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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.

Open to Public Inspection

OMB No 1545-0047

A F	or the	2011 calendar year, or tax year beginning and ending	9	-	
В	Check if applicable	C Name of organization	D Em	ployer identific	ation number
	Address	ASSOCIATION OF SMALL BUSINESS DEV. CENTR			
	Name change	Doing Business As		01-03	365191
]initial return	Number and street (or P.O. box if mail is not delivered to street address) Room/	suite E Tel	ephone number	
	Termin- ated	8990 BURKE LAKE ROAD		703-	764-9850
Ļ	Amende	City or town, state or country, and ZIP + 4	G Gros	ss receipts \$	2,073,490.
	Applica- tion pending		H(a) Is	s this a group re	
	, .	F Name and address of principal officer.C. EDWARD ROWE, III		or affiliates?	Yes X No
		SAME AS C ABOVE		re all affiliates incl	
		mpt status 501(c)(3) 501(c)(6) ◀ (insert no.) 4947(a)(1) or			list. (see instructions)
		:: ▶ WWW.ASBDC-US.ORG		Group exemption	
		rganization: X Corporation Trust Association Other ► L Summary	Year of forma	tion: 1979 N	State of legal domicile; ME
	T-	rifely describe the organization's mission or most significant activities: TO SUPPO	ገውጥ ተጥና	MEMBER	S IN THEIR
८⊍ ा≾ Governance		EFFORTS TO ASSIST THE DEVELOPMENT OF SMALL 1			
ā		theck this box In the organization discontinued its operations or disposed of			
&U∜ Goverı	1	lumber of voting members of the governing body (Part VI, line 1a)	more than 2	3	10
	1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	10
es &		otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	7
vitie.	1	otal number of volunteers (estimate if necessary)		6	0
AUG % Activities	7 a T	otal unrelated business revenue from Part VIII, column (C), line 12		7a	500.
≪	b N	et unrelated business taxable income from Form 990-T, line 34		7b	0.
$\widehat{\mathbb{R}}$			Pri	or Year	Current Year
	8 0	contributions and grants (Part VIII, line 1h)		0.	0.
考し		rogram service revenue (Part VIII, line 2g)	1,9	916,747.	1,937,195.
6	10 Ir	nvestment income (Part VIII, column (A), lines 3 (Wand 7d)		71,433.	61,087.
め	11 0	nvestment income (Part VIII, column (A), lines 3 4 and 7d) other revenue (Part VIII, column (A), lines 5, 6d, 86, 9c, 10d, and 11e) 2012		2,570.	860.
	12	otal revenue - add lines 6 through 11 (must equalizant viii, column (A), line_12)	1,9	990,750.	1,999,142.
		irants and similar amounts paid (Part IX, column (A), lines (73)		0.	0.
		enefits paid to or for members (Part IX, column (A), line 4)	<u> </u>	0.	0.
Expenses	1	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		509,800.	595,575.
Ë	1	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ä	Í	otal fundraising expenses (Part IX, column (D), line 25) 0.	1 (077,247.	1,291,922.
		other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		587,047.	1,887,497.
	l	levenue less expenses. Subtract line 18 from line 12		403,703.	111,645.
es-		leveride less expenses. Subtract line 10 from line 12		of Current Year	End of Year
Net Assets or Fund Balances	20 T	otal assets (Part X, line 16)		551,149.	2,767,990.
Ass 1 Ba	21 T	otal liabilities (Part X, line 26)		50,371.	74,174.
Ę.Set	22 N	let assets or fund balances Subtract line 21 from line 20	2.6	500,778.	2,693,816.
	art II	Signature Block			
Und	er penalt	ies of perjury, I declare that I have examined this return, including accompanying schedules and s	tatements, and	d to the best of m	y knowledge and belief, it is
true	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which pre	eparer has any	knowledge,	/
		* C. Slat R. C.		8/10/0	20/2
Sig	n	Signature of officer		Date /	
Her	e	C. EDWARD ROWE, III, PRESIDENT AND CEO			
		Type or print name and title		T	- 1 5TW
		Print/Type preparer's name Prepayer's signature	Date	Check L	PTIN
Paid		STEVEN M. COLLINS SILVE TO COLLINS	8/8/	1 1 2 2 2 2 2 3 2	
	_	Firm's name MURRAY & CAVANAUGH, P.C., CPA'S		Firm's EIN	54-1152891
Use	Only	Firm's address 1901 N. FT. MYER DR., SUITE 1100		Dhara	7021 527 0012
	. 40 c 151	ARLINGTON, VA 22209-1688		Phone no. (703) 527-8012 X Yes No
May	trie iH	S discuss this return with the preparer shown above? (see instructions)			X Yes No

	1 990 (2011) ASSOCIATION OF SMALL BUSINESS DEV. CENTR 01-0365191 Page 2 rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission.
	TO REPRESENT THE COLLECTIVE INTEREST OF OUR MEMBERS BY PROMOTING,
	INFORMING, SUPPORTING AND CONTINUOUSLY IMPROVING THE SMALL BUSINESS
	DEVELOPMENT CENTERS NETWORK, WHICH DELIVERS NATIONWIDE EDUCATIONAL
	ASSISTANCE TO STRENGTHEN SMALL/MEDIUM BUSINESS MANAGEMENT, THEREBY
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	if "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	
	THE ASSOCIATION REPRESENTS THE COLLECTIVE INTERESTS OF ITS MEMBERS BY
	PROMOTING, INFORMING, SUPPORTING AND CONTINUOUSLY IMPROVING THE SMALL
	BUSINESS DEVELOPMENT CENTERS NETWORK, WHICH DELIVERS NATIONWIDE
	EDUCATIONAL ASSISTANCE TO STRENGHTEN SMALL/MEDIUM BUSINESS MANAGEMENT,
	THEREBY CONTRIBUTING TO THE GROWTH OF LOCAL, STATE AND NATIONAL
	ECONOMIES. THE ASSOCIATION CONDUCTS CONFERENCES AND MEETINGS TO PROVIDE
	A MEDIUM OF COMMUNICATION AND EXCHANGE OF INFORMATION AMONG THE
	MEMBERS. THE ASSOCIATION ALSO FACILITATES THE PURCHASE OF WORKSHOP
	MATERIALS OF VALUE TO THE MEMBERS' SMALL BUSINESS DEVELOPMENT CENTERS
	COUNSELORS.
4b	(Code) (Expenses \$including grants of \$) (Revenue \$)
	SINCE 1994 THE SMALL BUSINESS ACT PROVIDES THAT THE U.S. SMALL BUSINESS
	ADMINISTRATION (SBA) CONTRACT WITH THE ASSOCIATION TO PROVIDE FOR AN
	ACCREDITATION PROCESS FOR THE SMALL BUSINESS DEVELOPMENT CENTER
	PROGRAM. THE SBA IS REQUIRED TO CONSIDER THE RESULTS OF THE
	ACCREDITATION PROCESS WHEN EVALUATING THE PERFORMANCE OF A SMALL
	BUSINESS DEVELOPMENT CENTER (SBDC) FOR PURPOSES OF EXTENDING OR
	RENEWING ITS COOPERATIVE AGREEMENT. THE ASSOCIATION PERFORMS AN
	ACCREDITATION ON EACH SBDC GRANTEE ONCE EVERY FOUR YEARS. THE
	ASSOCIATION PROVIDES WRITTEN REPORTS OF THE RESULTS OF EACH
	ACCREDITATION TO THE SBA FOR ITS USE. THE ACCREDITATION PROCESS USED IS
	BASED ON ESTABLISHED GUIDELINES AND EDUCATION AND TRAINING IS TO BE
	PROVIDED TO THE ASSOCIATION'S MEMBERS ON A REGULAR BASIS.
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses
13200	Form 990 (2011)

			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_		<u>X</u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
4	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? <i>If</i> "Yes," <i>complete Schedule C, Part II</i>			
5		_4		
Ŭ	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	_	x	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	5		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I			х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
_	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide	-		
•	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			-43-
	endowments, 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	-10		
	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	х	
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		х
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
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	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?			٠,,
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	——	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
.,	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	145		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18_		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 hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	_23_	_X_	
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			
b	Schedule K. If "No", go to line 25	24a		_X_
C	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
·	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	24d		
200	disqualified person during the year? If "Yes," complete Schedule L, Part I	05-		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	25a		
-	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified	200		
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		_X_
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			7.7
22	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	00		v
34	Was the organization related to any tax-exempt or taxable entity?	33		X
. .	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	X_	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of	334		
_	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			_ - _
	If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38_	X	
		Form	99 <mark>0</mark> (2011)

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

Form 990 (2011)

14a

Х

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

Form 990 (2011) ASSOCIATION OF SMALL BUSINESS DEV. CENTR 01-0365191 Page 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 (D. See i	nstructions				
	Check if Schedule O contains a response to any question in this Part VI						\mathbf{X}
Sec	tion A. Governing Body and Management						
						Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		10		[
	If there are material differences in voting rights among members of the governing body, or if the governing						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.						
b	Enter the number of voting members included in line 1a, above, who are independent	1b		10		ĺ	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	ip with	any other		ı		
	officer, director, trustee, or key employee?				2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision				
	of officers, directors, or trustees, or key employees to a management company or other person?			_ 3	3		<u> </u>
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa	as filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's as	ssets?		_ 5	5		X
6	Did the organization have members or stockholders?				5	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or				
	more members of the governing body?			7	a 📗	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or				
	persons other than the governing body?			7	ь	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y	ear by th	ne following:				
а	The governing body?		-	8	a	X	
b	Each committee with authority to act on behalf of the governing body?			8	b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	ached	at the				
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O						X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal in	Revenu	e Code.)				
						Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10)a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapte	s, affiliates,				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10	ъ		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bo	dy befo	ore filing the fo	rm? 1	1a	_X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						1
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			1:	2a	X	<u></u>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris	se to co	nflicts?	12	2b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes," a	lescnbe				İ
	in Schedule O how this was done			1:	2c	Х	
13	Did the organization have a written whistleblower policy?			_1	3		X
14	Did the organization have a written document retention and destruction policy?			1	4		X
15	Did the process for determining compensation of the following persons include a review and appro-	val by 1	ndependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?		}			
а	The organization's CEO, Executive Director, or top management official			. 1	5a		X
b	Other officers or key employees of the organization			15	5b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				ļ		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement	with a		ŀ		}
	taxable entity during the year?			10	6a		X
b	if "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	ate its	participation	ļ	l		
	ın joint venture arrangements under applicable federal tax law, and take steps to safeguard the org	anızatı	on's		ı		
	exempt status with respect to such arrangements?	.,,,,,,,,,,		10	6b		<u> </u>
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed NONE						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990	·T (Sec	tion 501(c)(3)s	only) ava	ılab	le	
	for public inspection. Indicate how you made these available. Check all that apply.						
	Own website Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, or	conflict	of interest pol	icy, and fi	nan	icial	
	statements available to the public during the tax year.						
20	State the name, physical address, and telephone number of the person who possesses the books	and red	cords of the or	ganızatıor	ı. >		
	THE ORGANIZATION - 703-764-9850						
	8990 BURKE LAKE ROAD, BURKE, VA 22015						
13200 01-23-	B ————————————————————————————————————			F	orm	990	(2011)

ASSOCIATION OF SMALL BUSINESS DEV. CENTR

01-0365191

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	Position (do not check more than one box, unless person is both an officer and a director/trustee)					h an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ALLAN ADAMS										
DIRECTOR	4.00	X		<u> </u>		L.		0.	0.	0
(2) JAMES KING		ļ						_	_	
DIRECTOR	4.00	X				<u> </u>	<u> </u>	0.	0.	0
(3) GAYLE R. KUGLER	4 00							•		•
DIRECTOR	4.00	X	-	-		-		0.	0.	0
(4) BRETT ROGERS	4.00							_	0	•
DIRECTOR (5) MARY LYNN WILKERSON	4.00	X				├	_	0.	0.	0
DIRECTOR - TERM ENDED IN 2011	4.00	x						0.	0.	0
(6) JERRY CARTWRIGHT	4.00					\vdash		0.	0.	
DIRECTOR - TERM ENDED IN 2011	4.00	x						0.	0.	0
(7) JAMES HECKMANN		ļ				†				
DIRECTOR	4.00	x						0.	0.	0
(8) DIANE HOWERTON										
DIRECTOR	4.00	X						0.	0.	0
(9) AL SALGADO										
CHAIRPERSON	4.00	X		X		<u> </u>		0.	0.	0
(10) MARC KING										_
VICE CHAIRPERSON	4.00	X		X		_	_	0.	0.	0
(11) MICHAEL YOUNG							ĺ			
TREASURER	4.00	X		X		_	_	0.	0.	0
(12) GEORGIANNA PARKIN	4 00									
SECRETARY	4.00	X		X		\vdash	_	0.	0.	0
(13) C. EDWARD ROWE, III	40.00			x				156 242	0.	8,723
PRESIDENT/CEO (14) DONNA ETTENSON	40.00	╁		^				156,343.	<u> </u>	0,143
VP OPERATIONS	40.00		1			x		103,133.	0.	6,751
VI OLDANITOND	10.00							103,133.		37,31

Pa:	1990 (2011) ASSOCIAT	LON OF	SM/	AL]	<u>ا ا</u>	BU:	SI	NE.	SS DEV. CENT	<u>R 01-036</u>	<u>5191</u>	Pa	ge 8
· ai	t VII Section A. Officers, Directors, Tr	ustees, Key Eı	mplo	oyee	es, a	nd I	High	est	Compensated Employ	rees (continued)	-		
	(A) Name and title	Average hours per	Average Position					one h an	(D) Reportable compensation	(E) Reportable compensation	am	(F) timate tount o	
		(describe hours for related organizations in Schedule	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	comp fro orga and	other censation the anization relate	e on ed
	· · · · · · · · · · · · · · · · · · ·	O)	Individ	Institut	Officer	Key em	Highes	Former			orga	nızatıc	ons
_													
			-								 		
	***		_				<u> </u>						
				-			┝				-		
			_			_	_				ļ		
					-								
	Sub-total	<u> </u>				<u></u>	L		259,476.	0	11	5,4	7.4
	Total from continuation sheets to Part V	I Section A							259,470.	0),4 <u>.</u>	0.
	Total (add lines 1b and 1c)	ii, occilori A							259,476.	0	\rightarrow	5,4	
2	Total number of individuals (including but r	ot limited to th	ose	liste	ed al	bove	e) wh	no re				_	
	compensation from the organization										1	Yes	2 No
3	Did the organization list any former officer,	director, or tru	uste	e, ke	y er	nplo	yee,	or	highest compensated e	mployee on		163	140
	line 1a? If "Yes," complete Schedule J for s	uch individual									3		X
4	For any individual listed on line 1a, is the su									the organization		.,	
5	and related organizations greater than \$15 Did any person listed on line 1a receive or			-						idual for services	4	Х	
Soc	rendered to the organization? If "Yes," com										5		<u> </u>
1	tion B. Independent Contractors Complete this table for your five highest co	mpensated inc	depe	ende	nt c	onti	racto	ors t	hat received more than	\$100,000 of compe	nsation fr	om	
	the organization. Report compensation for												
	(A) Name and business	address	NO	ONE	3				(B) Description of s	services	(C Comper		า
		-									•		
					_			\dashv					
									· · · · · · · · · · · · · · · · · · ·				
									-				
								\dashv					
2	Total number of independent contractors (noludina hut -	O 1	m.+-	d +-	th -	00 1	\	I shows who are sound in	nore than			
_	Total number of independent contractors (in \$100,000 of compensation from the organic		ot III	me	u 10		se 118 0		above) who received h	iore triaff			
											Form \$	990 (2	2011)

T di	VII	Statement of Rever	iue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b]			
S, O	С	Fundraising events	1c	<u> </u>				
	d	Related organizations	1d					
j.	е	Government grants (contribut	ions) 1e					
rior	f	All other contributions, gifts, gran	ts, and					
ğ ţ		similar amounts not included above	ve 1 1					
음	g	Noncash contributions included in lines	1a-1f \$]	-		
<u>용</u>	<u>h</u>	Total. Add lines 1a-1f						
				Business Code				
8	2 a	CONFERENCES & M	EETINGS	900099	1,256,786.	23,401.		1233385.
<u>e</u> ₹	b	MEMBERSHIP DUES	<u> </u>	900099	458,403.	458,403.		
Program Service Revenue	С	ACCREDITATION P	ROGRAM	900099	192,019.	192,019.		
e a	d	CENSUS BUREAU A		900099	12,874.	12,874.		
<u>5</u>	е	TECHNICAL & TRA	INING S	900099	12,648.	12,648.		
<u>-</u>	f	All other program service reve	nue	611710	4,465.	4,465.		
		Total. Add lines 2a-2f			1,937,195.			<u> </u>
İ	3	Investment income (including	dividends, intere	est, and	Ì			_
		other similar amounts)		>	51,196.			<u>51,196.</u>
	4	Income from investment of tax	k-exempt bond p	roceeds				·····
	5	Royalties		<u> </u>				
			(i) Real	(II) Personal	_			
	6 a				_			
		Less. rental expenses			1			
-		Rental income or (loss)	L	<u> </u>	1			
1		Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(II) Other	4			
		assets other than inventory	84,239.		-			
	þ	Less cost or other basis	E4 240					
		and sales expenses	74,348.		-			
		Gain or (loss)	9,891.		0 001			0 001
		Net gain or (loss)			9,891.			9,891.
9	g a	Gross income from fundraising	•					
Ş		including \$	of					
8		contributions reported on line	•					
Other Revenu	L -	Part IV, line 18 Less ⁻ direct expenses	а		1			
٥		Net income or (loss) from fund	b traising events		†			
1		Gross income from gaming at	-			 		
	<i>5</i> a	Part IV, line 19	a a					
	h	Less: direct expenses	b		1			
ľ		Net income or (loss) from gam			1			
		Gross sales of inventory, less	-					
		and allowances	а					
1	b	Less: cost of goods sold	b					
ĺ		Net income or (loss) from sale		>	1			
T		Miscellaneous Revenu		Business Code				
ľ	11 a	ADVERTISING INC		541800	500.		500.	
	 b	VT 445- 1 115-0114		900099	360.	360.	_	
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d			860.			
	12	Total revenue. See instructions.		> _	1,999,142.	704,170.	500.	1294472.
132001	12							Form 990 (2011)

Part IX Statement of Functional Expenses

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

Do	Check if Schedule O contains a respons not include amounts reported on lines 6b,	(A)	(B)	(C) Management and	_ (D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,	ļ			
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	171,980.			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
,	Other salaries and wages	319,242.			
3	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)	12,185.	<u> </u>		
9	Other employee benefits	56,723.			
)	Payroll taxes	35,445.			
1	Fees for services (non-employees).				
а	Management				
b	Legal	11,846.			
С	Accounting	35,384.			
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	13,764.			
g	Other	58,213.			
2	Advertising and promotion	13,604.	***		
3	Office expenses	52,460.			
ŀ	Information technology	3,611.			
5	Royalties				
6	Occupancy	13,023.			
7	Travel	127,512.			
3	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
•	Conferences, conventions, and meetings	899,084.			
)	Interest	139.			
	Payments to affiliates				
2	Depreciation, depletion, and amortization	1,480.			
3	Insurance	6,781.			
1	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)				
а	IMPACT ASSESSMENT	21,515.			
b	WORKSHOP MATERIALS	9,391.			
c	ASSOCIATION DUES AND SU	8,515.			
d	PERIODICALS	6,384.			
e	All other expenses	9,216.			
Ī	Total functional expenses. Add lines 1 through 24e	1,887,497.			
 3	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

<u>rai</u>	T X	Balance Sneet					
			_		(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			175,932.	1	142,037.
	2	Savings and temporary cash investments			993,684.	2	994,102.
	3	Pledges and grants receivable, net		<u> </u>		3	
İ	4	Accounts receivable, net		-	51,299.	4	171,078.
	5	Receivables from current and former officers, dir	ectors	. trustees, kev	02/2/		
		employees, and highest compensated employee					
		of Schedule L		inploto i dit ii		5	
	6	Receivables from other disqualified persons (as	define	d under section			
		4958(f)(1)), persons described in section 4958(c)					
		employers and sponsoring organizations of sect		-			
		employees' beneficiary organizations (see instru-		r(c)(s) voluntary		6	
3	7	Notes and loans receivable, net	Clions	-	3,450.	7	3,450.
ครรดเร		Inventories for sale or use		-	31,800.		28,275.
ָ	8	Prepaid expenses and deferred charges		-		8	25,439.
	9		1	-	23,273.	9	45,439
	10a	Land, buildings, and equipment, cost or other		22 024	•		
	L	basis Complete Part VI of Schedule D	10a	33,024.	2 000		C 400
		Less. accumulated depreciation	<u>1</u> 0b	26,536.	3,088.		6,488. 1,397,121.
	11	Investments - publicly traded securities	_	-	1,368,623.	11	1,39/,121
	12	Investments - other securities. See Part IV, line 1		-		12	
	13	Investments - program-related. See Part IV, line	11	-		13	
	14	Intangible assets		ļ		14	
	15	Other assets. See Part IV, line 11	-	0 5-4 440	15	0.757.000	
	16	Total assets, Add lines 1 through 15 (must equa	al line (34)	2,651,149.	16	2,767,990
	17	Accounts payable and accrued expenses		-	41,871.	17	65,674.
	18	Grants payable		<u> </u> _		18	
	19	Deferred revenue		8,500.	19	8,500	
	20	Tax-exempt bond liabilities		_		20	
3	21	Escrow or custodial account liability Complete F	art IV	of Schedule D		21	
	22	Payables to current and former officers, director	s, trus	tees, key employees,			
Liabillies		highest compensated employees, and disqualified	ed per	sons. Complete Part II			
_		of Schedule L				22	
	23	Secured mortgages and notes payable to unrela	ited th	rd parties		23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, pages	yables	to related third			
		parties, and other liabilities not included on lines	17-24	Complete Part X of			
		Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			50,371.	26	74,174
		Organizations that follow SFAS 117, check he	ere 🕨	X and complete			
2		lines 27 through 29, and lines 33 and 34.					
2	27	Unrestricted net assets			2,600,778.	27	2,693,816
5	28	Temporarily restricted net assets		Γ		28	
))	29	Permanently restricted net assets		Γ		29	
5		Organizations that do not follow SFAS 117, cl	heck h	ere 🕨 🔲 and			
5		complete lines 30 through 34.					
3	30	Capital stock or trust principal, or current funds				30	
200	31	Paid-in or capital surplus, or land, building, or eq	ulpme	nt fund		31	
net Assets of Fund Balances	32	Retained earnings, endowment, accumulated in				32	
נו	02		-0.110,		2,600,778.	33	2,693,816.
Ž	33	Total net assets or fund balances		4	Z. NUU //O-	.3.3	4 4 10 3 3 - D T D +

Form **990** (2011)

<u>Form</u>	990 (2011) ASSOCIATION OF SMALL BUSINESS DEV. CENTR	01-	03653	<u> 191</u>	Pag	e 12	
Pa	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response to any question in this Part XI					\mathbf{X}	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1	, 99	9,1	42.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	, 88	7,4	97.	
3	Revenue less expenses Subtract line 2 from line 1		111,645.				
4							
5	5 Other changes in net assets or fund balances (explain in Schedule O) 5						
6_							
Pa	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response to any question in this Part XII		_				
			_		Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		[
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.	\ 				
2a		<u>2a</u>		<u>X</u>			
b	Were the organization's financial statements audited by an independent accountant?			2b	X		
С	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		_X_	
	If the organization changed either its oversight process or selection process during the tax year, explain in Scho	edute O	. [ı	
d	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 Consolidated basis Both consolidated and separate basis		ļ				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sii	ngle Aud	int				
	Act and OMB Circular A-133?		ļ	<u>3</u> a		_X_	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red aud	lit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.			<u>3</u> b			
				Form	990 (2011)	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► See separate instructions.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

Inspection

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

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

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

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

f the organization answered "Yes" to • Section 501(c)(4), (5), or (6) organization		ky Tax), or Form 990-E	Z, Part V, line 35c (I	Proxy Ta	x), then
Name of organization	F		·	Emplo	yer identification number
ASSOCIA	TION OF SMALL B	USINESS DEV.	CENTR		01-0365191
Part I-A Complete if the org	janization is exempt un	der section 501(c) or is a section	527 or	ganization.
 Provide a description of the organiz Political expenditures Volunteer hours 	cation's direct and indirect polit	ical campaign activities	ın Part IV.	> \$_	
Part I-B Complete if the org	ganization is exempt un	der section 501(c)(3).		
1 Enter the amount of any excise tax				▶ \$	
2 Enter the amount of any excise tax	incurred by organization mana	gers under section 495	5	▶\$	
3 If the organization incurred a section	n 4955 tax, did it file Form 472	0 for this year?		-	Yes No
4a Was a correction made?		·			Yes No
b If "Yes," describe in Part IV.					
Part I-C Complete if the org	ganization is exempt un	der section 501(c), except section	n 501(c)(3).
1 Enter the amount directly expended	d by the filing organization for s	section 527 exempt fun	ction activities	▶\$	
2 Enter the amount of the filing organ	nzation's funds contributed to d	other organizations for	section 527		
exempt function activities				▶\$.	
3 Total exempt function expenditures	s. Add lines 1 and 2. Enter here	and on Form 1120-PO	L,		
line 17b				▶\$	
4 Did the filing organization file Form	1120-POL for this year?				Yes No
5 Enter the names, addresses and en	nployer identification number (E	EIN) of all section 527 p	olitical organizations	to which	the filing organization
made payments. For each organiza	ition listed, enter the amount pa	aid from the filling organ	nzation's funds Also	enter the	e amount of political
contributions received that were pr	-	·		separat	e segregated fund or a
political action committee (PAC). If	additional space is needed, pro	ovide information in Par	rt IV		
(a) Name	(b) Address	(c) EIN	(d) Amount paid filing organizat funds. If none, e	ion's	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
·					
			-		
	1	1	1		
					

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

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Schedule C (Form 990 or 990-EZ) 2011	ASSOCI.	<u>ATION</u>	OF SMALL B	USINESS DEV	CENT 01-0	365191 Page 2
Part II-A Complete if the org (election under sec			npt under sectioi	1 501(c)(3) and file	ed Form 5768	
						
				Part IV each affiliated	group member's nan	ne, address, EIN,
expenses, and shar B Check F if the filing organiza			•			
Limi	ts on Lobby	ing Expe	nd "limited control" pro nditures ints paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	ience public	- ODIDIOD /	grace roots lobbying)			
b Total lobbying expenditures to influ	•	•		-		
c Total lobbying expenditures (add li	_		ay (direct lobbying)	•		
d Other exempt purpose expenditure		10)		-		-
e Total exempt purpose expenditure		1c and 1c	n	-	· · · · · · · · · · · · · · · · · · ·	
f Lobbying nontaxable amount. Enter	•		•	a columne		
If the amount on line 1e, column (a) o			***************************************	·		
Not over \$500,000	או (ט) וא		bying nontaxable ame the amount on line 1e	ount is:		
Over \$500,000 but not over \$1,000	2.000			000 OVOT \$500 000		
Over \$1,000,000 but not over \$1,500			00 plus 15% of the exc 00 plus 10% of the exc			
Over \$1,500,000 but not over \$17,500,000 but n			00 plus 5% of the exce			
Over \$17,000,000	000,000			ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (er	ter 25% of I	ine 1fl				
h Subtract line 1g from line 1a. If zer		•		ŀ		
i Subtract line 1f from line 1c. If zero	•			ŀ		
j If there is an amount other than ze	•		line 1. did the organize	ation file Form 4720		
reporting section 4911 tax for this		mie mo	ille 11, did the organiza	ation life Form 4/20		Yes No
reporting section 4911 tax for this		Voor Au	eraging Period Under	Section FO1/h)		
	ations that	made a s	ection 501(h) election	n do not have to comp es 2a through 2f on pa		
	Lobby	ing Expe	nditures During 4-Yea	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 20	008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))				_		
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						
(150% of line 2d, column (e))						
						
Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2011

Schedule C (Form 990 or 990 EZ) 2011 ASSOCIATION OF SMALL BUSINESS DEV. CENT 01-0365191 Page 3 Part II-B | Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	ch "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	(t	<u>)</u>
of the	lobbying activity.	Yes	No	Amo	ount
1 (During the year, did the filing organization attempt to influence foreign, national, state or	1			
١	ocal legislation, including any attempt to influence public opinion on a legislative matter	1			
	or referendum, through the use of:				
a \	Volunteers?				
b l	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?]	
	Media advertisements?				
d l	Mailings to members, legislators, or the public?				
e l	Publications, or published or broadcast statements?				
f (Grants to other organizations for lobbying purposes?				
g l	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h l	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				·
į (Other activities?				
į.	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
	III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)(5), or s	ection	
	501(c)(6).				,·-
				Yes	No
	Were substantially all (90% or more) dues received nondeductible by members?		1	Х	1
1 '	vicio substantially all (50% of more) dues received hondeductible by members?			22	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	11	X
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered		2 3)(5), or s	ection	X
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect		2 3)(5), or s	ection	X
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No" Ol	2 3)(5), or s R (b) Par	ection	X
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2 3 Part 1 2 3 6 6 6 6 6 6 6 6 6	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of policexpenses for which the section 527(f) tax was paid).	d "No" Ol	2 3)(5), or s R (b) Par 1 2a 2b	ection	X
2 3 Part	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	d "No" Ol	2 3)(5), or s R (b) Par	ection	X
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2 3 Part 1 2 5 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	d "No" OI	2 3)(5), or s R (b) Par 1 2a 2b 2c 3	ection	X
2 3 Part 1 2 3 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the expenditure next year?	d "No" OI	2 3)(5), or s R (b) Par 1 2a 2b 2c	ection	Х
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	
	organization answered "Yes" to Form 990, Part IV, line		·
		(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 v	vriting that the assets held in donor advised	funds
	are the organization's property, subject to the organization's	-	Yes No
6	Did the organization inform all grantees, donors, and donor ad	•	
_	for charitable purposes and not for the benefit of the donor of		-
	impermissible private benefit?	a series du rices, es los ally estiles parpeces es	Yes No
Par		anization answered "Yes" to Form 990. Par	
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e		rically important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space	v voscivation or a continu	sa motorio di aditare
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
	,		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic stri	ucture included in (a)	2c
_	Number of conservation easements included in (c) acquired a	` '	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the o	
_	year ▶	outed, extinguished, or terminated by the t	ngamzanon danng mo tax
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the per		
_	violations, and enforcement of the conservation easements it	• • • • •	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		ing the year
7	Amount of expenses incurred in monitoring, inspecting, and e	_	
8	Does each conservation easement reported on line 2(d) above		
	and section 170(h)(4)(B)(ii)?	, ,	Yes No
9	In Part XIV, describe how the organization reports conservation	on easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes th	e organization's accounting for
	conservation easements		<u> </u>
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherand	ce of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that descri	bes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	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 treatment	asures, or other similar assets for financial o	
_	the following amounts required to be reported under SFAS 1		- · · ·
а	Revenues included in Form 990, Part VIII, line 1	. , ,	. • \$
b	Assets included in Form 990, Part X		. > \$
-	·		

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

Schedule D (Form 990) 2011

	dule D (Form 990) 2011 ASSOCIA	TION OF SM	IALL	BUSINE:	SS DEV.	CEN	TR (<u>65191</u>	
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tre	easures, o	r Other	r Simila	ar Asset	S (continu	.ed)
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the f	following that	t are a sig	ınıfıcant ı	use of its o	collection i	tems
	(check all that apply)									
а	Public exhibition	(d	Loan or exch	nange progra	ms				
b	Scholarly research	•	• 🗀	Other						
C	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	in how th	ney further th	e organizatio	on's exem	npt purpo	se in Part	XIV.	
5	During the year, did the organization solicit of									
	to be sold to raise funds rather than to be m								Yes	No No
Par	t IV Escrow and Custodial Arran	gements. Comp	lete if the	organization	n answered '	Yes" to F	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa	rt X, line 21								
1a	Is the organization an agent, trustee, custod	ian or other interme	diary for	contributions	s or other as	sets not II	ncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the fo	ollowing	table.						
									Amount	
С	Beginning balance						1c			
d	Additions during the year						1d			
е	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?						Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV					_				
Par	t V Endowment Funds. Complete	f the organization a	nswered	"Yes" to For	m 990, Part	IV, line 10).			
		(a) Current year	(b) F	Prior year	(c) Two year	s back (d) Three y	ears back	(e) Four y	ears back
1a	Beginning of year balance									
b	Contributions				_					
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities			_						
	and programs									
f	Administrative expenses					}				
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end balan	ce (line 1	g, column (a)) held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment >	%								
С	Temporarily restricted endowment ▶	%								
	The percentages in lines 2a, 2b, and 2c show	uld equal 100%								
За	Are there endowment funds not in the posse	ession of the organiz	zation th	at are held ar	nd administe	red for th	e organiz	zation		
	by.								Y	'es No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii)	
b	If "Yes" to 3a(ii), are the related organization	s listed as required	on Sche	dule R?					3b	
4	Describe in Part XIV the intended uses of the	e organization's end	lowment	funds	<u></u>				_	
Par	t VI Land, Buildings, and Equipn	nent. See Form 99	0, Part X	(, line 10.				· · · · · ·		
	Description of property	(a) Cost or	other	(b) Cost	or other	(c) Ac	cumulate	ed	(d) Book	value
		basis (invest	ment)	basis ((other)	dep	reciation			
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment			1	4,600.		10,3	29.	4	,271.
<u>е</u>	Other				8,424.		16,2	07.	2	,217.
Total	, Add lines 1a through 1e. (Column (d) must e	egual Form 990. Par	t X. colui	mn (B), line 1	O(c).)				6	,488.

Schedule D (Form 990) 2011

(a	a) Description of security or category	(b) Book value		(c) Method of valu	
	(including name of security)		Co	st or end-of-year ma	arket value
	al derivatives				
Closely- Other	held equity interests				
(A)		 			
(B)					
(C)					
(D)				· · ·	
(E) _					 _
(F)					
(G)					
(H)					
(1)					
al. (Col (b	n) must equal Form 990, Part X, col (B) line 12.)	>			
art VIII	Investments - Program Related	See Form 990, Part X, I	ne 13.		
	(a) Description of investment type	(b) Book value		(c) Method of valuest or end-of-year m	
(1)					
(3)					
(4)	-	**			
(5)					
(6)		~	-		
(7)					
(8)					
(9)					
(10)					
	o) must equal Form 990, Part X, col (B) line 13.)				
art IX	Other Assets. See Form 990, Part X,				
		(a) Description			(b) Book value
(1)					
_(2)					
(3)					<u> </u>
(4)					<u> </u>
(5)					
(6)		 .			ļ
(7)	-				<u>. </u> -
(8)					-
<u>(9)</u>					
10)		line 15)			
tal. (C <u>olu</u> art X	mn (b) must equal Form 990, Part X, col (B) Other Liabilities. See Form 990, Part				<u> </u>
aitA	(a) Description of liability	t A, line 25.	(b) Book value	1	
(1) Fed			(b) Book value	-	
(1) red (2)	leral income taxes			1	
(3)				1	
(4)				1	
(5)				1	
(6)				1	
(7)	·			1	
(8)			<u> </u>	7	
				1	
(9)		-		1	
<u>(9)</u> (10)					
(10)	Imn (b) must equal Form 990, Part X, col (B) SC 740) Footnote In Part XIV, provide the text of the footno SC 740)			-	

	dule D (Form 990) 2011 ASSOCIATION OF SMALL BUSINE	ESS	DEV.	CENT	<u> 01-</u>	<u>-0365191</u>	Page 4
Pai	rt XI Reconciliation of Change in Net Assets from Form 990 to	Audit	ted Fin	ancial S	tatemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1		1,999	,142.
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	• •	1,887	,497.
3	Excess or (deficit) for the year. Subtract line 2 from line 1			3			,645.
4	Net unrealized gains (losses) on investments			4			,607.
5	Donated services and use of facilities			5			
6	Investment expenses			6			
7	Prior period adjustments			7			
8	Other (Describe in Part XIV.)			8			
9	Total adjustments (net). Add lines 4 through 8			9		-18	,607.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and	19		10		93	,038.
Par	t XII Reconciliation of Revenue per Audited Financial Statemen	nts W	ith Re	venue p	er Retur	'n	
1	Total revenue, gains, and other support per audited financial statements				1	1,980	,535.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12						
а	Net unrealized gains on investments	2a	.	-18,60	7.		
b	Donated services and use of facilities	2b					
С	Recoveries of prior year grants	2c	l				
d	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d	<u> </u>			2e	-18	,607.
3	Subtract line 2e from line 1				3	-18 1,999	,142.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
c	Add lines 4a and 4b				4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	1,999	
Par	t XIII Reconciliation of Expenses per Audited Financial Stateme	ents \	With Ex	penses	per Ret	urn	
1	Total expenses and losses per audited financial statements				1	1,887	,497.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.						
а	Donated services and use of facilities	2a					
b	Prior year adjustments	2b					
С	Other losses	2c				1	
d	Other (Describe in Part XIV.)	2d					
е	Add lines 2a through 2d				2e	İ	0.
3	Subtract line 2e from line 1				3	1,887	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						-
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a					
b	Other (Describe in Part XIV)	4b					
С	Add lines 4a and 4b				4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)				5	1,887	,497.
Par	t XIV Supplemental Information		-				_
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III	, lines	1a and 4	; Part IV, lir	nes 1b and	I 2b; Part V, line	4; Part
	e 2; Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also comp						·
•	, and an an an an an an an an an an an an an			p. 0 1. 20 a	,		

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					-		

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.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990. ► See separate instructions.

ASSOCIATION OF SMALL BUSINESS DEV. CENTR

Employer identification number 01-0365191

P 6	art I	Questions Regarding Compensation			
				Yes	No
1a	Chec	k the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
		/II, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	Щ	First-class or charter travel Housing allowance or residence for personal u	se		
	\square	Travel for companions Payments for business use of personal resider	nce		
		Tax indemnification and gross-up payments Health or social club dues or initiation fees			
		Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any	of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
		oursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2		ne organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, director		-	
		ees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
		The state of the s			
3	Indica	ate which, if any, of the following the filing organization used to establish the compensation of the organization	,		
		Executive Director Check all that apply Do not check any boxes for methods used by a related organization to			
		olish compensation of the CEO/Executive Director. Explain in Part III.	'		
		Compensation committee Written employment contract			
		Independent compensation consultant Compensation survey or study			
		Form 990 of other organizations X Approval by the board or compensation comm	nittee		
		Parally of the board of compensation comin	iii.co		
4	Durin	g the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
		nization or a related organization.			
а		ive a severance payment or change-of-control payment?	4a		x
	_	cipate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
		cipate in, or receive payment from, an equity-based compensation arrangement?	4c		X
		s" to any of lines 4a·c, list the persons and provide the applicable amounts for each item in Part III.			
		and provide the process and provide the applicable arresting to cash terminal architecture.			
	Only	section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5		ersons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
		ngent on the revenues of			
а		irganization?	5a		
		elated organization?	5b		
	•	s" to line 5a or 5b, describe in Part III			
6		ersons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
		ngent on the net earnings of			
а		irganization?	6a		
		elated organization?	6b		
_		s" to line 6a or 6b, describe in Part III.	35		
7		ersons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments			
		escribed in lines 5 and 6? If "Yes," describe in Part III	7		
8		any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-		contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		
9		s" to line 8, did the organization also follow the rebuttable presumption procedure described in		<u> </u>	
-		lations section 53 4958-6(c)?	9		
_HA			Schedule J (Forn	9901	2011
				,	

Schedule J (Form 990) 2011

Part II 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 (if). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

			(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	0	Q	(E)	(9)
			(-)			Retirement and	Nontaxable	Total of columns	Compensation
(A) Name	ne		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(a)-(i)(a)	reported as deferred in prior Form 990
		9	153,843.	2,500.	0	0	8,723.	165,066.	0
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14		(ii)							
		Ξ							
15		(ii)							
		(i)							
16		(ii)							

Schedule J (Form 990) 2011

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

ASSOCIATION OF SMALL BUSINESS DEV. CENTR

Employer identification number

ASSOCIATION OF SMALL BUSINESS DEV. CENTR 01-0365191
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CONTRIBUTING TO THE GROWTH OF LOCAL, STATE AND NATIONAL ECONOMIES.
FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION'S MEMBERSHIP HAS
TWO CLASSES: COMMON VOTING MEMBERS AND ASSOCIATE MEMBERS WHO HAVE NO VOTE.
FORM 990, PART VI, SECTION A, LINE 7A: COMMON VOTING MEMBERS ANNUALLY
ELECT THE MEMBERS OF THE BOARD OF DIRECTORS WHICH IS THE GOVERNING BODY OF
THE ORGANIZATION.
FORM 990, PART VI, SECTION A, LINE 7B: COMMON VOTING MEMBERS APPROVE ANY
CHANGES IN THE DUES ASSESSMENTS FOR COMMON AND ASSOCIATE MEMBERS. THE
COMMON VOTING MEMBERS ALSO APPROVE ANY AMENDMENTS TO THE ACCREDITATION
PROGRAM STANDARDS.
FORM 990, PART VI, SECTION A, LINE 8B: THERE ARE NO COMMITTEES WITH
AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.
FORM 990, PART VI, SECTION B, LINE 11: BEFORE FILING FORM 990 THE
PRESIDENT/CEO REVIEWS AND APPROVES THE RETURN. THE PRESIDENT/CEO THEN
PRESENTS THE RETURN TO THE GOVERNING BODY (BOARD OF DIRECTORS) FOR THEIR
REVIEW AND APPROVAL.
FORM 990, PART VI, SECTION B, LINE 12C: COMPLIANCE IS REQUIRED ANNUALLY.

FORM 990, PART VI, SECTION C, LINE 19: SUCH DOCUMENTS ARE NOT AVAILABLE TO

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

Schedule O (Form 990 or 990-EZ) (2011)

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Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization ASSOCIATION OF SMALL BUSINESS DEV. CENTR	Employer identification number 01-0365191
THE PUBLIC.	
	
	-
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	
NET UNREALIZED LOSSES ON INVESTMENTS:	-18,607.
	· · · · · · · · · · · · · · · · · · ·

Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990)

Name of the organization

Part

Related Organizations and Unrelated Partnerships

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

▶ See separate instructions.

OMB No 1545-0047

▶ Attach to Form 990.

Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

ASSOCIATION OF SMALL BUSINESS DEV. CENTR

2011 Open to Public Inspection

Employer identification number

01-0365191

(g) Section 512(b)(13) controlled ž × entity? Direct controlling Yes entity 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.) Direct controlling entity End-of-year assets <u>e</u> status (if section Public charity 501(c)(3)) 170(B)(1) (A) (VI) Total income Exempt Code ਉ section 501(C)(3) € SECTION Legal domicile (state or Legal domicile (state or foreign country) foreign country) /IRGINIA RESEARCH RELATED TO SMALL TO SUPPORT EDUCATION AND Primary activity Primary activity BUSINESS INDUSTRY, <u>e</u> CENTERS FOUNDATION - 54-1776460, 8990 BURKE ASSOCIATION OF SMALL BUSINESS DEVELOPMENT Name, address, and EIN Name, address, and EIN of related organization of disregarded entity LAKE ROAD, BURKE, VA 22015 Part II

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

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Schedule R (Form 990) 2011

Schedule R (Form 990) 2011 ASSOCIATION OF SMALL BUSINESS DEV. CENTR

Page 2

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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

General or Percentage , managing ownership partner? 3 Yes No Code V-UBI amount in box 17 20 of Schedule -K-1 (Form 1065) Ξ te allocations? Disproportion-Yes No Ξ Share of end-of-year assets <u>6</u> Share of total income Predominant income (related, unrelated, excluded from tax under sections 512-514) **©** (d)
Direct controlling
entity (c)
Legal
domicite
(state or
foreign Primary activity 9 Name, address, and EIN of related organization

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

(f) (g) (h) Share of total Share of Percentage end-of-year ownership assets		
(e) pe of entity corp, S corp or trust)		
(G) (d) Legal domicile Direct controlling Ty (S.ciate or foreign country)		
(c) Legal domicile (state or foreign country)		
(b) Primary activity		
(a) Name, address, and EIN of related organization		

Schedule R (Form 990) 2011

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Schedule R (Form 990) 2011 ASSOCIATION OF SMALL BUSINESS DEV. CENTR

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990, Part IV, line 34, 35, 35a
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Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				×	Yes	ہ ا
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more re	elated organizations listed	In Parts II-IV?			
a Receipt of (i) interest (ii) annuties (iii) royalties or (iv) rent from a controlled entity			:	1 a	×	54
 b Gift, grant, or capital contribution to related organization(s) 			: .	1b	×	54
c Gift, grant, or capital contribution from related organization(s)	:			10	×	5 .4
d Loans or loan guarantees to or for related organization(s)				1d	×	
	•	•		┝	*	۰
	•		•	ש	1	اه
f Sale of assets to related organization(s)				+	<u>×</u>	M
a Purchase of assets from related organization(s)				: 5	×	
		•		2 +	* ×	۔ ا
				;	: ×	ا ا
					1	4
j Lease of facilities, equipment, or other assets from related organization(s)				;=	×	W
k Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			¥	×	u l
I Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			=	×	J.
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoi			ᄩ	×	1
n Sharing of paid employees with related organization(s)	·	: : : : : : : : : : : : : : : : : : : :		£	×	
 Reimbursement paid to related organization(s) for expenses 				9	×	u
b Reimbursement baid by related organization(s) for expenses				10	X	
					<u> </u>	
 Qther transfer of cash or property to related organization(s) Cther transfer of cash or property from related organization(s) 				14	××	اماما
s for infor	who must complete th	ils line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
ASSOCIATION OF SMALL BUSINESS DEVELOPMENT	Q	3.450.	AMT OF FUNDS ADVANCED			1
ASSOC						[
(2) CTRS FOUNDATION	×	500.	.ESTIMATE			l
(3)						
(4)						-
						1
(9)	c					1:
132163 01-23-12	28		Schedule	Schedule R (Form 990) 2011	90) 201	<u>-</u>

Page 4

Part VI 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) Name, address, and EIN of entrty	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax, under section 512-51	(e) Are all partners sec 501(c)(3) orgs ? 4) Yes No	(f) Share of total	(g) Share of end-of-year assets	(h) Disproportionate adfocations? Ves No	(h) (i) (j) (k) Dispropor- Dispr	General or managing partner?	(k) Percentage ownership
					<u>.</u> ,			i		

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Schedule R (Form 990) 2011

Schedule R	(Form 990) 2011	ASSOCIATION	OF SMALL	BUSINESS	DEV.	CENTR01-0365191	Page 5
Part VII	(Form 990) 2011 Supplemental Infor	mation					
	Complete this part to prov	/ide additional informatio	n for responses to	auestions on Sch	nedule R (4	see instructions)	
			responses to	- questions on our	iouule n (S	see arandenoria)	
							
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