADVOCATES 818 CONNECTICUT AVENUE, NW SUITE 1100 WASHINGTON, DC 20006	LOBBYING	108,000.
TOTAL COMPENSATION		3,620,868.

Name of the organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY

Employer identification number 39-6061326

ATTACHMENT 2

FORM 990, PART VIII - INVESTMENT INCOME

DESCRIPTION	(A) TOTAL REVENUE	(B) RELATED OR EXEMPT REVENUE	(C) UNRELATED BUSINESS REV.	(D) EXCLUDED REVENUE
INTEREST INCOME	395,516.			395,516.
TOTALS	395,516.			395,516.

ATTACHMENT 3

FORM 990, PART VIII - FUNDRAISING EVENTS

DESCRIPTION	GROSS INCOME	DIRECT EXPENSES	NET INCOME
ART BENEFIT DINNER	143,295.	50,018.	93,277.
TOTALS	143,295.	50,018.	93,277.

ATTACHMENT 4

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

DESCRIPTION	ENDING BOOK VALUE
COMMON STOCKS	11,487,242.
MONEY FUNDS	367,693.
MUTUAL FUNDS	4,809,512.
COMMODITIES	968,191.
TOTALS	17,632,638.

The American Academy of Allergy, Asthma and Immunology

Financial Statements
(and supplemental material)
Years Ended December 31, 2010 and 2009

The American Academy of Allergy, Asthma and Immunology

Contents

Independent Auditors' Report

The American Academy of Allergy, Asthma and Immunology
Milwaukee, Wisconsin

We have audited the accompanying statements of financial position of The American Academy of Allergy, Asthma and Immunology the (Academy) as of December 31, 2010 and 2009, and the related statements of activities, changes in net assets and cash flows for the years then ended. These financial statements are the responsibility of the Academy's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes consideration of internal control over financial reporting as a basis for designing audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Academy's internal control over financial reporting. Accordingly, we express no such opinion. An audit also includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements, assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The American Academy of Allergy, Asthma and Immunology at December 31, 2010 and 2009, and the results of its operations, changes in net assets and cash flows for the years then ended in conformity with accounting principles generally accepted in the United States of America.

BDO USA, LLP

May 25, 2011

Financial Statements

The American Academy of Allergy, Asthma and Immunology

Statements of Financial Position

December 31,	2010	2009
Assets		
Cash and money market funds	$ 2,302,665	$ 1,825,161
Investments (Note 3)	17,632,638	16,037,656
Other receivables	955,214	909,184
Prepaid expenses	534,121	612,269
Total Current Assets	21,424,638	19,384,270
Other Assets		
Website redesign (Note 1)	163,554	-
Total Assets	$ 21,588,192	$ 19,384,270
Liabilities and Net Assets		
Current Liabilities		
Accounts payable (Note 2)	$ 245,974	$ 318,013
Deferred revenues:		
Annual meeting	1,502,872	1,573,338
Journal bonus	700,000	-
Other	978,078	997,683
Total Current Liabilities	3,426,924	2,889,034
Net Assets		
Unrestricted - operating	8,214,594	6,937,943
Unrestricted - board designated	400,000	400,000
Temporarily restricted (Note 4)	9,446,674	9,057,293
Permanently restricted (Note 4)	100,000	100,000
Total Net Assets	18,161,268	16,495,236
	$ 21,588,192	$ 19,384,270

See accompanying independent auditors' report and notes to financial statements.

The American Academy of Allergy, Asthma and Immunology

Statements of Activities

Years ended December 31,	2010		2009	
	Revenue	Expense	Revenue	Expense
Unrestricted:				
Annual meeting	$ 3,929,549	$ 2,508,052	$ 4,020,504	$ 3,065,540
Journal of Allergy	2,362,934	778,001	2,335,846	854,436
Membership dues	1,586,496	6,875	1,418,436	4,462
Membership and application fees	3,180	-	5,410	-
Academy News	21,760	31,242	6,214	19,027
Miscellaneous income/expense	10,720	-	31,710	783
Interest sections coordinating committee	-	460	-	1,487
Interest Sections:				
Asthma Diagnosis and Treatment	-	1,560	-	1,696
Basic and Clinical Immunology	-	1,173	-	1,247
Environmental and Occupational Respiratory Diseases	-	3,157	660	2,279
Food allergy, Anaphylaxis Dermatology & Drug Allergy	-	10,082	125	12,039
Mechanisms of Asthma and Allergic Inflammation	-	585	-	1,073
Health outcomes, Education, Delivery and Quality	-	2,877	-	3,156
Immunotherapy, Rhinitis, Sinusitis, Ocular Disease and Cough	-	15,665	-	5,163
Divisions:				
Education	23,477	102,346	10,619	111,361
Practice and Policy	-	11,511	-	8,728
Research and Training	8,100	34,160	3,000	40,002
Board of Directors	25,000	60,594	24,964	77,917
Courses:				
National Asthma Education Course	-	-	15,000	20,100
Practice Management Course	10,710	702	76,034	90,844

The American Academy of Allergy, Asthma and Immunology

Statements of Activities

Years ended December 31,	2010		2009	
	Revenue	Expense	Revenue	Expense
Unrestricted (continued):				
Mini-primer	$ -	$ 72,709	$ -	$ 10,000
Joint Task Force on Practice Program	-	40,333	-	37,490
Marketing assessment	10,095	9,484	8,800	537
Audit and legal services	-	47,545	-	65,301
Public education materials	68,668	27,766	86,270	59,226
GARD	-	8,636	-	17,643
Anaphylaxis research	-	2,412	32,000	2,500
E. Grant Smith Textbook	6,303	-	4,297	-
Job Placement	33,650	-	18,475	695
ASP Geriatrics Development	75,000	84,430	37,500	56,250
National Allergy Bureau	-	36,547	-	27,106
Website	-	102,435	-	67,183
Professional and administrative fees	-	3,139,944	-	3,048,489
Executive VP professional fees	-	124,812	-	122,940
Insurance	-	7,970	-	12,552
Membership dues - related associations	-	30,452	-	25,842
Membership services	4,552	17,215	-	30,067
Meetings and travel expenses	-	8,419	-	11,440
Meeting - related organizations	-	42,491	-	92,171
Joint Council of Allergy, Asthma and Immunology	-	144,547	-	107,498
Postage and shipping	-	12,617	-	24,214
President's expense	-	80,000	-	70,000
Stationery, duplicating and copying	-	12,948	-	20,759
Telephone	-	4,975	-	5,554
Bank and credit card processing charges	-	126,919	-	123,401

The American Academy of Allergy, Asthma and Immunology

Statements of Activities

Years ended December 31,	2010		2009	
	Revenue	Expense	Revenue	Expense
Unrestricted (continued):				
Board of Directors	$ -	$ 200,106	$ -	$ 207,518
Grants/Fellowships	-	160,413	-	396,367
Washington Health Advocates	-	108,027	-	100,024
ART Fund expenses	-	542,039	-	623,668
Associates	14,715	12,698	19,521	15,054
Non-sponsored programs	750	48,778	-	192,463
Externally sponsored programs	-	661,950	-	1,350,238
IT surveillance	-	19,239	-	18,322
Hurricane Ike Fund	-	-	-	50,000
Allergy and Asthma Pregnancy Surveillance	19,770	10,514	-	-
Website redesign expenses	-	44,000	-	-
Operating revenue/expenses	8,215,429	9,562,412	8,155,385	11,313,852
Change in net assets from operating activities		(1,346,983)		(3,158,467)
Non-operating:				
Investment gain (Note 3)		830,519		1,558,501
Net assets released from restrictions (Note 4)		1,793,115		2,379,444
Change in unrestricted net assets		1,276,651		779,478
Temporarily restricted (Note 4):				
Annual meeting	152,863	-	310,000	-
Program grants	780,992	-	713,381	-
Investment gain (Note 3)	865,303	-	1,605,676	-
ART contributions	383,338	-	467,150	-
Net assets released from restrictions	-	1,793,115	-	2,379,444
Change in temporarily restricted net assets		389,381		716,763
Change in Total Net Assets		$ 1,666,032		$ 1,496,241

See accompanying independent auditors' report and notes to financial statements.

The American Academy of Allergy, Asthma and Immunology

Statements of Changes in Net Assets

	Unrestricted Operating	*Unrestricted Board Designated ART*	*Temporarily Restricted*	*Permanently Restricted*	*Total*
Balance, December 31, 2008	$ 6,158,465	$ 400,000	$ 8,340,530	$ 100,000	$ 14,998,995
Change in net assets	779,478	-	716,763	-	1,496,241
Balance, December 31, 2009	6,937,943	400,000	9,057,293	100,000	16,495,236
Change in net assets	1,276,651	-	389,381	-	1,666,032
Balance, December 31, 2010	$ 8,214,594	$ 400,000	$ 9,446,674	$ 100,000	$ 18,161,268

See accompanying independent auditors' report and notes to financial statements.

The American Academy of Allergy, Asthma and Immunology

Statements of Cash Flows

Year ended December 31,	2010	2009
Cash Flows from Operating Activities		
Change in Total Net Assets	$ 1,666,032	$ 1,496,241
Adjustments to reconcile change in total net assets to net cash provided by (used in) operating activities:		
Realized/unrealized gain on investments	(1,374,634)	(2,764,009)
Changes in assets and liabilities:		
Other receivables	(46,030)	44,221
Prepaid expenses	78,148	60,875
Accounts payable	(72,039)	55,988
Deferred revenues	609,929	200,444
Total Adjustments	(804,626)	(2,402,481)
Net cash provided by (used in) in operating activities	861,406	(906,240)
Cash Flows from Investing Activities		
Purchases of investments	(376,860)	(561,801)
Proceeds from sale of investments	156,512	-
Purchase of website redesign	(163,554)	-
Net cash used in investing activities	(383,902)	(561,801)
Net Increase (Decrease) in Cash and Money Market Funds	477,504	(1,468,041)
Cash and Money Market Funds, beginning of year	1,825,161	3,293,202
Cash and Money Market Funds, end of year	$ 2,302,665	$ 1,825,161

See accompanying independent auditors' report and notes to financial statements.

1. Summary of Significant Accounting Policies

Nature of Organization

The American Academy of Allergy, Asthma and Immunology the (Academy) is a non-profit professional association whose mission is the advancement and practice of allergy and immunology, by discussion at meetings, by fostering the education of students and the public, by encouraging union and cooperation among those engaged in this field, and by promoting and stimulating research and study in allergy and immunology.

Financial Statements

These financial statements, which are presented on the accrual basis of accounting, have been prepared to present balances and transactions according to the existence or absence of donor-imposed restrictions. This has been accomplished by classification of transactions into three classes of net assets - unrestricted, temporarily restricted, or permanently restricted, as follows:

Unrestricted Net Assets - Net assets not subject to donor-imposed stipulations. Designated net assets are unrestricted funds which have been set aside by the Board of Directors for a specific purpose.

Temporarily Restricted Net Assets - Net assets subject to donor-imposed stipulations that may or will be met by actions of the Academy and/or the passage of time.

Permanently Restricted Net Assets - Net assets subject to donor-imposed stipulations requiring in perpetuity that the principal be invested and that only income be expended.

Revenues are reported as increases in unrestricted net assets, unless use of the related assets is limited by donor-imposed restrictions. Expenses are reported as decreases in unrestricted net assets. Expirations of temporary restrictions on net assets are reported as reclassifications between the applicable classes of net assets. Donor-restricted contributions whose restrictions are met during the same year are reported in the unrestricted net asset classification.

Donor contributions are received for general operating purposes and to support specific programs. Contributions, including unconditional promises to give, are recognized as revenues in the period the pledge is received. Conditional promises to give are not recognized until they become unconditional, that is, when the conditions on which they depend are substantially met.

Investments

Investments are stated at fair value based on quoted market prices at the end of the fiscal year, and security transactions are accounted for on the trade date. Realized gains or losses arising from the sale of investments are determined on the basis of specific identification of the securities sold.

Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it

is reasonable possible that changes in the value of investment securities will occur in the near term and such changes could materially affect the amounts reported in the financial statements.

Receivables and Allowance for Doubtful Accounts

Receivables are uncollateralized pledges due from donors and royalties earned but not collected. The Academy regularly reviews pledge receivables for contractually past due items based upon pledges from the donors. When the pledge is deemed uncollectible, the amount is written off. Write offs are rare and as such no allowance is recorded at December 31, 2010 and 2009.

Website Redesign

During 2010, the Academy began redesigning its website and incurred $163,554 of costs through December 31, 2010. The new website is expected to be placed into service during 2011, when it will be amortized on a straight-line basis over a life of 5 years. Future costs to place this website into service are not significant at December 31, 2010.

Associates of The American Academy of Allergy, Asthma and Immunology (Associates)

The Associates is a voluntary association of spouses of members of the Academy. Revenues and expenses are recorded when received or incurred and are included in the Academy's financial statements.

Deferred Income

Deferred income is comprised of membership dues and contract fees received in advance and registration for the following year's annual meeting. Deferred income amounts are recognized in income in the period to which membership dues or contract fees apply or the annual meeting is held. Receipt of these amounts is conditioned upon performance of specific events. If these events do not occur, the Academy would be required to refund these amounts.

Income Taxes

The Academy is generally exempt from federal and state income taxes under the provisions of Section 501(c)(3) of the Internal Revenue Code; however, the net income from certain activities of the Academy may be subject to income tax as unrelated business income.

Use of Estimates

The preparation of financial statements in conformity with Generally Accepted Accounting Principles (GAAP) in the United States of America requires management to make estimates that affect the reported amounts of assets, liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Concentration of Credit Risk

Financial instruments which potentially subject the Academy to concentration of credit risks consist of cash, money market funds, investments, other receivables and accounts payable. These financial instruments are carried at approximate fair value, less appropriate allowance, if any, due to their short maturities.

The Academy's policy is to limit the amount of credit exposure to any one financial institution and places its investments with various financial institutions deemed as being creditworthy. Concentration of credit risks with respect to other receivables is limited due to the Academy's credit evaluation process. Historically, the Academy has not incurred any significant credit-related losses.

The Academy at times has investments in excess of the FDIC insurance limit. At December 31, 2010, the Academy had $1,614,276 of bank deposits in excess of federally insured limits.

Advertising Costs

Advertising costs are expensed as incurred. Advertising costs were $9,484 and $537 for 2010 and 2009, respectively.

Subsequent Events

The Academy has performed a review of events subsequent to the Statement of Financial Position date through May 25, 2011, the date the financial statements were approved and available to be issued. Effective February 25, 2011, the Allergy, Asthma, & Immunology Education & Research Trust Fund was separately incorporated as the Allergy, Asthma, & Immunology Education and Research Organization, Inc. No other subsequent events occurred through the date of this report issuance.

Reclassifications

Certain amounts in the financial statements as of December 31, 2009 have been reclassified to conform to the classification used as of December 31, 2010.

Recent Accounting Pronouncements

In January 2010, the Financial Accounting Board (FASB) issued Accounting Standards Update (ASU) No. 2010-06, *Improving Disclosures about Fair Value Measurements*. ASU No. 2010-06 amends FASB Account Standards Codification (ASC) 820 and clarifies and provides additional disclosure requirements related to recurring and non-recurring fair value measurements. This ASU is effective for years beginning after December 15, 2009. The Academy adopted the standard for the year ended December 31, 2010 and concluded that the adoption did not have any effect on the financial statements.

2. Related Party Transactions

The Executive Director, Inc. (EDI) provides occupancy, accounting and administrative services for the Academy. EDI's stock is closely-held and owned by the management staff of the Academy. Payments to this corporation were $3,512,868 and $3,431,702 during 2010 and 2009, respectively. The amount for 2010 and 2009, respectively, includes $3,350,137 and $3,255,407 for authorized fixed payments, $145,449 and $127,611 for variable expenses such as creative services, website design and printing, $12,630 and $41,838 for reimbursed expenses such as postage and travel, and $4,652 and $6,846 for services provided for the Associates of the Academy. These expenses are detailed by invoices or other appropriate documentation and submitted to the Academy treasurer for approval and counter-signing of checks covering each of these transactions. Amount due to EDI included in Accounts Payable at December 31, 2010 and 2009 was $36,857 and $8,767, respectively.

3. Investments

All of the Academy's investment activity is managed by an investment management company. The holdings at December 31, 2010 and 2009 are as follows:

December 31,	2010	2009
Money funds	$ 367,693	$ 427,160
Commodities	968,191	672,674
Mutual funds		
Mid cap fixed income bond funds	4,809,512	4,392,266
Common stocks		
Real estate index funds	384,522	784,313
Small cap equity funds	1,321,000	995,769
International equity funds	2,782,293	2,383,007
Large cap international equities	567,270	383,511
Large cap domestic equities	6,432,157	5,998,956
	$ 17,632,638	$ 16,037,656

ASC 820 establishes a three-tier fair value hierarchy, which prioritizes the inputs used in measuring fair value.

These tiers include: Level 1, defined as observable inputs such as quoted prices in active markets; Level 2, defined as inputs other than quoted prices in active markets that are either directly or indirectly observable; and Level 3, defined as unobservable inputs in which little or no active market data exists. In determining fair value the Academy utilizes valuation techniques that maximize the use of observable inputs and minimize the use of unobservable inputs to the extent possible. Commodity funds held at December 31, 2010 and 2009 were classified as Level 2. All other financial assets carried at fair value at December 31, 2010 and 2009 were classified as Level 1. During 2010 the Academy had transfers of $130,000 from Level 1 investments to Level 2 investments.

The income earned during 2010 and 2009 was as follows:

As of December 31,	*2010*		*2009*	
	Unrestricted	*Temporarily Restricted*	*Unrestricted*	*Temporarily Restricted*
Interest and dividends	$ 203,117	$ 192,399	$ 243,279	$ 226,641
Realized/unrealized gains	695,393	679,241	1,379,319	1,384,690
Investment expenses	(67,991)	(6,337)	(64,097)	(5,655)
Investment gain	$ 830,519	$ 865,303	$ 1,558,501	$ 1,605,676

4. Net Assets

The Academy treats all donor restricted funds as either permanently or temporarily restricted based on the donor's intent. These funds are invested in balanced portfolios with separate accounts maintained for each donor restricted fund. The returns on these funds have been included as increases to temporarily restricted net assets in the Statements of Activities. During the years ended December 31, 2010 and 2009, investment gains were $865,303 and $1,605,676, respectively.

The Academy receives contributions and grants which are restricted as to use. The following comprise the temporarily restricted net assets:

Annual Meetings - Comprised of funds received for annual meeting programming in future years.

Program Grants - Comprised of funds contributed for programs in future years.

Lectureships - Contributions are received for the purpose of presenting commemorative lectures on a rotating basis at the annual meeting. Funds are contributed in honor of an individual for a specific topic. Funds are used to present the lectures until depleted and include the cost of the speaker and all expenses to present the lecture.

Allergy, Asthma, & Immunology Education & Research Trust Fund (ART) - Funds raised for the purpose of granting scholarships for research.

Permanently restricted net assets is made up of $100,000 received from the Dorothy Merksamer estate in 1993 with the stipulation that the annual income from the fund be used for research grants, fellowships and internships, and lecture programs.

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The net asset balances are as follows at December 31, 2010 and 2009:

December 31,	2010	2009
Temporarily restricted:		
Annual meetings	$ 152,863	$ 310,000
Program grants	933,569	1,078,064
Lectureships	228,401	244,063
ART Fund	8,131,841	7,425,166
Total temporarily restricted	$ 9,446,674	$ 9,057,293

Net assets were released from restrictions for the following purposes during 2010 and 2009:

December 31,	2010	2009
Annual meetings	$ 310,000	$ 369,050
Program grants	925,487	1,367,306
Lectureships	15,661	19,410
ART Fund	541,967	623,678
	$ 1,793,115	$ 2,379,444

The Academy expends amounts based on Board approval consistent with the donor's intentions. Such amounts are presented as net assets released from restrictions with a corresponding addition to unrestricted revenue in the Statement of Activities.

At December 31, 2010 and 2009, the Academy had $400,000 in Board designated funds.

Supplemental Material

Independent Auditors' Report on Supplemental Material

Our audits of the basic financial statements included in the preceding section of this report were made for the purpose of forming an opinion on those statements taken as a whole. The supplemental material presented in the following section of this report is presented for purposes of additional analysis and is not a required part of the basic financial statements. The information has been subjected to the auditing procedures applied in the audits of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

BDO USA, LLP

May 25, 2011

The American Academy of Allergy, Asthma and Immunology

Schedule of Functional Expenses

	2010							
	Programs							
	Grants & Awards	*ART*	*Publications*	*Annual Meeting*	*Externally Sponsored*	*Management & General*	*Total*	*2009 Total*
Annual meeting	$ -	$ -	$ -	$ 2,508,052	$ -	$ -	$ 2,508,052	$ 3,065,540
Journal of Allergy	-	-	702,808	-	-	-	702,808	779,243
Membership dues	-	-	-	-	-	6,875	6,875	4,462
Interest sections	-	-	-	-	-	35,099	35,099	21,715
Divisions	-	-	-	-	-	209,067	209,067	244,432
Consultants' fees	-	-	-	-	23,931	-	23,931	45,377
Primer	-	-	72,709	-	-	-	72,709	10,000
Marketing	-	-	-	-	-	9,484	9,484	537
Audit and legal services	-	-	-	-	-	47,545	47,545	65,301
Public education materials	-	-	-	-	-	27,766	27,766	59,227
Contributions	-	-	-	-	-	8,636	8,636	67,643
Professional and administration fees	-	123,000	75,193	854,256	-	2,410,500	3,462,949	3,453,347
Insurance	-	-	-	-	-	7,970	7,970	12,552
Membership dues	-	-	-	-	-	30,452	30,452	25,842
Membership services	-	-	-	-	-	17,215	17,215	31,545
Academy News	-	-	31,242	-	-	-	31,242	19,027
Grants & awards	109,430	320,000	-	-	327,830	-	757,260	1,427,258
Meeting & travel	-	-	-	-	126	10,540	10,666	12,889
Online services and web design	-	-	-	-	302,592	81,344	383,936	86,202
Related organizations	-	-	-	-	-	150,518	150,518	192,195
Postage and shipping	-	-	-	-	451	12,617	13,068	24,266
President's expense	-	-	-	-	-	80,000	80,000	70,000
Printing and supplies	-	-	-	-	-	12,948	12,948	20,758
Printing and design	-	-	-	-	61	4,080	4,141	102,399
Telephone & fax	-	-	-	-	-	4,975	4,975	5,554
Bank charges	-	-	-	-	-	126,919	126,919	123,401

The American Academy of Allergy, Asthma and Immunology

Schedule of Functional Expenses

	2010							
	Programs							
	Grants & Awards	*ART*	*Publications*	*Annual Meeting*	*Externally Sponsored*	*Management & General*	*Total*	*2009 Total*
Board of directors	-	-	-	-	-	200,106	200,106	207,518
Grants/fellowships	135,413	-	-	-	-	-	135,413	246,367
Courses	-	-	-	-	-	702	702	90,844
Committee honoraria	-	-	-	-	4,500	52,844	57,344	57,598
Joint task force	-	-	-	-	-	40,333	40,333	37,490
Onsite meeting expense	-	-	-	-	1,822	50,465	52,287	152,985
Speaker travel expense	-	-	-	-	-	5,353	5,353	143,051
Training exam	-	-	-	-	-	-	-	9,466
Communication	-	-	-	-	75	2,071	2,146	1,557
Other	-	-	-	-	-	-	-	12,500
Cert/Recert course	-	-	-	-	562	-	562	33,447
ART Expenses	-	99,039	-	-	-	-	99,039	206,943
Associates	-	-	-	-	-	12,698	12,698	15,054
IT surveillance	-	-	-	-	-	19,239	19,239	18,322
Joint Council of Allergy, Asthma and Immunology	-	-	-	-	-	144,547	144,547	107,498
Website redesign expenses	-	-	-	-	-	44,000	44,000	-
Anaphylaxis research	-	-	-	-	-	2,412	2,412	2,500
Totals	$ 244,843	$ 542,039	$ 881,952	$ 3,362,308	$ 661,950	$ 3,869,320	$ 9,562,412	$ 11,313,852

Form **8868**
(Rev January 2011)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

OMB No 1545-1709

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

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

Electronic filing *(e-file)* You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit *www irs gov/efile* and click on *e-file for Charities & Nonprofits*

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

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

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

Type or print	Name of exempt organization THE AMERICAN ACADEMY OF ALLERGY, ASTHMA AND IMMUNOLOGY	**Employer identification number** 39-6061326
File by the due date for filing your return See instructions	Number, street, and room or suite no If a P O box, see instructions 555 EAST WELLS SUITE 1100	
	City, town or post office, state, and ZIP code For a foreign address, see instructions MILWAUKEE, WI 53202	

Enter the Return code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ DAN NEMEC

Telephone No ▶ 414 272-6071 FAX No ▶

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

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 08/15, 20 11, to file the exempt organization return for the organization named above The extension is for the organization's return for

▶ [X] calendar year 20 10 or

▶ [ ] tax year beginning _____, 20 ____, and ending _____, 20 ____

2 If the tax year entered in line 1 is for less than 12 months, check reason [ ] Initial return [ ] Final return [ ] Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	$ 0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	$ 0.
c	**Balance Due.** Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	3c	$ 0.

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

• If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** and check this box . . . . . ▶ [X]

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension, complete only Part I** (on page 1).

Part II **Additional (Not Automatic) 3-Month Extension of Time.** Only file the original (no copies needed).

Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	THE AMERICAN ACADEMY OF ALLERG ASTHMA AND IMMUNOLOGY	39-6061326
	Number, street, and room or suite no If a P O box, see instructions 555 EAST WELLS	
	City, town or post office, state, and ZIP code For a foreign address, see instructions MILWAUKEE, WI 53202	

Enter the Return code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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

• The books are in the care of ▶ DAN NEMEC
Telephone No. ▶ 414 272-6071 FAX No. ▶

• If the organization does not have an office or place of business in the United States, check this box . . . . . ▶ [ ]

• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box . . . . . ▶ [ ] . If it is for part of the group, check this box . . . . . ▶ [ ] and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 20 11 .

5 For calendar year 2010 , or other tax year beginning _____, 20 ____ , and ending _____, 20 ____ .

6 If the tax year entered in line 5 is for less than 12 months, check reason: [ ] Initial return [ ] Final return
[ ] Change in accounting period

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

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	$
c	**Balance Due.** Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	$

Signature and Verification

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

Signature ▶ Tracey Gunder Title ▶ CPA Date ▶ 7/26/2011