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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

Open to Public Inspection

A	For th	e 2010 calendar year, or tax year beginning SEP 1, 2010 and ending	AUG 31, 2011	
В	Check if applicat	C Name of organization	D Employer identifica	ation number
۲	Addr	ess ASAE FOUNDATION		
Ĩ	Nam chan	ge Doing Business As	52-13	00485
	Initia retur Term ated	Number and street (or P O box it mail is not delivered to street address) Hoom/s	uite E Telephone number (202)	326-9550
	Amer		G Gross receipts \$	6,235,984.
	Appli	WABITINGTON, DC 20005	H(a) Is this a group ret	urn
	pend	F Name and address of principal officer: JOHN H. GRAHAM, IV	for affiliates?	Yes X No
		SAME AS C ABOVE	H(b) Are all affiliates inclu	ded? Yes No
			527 If "No," attach a li	st. (see instructions)
		ite: ► WWW.ASAECENTER.ORG	H(c) Group exemption	
			rear of formation 1983 M	State of legal domicile DC
-	art I	Summary CDE CCUE	DITEO	
ခ	1	Briefly describe the organization's mission or most significant activities: SEE SCHE	DOTE O	
& Governance	2	Check this box If the organization discontinued its operations or disposed of n	nore than 25% of its net ass	etc
, e	3	Number of voting members of the governing body (Part VI, line 1a)	3	12
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
SS SS	5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	0
۲į	6	Total number of volunteers (estimate if necessary)	6	1714
LUIL Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
_	b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.
7	1		Prior Year	Current Year
JOE F	8	Contributions and grants (Part VIII, line 1h)	788,729.	514,579.
รัฐ	9	Program service revenue (Part VIII, line 2g)	11,045,585.	543,217.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	52,245.	2,015,346.
Ľ)	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,034,934.	128,032.
Expenses	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,921,493.	3,201,174.
7	13	Grants and similar amounts paid (Part IX, column (A), lines 1·3)	0.	0.
3	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
beu	h	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 400,338.		
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	13,750,565.	2,076,913.
		Total expenses Add lines 13-17 (must equal-Part-IX, column, (A), line, 25)	13,750,565.	2,076,913.
	19	Revenue less expenses. Subtract line 18 from line 12 CFIVED	<829,072.>	1,124,261.
Net Assets or Fund Balances		The second of th	Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16) Total liabilities (Part X, line 26) Net assets or fund balances. Subtract line 21 from line 20	20,586,028.	19,878,205.
et As	21	Total liabilities (Part X, line 26)	11,366,174.	8,140,305.
		The december of fell defended Countries and Elementation	9,219,854.	11,737,900.
	art II	Signature Block / OGDEN, UT		
		alties of perjury, I declare that I have examined the return, including accompanying schedules and sta		knowledge and belief, it is
true	, corre	ct, and complete. Declaration of preparer (other that) officers is based on all information of which prep	arer has any knowledge	7
Sig	n	Signature of officer	Date	
Hei		JOHN H. GRAHAM, IV, PRESIDENT/CEO	•	
	Ū	Type or print name and title		· · · · · · · · · · · · · · · · · · ·
_		Print/Type preparer's name PEROPAH C VOCNETTION Reparer's signature	Date / Check	PTIN
Paid	j	DEBORAH G. KOSNETT DEOTT GROWN	$-\frac{7}{9}/2$ self-employed	
	parer	Firm's name TATE AND TRYON	l / Firm's EIN ▶	
Use	Only	Firm's address 2021 L STREET, NW SUITE 400		
		WASHINGTON, DC 20036	Phone no (2	02) 293-2200
<u>May</u>	the l	RS discuss this return with the preparer shown above? (see instructions)		X Yes No
0330	01 02-2	2.11 HA For Panerwork Reduction Act Notice, see the separate instructions.		Form 990 (2010)

4d	Other program ser	vices. (Describe in	Schedule O)
	(Expenses \$		including gra

including grants of \$

) (Revenue \$

4e Total program service expenses

1,516,229.

			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?	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		<u> X</u>
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	N/	A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			v
_	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,	_		Х
۰	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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	-		
J	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
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	Х	
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.			
а	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 - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	_	<u>X</u>
С	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_
ď	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	ĺ l		v
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	<u>X</u>
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e	^	
f	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	х	
12a	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
ь	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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
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		<u>X</u>
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		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		l	v
4-	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		Х
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 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	х	
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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		X
	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		
		Form 9	agn /a	/01/N

032003 12-21-10

			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	<u> </u>	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		l	
	Schedule J	23	X	-
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25	24a	ļ	X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			.,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
Ь		1		ĺ
	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		Х
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):			v
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	00-	х	
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		X
24	contributions? If "Yes," complete Schedule M	30_		Δ_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			Х
30	If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		Λ
32		32		Х
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	- 32		
43	sections 301.7701-2 and 301.7701-37 If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity?			
0 -4	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		Х
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	00		
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
J	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	- 50		
٠,	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?	3,		
40	Note. All Form 990 filers are required to complete Schedule O	38	x	
		Form		2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance Check is Sheebuld on Comman a response to any question in this Part V	Forn	1 990 (2010) ASAE FOUNDATION 52-130	0485	, F	age
Series The number reported in Box 3 of Form 1096. Enter -0- if not applicable 1s 59 1b 0 0	Pa				<u></u>
1a Enter the number reported in Box 3 of Form 1096. Enter 0-4 in of applicable 1b 0 0 b Enter the number of Form 80/26 included in the Int. Enter 0-4 in fine applicable 1b 0 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) without provided provided payments to reportable payments to present on the provided in the provided pro		Check if Schedule O contains a response to any question in this Part V			
1a Enter the number reported in Box 3 of Form 1096. Enter 0-4 in of applicable 1b 0 0 b Enter the number of Form 80/26 included in the Int. Enter 0-4 in fine applicable 1b 0 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) without provided provided payments to reportable payments to present on the provided in the provided pro				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) withwinings to pizze with energy and the property of the prope	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	•		
a Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, 2a	b		วี		
2a Eiter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. filed for the calendar year ending with or writhin the year covered by the return. b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file, (see instructions) 3 Did the organization have underlied business gross income of \$1,000 or more during the year? 5 If "Yes," has it filed a Form 990-T for this year? If "No, "provide an explaination in Schedule O 5 If "Yes," has it filed a Form 990-T for this year? If "No, "provide an explaination in Schedule O 5 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; level. 5 If "Yes," the state of the foreign country; level as a bank account, securities account, or other financial accounts. 5 Was the organization a party to a prohibitod tax shelter transaction at any time during the tax year? 5 Was the organization a party to a prohibitod tax shelter transaction? 6 If "Yes," to line 5a or 5b, did the organization file Form 8885:T? 7 Did any taxable party nority the organization file Form 8885:T? 8 Does the organization and party to a prohibitod stax shelter transaction or grits were not tax deductible? 7 Organizations that may receive deductible contributions under section 170c). 8 If "Yes," did the organization include with every solicitation an express statement that such contributions or grits were not tax deductible? 7 Organizations that may receive deductible contribution of up a party for goods and services provided to the payor? 7 If Yes," indicate the number of Forms 8282 filed during the year 9 Did the organization receive a contribution of up and party for goods and services provided? 10 If Yes," indicate the number of Forms 8282 filed during the year 10 Did the organization receives a paymant in excess	c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	7		
field for the calendary year ending with or within the year covered by this return by If at least one is reported on line 24, cith the organization file all required federal employment tax returns? Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file, (see instructions) 3a. Did the organization have unrelated submess gross is more coming the year? by If "Yes," has if filed a Form 990-17 for this year? If "No," provide an explanation in Schedule O 4a. At any time during the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountly is the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountly is the calendary year, did the organization have an interest in, or a signature or other authority over, a financial accountly is the organization of the foreign country; by the submitted that should be a submitted to the submitted that should be a submitted and the submitted that should be a submitted and part of the properties of the submitted that should be a submitted that should be a submitted and part of the organization about the submitted that should be a submitted and part of the properties of the submitted and part of property of the which it was one submitted and partly for goods and services provided? b if "Yes," did the organization netty the donor of the value of the goods or services provided? b if "Yes," did the organization review a payment in arcsss of \$5 made partly as a continution and partly for goods and services provided? b if the organization review a payment in arcsss of \$5 made partly as a continution of our partly and the submitted and partly and the submitted and the submitted and partly and the submitted and partly and the submitted and partly and t		(gambling) winnings to prize winners?	1c	Х	
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Note, if the sum of lines 1 and 2a is greater than 250, you may be required to e-file; geen embructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 5b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3a At any time during the calendary year, of 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)? 5b If "Yes," either the name of the foreign country. Power of the organization and 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)? 5c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction solicit any contributions that were not tax deductible? 6c If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," to line the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If "Yes," include the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If "Yes," include the organization include with every solicitation and party for goods and services provided? 7d If "Yes," did the organization include with every solicitation and party for good and services provided? 7d If "Yes," include the form 82822	2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file, feee instructions) 3		filed for the calendar year ending with or within the year covered by this return 2a 6)		
3a Dut the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes, *has if filed a Form 990-T for this year? If *No,* prowde an explanation in Schedule O 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, ecunties account, or other financial accounts) 5b If Yes, *I enter the name of the foreign country * >► 5c In the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c In Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited ax shelter transaction? 6c If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited ax shelter transaction? 6c If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes,* did the organization have an interest in, or a signature or other any contributions and the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes,* did the organization houlde with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes,* did the organization notify the dinor of the value of the goods or services provided? 7e Organizations that may receive deductible contributions under section 170(c). 8d but the organization receive a payment in excess of 35 made party as a contribution and party for goods and services provided to the payor? 7e If Yes,* did the organization notify the dinor of the value of the goods or services provided? 7f If If the organization contribution of place of the payor of the property of which it was required to the Form 8262? 7g If He organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8g if the organization received a contribution of qualified intellectual property, did the organ	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a Dut the organization have unrelated business gross income of \$1,000 or more during the year? 4b If Yes, *has if filed a Form 990-T for this year? If *No,* prowde an explanation in Schedule O 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, ecunties account, or other financial accounts) 5b If Yes, *I enter the name of the foreign country * >► 5c In the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c In Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited ax shelter transaction? 6c If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited ax shelter transaction? 6c If Yes,* to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes,* did the organization have an interest in, or a signature or other any contributions and the organization that it was or is a party to a prohibited tax shelter transaction? 6c If Yes,* did the organization houlde with every solicitation an express statement that such contributions or gifts were not tax deductible? 6d If Yes,* did the organization notify the dinor of the value of the goods or services provided? 7e Organizations that may receive deductible contributions under section 170(c). 8d but the organization receive a payment in excess of 35 made party as a contribution and party for goods and services provided to the payor? 7e If Yes,* did the organization notify the dinor of the value of the goods or services provided? 7f If If the organization contribution of place of the payor of the property of which it was required to the Form 8262? 7g If He organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8g if the organization received a contribution of qualified intellectual property, did the organ		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	· · · · · · · · · · · · · · · · · · ·		1
b If "Yes," has filled a Form 990-T for this year? If "No," provide an explanation in Schedule O 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)? b If "Yes," enter the name of the foreign country. IP 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 fransaction at any time during the tax year? 5b Dd any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5c If "Yes," to line 5a or 5b, did the organization file Form 8885-T? 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 educutible? b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$15 made party as a contribution and partly for goods and services provided to the payor? 7c If Yes, indicate the number of Forms \$282 filed during the year 6b Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c If If the organization creaved a contribution of oras, boats, enjoines, or other evides, clid the organization flee Form 1999 as required? 7c If If the organization received a contribution of oras, boats, enjoines, or other evidenes, clid the organization flee Form 1999 as required? 7d If the organization received a contribution of oras, boats, enjoines, or other evidenes, clid the organization flee Form 1999 as required? 7d If the organization make any taxable distributions under section 500(a)3 supporting o	За		3a		X
financial account in a foreign country (such as a bank account, securities account, or other financial account)? b If "Yes," enter the name of the foreign country: See instructions for fining requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. See instructions for fining requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. Say Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5a	b		3b		
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b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O					
				<u>aan //</u>	2010

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 Section A. Governing Body and Management No Yes 12 1a Enter the number of voting members of the governing body at the end of the tax year **b** Enter the number of voting members included in line 1a, above, who are independent 16 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 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 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members of the X governing body? 7a X b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7ь Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X **b** Each committee with authority to act on behalf of the governing body? 8ь 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 a 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 b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, 10b and branches to ensure their operations are consistent with those of the organization? Х 11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? 12b c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe Х in Schedule O how this is done 12c Х 13 Does the organization have a written whistleblower policy? 13 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? Х a The organization's CEO, Executive Director, or top management official 15a Х **b** Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a 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? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed -17 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 X Upon request Another's website 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: HEIDI ELLIS ROBEY - 202-326-9550 1575 I STREET NW, WASHINGTON, DC 20005 Form **990** (2010) 032006

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.

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

- 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.

(A)	(B)		(C)		(D)	(E)	(F)			
Name and Title	Average		Position		Reportable	Reportable	Estimated			
	hours per	(c	(check all		that	app	ly)	compensation	compensation	amount of
	week	director				l	ł	from	from related	other
	(describe	l a				2		the	organizations	compensation
	hours for related	Se o	uste		_	eusa		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations	a E	la la		ag of	E 25 85		(** 2) 1000 (**100)		and related
	ın Schedule	1 #	Institutional trustee	is difference of the control of the	Key employee	Highest compensated employee	Former			organizations
	0)	트	Ĕ	5	줆	₹ 5	G.			
PETER O'NEIL, CAE	0.00			, ,					0	_
CHAIRMAN, ASAE FOUNDATION	2.00	X	<u> </u>	X		_		0.	0.	0.
KAREN L. HACKETT, FACHE, CAE								_	0	_
CHAIRMAN, ASAE	2.00	X	ļ	Х				0.	0.	0.
JOSEPH M. MCGUIRE, CAE								_	•	_
SECRETARY/TREASURER	2.00	X	<u> </u>	X			<u> </u>	0.	0.	0.
ROBIN LOKERMAN, FASAE, CCM										
IMMEDIATE PAST CHAIRMAN	2.00	X		X				0.	0.	0.
STEVEN Z. BERGER										
BOARD MEMBER	2.00	X	<u> </u>					0.	0.	0.
MATTHEW R. D'UVA, CAE								_	_	
BOARD MEMBER	2.00	X					<u>L</u>	0.	0.	0.
ABE ESHKENAZI, CSCP, FACHE, CPA, CAE									_	
BOARD MEMBER	2.00	X						0.	0.	0.
PAUL GANNON							l		_	_
BOARD MEMBER	2.00	X						0.	0.	0.
AGATHA JOHNSON, MA, CAE							ļ	_		_
BOARD MEMBER	2.00	X				_		0.	0.	0.
ANN T. TURNER, PHD, CAE									_	_
BOARD MEMBER	2.00	X						0.	0.	0.
LISA MULLINGS, ESQ., CAE								_		_
BOARD MEMBER	2.00	X						0.	0.	0.
SUSAN NEELY, CAE								_	_	_
BOARD MEMBER	2.00	X						0.	0.	0.
JOHN GRAHAM	. 1							_		
PRESIDENT & CEO	2.00			Х				0.	827,851.	328,483.
HEIDI ROBEY										
VP FINANCE & CFO	2.00			Х				0.	156,143.	26,526.
SUSAN ROBERTSON										
EXEC VP ASAE, PRESIDENT FDN	16.00	L		Х				144,629.	216,343.	48,062.
REGINALD HENRY										
CHIEF INFORMATION OFFICER	2.00	<u> </u>			Х			0.	170,915.	38,097.
ROBERT SKELTON										
CHIEF ADMINISTRATIVE OFFICER	2.00	L			Х			0.		51,125.
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032007 12-21-10

(A)	(B)	1		(0	C)			(D)	(E)	(F)	
Name and title	Average hours per	(c		Pos all		app	ly)	Reportable compensation	Reportable compensation	Estimate amount	
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Form e r	from the organization (W-2/1099·MISC)	from related organizations (W-2/1099-MISC)	other compensa from th organizat and relat organizati	atior ie tion ted
RONALD MCNALLY	4 00				.,			0	160 011	21 0	<i>-</i> 1
CHIEF MEMBER & VOL OFFICER	4.00		_		Х			0.	160,011.	31,9	ρl
MONICA DIGNAM CHIEF RESEARCH OFFICER	10.00					х		112,952.	48,407.	38,9	95
CARYLANN ASSANTE								·- <u>-</u>			
P, DEVELOPMENT	27.00					X		28,953.	78,280.	14,6	27
SUSAN SARFATI											
FORMER EXEC VP	0.00						X	357,844.	0.		0
1b Sub-total	/// Coation A					>		644,378.	1,826,774.	577,8	<u>76</u>
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	vii, Section A					<u> </u>			1,826,774.	577,8	76
Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	d at	oove) wh	o re	ceived more than \$100	.000 in reportable		
Compensation nom the organization					-					Yes	No

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 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization X and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services

Х rendered to the organization? If "Yes," complete Schedule J for such person **Section B. Independent Contractors** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from

(A)	(B)	(C)
Name and business address	Description of services	Compensation
HARGROVE INC.	TRADE SHOW & EVENT	
ONE HARGROVE DRIVE, LANHAM, MD 20706	SERVICES	364,669
CENTERPLATE/NBSE, 801 MOUNT VERNON PLACE,	FOOD & BEVERAGE	
NW, WASHINGTON, DC 20001	SERVICES	253,297
MARRIOTT BUSINESS SERVICES	FOOD & BEVERAGE	
P.O. BOX 402642, ATLANTA, GA 30384-2642	SERVICES	219,286
THE BROADMOOR	FOOD & BEVERAGE	
1 LAKE AVENUE, COLARDO SPRINGS, CO 80906	SERVICES	187,181.
VIVA CREATIVE, INC.	FOOD & BEVERAGE	
164 ROLLINS AVE 2ND FL, ROCKVILLE, MD 2085	2SERVICES	139,534.
2 Total number of independent contractors (including but not limited to those lis	ted above) who received more than	
\$100,000 in compensation from the organization > 8		

Part	VII	Statement of Reve	nue				·	486.7
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
and other similar amounts	1 a	Federated campaigns	1a					
2	b	Membership dues	16					
a	C	Fundraising events	1c	166,278.				
<u>ā</u>	d		1d					
<u>.</u> E	е	3 ,						
ē	f	All other contributions, gifts, gran	l i	240 201				
ㅎ		similar amounts not included abo	ove 1f	348,301.				
2		Noncash contributions included in lines	3 1a-1f \$		F14 F70			
-	_ <u>h</u>	Total. Add lines 1a-1f		<u> </u>	514,579.	,		
	_	TEADMING CENTER	D DACTT	Business Code	520 604			E20 C04
	2 a	LEARNING CENTER		900099	520,694.	20 222		520,694
e l	b	PROFESSIONAL DE SPONSORSHIPS	EVELOPME	900099	20,333.	20,333.	·····	2 100
Ven	c		JOURNAL	900099	2,180. 10.	10.		2,180
Revenue	đ	MAGAZINES AND J	JOURNAL	900099	10.	10.		
{	e	A (1 - 4)						
	T	All other program service reve	enue		543,217.			
+-		Total. Add lines 2a-2f			343,211.			
	3	Investment income (including	aividenas, inter	est, and	405,760.			405,760
	4	other similar amounts)			403,700.		 	403,700
- 1	4 5	Income from investment of ta	x-exempt bona (proceeds	17,281.			17,281
'	5	Royalties	(ı) Real	(II) Personal	11,201.			17,201
1.	6 a	Gross Rents	(I) Neal	(ii) Personai		į		
	b	Less rental expenses		 				
	•	Rental income or (loss)		 				
	d	Net rental income or (loss)	L	<u> </u>	İ	·		
,		Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	2,953,208.	1,625,891.		£ .		
	b	Less: cost or other basis	27-22/2001			į		
	_	and sales expenses	2,872,569.	96,944.				
	С	Gain or (loss)	80,639.					
		Net gain or (loss)	<u> </u>	•	1609586.			1,609,586
, 1		Gross income from fundraisin	g events (not					•
!		including \$ 166, 2						
		contributions reported on line	1c). See					
		Part IV, line 18	a	176048.				
	b	Less: direct expenses	b	65,297.				
'	c	Net income or (loss) from fund	draising events		110,751.			110,751
1	Эa	Gross income from gaming ac	tivities. See	1	•			
		Part IV, line 19	а		[
1	b	Less: direct expenses	b		ļ			
	С	Net income or (loss) from gam	ing activities	>				
10) a	Gross sales of inventory, less	returns		[
		and allowances	а	ļ				
		Less: cost of goods sold	b		-			
	<u> </u>	Net income or (loss) from sale		,				
-		Miscellaneous Revenu	<u>e</u>	Business Code				
11	la							
	b							
	С	All	_	 				<u> </u>
		All other revenue		<u> </u>				
12		Total. Add lines 11a-11d			3201174.	20,343.	0.	
1 12		Total revenue. See instructions			22011/40	20,343.	<u> </u>	2,666,252

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). (A) (C) Do not include amounts reported on lines 6b. Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 9 Other employee benefits 10 Payroll taxes Fees for services (non-employees): Management Legal ь Accounting Lobbying Professional fundraising services See Part IV, line 17 85,080. 85,080. Investment management fees 2,700. 44,572. 329,459. 282,187. Other 9 41,019. 41,019. 12 Advertising and promotion 162,634 80,808. 253,663. 10,221 13 Office expenses 14 Information technology <35. <35. Royalties 15 321,576. 321,576. 16 Occupancy $26,1\overline{51}$ 12,736 13,415. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 32,240.66,591 3,819 30,532. Conferences, conventions, and meetings 19 Interest 20 21 Payments to affiliates 136,166. 103,309 32,857. 22 Depreciation, depletion, and amortization 1,279. 1,279. 23 Other expenses Itemize expenses not covered 24 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) 331,254. 531,841. 81,735 118,852. PERSONNEL SALARY EXPENS 24,612. 229,980. 170,310. OVERHEAD ALLOCATION 35,058. 14,091. PERSONNEL BENEFITS 85,348. 51,187. 20,070. 34,526. 27,162. 7,364. CONTRIBUTIONS AND SPONS 9,305. 5,791 CREDIT CARD EXPENSE 3,514. <75,036.> 15,843. <94,734.> 3,855. All other expenses 2,076,913. 1,516,229. 160,346. 400,338. Total functional expenses. Add lines 1 through 24f 25 Jaint 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

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing		1	
	2	Savings and temporary cash investments	1,447,908.	2	1,120,728.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	1,976,547.	4	145,956.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
	ļ	of Schedule L	7	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			
s		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ş	8	Inventories for sale or use	11 7 7 7	_8_	
	9	Prepaid expenses and deferred charges	117,518.	9	7,404.
	10a				
		basis. Complete Part VI of Schedule D 10a 265, 363.	220 207		100.056
	l l	Less accumulated depreciation 10b 161,407.	338,387.		103,956. 18,500,161.
	11	Investments - publicly traded securities	16,705,668.	11	18,500,161.
	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	0.
	16_	Total assets. Add lines 1 through 15 (must equal line 34)	20,586,028.	16	19,878,205.
	17	Accounts payable and accrued expenses	645,614.	17	_118,200.
	18	Grants payable	1,316,438.	18	30 000
	19	Deferred revenue	1,310,430.	19	30,000.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			
2		highest compensated employees, and disqualified persons. Complete Part II of Schedule L		00	
	22	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de		22 23	
	23 24	Secured mortgages and notes payable to unrelated third parties		24	
	25	Unsecured notes and loans payable to unrelated third parties Other liabilities Complete Part X of Schedule D	9,404,122.	25	7,992,105.
	26	Total liabilities. Add lines 17 through 25	11,366,174.	26	8,140,305.
		Organizations that follow SFAS 117, check here X and complete	11/000/11/10	-20	0/110/0000
s		lines 27 through 29, and lines 33 and 34.			
JCe	27	Unrestricted net assets	9,165,890.	27	11,697,066.
Net Assets or Fund Balances	28	Temporarily restricted net assets	53,964.	28	11,697,066.
9 6	29	Permanently restricted net assets		29	
ş		Organizations that do not follow SFAS 117, check here and			
5		complete lines 30 through 34.			
2	30	Capital stock or trust principal, or current funds		30	
Ž,	31	Paid in or capital surplus, or land, building, or equipment fund		31	
te	32	Retained earnings, endowment, accumulated income, or other funds		32	
Ź	33	Total net assets or fund balances	9,219,854.	33	11,737,900.
	34	Total liabilities and net assets/fund balances	20,586,028.	34	19,878,205.

Form	990 (2010) ASAE FOUNDATION	52-	1300485	Pa	ge 12
Pai	TXI Reconciliation of Net Assets				<u> </u>
	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	3,20		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,07	5,9	13.
3	Revenue less expenses. Subtract line 2 from line 1	3	$\frac{1}{1}$, 12	1,2	61.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	9,219	9,8	54.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	1,393	3,7	85.
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	11,73	7,9	00.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				\mathbf{X}
	<u></u>			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
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 th	e audıt,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edule O			
ď	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis X 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 Sir	igle Aud	dit [

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.

Form **990** (2010)

Act and OMB Circular A-133?

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

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

Open to Public Inspection

Name of the organization

Employer identification number 52-1300485 ASAE FOUNDATION 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). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 🔟 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) R A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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). 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. d ____ Type III - Other a ____ Type I b Type II c ____ Type III - Functionally integrated 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). 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g Yes No 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) (ii) A family member of a person described in (i) above? 11g(ii) 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? h Provide the following information about the supported organization(s). (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organization in col organization in col (i) listed in your organization in col organization support (i) organized in the (described on lines 1-9 governing document? (i) of your support? above or IRC section (see instructions)) Yes

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2010

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.)

Se	ction A. Public Support				- " •		<u>-</u>
Cale	endar 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 ")	3,605,549.	1,047,534.	666,903.	788,729.	514,579.	6,623,294.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to	1					
	or expended on its behalf						
3	The value of services or facilities						<u> </u>
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3,605,549.	1,047,534.	666,903.	788,729.	514,579.	6,623,294.
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)						1,267,503.
_ 6	Public support. Subtract line 5 from line 4	,		,,,,		, , , , , , , , , , , , , , , , , , , ,	5,355,791.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	3,605,549.	1,047,534.	666,903.	788,729.	514,579.	6,623,294.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	806,923.	630,635.	1,232,567.	1,590,009.	423,041.	4,683,175.
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.)	778.					778.
11	Total support. Add lines 7 through 10						11,307,247.
	Gross receipts from related activities,	•			İ		,651,685.
13	First five years. If the Form 990 is for	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	. \Box
2	organization, check this box and stor						
	ction C. Computation of Publ						47 27
	Public support percentage for 2010 (I	, ,,	•	olumn (f))	}	14	47.37 % 57.96 %
	Public support percentage from 2009			h	4 00 4 /00	15	
10a	33 1/3% support test - 2010.If the o	•			4 IS 33 1/3% or m	ore, check this box	t and ►X
_	stop here. The organization qualifies 33 1/3% support test - 2009. If the o		-		15 15 22 1/20/	ar mara abaal thu	
U	and stop here. The organization qual	•			ine 13 is 33 1/370	or more, check this	■
172	10% -facts-and-circumstances test	•	• •		13 16a or 16b a	nd line 14 is 1004 o	vr more
1 / d	and if the organization meets the "fac	_					
	meets the "facts-and-circumstances"					now the organi	
h	10% -facts-and-circumstances test	-	•		-	7a, and line 15 is 1	0% or
	more, and if the organization meets th						J. 70 O.
	organization meets the "facts-and-circ						▶ □
18	Private foundation. If the organization			· ·			
						dule A (Form 990	

032022

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						
ınclude any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in any activity that is related to the						
organization's tax-exempt purpose				L		
3 Gross receipts from activities that						
are not an unrelated trade or bus-				•		
iness under section 513				ļ		
4 Tax revenues levied for the organ-						
ization's benefit and either paid to		1				
or expended on its behalf		<u> </u>				
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge			_			
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and			·		· -	
3 received from disqualified persons						
b Amounts included on lines 2 and 3 received						
from other than disqualified persons that	İ					
exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	!					
c Add lines 7a and 7b				<u> </u>		
8 Public support (Subtract line 7c from line 6)	•				7	1
Section B. Total Support	 	1		1	<u> </u>	
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	(8) 2000	(5) 2001	(0) 2000	10, 2003	10/2010	(i) Total
10a Gross income from interest,						1
dividends, payments received on						
securities loans, rents, royalties and income from similar sources]		
b Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975	ļ					
· · · · ·						+
c Add lines 10a and 10b 11 Net income from unrelated business						-
activities not included in line 10b,						
whether or not the business is						
regularly carried on 12 Other income Do not include gain				 		
or loss from the sale of capital						
assets (Explain in Part IV)		 				
13 Total support (Add lines 9, 10c, 11, and 12)		<u> </u>			5047.101	
14 First five years. If the Form 990 is for the	ne organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3) organı	zation,
check this box and stop here						
Section C. Computation of Public					1	
15 Public support percentage for 2010 (line	**	-	olumn (f))		15	9
16 Public support percentage from 2009 S					16	9
Section D. Computation of Invest						
17 Investment income percentage for 2010		***	e 13, column (f))		17	9
18 Investment income percentage from 20	09 Schedule A,	Part III, line 17			18	9
19a 33 1/3% support tests - 2010. If the o	ganization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line	17 is not
more than 33 1/3%, check this box and	stop here. The	organization quali	fies as a publicly s	supported organiza	ation	▶□
b 33 1/3% support tests - 2009. If the or	ganization did n	ot check a box on	line 14 or line 19a	ı, and line 16 is mo	re than 33 1/3%,	and
line 18 is not more than 33 1/3%, check	this box and st	t op here. The orga	nization qualifies a	as a publicly suppo	orted organization	ı ▶ <u>□</u>
20 Private foundation. If the organization	did not check a l	box on line 14, 19a	a, or 19b, check th	ns box and see ins	tructions	▶□

032023 12-21-10

Schedule A (Form 990 or 990-EZ) 2010

SCHEDULE D

(Form 990)

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 Open to Public inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

	ASAE FOUNDATION	04 - 0: ::	32-1300483
Pa		unds 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	ng that the assets held in donor advised fu	unds
	are the organization's property, subject to the organization's excl	usive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advis-	ors in writing that grant funds can be used	d only
	for charitable purposes and not for the benefit of the donor or do		
	impermissible private benefit?	• • •	Yes No
Pa	rt II Conservation Easements. Complete if the organiz	ation answered "Yes" to Form 990, Part I	V, line 7.
1	Purpose(s) of conservation easements held by the organization (c		
	Preservation of land for public use (e.g., recreation or education of land for public use)		ally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space	i reservation of a continua	motorio directoro
2	·	economistion contribution in the form of n	consequation engagement on the last
~	Complete lines 2a through 2d if the organization held a qualified of day of the tax year.	conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
_	Total number of consequences		
a	Total number of conservation easements		2a
D	Total acreage restricted by conservation easements	on the dead of the (a)	2b
C	Number of conservation easements on a certified historic structu		2c
d	Number of conservation easements included in (c) acquired after	8/1 //06, and not on a historic structure	
_	listed in the National Register		
3	Number of conservation easements modified, transferred, release	ed, extinguished, or terminated by the orga	anization during the tax
_	year ▶		
4	Number of states where property subject to conservation easeme		
5	Does the organization have a written policy regarding the periodic		n, n,
	violations, and enforcement of the conservation easements it hold		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and enfor		
8	Does each conservation easement reported on line 2(d) above sa	tisfy the requirements of section 170(h)(4)	
	and section 170(h)(4)(B)(ii)?		└ Yes └ No
9	In Part XIV, describe how the organization reports conservation e	•	
	include, if applicable, the text of the footnote to the organization's	s financial statements that describes the o	rganization's accounting for
Feet 1	conservation easements.	A III A STATE OF THE STATE OF T	Circilar Assats
Pai	TIII Organizations Maintaining Collections of Ar		Similar Assets.
	Complete if the organization answered "Yes" to Form 990,		
1a	If the organization elected, as permitted under SFAS 116 (ASC 95		
	historical treasures, or other similar assets held for public exhibition		of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes t		
Ь	If the organization elected, as permitted under SFAS 116 (ASC 95	•	
	treasures, or other similar assets held for public exhibition, educa-	tion, or research in furtherance of public se	ervice, 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 treasure	es, or other similar assets for financial gain	, provide
	the following amounts required to be reported under SFAS 116 (A	SC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		> \$

Schedule D (Form 990) 2010

Sche	edule D (Form 990) 2010 ASAE FO	UNDATION				!	52-13	00485	Page 2
Pa	rt III Organizations Maintaining (Collections of A	rt, Historical Tr	easures,	or Oth	er Simila	ar Asse	ts (contin	ued)
3	Using the organization's acquisition, access	on, and other record	ls, check any of the	following th	at are a s	significant	use of its	collection	ıtems
	(check all that apply):								
а	Public exhibition	d	Loan or exc	hange prog	rams				
b	Scholarly research	е	Other						
c	Preservation for future generations								
4	Provide a description of the organization's c	ollections and explai	n how they further t	he organizat	tion's exe	empt purpo	ose in Par	t XIV.	
5	During the year, did the organization solicit of	r receive donations	of art, historical trea	sures, or oti	ner sımıla	r assets			
	to be sold to raise funds rather than to be m	aintained as part of t	he organization's co	ollection?				Yes_	☐ No
Pa	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered	"Yes" to	Form 990	, Part IV,	ine 9, or	
	reported an amount on Form 990, Pa		-						
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contribution	s or other a	ssets no	t included			
	on Form 990, Part X?		•					Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and complete the fo	llowing table.					_	
								Amount	
c	Beginning balance					1c		<u> </u>	
d	Additions during the year					1d			
9	Distributions during the year					1e			
4	Ending balance					1f	·· ····· ·		
2a	Did the organization include an amount on F	orm 000 Bart Y line	212					Yes	No
	If "Yes," explain the arrangement in Part XIV	onn 550, ran A, inle	21:					_ 163	110
	Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.								
	Endownient Lands. Complete		(b) Prior year	(c) Two year		(d) Three v	pare hack	(a) Four	ears back
10	Beginning of year balance	(a) Current year 9,183,135.	8,570,072.		7,141.	(a) illes y	Gais Dack	(e) roury	Cais Dack
1a	Contributions	9,163,133.	8,370,072.	10,33	, 1 1 1 1 1			*************	***************************************
b		1 220 102	002 727	-1 22	0 272				
	Net investment earnings, gains, and losses	1,338,102.	983,737.	<1,32	9,273.	••••••••••••••••••••••••••••••••••••••	***************************************	*********	***************************************
٥	Grants or scholarships	-	 -						
е	Other expenditures for facilities	400 167	205 674	4.5	7 706				
	and programs	492,167.	395,674.	43	7,796.				······
T	Administrative expenses		0 150 105			**********	***********		
9	End of year balance	10,029,070.	9,158,135.	8,5/	0,072.				
2	Provide the estimated percentage of the year								
а	Board designated or quasi-endowment	99.71	_%						
Ь	Permanent endowment ► .25	%							
		%							
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administ	ered for t	he organiz	ation		
	by:								es No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" to 3a(II), are the related organizations	•						3b	
4	Describe in Part XIV the intended uses of the								
Par	······································	1			,				
	Description of investment	(a) Cost or of				ccumulate	d	(d) Book	value
		basis (investri	nent) basis ((other)	de	preciation			
1a	Land	<u> </u>							
b	Buildings								
С	Leasehold improvements					164	<u> </u>		055
d	Equipment		26.	5,363.		161,40) / •	103	,956.
	Other		_ <u></u>		L				0.5.5
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	0(c))				103	,956.

Schedule D (Form 990) 2010

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		Method of valua end-of-year mar	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				_ -
(D)	 			
(E)				
(F)				
(H)		-		
(l)				
Total (Col (b) must equal Form 990, Part X, col (B) line 12)		······································		········
Part VIII Investments - Program Related.	See Form 990, Part X, lin	e 13.		······································
(a) Description of investment type	(b) Book value	(c) N	lethod of valua and-of-year mar	
(1)				
(2)				
(3)				·····
(4)			··- <u>·</u>	
(5)		<u> </u>		
	 		·	
(7)				
(8) (9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13)				······································
Part IX Other Assets. See Form 990, Part X, lin	e 15.	<u></u>		
) Description			(b) Book value
(1)				
(2)				<u> </u>
(3)				
(4)	· · · · · · · · · · · · · · · · · · ·			
(5)				
				
				
(9)				
(10)				·
Total. (Column (b) must equal Form 990, Part X, col (B) lii	ne 15.)			
Part X Other Liabilities. See Form 990, Part X				
(a) Description of liability		(b) Amount		·····
(1) Federal income taxes				
(2) DUE TO AFFILIATES		7,992,105.		
(3)				
(4)		· 		
(5)				
(8)				
(10)				
(11)				
	ne 25.)	7,992,105.		
Total. (Column (b) must equal Form 990, Part X, col (B) lir FIN 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote FIN 48 (ASC 740)	to the organization's financial stat	ements that reports the organization's	liability for uncertain	tax positions under

52-13001

Sche	dule D (Form 990) 2010 ASAE FOUNDATION		52-	1300485	Page 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990 to Audited Finance	cial Stat			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1		3,201,	174.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	-	2,076,	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3		1,124,	261.
4	Net unrealized gains (losses) on investments	4		1,393,	
5	Donated services and use of facilities	5			7000
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		1,393,	785.
_10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10		2,518,	
*******	t XII Reconciliation of Revenue per Audited Financial Statements With Reven		Returr		
ىتىنىد 1	Total revenue, gains, and other support per audited financial statements		1	4,660,	256.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a		3,785.			
b	Donated services and use of facilities 2b		1		
c	Recoveries of prior year grants 2c		1		
d		5,297	1		
٥	Add lines 2a through 2d	3/231	2e	1,459,	082.
3	Subtract line 2e from line 1		3	3,201,	174.
_	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		3	3/201/	1/1
4					
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) 4b	-	-		
b	Other (Describe in Part XIV.) Add lines 4a and 4b		1 40		0.
C			4c	3,201,	
5 D a	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) † XIII Reconciliation of Expenses per Audited Financial Statements With Expe	nsas nai			
1	Total expenses and losses per audited financial statements	ioco pei	1	2,142,	210.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		 	2/112/	LIU
	Donated services and use of facilities 2a				
a			1 1		
b			1 1		
C		5,297.	1 1		
d	Add lines 2a through 2d	<u> </u>	2e	65.	297.
e	Subtract line 2e from line 1		3	2,076,	913.
3				2,010,	713.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a				
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIV.) 4b		1		
	Add lines 4a and 4b		40		0.
			4c 5	2,076,	
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) t XIV Supplemental Information		<u> </u>	2/0/0/	<u> </u>
·····		+ IV lines 1	h and '	Db. Dort V. line	1. Dort
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par				+, ran
	e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to prov LT V, LINE 4: BOARD DESIGNATED FUND, THE CORPUS OF WI				
<u>. m</u>	TI V, HINE 4. DOARD DEDIGNATED TOND, THE CORTOR OF WE	11011	.0 1	-	
BEN	AIN INTACT AND THE INVESTMENT INCOME FROM WHICH IS	TO BE	HSEI	FOR	
7/17	WIN INTACT AND THE INVESTMENT INCOME TROM WHICH TO	<u> </u>		<u> </u>	
RES	EARCH BENEFITING THE ASSOCIATION COMMUNITY. AN ESTA	ARLISE	ED S	SPENDING	
<u></u>	DINCH DENDITING THE RODOCINITON COMMONITY. AND EDIT	1011101		DI LIND ING	
POT	ICY OF 5-7% OF THE AVERAGE OF THE PORTFOLIO AS OF DI	CEMBE	R 3	тов тн	E
- 01	THE OF S 76 OF THE AVERAGE OF THE TORITORIO THE OF BE	СПП	J.	I I OIL III	
ז קק	OR 3 YEARS IS USED TO DETERMINE THE ANNUAL BUDGET SU	JBMTmm	י מאַי	OR BOAR	D
- 111	ON O THIRD TO COUD TO DETENDING THE ANNOAD DODGET DO		ו יייי	OIL DOM	. <u>~</u>
дрг	ROVAL.				

PART X, LINE 2: THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE

Schedule D (Form 990) 2010

SCHEDULE G

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

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

2010

Open To Public Inspection

Name of the organization Employer identification number ASAE FOUNDATION 52-1300485 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not Part I required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations Internet and email solicitations Solicitation of government grants Phone solicitations C In-person solicitations 2 a 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? 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. (iii) Did (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) have custody or control of contributions? (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No 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. LHA Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule G (Form 990 or 990-EZ) 2010

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 (b) Event #2 (c) Other events (d) Total events FOOD & WINE SPRINGTIME (add col. (a) through CLASSIC GOLF col. (c)) (event type) (event type) (total number) Gross receipts 273,050. 38,960. 30,316. 342,326. 22,101. 136,525. 7,653. 166,279. 2 Less: Charitable contributions 136,525. 31,307. 8,215. 176,047. Gross income (line 1 minus line 2) Cash prizes 2,366. 4,839. 7,205. Noncash prizes Expenses 8,802. 8,802. 6 Rent/facility costs Direct 7,365 7,365. 7 Food and beverages Entertainment 20,629. 5,168. 16,128 41,925. Other direct expenses 65,297 10 Direct expense summary. Add lines 4 through 9 in column (d) 110,750. 11 Net income summary Combine line 3, column (d), and line 10 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. (b) Pull tabs/instant (d) Total gaming (add Revenue (c) Other gaming (a) Bingo bingo/progressive bingo col (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses 3 Noncash prizes Rent/facility costs 5 Other direct expenses Yes Yes Yes 6 Volunteer labor No Direct expense summary Add lines 2 through 5 in column (d) 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? **b** If "No," explain: Yes 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If "Yes," explain: Schedule G (Form 990 or 990-EZ) 2010 032082 01-13-11

Schedule G (Form 990 or 990 EZ) 2010 ASAE FOUNDATION	52-1300485 Page 3
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 former	ed
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	
15a 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 > \$	
Gaining manager compensation > 4	
Description of services provided ▶	
Description of services provided P	
Director/officer Employee Independent contractor	
47	
17 Mandatory distributions:	
a is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes No
retain the state gaming license?	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sp	pent in the
organization's own exempt activities during the tax year ► \$ Part IV Supplemental Information. Complete this part to provide the explanations 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 lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable.	
intes 9, 90, 100, 100, 100, 10, and 170, as applicable. Also complete this part to provide any additions	information (see instructions).
	·· —————
	hul. 0 /F 000 000 FT 00
032083 01-13-11 Sched	lule G (Form 990 or 990-EZ) 2010

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" to Form 990,

Part IV, line 23.

Attach to Form 990. See separate instructions. OMB No 1545-0047

Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

ASAE FOUNDATION

Employer identification number 52-1300485

P	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	-		
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
ь	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	ĺ	1
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors,	\Box		
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	ļ	ļ
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply.			
	X Compensation committee X Written employment contract			
	X Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	Х	1
b		4b	Х	
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a	Х	
	Any related organization?	5b	Х	
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1		ľ
	contingent on the net earnings of:			ĺ
а	The organization?	6a	Х	İ
b	Any related organization?	6b	X	
	If "Yes" to line 6a or 6b, describe in Part III.			!
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			Ī
	not described in lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

Part # Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

		(B) Breakdown of W-2 and/	W-2 and/or 1099-MIS	or 1099-MISC compensation	(C)	(D)	(E) Total of columns	(F)
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(l)-(D)	reported in prior Form 990 or Form 990-EZ
	9	0	0	0	0	0	0	0
1 JOHN GRAHAM	3	574,666.		115,185.	285,434.	54,132.	1,167,417.	0
	ε	0		0	0	0	0	0
2 HEIDI ROBEY	: (3)	150,356.	2,000.	3,787.	22,220.	5,935.	184,298.	0
	ε	119,	22,354.	2	15,180.	-	165,461.	0
3 SUSAN ROBERTSON	⊕	179,15	33,530.	3,65	22,770.	8,477.	247,590.	0
	Θ	0	0.	0			- 1	0
4 REGINALD HENRY	€	169,911.	0	1,004.	21,176.	19,721.	211,812.	0
	ε	0	0	0	1 1	• 0	0	0
5 ROBERT SKELTON	(E)	168,281.	0	543.	26,495.	27,297.	222,616.	0
	ε	0		0	0	0.	0	0
6 RONALD MCNALLY	€	159,120.	0	891.	19,469.	14,964.	194,444.	0
	ε	1	0	12,253.	14,018.	14,468.	-	0
7 MONICA DIGNAM	Ξ	43,156.	0	5,251.	.800,9	6,201.	60,616.	
	Θ	0	0	357,844.	• 0	0	357,844.	43,000.
8 SUSAN SARFATI	(ii)	0	0.	0	• 0	0.	0	0
	€							
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				Ć			Schedu	Schedule J (Form 990) 2010

Page 3

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

PART I, LINES 4A-B: SUSAN SARFATI: SEVERANCE PAY, \$243,707

SUSAN SARFATI: 457B DISTRIBUTION, \$43,000

JOHN GRAHAM: SERP FUNDING, \$263,685

ASAE FOUNDATION'S CEO IS DETERMINED AS FOLLOWS: THE TARGET ANNUAL INCENTIVE PART I, LINE 5: DETERMINATION OF ANNUAL INCENTIVE COMPENSATION FOR THE

AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARABLE GROUP

AS DESCRIBED IN THE ANSWER TO 990, PART VI, QUESTION 15. THE ANNUAL

INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL,

STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH THE ASAE FOUNDATION AND

OF ASAE, A RELATED ORGANIZATION. THE PRIMARY QUANTITATIVE FACTORS REVIEWED

BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME,

IS NOT DEFINED EACH YEAR BY THE BOARD OF DIRECTORS. ANNUAL INCENTIVE PAY

TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS

REVENUE,

DETERMINED AS A SPECIFIC PERCENTAGE OF REVENUES; RATHER, REVENUES ARE

UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE

PART I, LINE 6: DETERMINATION OF ANNUAL INCENTIVE COMPENSATION FOR THE

ASAE FOUNDATION'S CEO IS DETERMINED AS FOLLOWS: THE TARGET ANNUAL INCENTIVE

Schedule J (Form 990) 2010

Information	
Supplemental	
Part III	

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SCHEDULE L

(Form 990 or 990-EZ)

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.

Employer identification number

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

	ASAE FOUNDATION 52-1300485										
Part I Excess Benefit	Transacti	ons (section	on 501(c)(3) and sectio	n 501(c)(4) organizatio	ons only)					
Complete if the organ	nization ansv	wered "Yes"	on Form	990, Part IV,	line 25a or 25b, or Fo	rm 990-E	Z, Part	V, line 40)b		
(a) Name of disqualified person				(b) Description of transaction						(c) Corrected?	
									Yes	No	
					······································						
					<u> </u>						
2 Enter the amount of tax imposection 49583 Enter the amount of tax, if an		_	-	·		year un	der	▶ \$ ▶ \$			
Part II Loans to and/or	From Int	erested I	Persons	S.							
	nization ansv	vered "Yes"	on Form	990, Part IV,	line 26, or Form 990-E	Z, Part \	/, line 3	3a			
(a) Name of Interested person and purpose	nterested (b) Loan to or from (c) Original prin		(c) Original principa		(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
							Yes	No	Yes	No	
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Part III Grants or Assist Complete if the organ		_									
(a) Name of interested p		vered res			een interested person	and		(c) Am	ount and	d type of	
					ganization				assistan —		
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2010

Page 2

Complete if the organization answered	"Yes" on Form 990, Part	IV, line 28a, 2	8b, or 28c.	<u></u>	(a) Cha	wine of
(a) Name of interested person	(b) Relationship betwee person and the orga		(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
	person and me orga				Yes	No
PAUL GANNON	VP MARKETING	FOR TM	275,000.	SPONSORSHIP		X
LARRY ALEXANDER	BOARD MEMBER	AND PR		SPONSORSHIP		Х
JACK HORNE	BOARD MEMBER	AND VP		TOTAL OF \$1		Х
ROBIN LOKERMAN	BOARD MEMBER			INTERNATION		Х
ASAE	COMMON BOARD			PLEASE SEE		X
	·					
	-					
Part V Supplemental Information						
Complete this part to provide additional	I information for response	es to question	s on Schedule L (see	Instructions).		
			 -			
SCH L, PART IV, BUSINESS T	RANSACTIONS]	INVOLVI	NG INTEREST	ED PERSONS:		
(A) NAME OF PERSON: PAUL G	ANNON					
(D) DELAMIONOUID DEMUNDEN I	NUMBER OF THE	2021 221	D ODGANTGAM	TON.		
(B) RELATIONSHIP BETWEEN I	NTERESTED PER	RSON AN	D ORGANIZAT	ION:		
VP MARKETING FOR TMA RESOU	DODO ANN ACI	אב ברוואו	ווחוא אחדראו	מואחמגם עמיים	ס	
VP MARKETING FOR THA RESOU	RCES, ANN ASA	AE FOON	DATION INDU	SIKI PAKINE	<u> </u>	
(C) AMOUNT OF TRANSACTION	\$ 275.000					
(c) Another of Thanbaction	y 2137000.					
(D) DESCRIPTION OF TRANSAC	TION: SPONSOF	RSHIPS.	ADVERTISIN	G AND EXHIB	ΙT	
<u> </u>						
REVENUE: \$275,000 IN TOTAL	TO ASAE AND	THE AS	AE FOUNDATI	ON		
(E) SHARING OF ORGANIZATIO	N REVENUES? =	= NO				
						
(A) NAME OF PERSON: LARRY	AT FYANDED					
(A) NAME OF PERSON: LARRY	ALEXANDER					
(B) RELATIONSHIP BETWEEN I	NTERESTED PER	RSON AN	D ORGANIZAT	ION:		
To its in the second se						
BOARD MEMBER AND PRES/CEO	OF DETROIT ME	TRO CV	B, AN ASAE	INDUSTRY PA	RTNE	R
(D) DESCRIPTION OF TRANSAC	TION: SPONSOF	RSHIPS,	ADVERTISIN	G, AND EXHI	BIT	_
REVENUE: \$225,000 IN TOTAL	TO ASAE AND	ASAE F	OUNDATION			
			· · · · · · · · · · · · · · · · · · ·			
(A) NAME OF DEDGON. TACK I	ODM					
(A) NAME OF PERSON: JACK H	ORNE					
(B) RELATIONSHIP BETWEEN I	NAEDECAED DEE	CON AN	D ORCANTZAT	TON•		
(B) REHATIONSHIP BEIWEEN I	NIERLOIED IEI	COON AND	D ORGANIZAT	1011.	<u></u>	
BOARD MEMBER AND VP SALES	гов нуатт ног	ELS AN	D RESORTS			
T						
(D) DESCRIPTION OF TRANSAC	TION: TOTAL C	F \$133	,300 TO ASA	E AND THE A	SAE	
			·			
FOUNDATION, FOR DIVERSITY_	INITIATIVE FU	NDING				
032132			So	hedule L (Form 990 c	r 990-E	Z) 2010

<u>Schedule L (Form 990 or 990-EZ) 2010 ASAE FOUNDATION 52-1300485 Page</u>
Part V Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions).
(A) NAME OF PERSON: ROBIN LOKERMAN
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
BOARD MEMBER AND CEO-INSTITUTIONAL DIV, MCI GROUP
(D) DESCRIPTION OF TRANSACTION: INTERNATIONAL STUDY MISSION CONSULTING
SERVICES
(A) WAVE OF DEDGOV AGAI
(A) NAME OF PERSON: ASAE
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
COMMON BOARD MEMBERS
COMMON BOARD MEMBERS
(D) DESCRIPTION OF TRANSACTION: PLEASE SEE SCHEDULE R FOR ALL REPORTABLE
TRANSACTIONS BETWEEN THE ASAE FOUNDATION AND THE AMERICAN SOCIETY OF
AND THE TIME THE TIME TO A THE TIME THE
ASSOCIATION EXECUTIVES
ASAE FOUNDATION AND THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES
(ASAE) ARE SECTION 501(C) ORGANIZATIONS THAT SHARE BOARD MEMBERS. ALL
AGE FOUNDAMION OFFICEDS AND DOADD MONDEDS ADE ALSO OFFICEDS AND OR
ASAE FOUNDATION OFFICERS AND BOARD MEMBERS ARE ALSO OFFICERS AND/OR
BOARD MEMBERS OF ASAE. PLEASE SEE SCHEDULES L AND R FOR ADDITIONAL
INFORMATION REGARDING BUSINESS TRANSACTIONS BETWEEN THE TWO ENTITIES.
INFORMATION REGARDING DUDINEDS TRANSPORTED BETWEEN THE TWO ENTITLES.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service

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.

2010
Open to Public Inspection

Name of the organization

ASAE FOUNDATION

Employer identification number 52-1300485

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THE ASAE FOUNDATION IS PRIMARILY FOCUSED ON ADVANCING KNOWLEDGE IN ASSOCIATION MANAGEMENT BY CONDUCTING RESEARCH IN AREAS THAT NO ONE ASSOCIATION CAN UNDERTAKE ON ITS OWN, DEVELOPING EXISTING AND NEW PROFESSIONALS WHO WILL LEAD THE PROFESSION OF ASSOCIATION MANAGEMENT INTO THE FUTURE AND HELPING ASSOCIATIONS BECOME MORE INNOVATIVE. FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: THAT NO ONE ASSOCIATION CAN UNDERTAKE ON ITS OWN, DEVELOPING EXISTING AND NEW PROFESSIONALS WHO WILL LEAD THE PROFESSION OF ASSOCIATION MANAGEMENT INTO THE FUTURE AND HELPING ASSOCIATIONS BECOME MORE INNOVATIVE. WITH THE HELP OF ASAE MEMBERS AND FRIENDS OF THE ASSOCIATION COMMUNITY, THE ASAE FOUNDATION MAINTAINS A RIGOROUS RESEARCH AGENDA THAT SUPPORTS THE PROFESSION OF ASSOCIATION MANAGEMENT AS A UNIQUE SECTOR IN THE NONPROFIT COMMUNITY. IT ALSO DEVELOPS AND SUPPORTS PROGRAMS DESIGNED TO EQUIP THE NEXT GENERATION OF ASSOCIATION LEADERS WITH THE KNOWLEDGE AND SKILLS REQUIRED TO SUCCESSFULLY MANAGE THE CHALLENGES AND OPPORTUNITIES IN THE FUTURE.

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES:

AS PART OF A COMPREHENSIVE PROGRAM REALIGNMENT, SEVERAL PROGRAMS WERE
SHIFTED FROM ASAE TO THE ASAE FOUNDATION, INCLUDING RESEARCH ACTIVITIES
FORMERLY CONDUCTED BY ASAE (EXCEPT FOR CERTAIN ASAE MARKET RESEARCH
ACTIVITIES). THE REALIGNMENT WAS A FAIR MARKET VALUE EXCHANGE,

UTILIZING 3RD PARTY VALUATIONS.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2010)

Employer identification number 52-1300485

FORM 990, PART III, LINE 3, CHANGES IN PROGRAM SERVICES:

AS PART OF A COMPREHENSIVE PROGRAM REALIGNMENT, SEVERAL PROGRAMS WERE

SHIFTED FROM ASAE FOUNDATION TO ASAE, A RELATED ENTITY, INCLUDING THE

ASAE FOUNDATION'S SPRINGTIME, SPONSORSHIP AND CENTER U/ANNUAL EDUCATION

PROGRAMS; AS WELL AS CERTAIN KNOWLEDGE AND COMMUNITY-BASED ACTIVITIES.

THE REALIGNMENT WAS A FAIR MARKET VALUE EXCHANGE, UTILIZING 3RD PARTY

VALUATIONS.

FORM 990, PART VI, SECTION A, LINE 1: LINE 1A: THE ASAE FOUNDATION HAS AN EXECUTIVE COMMITTEE, WHICH CONSISTS OF THE OFFICERS OF THE ASAE FOUNDATION, AND THE CHAIRMAN OF THE BOARD OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE), A RELATED MEMBERSHIP ASSOCIATION. IT MAY ACT IN PLACE OF THE BOARD OF DIRECTORS WHEN AUTHORITY IS DESIGNATED BY THE BOARD, OR IN EMERGENCY MATTERS WHERE EXECUTIVE COMMITTEE ACTION IS TEMPORARY AND SUBJECT TO RATIFICATION BY THE BOARD.

LINE 1B: THE BOARD MEMBERS OF ASAE FOUNDATION ARE ALSO BOARD MEMBERS OF ITS RELATED SECTION 501(C)(6) ASSOCIATION, THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE). AS SUCH, THE ASAE FOUNDATION'S BOARD MEMBERS TECHNICALLY ARE NOT INDEPENDENT, AS ASAE IS CONSIDERED TO BE "AN ENTITY MORE THAN 35% OWNED" AND IS THEREFORE AN "INTERESTED PERSON" FOR SCHEDULE L REPORTING PURPOSES. PLEASE SEE SCHEDULES L AND R FOR MORE INFORMATION.

FORM 990, PART VI, SECTION A, LINE 4: DURING NOVEMBER 2010, THE ASAE FOUNDATION'S BYLAWS WERE CHANGED:

-- TO REFLECT THE CHANGE IN NAME OF THE ENTITY FROM THE CENTER FOR

ASSOCIATION LEADERSHIP, TO THE ASAE FOUNDATION.

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Schedule O (Form 990 or 990-EZ) (2010)

Name of the organization
_ ASAE FOUNDATION

Employer identification number 52-1300485

-- TO SPECIFY THAT THE ASAE PRESIDENT AND CEO (WHO IS ALSO THE ASAE
FOUNDATION CEO) MAY APPOINT A STAFF MEMBER TO SERVE AS PRESIDENT OF THE
ASAE FOUNDATION, IN HIS SOLE DISCRETION.

FORM 990, PART VI, SECTION A, LINE 7A: ASAE FOUNDATION DIRECTORS OTHER

THAN EX-OFFICIO DIRECTORS ARE NOMINATED BY THE LEADERSHIP COMMITTEE OF THE

AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) AND ELECTED BY THE BOARD

OF DIRECTORS OF ASAE.

FORM 990, PART VI, SECTION A, LINE 7B: THE APPROVAL OF THE AMERICAN

SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) BOARD OF DIRECTORS IS REQUIRED,

SHOULD THE ASAE FOUNDATION WISH TO SEPARATE FROM ASAE OR TAKE MAJOR STEPS

TOWARD SUCH SEPARATION.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 RETURNS ARE PREPARED BY THE 3RD PARTY PREPARER WORKING WITH THE CFO AND DIRECTOR OF FINANCE. ONCE THE CFO IS COMFORTABLE WITH THE COMPLETENESS AND ACCURACY OF THE DOCUMENT, IT IS PROVIDED TO THE CEO FOR REVIEW AND IS UPLOADED INTO A SECURE RESTRICTED LOCATION WITHIN THE ORGANIZATION'S ONLINE SYSTEM SHAREPOINT FOR A PERIOD OF NOT LESS THAN 5 DAYS PRIOR TO FILING. BOARD MEMBERS ARE NOTIFIED THAT THIS DOCUMENT IS AVAILABLE, FOR HOW LONG AND WHEN THE RETURN WILL BE FILED. THE RETURN WILL BE FILED AS PRESENTED IF NO FURTHER ADJUSTMENTS ARE WARRANTED. THE BOARD WILL RECEIVE NOTIFICATION OF ANY ADDITIONAL CHANGES PRIOR TO FILING. THE RETURN IS THEN SIGNED BY THE CEO AND FILED APPROPRIATELY.

FORM 990, PART VI, SECTION B, LINE 12C: EACH BOARD MEMBER AND EXECUTIVE

STAFF MEMBER IS REQUIRED TO ANNUALLY COMPLETE AND SUBMIT A DISCLOSURE FORM

DETAILING ANY SUCH 'OTHER INTERESTS.' THE INDIVIDUAL ALSO MUST UPDATE THE

OBJECTION 101-24-11

Schedule O (Form 990 or 990-EZ) (2010)

ASAE FOUNDATION

Employer identification number 52-1300485

DISCLOSURE FORM IF ANY MATERIAL CHANGES OR ADDITIONS TO THE SUBMITTED INFORMATION ARISE DURING THE COURSE OF THE YEAR. A CHECKLIST IS MAINTAINED AND FOLLOW UP IS DONE UNTIL ALL FORMS ARE RETURNED. ONCE ALL FORMS ARE RECEIVED, THE CEO REVIEWS THE DISCLOSURES. ANY AFFIRMATIVE RESPONSE DEEMED UNUSUAL OR WHICH MAY APPEAR TO CONSTITUTE AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST IS REFERRED TO THE AUDIT COMMITTEE FOR DETERMINATION. THE AUDIT COMMITTEE MAY SEEK THE GUIDANCE OF COUNSEL AND MAKE SUCH DETERMINATION WITHOUT THE PRESENCE OF THE INDIVIDUAL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION. THE AUDIT COMMITTEE MAY CONCLUDE THAT THIS DETERMINATION SHOULD BE MADE BY THE FULL BOARD OF DIRECTORS OF ASAE, THE ASAE FOUNDATION, OR ABSI, AND REFER THE MATTER SHALL BE REFERRED TO THE APPROPRIATE BOARD (WITH OR WITHOUT A RECOMMENDATION FROM THE AUDIT COMMITTEE) FOR ITS CONSIDERATION, DELIBERATION AND RESOLUTION, WITH THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE PRESENCE OF THE INDIVIDUAL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION. THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESOLUTION OF ALL CONFLICT OF INTEREST MATTERS INVOLVING THE MEMBERS OF SUCH BOARD.

IF THE AUDIT COMMITTEE BELIEVES THAT A PARTICULAR RELATIONSHIP OR

TRANSACTION MAY REPRESENT AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OR

INTEREST, IT SHALL FIRST REQUEST ADDITIONAL INFORMATION FROM THE INDIVIDUAL
IN QUESTION DETAILING THE NATURE OF THE RELATIONSHIP OR TRANSACTION.

WHEN EVALUATING WHETHER A PARTICULAR TRANSACTION OR RELATIONSHIP

CONSTITUTES AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST, THE

AUDIT COMMITTEE SHALL CONSIDER THE FOLLOWING (NON-EXHAUSTIVE) FACTORS:

Employer identification number 52-1300485

ASAE FOUNDATION

- --ABUSING ONE'S ROLE FOR PERSONAL OR THIRD-PARTY GAIN OR PLEASURE (INCLUDING, BUT NOT LIMITED TO, THE SOLICITATION OR ACCEPTANCE OF GIFTS OR OTHER ITEMS OF VALUE OR INDIRECT INDUCEMENT TO PROVIDE SPECIAL TREATMENT ON ORGANIZATION MATTERS.)
- -- PLACING ONE'S OWN SELF-INTEREST, THE INTEREST OF ONE'S COMPANY, ORGANIZATION OR ANOTHER ENTITY FOR WHICH THE INDIVIDUAL SERVES IN A LEADERSHIP, EMPLOYMENT OR OWNERSHIP CAPACITY, OR THE INTEREST OF ANY THIRD PARTY ABOVE THAT OF ASAE, THE ASAE FOUNDATION, OR ABSI.
- -- ENGAGING IN ANY OUTSIDE BUSINESS, PROFESSIONAL OR OTHER ACTIVITIES THAT WOULD DIRECTLY OR INDIRECTLY MATERIALLY ADVERSELY AFFECT ASAE, THE ASAE FOUNDATION, OR ABSI.
- --PROVIDING GOODS OR SERVICES TO ASAE, THE ASAE FOUNDATION, OR ABSI AS A PAID VENDOR.
- IF THE AUDIT COMMITTEE DETERMINES THAT A PARTICULAR RELATIONSHIP OR TRANSACTION REPRESENTS AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST, IT (OR THE APPROPRIATE BOARD, IF THE MATTER HAS BEEN REFERRED TO THE BOARD) SHALL RESOLVE SUCH ACTUAL, POTENTIAL OR APPARENT CONFLICT IN ONE OF THE FOLLOWING MANNERS:
- (1) WAIVE THE ACTUAL, POTENTIAL OR APPARENT CONFLICT AS UNLIKELY TO AFFECT THE INDIVIDUAL'S ABILITY TO ACT IN THE BEST INTERESTS OF THE ORGANIZATION; (2) DETERMINE THAT THE INDIVIDUAL SHOULD BE RECUSED FROM ALL DELIBERATIONS AND DECISION-MAKING RELATED TO THE PARTICULAR TRANSACTION WHICH GIVES RISE TO THE ACTUAL, POTENTIAL OR APPARENT CONFLICT. THIS RESOLUTION SHOULD APPLY PARTICULARLY WHEN THE TRANSACTION OR RELATIONSHIP IS ONE THAT PRESENTS A CONFLICT ONLY WITH RESPECT TO ONE OR TWO DISCRETE PROGRAMS OR ACTIVITIES. FOR EXAMPLE, IF AN INDIVIDUAL BOARD MEMBER ALSO WORKS FOR A COMPANY THAT PRODUCES AN EDUCATIONAL PROGRAM THAT COMPETES WITH ONE OR TWO

Schedule O (Form 990 or 990-EZ) (2010)

Employer identification number 52-1300485

DISCRETE PROGRAMS OF ASAE, THE ASAE FOUNDATION, OR ABSI, THE AUDIT

COMMITTEE OR RELEVANT BOARD MAY DETERMINE THAT THE BOARD MEMBER SHOULD BE

RECUSED FROM ALL DELIBERATIONS AND VOTING RELATED TO SUCH PROGRAM(S) (BOTH

AT THE OUTSET AND ON AN ONGOING BASIS), BUT THAT THE BOARD MEMBER NEED NOT

RESIGN HIS/HER SEAT ON THE BOARD.

- (3) DETERMINE THAT THE INDIVIDUAL MUST RESIGN FROM HIS/HER SERVICE TO ASAE, THE ASAE FOUNDATION, OR ABSI BECAUSE THE ACTUAL, POTENTIAL OR APPARENT CONFLICT IS SO PERVASIVE THAT THE INDIVIDUAL WOULD SELDOM, IF EVER, LIKELY BE ABLE TO ACT IN THE BEST INTERESTS OF THE ORGANIZATION. FOR EXAMPLE, IF AN INDIVIDUAL BOARD MEMBER ALSO WORKS FOR A COMPANY THAT PRODUCES EDUCATIONAL PROGRAMS THAT COMPETE WITH MOST OF THE EDUCATIONAL PROGRAMS OF THE ASAE FOUNDATION, THE AUDIT COMMITTEE OR ASAE FOUNDATION BOARD MAY DETERMINE THAT THE INDIVIDUAL SHOULD RESIGN FROM THE ASAE FOUNDATION BOARD. (4) THE SPECIAL PROCEDURE BELOW IS APPLICABLE TO ALL INSTANCES IN WHICH A INDIVIDUAL (OR THE INDIVIDUAL'S COMPANY, ORGANIZATION OR ANOTHER ENTITY FOR WHICH THE INDIVIDUAL SERVES IN A LEADERSHIP, EMPLOYMENT OR OWNERSHIP CAPACITY, OR A MEMBER OF THE INDIVIDUAL'S FAMILY) SEEKS TO PROVIDE GOODS OR SERVICES TO ASAE, THE ASAE FOUNDATION, OR ABSI AS A PAID VENDOR, OR SEEKS TO RECEIVE A SIGNIFICANT GRANT OR CONTRACT FROM ONE OF THE THREE ORGANIZATIONS. THIS PROCEDURE SHALL NOT APPLY TO PRE-EXISTING RELATIONSHIPS WITH INDIVIDUALS THAT PREVIOUSLY HAVE BEEN DISCLOSED TO, AND WAIVED BY, THE AUDIT COMMITTEE OR THE BOARD OF THE RELEVANT ORGANIZATION. (A) THE INDIVIDUAL MUST DISCLOSE TO THE APPLICABLE CHAIRMAN IN ADVANCE OF ANY RELATED ACTION TO BE TAKEN BY THE BOARD HIS/HER INTENT TO SEEK TO PROVIDE GOODS OR SERVICES AS A PAID VENDOR TO ASAE, THE ASAE FOUNDATION, OR ABSI, OR TO RECEIVE A GRANT OR CONTRACT FROM ONE OF THE THREE ORGANIZATIONS;
- (B) THE INDIVIDUAL MUST RECUSE HIMSELF/HERSELF FROM ALL DELIBERATIONS AND

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 01-24-11 Schedule O (Form 990 or 990-EZ) (2010)

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization **Employer identification number** ASAE FOUNDATION 52-1300485 VOTING RELATED TO THE CONTEMPLATED ACTION; (C) IF THE VALUE OF THE TRANSACTION EXCEEDS \$5,000, ASAE, THE ASAE FOUNDATION, OR ABSI MUST, THROUGH A REQUEST FOR PROPOSAL PROCESS, HAVE SOLICITED PROPOSALS BROADLY FROM OTHER QUALIFIED VENDORS / PROSPECTIVE GRANT OR CONTRACT RECIPIENTS AND RECEIVED (OR ATTEMPTED TO RECEIVE) WRITTEN BIDS FROM AT LEAST THREE SUCH INDIVIDUALS / ENTITIES (INCLUDING THE INDIVIDUAL IN QUESTION); THE BOARD MUST DETERMINE (WITHOUT THE PRESENCE OR PARTICIPATION OF THE INDIVIDUAL) THAT THE TRANSACTION IS FAIR AND IN THE BEST INTERESTS OF ASAE, THE ASAE FOUNDATION, OR ABSI BASED ON ALL OF THE FACTS AND CIRCUMSTANCES, AND SUCH DETERMINATION (INCLUDING THE FACT THAT IT WAS MADE IN THE ABSENCE OF THE INDIVIDUAL) SHALL BE DOCUMENTED AS PART OF THE RELEVANT MEETING MINUTES (ALL COMPETING BIDS RECEIVED SHALL BE RETAINED AS WELL); AND (E) IF SELECTED, THE INDIVIDUAL MAY NOT PARTICIPATE IN ANY PROCESS BY WHICH HIS/HER PERFORMANCE AS A VENDOR / GRANT OR CONTRACT RECIPIENT IS EVALUATED. FORM 990, PART VI, SECTION B, LINE 15A: THE ASAE FOUNDATION IS STAFFED BY ASAE EMPLOYEES. ASAE'S COMPENSATION POLICY IS DEFINED IN ITS BOARD POLICY MANUAL, AND CONSISTS OF THE FOLLOWING: PRESIDENT & CEO PERFORMANCE EVALUATION AND COMPENSATION: THIS RESPONSIBILITY IS VESTED WITH THE ASAE BOARD OF DIRECTORS. THE ASAE BOARD OF DIRECTORS IS CHARGED WITH ENSURING THAT THE ANNUAL EVALUATION IS

CONDUCTED AND COMPENSATION ESTABLISHED. A COMPENSATION COMMITTEE CONSISTING OF THE IMMEDIATE PAST CHAIRMAN OF THE BOARD, CHAIRMAN OF THE BOARD, AND CHAIRMAN-ELECT WILL RECOMMEND COMPENSATION LEVELS TO THE ASAE BOARD OF DIRECTORS. IN ADDITION, THE PRESIDENT AND CEO'S ANNUAL OBJECTIVES ARE APPROVED BY THE ASAE BOARD OF DIRECTORS. IT IS THESE AGREED UPON OBJECTIVES

THAT ARE USED TO EVALUATE PERFORMANCE EACH YEAR.

Employer identification number 52-1300485

CEO COMPENSATION PHILOSOPHY

THE COMPENSATION PACKAGE, VIEWED AS A WHOLE, SHOULD PROMOTE PERFORMANCE-BASED RESULTS LINKED TO THE ACHIEVEMENT OF ASAE & THE ASAE FOUNDATION'S MISSION AND STRATEGIC GOALS. THE COMPENSATION PROGRAM SHOULD ENCOURAGE AN ENTREPRENEURIAL AND MEMBER SERVICE ENVIRONMENT IN COLLABORATION WITH THE VOLUNTEER LEADERSHIP TO DETERMINE, GUIDE, AND OVERSEE THE EXECUTION OF ASAE & THE ASAE FOUNDATION'S STRATEGIC GOALS AND MISSION. GIVEN THE UNIQUE SET OF SKILLS NEEDED TO ACCOMPLISH THE MISSION AND GOALS SET FORTH ABOVE, THE TOTAL COMPENSATION -- DIRECT AND INDIRECT --SHOULD BE TARGETED ABOVE THE MARKET MEDIAN, YET BE DEMONSTRABLY REASONABLE RELATIVE TO THE TOTAL COMPENSATION OFFERED BY ORGANIZATIONS COMPARABLE TO ASAE & THE ASAE FOUNDATION. THE COMPENSATION PHILOSOPHY SHOULD BE VIEWED PERIODICALLY TO ENSURE THAT IT CONTINUES TO BE ALIGNED WITH ASAE'S STRATEGIC DIRECTION AND FINANCIAL LIMITS AND CONTINUES TO BE BOTH REASONABLE AND COMPETITIVE.

CEO COMPENSATION PRACTICES

THE ASAE & THE ASAE FOUNDATION COMPENSATION PROGRAM IS TARGETED TO PROVIDE COMPETITIVE TOTAL COMPENSATION LEVELS (INCLUDING BOTH ANNUAL CASH COMPENSATION AND SUPPLEMENTAL BENEFITS) FOR HIGHLY COMPETITIVE PERFORMANCE. COMPENSATION IS BENCHMARKED AGAINST DATA DEVELOPED BY INDEPENDENT CONSULTANTS USING SURVEYS COMPRISED OF ORGANIZATIONS WITH SIMILAR INDIVIDUAL MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS, BOTH REGIONAL AND NATIONAL. THESE ORGANIZATIONS ARE SIMILAR TO ASAE IN MAGNITUDE, COMPLEXITY, AND SCOPE OF RESPONSIBILITY, AND THEY ARE REPRESENTATIVE OF THE VARIOUS MARKETS IN WHICH ASAE COMPETES FOR TALENT. TOTAL CASH COMPENSATION

IS TARGETED AT THE COMPETITIVE RANGE OF 85% - 115% OF THE 75TH PERCENTILE

OF DEVELOPED MARKET RATES, DEPENDING ON TENURE AND EXPERIENCE OF THE CEO.

CONSISTENT WITH THIS STRATEGY, THE FOLLOWING PRINCIPLES PROVIDE A FRAMEWORK FOR THE ORGANIZATION'S EXECUTIVE COMPENSATION PROGRAM:

- -- TOTAL ANNUAL CASH COMPENSATION (CONSISTING OF BASE PAY AND A VARIABLE, AT-RISK INCENTIVE) IS POSITIONED AT 85% - 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES;
- -- THE MIX OF TOTAL COMPENSATION ELEMENTS WILL REFLECT COMPETITIVE MARKET REQUIREMENTS AND STRATEGIC BUSINESS NEEDS;
- COMPENSATION IS LINKED TO BOTH QUALITATIVE AND BEHAVIORAL EXPECTATIONS, AND KEY OPERATIONAL AND STRATEGIC METRICS; AND
- -- COMPENSATION WILL BE DIFFERENTIATED ON THE FOLLOWING BASIS: BASE PAY -ON RELATIVE RESPONSIBILITY; ANNUAL INCENTIVES - ON PERFORMANCE; AND SUPPLEMENTAL BENEFITS - ON LONG-TERM PERFORMANCE.

BASE PAY -- DETERMINED BY INDIVIDUAL PERFORMANCE AND COMPARISONS TO SIMILAR POSITIONS IN INDIVIDUAL MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS. PAY IS ESTABLISHED BASED ON JOB RESPONSIBILITY, LEVEL OF EXPERIENCE, INDIVIDUAL CONTRIBUTION TO THE BUSINESS, ANALYSES OF COMPETITIVE INDUSTRY

PRACTICE AND VARIOUS OTHER QUALITATIVE AND QUANTITATIVE PERFORMANCE

FACTORS.

ANNUAL INCENTIVE -- THE TARGET ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARATOR GROUP AS DESCRIBED ABOVE. THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS. THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS.

Schedule O (Form 990 or 990-EZ) (2010)

ASAE FOUNDATION

AMONG THE QUALITATIVE FACTORS EVALUATED BY THE BOARD OF DIRECTORS ARE PROGRESS IN THE ACHIEVEMENT OF THE ORGANIZATIONS SHORT-TERM AND LONG-TERM BUSINESS GOALS, MEMBER SATISFACTION, AND THE EFFECTIVE MANAGEMENT OF ASAE AND THE ASAE FOUNDATION AND ITS HUMAN RESOURCES.

SUPPLEMENTAL BENEFITS -- UNDER THE SUPPLEMENTAL BENEFITS PLAN, THE BOARD OF DIRECTORS GRANTS DEFERRED SALARY AND SUPPLEMENTAL INCOME ARRANGEMENTS, BENEFITS AND PEROUISITES SUBJECT TO INDIVIDUAL LONG TERM PERFORMANCE. THESE AWARDS AND SUPPLEMENTAL BENEFITS ARE PROVIDED IN LINE WITH COMPETITIVE PRACTICES OF THE COMPARATOR GROUP. THE OBJECTIVES FOR THESE AWARDS ARE TO CLOSELY ALIGN EXECUTIVE INTERESTS WITH THE LONGER-TERM INTERESTS OF STAKEHOLDERS AND TO RETAIN THE SKILLS CRITICAL TO THE FUTURE SUCCESS OF ASAE AND THE ASAE FOUNDATION.

OTHER KEY OFFICERS/EMPLOYEES

UNDER BYLAW AND CEO CONTRACT, THE BALANCE OF STAFF ARE UNDER THE AUTHORITY STAFF COMPENSATION POLICY DECISIONS TAKE INTO CONSIDERATION ASAE'S OF CEO. OVERALL FINANCIAL CONDITION, EQUITY WITHIN THE ORGANIZATION, AND COMPETITIVE SALARY PLANNING. ASAE'S HUMAN RESOURCES DEPARTMENT IS RESPONSIBLE FOR ADMINISTRATION OF AND ONGOING INTERNAL REVIEW OF ALL COMPENSATION PLANS AND POLICIES. THIS COMPENSATION REVIEW HELPS ASAE MAINTAIN AND ADMINISTER A COMPENSATION PLAN THAT ACCURATELY AND FAIRLY REFLECTS EACH INDIVIDUAL'S RESPONSIBILITIES AND PERFORMANCE. ASAE'S STAFF SALARY ADMINISTRATION PROGRAM(S) CONSIST OF THE FOLLOWING:

JOB EVALUATION - THIS IS A SYSTEMATIC METHOD OF DETERMINING THE VALUE OF EACH JOB WITHIN THE ASSOCIATION, INCLUDING REVIEW OF SKILLS, EDUCATIONAL PREREQUISITES AND CONTRIBUTION TO THE ORGANIZATION.

-- SALARY STRUCTURE - POSITIONS ARE EVALUATED AND POSITIONS WITH SIMILAR VALUES ARE PLACED IN A SALARY GRADE THAT IS REVIEWED IN TERMS OF ITS Schedule O (Form 990 or 990-EZ) (2010)

44

Schedule O (Form 990 or 990-EZ) (2010) Name of the organization **Employer identification number** ASAE FOUNDATION 52-1300485 COMPETITIVENESS WITHIN THE MARKET AND OUR ORGANIZATIONAL NEEDS. EACH GRADE HAS A MINIMUM, WHICH IS THE LOWEST RECOMMENDED SALARY TO BE OFFERED TO AN INDIVIDUAL WHO MEETS THE MINIMUM QUALIFICATIONS OF THE POSITION; A MIDPOINT, REPRESENTING THE SALARY AT WHICH A FULLY OUALIFIED AND EXPERIENCED STAFF MEMBER WHO SATISFACTORILY PERFORMS ALL THE SPECIFICATIONS OF A POSITION IS PAID WITHIN THE MARKETPLACE; AND A MAXIMUM, WHICH IS THE UPPER LIMIT OF THE SALARY RANGE. A THIRD PARTY IS ENGAGED PERIODICALLY TO REVIEW THE COMPENSATION PACKAGE OF THE EXECUTIVE STAFF AND/OR FULL STAFF RELATIVE TO BASE COMPENSATION, BONUS AND INCENTIVE PROGRAMS COMPARATIVE TO MARKET. -- SALARY BUDGET AND GUIDELINES - ASAE'S ANNUAL SALARY BUDGET IS DEVELOPED ANNUALLY IN ORDER TO ALLOCATE MONIES NEEDED TO MAINTAIN STAFF MEMBER SALARIES AT COMPETITIVE LEVELS, SUBJECT TO BUDGETARY LIMITATIONS. ANNUAL MERIT POOL IS DEVELOPED AND APPROVED AS PART OF THE BUDGET CYCLE. THE CHIEF ADMINISTRATIVE OFFICER IS RESPONSIBLE FOR THE ADMINISTRATION OF THE PROGRAM, AND ALL INCREASES ARE SUBJECT TO THE APPROVAL OF THE CEO. FORM 990, PART VI, SECTION C, LINE 19: SOME GOVERNING DOCUMENTS ARE AVAILABLE ON THE WEBSITE - FOUNDATION BYLAWS, STRATEGIC FRAMEWORK - WHAT WE DO AND OUR PROMISE, CODE OF CONDUCT AND BOARD CONTACT INFORMATION. THE CONFLICT OF INTEREST POLICY IS CURRENTLY NOT POSTED, BUT PROVIDED AS A SAMPLE DOCUMENT UPON REQUEST. PUBLIC INSPECTION COPIES OF THE 990 ARE PROVIDED UPON REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED GAINS ON INVESTMENTS:

1,393,785.

FORM 990, PART XII, LINE 2C

	of the organi	zation		FOUNDATIO	ON				E	mployer ider 52-13	ntification number
THE	AUDIT	OVERS	IGHT	PROCESS	HAS	REMAINED	UNCHANGED	FROM	THE	PRIOR	YEAR.
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Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

2010 Open to Public Inspection

OMB No 1545-004Z,

Employer identification number 52-1300485

Direct controlling

End-of-year assets Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ▶ Attach to Form 990. Total income ত্ত Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or foreign country) Primary activity ASAE FOUNDATION Name, address, and EIN of disregarded entity Name of the organization Part #

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Part #

(g) Section 512(b)(13) controlled entity?	Yes No			×					
(f) Direct controlling sentity									
(e) Public charity status (if section	501(c)(3))								
(d) Exempt Code section				501(C)(6)					
(c) Legal domicile (state or foreign country)				DISTRICT OF COLUMBIA 501(C)(6)					
(b) Primary activity		MEMBERSHIP ORGANIZATION	AND VOICE OF THE	ASSOCIATION PROFESSION		,			
(a) Name, address, and ElN of related organization		AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES - MEMBERSHIP ORGANIZATION	53-0026940, 1575 I ST NW, WASHINGTON, DC	20005					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

032161 12-21-10 LHA

47

Schedule R (Form 990) 2010

Page 2 52-1300485

FOUNDATION ASAE Schedule R (Form 990) 2010

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

seneral or Percentage managing ownership N/A 3 Yes No A/N 9 Code V-UBI amount in box 20 of Schedule – K-1 (Form 1065) N/A \equiv ate allocations? Disproportion-Yes No Ξ N/A Share of end-of-year assets N/A Ō Share of total income N/A ε Predominant income (related, unrelated, excluded from tax under sections 512-514) N/A <u>e</u> Direct controlling entity N/A ত্ত (c)
Legal
domicile
(state or
foreign 2 Primary activity HEADQUARTERS 9 RENTAL OF BUILDING STREET, NW, WASHINGTON, DC 1575 EYE STREET ASSOCIATES LP - 52-1083648, 1575 EYE Name, address, and EIN of related organization <u>a</u> 20002

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

(a)	(2)	9	<u>G</u>	(e)	£	(6)	Ξ
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign country)	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership
ASAE BUSINESS SERVICES, INC 52-1066386							
1575 EYE STREET, NW	INSURANCE AND OTHER						
WASHINGTON, DC 20005	SERVICES	DC	N/A	C CORP	N/A	N/A	N/A
ASAE INSURANCE COMPANY - 03-0335958							
1575 EYE STREET, NW	INSURANCE AND OTHER						
WASHINGTON, DC 20005	SERVICES	DC	N/A	C CORP	N/A	N/A	N/A
							-
	1						
							
	T						
032162 12-21-10	48	8		į		Schedule R (Form 990) 2010	m 990) 2010

Page 3

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Yes

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P

int V Transactions With Related Organizations (Complete of the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)	ote. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.
ra	å

During the	e tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	f (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity
	 During the tax year, die	Receipt of (i) Intere

a Receipt of (I) interest (II) annuities (III) royatties of (IV) rent from a cont	b Gift, grant, or capital contribution to other organization(s)	
Receipt of (I)	Gift, grant, or	
Ø	Φ	

- c Gift, grant, or capital contribution from other organization(s)
- d Loans or loan guarantees to or for other organization(s)
 - e Loans or loan guarantees by other organization(s)
- Sale of assets to other organization(s)
- g Purchase of assets from other organization(s)
 - h Exchange of assets
- i Lease of facilities, equipment, or other assets to other organization(s)
- j Lease of facilities, equipment, or other assets from other organization(s)
- k Performance of services or membership or fundraising solicitations for other organization(s)
- Performance of services or membership or fundraising solicitations by other organization(s)

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- m Sharing of facilities, equipment, mailing lists, or other assets
 - n Sharing of paid employees
- Reimbursement paid to other organization for expenses
- p Reimbursement paid by other organization for expenses
- q Other transfer of cash or property to other organization(s)
- r Other transfer of cash or property from other organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete the	is line, including covered n	elationships and transaction thresholds.
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AM SOCIETY OF ASSN EXECUTIVES	Н	7,148,641.	
(2) AM SOCIETY OF ASSN EXECUTIVES	м	18,801.	
(3) ASAE BUSINESS SERVICES, INC.	æ	505.	
(4) AM SOCIETY OF ASSN EXECUTIVES	υ	25,760.	
(5) AM SOCIETY OF ASSN EXECUTIVES	Ĺτι	1,609,406.	
(9)			
	•		

Schedule R (Form 990) 2010

032163 12-21-10

Page 4

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

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

(a)	(8)	(2)	9	(e)	€	(0)	3
Name, address, and EIN	Primary activity		Are all partners section 501(c)(3)	Share of end-of-	ř e	Code V-UBI	ďΕ
O BILLIS		(state or Toreign country)	Yes No	year assets		of Schedule K-1 (Form 1065)	1 -
					_		
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			-				
	;						
						Schedule R (Form 990) 2010	1 990) 2010
							•

Schedule H	R (Form 990) 2010	ASAE FOU	NDA'I'ION		<u> 52-1300485</u>	Page 5
Part VII	(Form 990) 2010 Supplemental I	nformation				
	Complete this part to	n provide additional info	rmation for responses to all	iestions on Schedule R (see inst	ructions)	
	Complete the part to	o provide additional line	ATTICLION TO TOO POTICOO TO QU	estions on concease it toos met	radionoj.	
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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

B. In a corporation request an extension . Ited With Certain filing of this form,
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Form 8868 (Rev. 1-2011)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ex	xtension,	complete only Part II and check this b	ox	.	LX.
Note. Only complete Part II if you have already been granted an					
If you are filing for an Automatic 3-Month Extension, comple				·	
Part II Additional (Not Automatic) 3-Month E	xtensio	on of Time. Only file the original (no c	opies	needed).	
Type or Name of exempt organization			Emp	oloyer identification	number
print ASAE FOUNDATION			5	2-1300485	
File by the extended due date for filling your 1575 I STREET, NW	see instruc	ctions.			
return See Instructions City, town or post office, state, and ZIP code. For a finistructions WASHINGTON, DC 20005	oreign add	dress, see instructions.		-	
Enter the Return code for the return that this application is for (file	e a senara	ite application for each return)			01
				• • • • • • • • • • • • • • • • • • • •	·
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990	01	5 4044 4			
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	01	Form 4720			10
Form 990-PF Form 990-T (sec. 401(a) or 408(a) trust)	04	Form 5227 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		<u> </u>	slv file	ed Form 8888	
 The books are in the care of ► 1575 I STREET I Telephone No. ► 202-326-9550 If the organization does not have an office or place of business If this is for a Group Return, enter the organization's four digit of this is for a Group Return, enter the organization's four digit of this is for a Group Return, enter the organization's four digit of this is for a Group Return, enter the organization's four digit of this is for a Group Return, enter the organization of the content of the conten	s in the Ur	FAX No. ▶nted States, check this box			Cack this
box . If it is for part of the group, check this box					
I request an additional 3-month extension of time until		15, 2012 .	III GILID	ers the extension is	101,
			AUG	31, 2011	
6 If the tax year entered in line 5 is for less than 12 months, c			Final r		
Change in accounting period					
7 State in detail why you need the extension					
THE INFORMATION NECESSARY TO I	FILE A	A COMPLETE AND ACCUR	ATE	RETURN HA	S
NOT YET BEEN OBTAINED.					
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			
nonrefundable credits. See instructions.			8a	`\$	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 alle	owed as a	credit and any amount paid			_
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a. Include your page		h this form, if required, by using			•
EFTPS (Electronic Federal Tax Payment System), See Instru		- Novision Along	8c	\$	0.
Under penalties of perjury, I declare that I have examined this form, including the true, correct, and complete, and that Jam apthorized to prepare this for		d Verification anying schedules and statements, and to the	best of	my knowledge and bel	ief,
Signature Debote Co. 1080/11 Title C			Date	1111111111	
<u> </u>				Form 8868 (Rev	/. 1-2011)

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS



CERTIFICATE

THIS IS TO CERTIFY that all applicable provisions of the District of Columbia Nonprofit Corporation Act have been complied with and accordingly, this **CERTIFICATE OF AMENDMENT** is hereby issued to:

CENTER FOR ASSOCIATION LEADERSHIP (THE)

Name Changed To

ASAE FOUNDATION

IN WITNESS WHEREOF I have hereunto set my hand and caused the seal of this office to be affixed as of the 1st day of September, 2010.

LINDA K. ARGO Director

Business and Professional Licensing Administration

PATRICIA E. GRAYS

Superintendent of Corporations

Corporations Division

Adrian M. Fenty Mayor

ARTICLES OF AMENDMENT OF THE ARTICLES OF INCORPORATION OF THE CENTER FOR ASSOCIATION LEADERSHIP

TO:
DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS
BUSINESS & PROFESSIONAL LICENSING ADMINISTRATION
CORPORATIONS DIVISION

Pursuant to the provisions of the District of Columbia Nonprofit Corporation Act, the undersigned adopts the following Articles of Amendment to its Articles of Incorporation:

FIRST: The name of the corporation is The Center for Association Leadership (the "Corporation").

SECOND: The following amendments of the Articles of Incorporation were adopted by the Corporation in the manner prescribed by the District of Columbia Nonprofit Corporation Act:

1. Article FIRST is amended to read as follows:

"The name of the corporation is the ASAE Foundation."

- 2. The Articles of Amendment are amended to replace all references to "The Center for Association Leadership" with the "ASAE Foundation."
 - 3. Article THIRD is amended to read as follows:

"The purposes for which the Corporation is organized are: scientific, charitable, and educational within the meaning of Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (or the corresponding provision of any future United States Internal Revenue Code), including but not limited to conducting educational and research activities as set forth in the Corporation's Bylaws."

4. Article FOURTH is amended to read as follows:

"The Corporation shall be governed by a Board of Directors. The number and manner of appointment and removal of the Board of Directors shall be provided in the Bylaws of the Corporation."

- 5. The Articles of Incorporation are amended to replace all references to the "Board of Trustees" with the "Board of Directors".
 - 6. Article NINTH is added and reads as follows:

"The Corporation shall not have members."

THIRD. The Amendments have been adopted in the following manner: The amendments were adopted at a meeting of the Board of Directors held on August 20, 2010 at which a quorum was present. The amendments received the affirmative vote of a majority of the Directors in office, there being no members having voting rights in respect thereof.

As witness to these statements, I have signed these Articles of Amendment on the date indicated below.

Signed:
_
Susan Robertson President Vice President
President/ Vice President
Susan Robertson
Printed Name
9 0 Date
Date
Attest:
MMM
Secretary/Assistant Secretary
ROBERT M. SHELTON
Printed Name
9/1/10

Date