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Form 990

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

2011

Open to Public
Inspection

A For the 2011 calendar year, or tax year beginning JUL 1, 2011 and ending JUN 30, 2012

<input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization ASSOCIATION OF AMERICAN VETERINARY MEDICAL COLLEGES		D Employer identification number 36-6144553		
	Doing Business As				
	Number and street (or P.O. box if mail is not delivered to street address) 1101 VERNONT AVE. NW		Room/suite 301	E Telephone number 202-371-9195	
	City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005-3521				G Gross receipts \$ 3,494,017.
	F Name and address of principal officer ANDREW MACCABE SAME AS C ABOVE				H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)
J Website: ► WWW.AAVMC.ORG				H(c) Group exemption number ►	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►				L Year of formation: 1997 M State of legal domicile: DC	

Part I Summary

2013 Activities & Governance APR 09 Revenue SCANNED Expenses Net Assets or Fund Balances	1 Briefly describe the organization's mission or most significant activities SEE PART III, LINE 1.	
	2 Check this box ► <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets	
	3 Number of voting members of the governing body (Part VI, line 1a) 3 11	
	4 Number of independent voting members of the governing body (Part VI, line 1b) 4 11	
	5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) 5 14	
	6 Total number of volunteers (estimate if necessary) 6 11	
	7a 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.	
	8 Contributions and grants (Part VIII, line 1b) 8 102,994. 77,673.	
	9 Program service revenue (Part VIII, line 2g) 9 3,256,293. 3,409,061.	
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 3,925. 2,095.	
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11a) 11 35,611. 5,188.	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 3,398,823. 3,494,017.		
13 Grants and similar amounts paid (Part IX, column (A), lines 13) 13 23,048. 28,570.		
14 Benefits paid to or for members (Part IX, column (A), line 4) 14 0. 0.		
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 1,648,977. 1,684,163.		
16a Professional fundraising fees (Part IX, column (A), line 11e) 16a 0. 0.		
b Total fundraising expenses (Part IX, column (D), line 25) ► 0.		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 17 1,899,823. 1,923,816.		
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 3,571,848. 3,636,549.		
19 Revenue less expenses Subtract line 18 from line 12 19 -173,025. -142,532.		
20 Total assets (Part X, line 16) 20 2,933,549. 2,863,582.		
21 Total liabilities (Part X, line 26) 21 1,128,364. 1,200,929.		
22 Net assets or fund balances. Subtract line 21 from line 20 22 1,805,185. 1,662,653.		

Part II Signature Block

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

Sign Here <input type="checkbox"/>	Signature of officer <i>Andrew McCabe</i>		Date <i>05/16/2013</i>
	ANDREW MACCABE, EXECUTIVE DIRECTOR		
Type or print name and title			

Paid Preparer Use Only	Print/Type preparer's name <i>Terr. McKnight</i>	Preparer's signature <i>Terr. McKnight</i>	Date <i>3/8/13</i>	Check if self-employed <input type="checkbox"/>	PTIN 52-1392008
	Firm's name Firm's address	Firm's EIN 52-1392008			
	4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930	Phone no. (301) 951-9090			

May the IRS discuss this return with the preparer shown above? (see instructions)

 Yes No

9816 Q

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

AAVMC PROVIDES LEADERSHIP FOR AND PROMOTES EXCELLENCE IN ACADEMIC VETERINARY MEDICINE TO PREPARE THE VETERINARY WORKFORCE WITH THE SCIENTIFIC KNOWLEDGE AND SKILLS REQUIRED TO MEET SOCIETAL NEEDS THROUGH THE PROTECTION OF ANIMAL HEALTH, THE RELIEF OF ANIMAL

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the 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 (Code _____) (Expenses \$ **862,085.** including grants of \$ _____) (Revenue \$ **2,442,902.**)

THE AAVMC'S VETERINARY MEDICAL COLLEGE APPLICATION SERVICE (VMCAS) FACILITATES ENTRY INTO VETERINARY MEDICAL SCHOOL BY SERVING AS THE CENTRAL DISTRIBUTION, COLLECTION, AND PROCESSING SERVICE FOR APPLICATIONS TO VETERINARY MEDICAL COLLEGES. THIS FOUNDATIONAL FUNCTION UNDERPINS OUR EFFORTS TO DEVELOP THE VETERINARY WORKFORCE OF THE FUTURE AND PROVIDE THEM WITH THE SCIENTIFIC KNOWLEDGE AND SKILLS REQUIRED TO MEET SOCIETAL NEEDS, PROTECT ANIMAL HEALTH, RELIEVE ANIMAL SUFFERING, CONSERVE ANIMAL RESOURCES, PROMOTE PUBLIC HEALTH, PROMOTE ECOSYSTEM HEALTH, AND ADVANCE MEDICAL KNOWLEDGE.

4b (Code _____) (Expenses \$ **537,699.** including grants of \$ _____) (Revenue \$ _____)

THE AAVMC SUPPORTS THE EDUCATION AND THE PREPARATION OF A HIGH-CALIBER WORKFORCE THAT CAN MEET SOCIETY'S FUTURE NEEDS. THE ROLE OF ACADEMIC VETERINARY MEDICINE IS TO PREPARE FUTURE VETERINARIANS WHO WILL MEET SOCIETY'S NEEDS IN THAT INCREASINGLY IMPORTANT REALM WHERE THE HEALTH AND WELFARE OF ANIMALS, PEOPLE, AND THE ECOSYSTEM INTERSECT. THE AAVMC MARKED A MAJOR MILESTONE WITH THE PUBLICATION OF THE NORTH AMERICAN VETERINARY MEDICAL EDUCATION CONSORTIUM'S (NACMEC'S) REPORT ON THE FUTURE OF ACADEMIC VETERINARY MEDICINE. THE AAVMC CONVENED NAVMEC FOR THE PURPOSE OF ENSURING THAT ACADEMIC VETERINARY MEDICINE CONTINUES TO MEET EVOLVING SOCIETAL NEEDS - FROM COMPANION ANIMAL MEDICINE TO FOOD SECURITY AND SAFETY, PUBLIC HEALTH, BIOMEDICAL RESEARCH, AND MORE. THE REPORT, "ROADMAP FOR VETERINARY MEDICAL EDUCATION IN THE 21ST CENTURY:

4c (Code _____) (Expenses \$ **431,664.** including grants of \$ _____) (Revenue \$ **135,219.**)

AS A REFLECTION OF ITS COMMITMENT TO EDUCATION, THE AAVMC HOSTS MEETINGS, SYMPOSIUMS AND CONFERENCES FOR CONSTITUENTS AND STAKEHOLDERS. THESE EDUCATIONAL MEETINGS AND CONFERENCES PROMOTE BEST PRACTICES IN VETERINARY MEDICAL EDUCATION, DISSEMINATE INFORMATION ABOUT VETERINARY MEDICAL EDUCATION, INFORM STUDENTS ABOUT VETERINARY CAREERS, FACILITATE COMMUNICATION WITH LEGISLATORS AND OTHER HIGH-LEVEL DECISION MAKERS, PROMOTE DIVERSITY, ADVANCE RESEARCH, FOSTER TEACHING AND LEADERSHIP SKILLS, AND CHAMPION THE IMPORTANCE OF VETERINARY MEDICAL EDUCATION.

4d Other program services (Describe in Schedule O)

(Expenses \$ **1,385,315.** including grants of \$ **28,570.**) (Revenue \$ **834,379.**)

4e Total program service expenses ► **3,216,763.**

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132002
02-09-12

SEE SCHEDULE O FOR CONTINUATION(S)

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Part IV Checklist of Required Schedules

- 1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?
If "Yes," complete Schedule A
- 2 Is the organization required to complete *Schedule B, Schedule of Contributors*?
- 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*
- 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*
- 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*
- 6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*
- 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*
- 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*
- 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*
- 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*
- 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable
 - a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*
 - 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*
 - 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*
 - 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*
 - e Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part 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*
- 12a Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*
 - b Was the organization included in consolidated, independent audited financial statements for the tax year?
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional
- 13 Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*
- 14a Did the organization maintain an office, employees, or agents outside of the United States?
 - b 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*
- 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*
- 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*
- 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*
- 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*
- 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*
- 20a Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*
 - b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	Yes	No
1	X	
2	X	
3		X
4	X	
5		X
6		X
7		X
8		X
9		X
10		X
11a	X	
11b		X
11c		X
11d		X
11e	X	
11f	X	
12a	X	
12b		X
13		X
14a		X
14b		X
15		X
16		X
17		X
18		X
19		X
20a		X
20b		

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Part IV Checklist of Required Schedules (continued)

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

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

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

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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

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

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I

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

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

28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV

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

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations?
If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

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

34 Was the organization related to any tax-exempt or taxable entity?
If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

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

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

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

	Yes	No
21	<input checked="" type="checkbox"/>	
22		<input checked="" type="checkbox"/>
23	<input checked="" type="checkbox"/>	
24a		<input checked="" type="checkbox"/>
24b		
24c		
24d		
25a		<input checked="" type="checkbox"/>
25b		<input checked="" type="checkbox"/>
26		<input checked="" type="checkbox"/>
27		<input checked="" type="checkbox"/>
28a		<input checked="" type="checkbox"/>
28b		<input checked="" type="checkbox"/>
28c		<input checked="" type="checkbox"/>
29		<input checked="" type="checkbox"/>
30		<input checked="" type="checkbox"/>
31		<input checked="" type="checkbox"/>
32		<input checked="" type="checkbox"/>
33		<input checked="" type="checkbox"/>
34		<input checked="" type="checkbox"/>
35a		<input checked="" type="checkbox"/>
35b		<input checked="" type="checkbox"/>
36		<input checked="" type="checkbox"/>
37		<input checked="" type="checkbox"/>
38		<input checked="" type="checkbox"/>

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Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	31
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	14
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</i>	2b	X
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country: ► See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	5a	X
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c	
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	6a	X
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?	6b	
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	7a	X
7 Organizations that may receive deductible contributions under section 170(c).	7b	
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?	7c	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7d	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7e	X
d If "Yes," indicate the number of Forms 8282 filed during the year	7f	X
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7g	
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7h	
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	8	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	9a	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations Did the supporting N/A organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9b	
9 Sponsoring organizations maintaining donor advised funds.	N/A	
a Did the organization make any taxable distributions under section 4966?	N/A	N/A
b Did the organization make a distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter	N/A	
a Initiation fees and capital contributions included on Part VIII, line 12	10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter	N/A	
a Gross income from members or shareholders	11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	N/A	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	N/A	
a Is the organization licensed to issue qualified health plans in more than one state?		
<i>Note. See the instructions for additional information the organization must report on Schedule O.</i>		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

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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

	1a	11	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year 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 O.	1a	11		
1b Enter the number of voting members included in line 1a, above, who are independent	1b	11		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	X		
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	X		
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	X		
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5	X		
6 Did the organization have members or stockholders?	6	X		
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	X		
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	X		
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?	8a	X		
b Each committee with authority to act on behalf of the governing body?	8b	X		
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	X		

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

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X
b Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	X
13 Did the organization have a written whistleblower policy?	13	X
14 Did the organization have a written document retention and destruction policy?	14	X
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	15a	X
b Other officers or key employees of the organization	15b	X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	X

Section 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 (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
<input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial 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 records of the organization. ► MARK STODTER - (202) 371-9195
1101 VERMONT AVE. NW, NO. 301, WASHINGTON, DC 20005-3521

**ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES**

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

• List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

• List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(1) GERHARDT SCHURIG <u>PRESIDENT</u>	1.00	X		X			0.	0.	0.
(2) WILLIE REED <u>PAST-PRESIDENT</u>	1.00	X		X			0.	0.	0.
(3) DEBORAH KOCHVAR <u>PRESIDENT-ELECT</u>	1.00	X		X			0.	0.	0.
(4) STUART W.J. REID <u>SECRETARY</u>	0.50	X		X			0.	0.	0.
(5) PETER HAYNES <u>TREASURER</u>	0.50	X		X			0.	0.	0.
(6) SHEILA ALLEN <u>AT-LARGE, U.S. COLLEGES</u>	0.50	X					0.	0.	0.
(7) ALASTAIR CRIBB <u>AT-LARGE, CANADIAN COLLEGES</u>	0.50	X					0.	0.	0.
(8) CHRISITIAN ABEE <u>AT-LARGE, DEPT. OF COMPARATIVE MED.</u>	0.50	X					0.	0.	0.
(9) DAVID HARDIN <u>AT-LARGE, DEPT. OF VET. SCIENCE</u>	0.50	X					0.	0.	0.
(10) TREVOR AMES <u>AT-LARGE, APLU LIAISON</u>	0.50	X					0.	0.	0.
(11) JOSH YONAS <u>AT-LARGE, SAVMA LIAISON</u>	0.50	X					0.	0.	0.
(12) MARGUERITE PAPPAIOANOU <u>EXEC. DIRECTOR (THROUGH 10/31/11)</u>	40.00			X			248,217.	0.	47,647.
(13) ANDREW MACCABE <u>EXECUTIVE DIRECTOR (BEGIN 05/15/12)</u>	40.00			X			0.	0.	0.
(14) LISA GREENHILL <u>ASTE E.D. OF RESEARCH & DIVERSITY</u>	40.00				X		106,073.	0.	20,432.
(15) TED MASHIMA <u>ASTE E.D. OF ACADEMIC/RESEARCH</u>	40.00				X		128,010.	0.	22,626.
(16) JOHN ROANE <u>CHIEF OPERATING OFFICER</u>	40.00				X		138,102.	0.	23,635.
(17) HARRY CHADDOCK <u>DEPUTY DIRECTOR</u>	40.00				X		165,517.	0.	26,377.

132007 01-23-12

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ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES

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Part VIII Statement of Revenue

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f ►	1a 1b 1c 1d 1e 1f 77,673.	77,673.		
Program Service Revenue	2 a APPLICATION FEES b MEMBERSHIP DUES c ANNUAL MEETINGS / EVENT d PUBLICATIONS e JOBS BOARD f All other program service revenue g Total. Add lines 2a-2f ►	Business Code 900099 900099 900099 900099 900099	2442902. 763,487. 135,219. 64,555. 2,898.	2442902. 763,487. 135,219. 64,555. 2,898.	
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ► 9 a Gross income from gaming activities. See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities ► 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory ► Miscellaneous Revenue 11 a CONTRACT FEES b MISCELLANEOUS c d All other revenue e Total. Add lines 11a-11d ► 12 Total revenue. See instructions. ►	(i) Real (ii) Personal (i) Securities (ii) Other a b a b a b a b a b a b Business Code 900099 900099	2,095. 2,095.		

**ASSOCIATION OF AMERICAN VETERINARY
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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)

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

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	28,570.	28,570.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, 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	194,878.	155,902.	38,976.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,088,991.	843,703.	245,288.	
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	104,093.	80,630.	23,463.	
9 Other employee benefits	212,565.	165,283.	47,282.	
10 Payroll taxes	83,636.	65,085.	18,551.	
11 Fees for services (non-employees)				
a Management				
b Legal	110,461.		110,461.	
c Accounting	38,195.		38,195.	
d Lobbying	15,000.	15,000.		
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	311,377.	145,622.	165,755.	
12 Advertising and promotion				
13 Office expenses	135,888.	95,885.	40,003.	
14 Information technology	338,029.	269,140.	68,889.	
15 Royalties				
16 Occupancy	224,157.		224,157.	
17 Travel	41,588.	41,588.		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	204,794.	204,794.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	49,417.		49,417.	
23 Insurance	16,716.		16,716.	
24 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 O.)				
a GENERAL & ADMIN ALLOC.	0.	693,232.	-693,232.	
b PUBLICATION EXPENSES	90,408.	90,408.		
c TEMPORARY SERVICES	78,221.	78,221.		
d VETERINARY MEDICAL EDU.	68,451.	68,451.		
e All other expenses	201,114.	175,249.	25,865.	
25 Total functional expenses Add lines 1 through 24e	3,636,549.	3,216,763.	419,786.	0.
26 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)

**ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES**

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Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest bearing		1	
	2 Savings and temporary cash investments	2,305,468.	2	2,296,728.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	360,110.	4	311,820.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	50,297.	9	55,218.
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 670,962.		
	b Less: accumulated depreciation	10b 499,494.	10c	171,468.
	11 Investments - publicly traded securities		11	
	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	18,348.	15	28,348.
	16 Total assets. Add lines 1 through 15 (must equal line 34)	2,933,549.	16	2,863,582.
Liabilities	17 Accounts payable and accrued expenses	220,714.	17	225,936.
	18 Grants payable		18	
	19 Deferred revenue	785,881.	19	862,944.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	112,049.
	26 Total liabilities. Add lines 17 through 25	1,128,364.	26	1,200,929.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	1,774,906.	27	1,630,766.
	28 Temporarily restricted net assets	30,279.	28	31,887.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	1,805,185.	33	1,662,653.
	34 Total liabilities and net assets/fund balances	2,933,549.	34	2,863,582.

Form 990 (2011)

ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES

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Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	3,494,017.
2 Total expenses (must equal Part IX, column (A), line 25)	2	3,636,549.
3 Revenue less expenses. Subtract line 2 from line 1	3	-142,532.
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,805,185.
5 Other changes in net assets or fund balances (explain in Schedule O)	5	0.
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	1,662,653.

Part XII Financial Statements and Reporting

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

1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?
b Were the organization's financial statements audited by an independent accountant?
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
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.

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

Form 990 (2011)

Department of the Treasury
Internal Revenue Service

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.

4947(a)(1) nonexempt charitable trust.

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

Name of the organization ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES

Employer identification number
36-6144553

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?

(ii) A family member of a person described in (i) above?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

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

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

1 HAF

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

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2010 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		
b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		
17a 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
b 10% -facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

ASSOCIATION OF AMERICAN VETERINARY

Schedule A (Form 990 or 990-EZ) 2011 MEDICAL COLLEGES

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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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	506,484.	906,809.	110,021.	102,994.	77,673.	1,703,981.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	2,586,743.	2,532,221.	3,250,723.	3,256,293.	3,409,061.	15,035,041.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	3,093,227.	3,439,030.	3,360,744.	3,359,287.	3,486,734.	16,739,022.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
8 Public support (Subtract line 7c from line 6)						16,739,022.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6	3,093,227.	3,439,030.	3,360,744.	3,359,287.	3,486,734.	16,739,022.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	76,035.	33,150.	26,971.	4,546.	2,095.	142,797.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	76,035.	33,150.	26,971.	4,546.	2,095.	142,797.
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.)	17,589.	33,779.	24,104.	34,990.	5,188.	115,650.
13 Total support (Add lines 9, 10c, 11, and 12)	3,186,851.	3,505,959.	3,411,819.	3,398,823.	3,494,017.	16,997,469.

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

15 Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	15	98.48	%
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	98.07	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	17	.84	%
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	1.27	%

19a 33 1/3% support tests - 2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► b 33 1/3% support tests - 2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ► 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

ASSOCIATION OF AMERICAN VETERINARY

Schedule C (Form 990 or 990-EZ) 2011 MEDICAL COLLEGES

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Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768
(election under section 501(h)).A Check ► if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).B Check ► if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	36,000.													
c	Total lobbying expenditures (add lines 1a and 1b)	36,000.													
d	Other exempt purpose expenditures	3,600,549.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	3,636,549.													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns.	331,827.													
<table border="1"> <tr> <td>If the amount on line 1e, column (a) or (b) is:</td> <td>The lobbying nontaxable amount is:</td> </tr> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	82,957.													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2a Lobbying nontaxable amount	283,215.	322,098.	328,592.	331,827.	1,265,732.
b Lobbying ceiling amount (150% of line 2a, column(e))					1,898,598.
c Total lobbying expenditures	100,000.	212,922.	108,000.	36,000.	456,922.
d Grassroots nontaxable amount	70,804.	80,525.	82,148.	82,957.	316,434.
e Grassroots ceiling amount (150% of line 2d, column (e))					474,651.
f Grassroots lobbying expenditures	25,000.		18,000.		43,000.

Schedule C (Form 990 or 990-EZ) 2011

ASSOCIATION OF AMERICAN VETERINARY

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)).

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j 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)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

- 1** Were substantially all (90% or more) dues received nondeductible by members?
- 2** Did the organization make only in-house lobbying expenditures of \$2,000 or less?
- 3** Did the organization agree to carry over lobbying and political expenditures from the prior year?

	Yes	No
1		
2		
3		

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

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

1	
2a	
2b	
2c	
3	
4	
5	

Part IV **Supplemental Information**

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

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

2011Open to Public
Inspection

Name of the organization	ASSOCIATION OF AMERICAN VETERINARY MEDICAL COLLEGES	Employer identification number 36-6144553
--------------------------	--	--

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

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

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

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
2a	
2b	
2c	
2d	

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8

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

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

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

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

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

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

b Assets included in Form 990, Part X ► \$ _____

**ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES**

Schedule D (Form 990) 2011

36-6144553 Page 2

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

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

- a Public exhibition
- b Scholarly research
- c Preservation for future generations

d Loan or exchange programs

e Other _____

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection?

Yes No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

Yes No

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

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?

Yes No

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

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

- 1a Beginning of year balance
- b Contributions
- c Net investment earnings, gains, and losses
- d Grants or scholarships
- e Other expenditures for facilities and programs
- f Administrative expenses
- g End of year balance

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a					
b					
c					
d					
e					
f					
g					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ► _____ %

b Permanent endowment ► _____ %

c Temporarily restricted endowment ► _____ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

by:

- (i) unrelated organizations
- (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land				
b	Buildings				
c	Leasehold improvements	176,172.	63,001.	113,171.	
d	Equipment	485,375.	427,702.	57,673.	
e	Other	9,415.	8,791.	624.	

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ► 171,468.

Schedule D (Form 990) 2011

**ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES**

Schedule D (Form 990) 2011

36-6144553 Page 3

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

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

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DEFERRED RENT ABATEMENT	112,049.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ►	112,049.

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

132053
01-23-12

Schedule D (Form 990) 2011

**ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES**

Schedule D (Form 990) 2011

36-6144553 Page 4

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

1	3,494,017.
2	3,636,549.
3	-142,532.
4	
5	
6	
7	
8	
9	
10	-142,532.

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

1	3,494,017.
2	
a	
b	
c	
d	
e	
2e	0.
3	3,494,017.
4	
a	
b	
c	
4a	
4b	
4c	0.
5	3,494,017.

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

1	3,636,549.
2	
a	
b	
c	
d	
e	
2e	0.
3	3,636,549.
4	
a	
b	
c	
4a	
4b	
4c	0.
5	3,636,549.

Part XIV Supplemental Information

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

PART X, LINE 2: IN JUNE 2006, THE FINANCIAL ACCOUNTING STANDARDS BOARD

(FASB) RELEASED FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES. FOR THE YEAR ENDED JUNE 30, 2012, AAVMC HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10 AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FEDERAL FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS

Part XIV **Supplemental Information** *(continued)*

AFTER IT IS FILED.

ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES

MEDICAL COLLEGES

Schedule I (Form 990) (2011)

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
---------------------------------	--------------------------	--------------------------	-----------------------------------	---	--

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

SCHEDULE I, PART I, LINE 2: THE ORGANIZATION MAKES GRANTS OF SPECIFIC SUPPORT TO EVENTS RELATED TO ITS EXEMPT PURPOSE. AN EVALUATION IS CONDUCTED AFTER THE CONCLUSION OF THE EVENT TO DETERMINE ITS EFFICACY AND VALUE TO THE PARTICIPANTS. BASED ON THE RESULTS OF THIS EVALUATION, THE ORGANIZATION DETERMINES WHETHER CONTINUED SUPPORT WILL BE PROVIDED.

SCHEDULE J
(Form 990)

Department of the Treasury
Internal Revenue Service

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

2011

Open to Public
Inspection

Name of the organization

**ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES**

Employer identification number
36-6144553

Part I Questions Regarding Compensation

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.

<input type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)

1b 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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input type="checkbox"/> Compensation survey or study
<input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> 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:

- Receive a severance payment or change-of-control payment?
- Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- Participate in, or receive payment from, an equity-based compensation arrangement?

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

- The organization?
- Any related organization?

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 contingent on the net earnings of

- The organization?
- Any related organization?

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 not described in lines 5 and 6? If "Yes," describe in Part III

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

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

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

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 (ii)
 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.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 MARGUERITE PAPPATIOANOU	(i) 214,299.	0.	33,918.	24,822.	22,825.	295,864.	0.
2 TED MASHIMA	(i) 127,909.	0.	0.	0.	0.	0.	0.
3 JOHN ROANE	(i) 138,001.	101.	0.	12,801.	9,825.	150,636.	0.
4 HARRY CHADDOCK	(i) 165,416.	101.	0.	13,810.	9,825.	161,737.	0.
5	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
6	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
7	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
8	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
9	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
10	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
11	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
12	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
13	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
14	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
15	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)
16	(i)	(ii)	(iii)	(i)	(ii)	(i)	(ii)

ASSOCIATION OF AMERICAN VETERINARY
MEDICAL COLLEGES

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 4A: OVER A TWO MONTH PERIOD MARGUERITE PAPPAIOANOU

**RECEIVED A SEVERANCE PAYMENT OF \$53,248 THAT CONSISTED OF \$33,918 IN OTHER
COMPENSATION, \$3,392 IN RETIREMENT CONTRIBUTIONS AND \$15,938 IN NON-TAXABLE
BENEFITS.**

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public
Inspection

Name of the organization	ASSOCIATION OF AMERICAN VETERINARY MEDICAL COLLEGES	Employer identification number 36-6144553
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FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
SUFFERING, THE CONSERVATION OF ANIMAL RESOURCES, THE PROMOTION OF
PUBLIC HEALTH, AND THE ADVANCEMENT OF MEDICAL KNOWLEDGE.

AAVMC PURSUES ITS MISSION BY PROVIDING LEADERSHIP IN:

- ADVOCATING ON BEHALF OF ACADEMIC VETERINARY MEDICINE;
- SERVING AS A CATALYST AND CONVENER ON ISSUE OF IMPORTANCE TO ACADEMIC
VETERINARY MEDICINE;
- PROVIDING INFORMATION, KNOWLEDGE, AND SOLUTIONS TO SUPPORT MEMBER'S
WORK;
- FACILITATING ENROLLMENT IN VETERINARY MEDICAL SCHOOLS AND COLLEGES;

AND

- BUILDING GLOBAL PARTNERSHIPS AND COALITIONS TO ADVANCE OUR COLLECTIVE
GOALS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
RESPONSIVE, COLLABORATIVE, FLEXIBLE", RESULTED FROM SEVERAL YEARS OF
INTENSIVE WORK FROM A BROAD GROUP OF STAKEHOLDERS IN VETERINARY
MEDICINE. THE REPORTED STRESSES THE IMPORTANCE OF INTEGRATING CORE
COMPETENCIES WITH ADMISSION AND CURRICULAR DEVELOPMENT, STANDARDS OF
ACCREDITATION, NATIONAL AND STATE BOARD TESTING, AND STATE LICENSURE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
GOVERNMENT
EXPENSES \$ 350,090. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

DIVERSITY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
132211
01-23-12

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

Name of the organization	ASSOCIATION OF AMERICAN VETERINARY MEDICAL COLLEGES	Employer identification number
		36-6144553

EXPENSES \$ 318,762. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

JOURNAL OF VETERINARY MEDICAL EDUCATION

EXPENSES \$ 274,349. INCLUDING GRANTS OF \$ 0. REVENUE \$ 64,555.

RESEARCH

EXPENSES \$ 132,852. INCLUDING GRANTS OF \$ 10,000. REVENUE \$ 0.

RECRUITMENT

EXPENSES \$ 86,054. INCLUDING GRANTS OF \$ 3,570. REVENUE \$ 0.

CAPACITY

EXPENSES \$ 67,195. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

ANIMAL WELFARE

EXPENSES \$ 64,961. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

LEADERSHIP

EXPENSES \$ 56,618. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

GLOBAL COLLABORATIONS

EXPENSES \$ 34,434. INCLUDING GRANTS OF \$ 15,000. REVENUE \$ 0.

OTHER PROGRAMS

EXPENSES \$ 0. INCLUDING GRANTS OF \$ 0. REVENUE \$ 769,824.

FORM 990, PART VI, SECTION A, LINE 4: THE ORGANIZATION REVISED ITS

GOVERNING DOCUMENTS TO INCLUDE THE CHANGE IN THE COMPOSITION OF THE BOARD

132212
01-23-12

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

Name of the organization	ASSOCIATION OF AMERICAN VETERINARY MEDICAL COLLEGES	Employer identification number
		36-6144553

OF DIRECTORS AND THE ROLE OF MEMBERS.

FORM 990, PART VI, SECTION A, LINE 6: AAVMC IS A NONPROFIT, INSTITUTIONAL MEMBERSHIP-BASED ORGANIZATION. QUALIFIED MEMBERS MUST PAY A FEE TO JOIN THE ORGANIZATION. EXCESS REVENUES ARE NOT DISTRIBUTED TO MEMBERSHIP. THE ORGANIZATION HAS TWO MAIN CLASSES OF MEMBERSHIP; VOTING AND NON-VOTING. THE SUB-CLASSES OF MEMBERSHIP ARE:

VOTING - US COLLEGES

VOTING - INTERNATIONAL COLLEGES

VOTING - DEPT OF VETERINARY SCIENCE

VOTING - DEPT OF COMPARATIVE MEDICINE

NON-VOTING - AFFILIATE MEMBERS

FORM 990, PART VI, SECTION A, LINE 7A: THE ORGANIZATION'S MEMBERS ELECT THE GOVERNING BODY.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 WAS PREPARED BY THE OUTSIDE ACCOUNTANTS. THE CHIEF OPERATING OFFICER PROVIDED THE FORM 990 TO THE BOARD OF DIRECTORS IN SUFFICIENT TIME FOR BOARD REVIEW AND TO REQUEST ADDITIONAL INFORMATION, IF NEEDED, BEFORE THE FORM WAS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION DISTRIBUTES A CONFLICT OF INTEREST (COI) FORM AND COPY OF THE COI POLICY TO ALL OFFICERS, DIRECTORS, EMPLOYEES, AND VOLUNTEERS ON AN ANNUAL BASIS. ALL COI FORMS ARE REQUIRED TO BE FILLED OUT AND RETURNED TO THE ORGANIZATION PRIOR TO OFFICER, DIRECTOR, EMPLOYEE, OR VOLUNTEER'S PARTICIPATION IN ORGANIZATION ACTIVITIES. THE COI COMPLIANCE OFFICER (AS NAMED IN THE COI POLICY) DISCUSSES REPORTED CONFLICTS OF INTEREST WITH THE INDIVIDUAL. COI POLICY

Name of the organization	ASSOCIATION OF AMERICAN VETERINARY MEDICAL COLLEGES	Employer identification number
		36-6144553

PROVIDES FOR A SEPARATE MECHANISM FOR ALL OFFICERS, DIRECTORS, EMPLOYEES, AND/OR VOLUNTEERS TO REPORT UNREPORTED COI VIOLATIONS TO THE COI COMPLIANCE OFFICER FOR INVESTIGATION AND RESOLUTION IN ACCORDANCE WITH THE COI POLICY.

FORM 990, PART VI, SECTION B, LINE 15: THE EXECUTIVE DIRECTOR'S (E.D.) SALARY IS REVIEWED ON AN ANNUAL BASIS. SALARY DATA FROM COMPARABLE ORGANIZATIONS, INVOLVING EMPLOYEES WITH COMPARABLE DUTIES, ARE COLLECTED AND REVIEWED. DOCUMENTATION OF THIS APPROVAL IS CONTAINED IN THE MINUTES OF THE BOARD OF DIRECTORS' BUDGET APPROVAL MEETING.

SALARIES ARE REVIEWED ON AN ANNUAL BASIS. SALARY DATA FROM COMPARABLE ORGANIZATIONS, INVOLVING EMPLOYEES WITH COMPARABLE DUTIES, ARE COLLECTED AND REVIEWED. THE E.D. REVIEWS SALARY DATA AND PROVIDES SUGGESTED SALARY LEVELS TO THE BOARD OF DIRECTORS FOR REVIEW AND BUDGET APPROVAL. DOCUMENTATION OF THIS APPROVAL IS CONTAINED IN THE MINUTES OF THE BOARD OF DIRECTORS' BUDGET APPROVAL MEETING.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS ARTICLES OF INCORPORATION AND BYLAWS AVAILABLE TO THE PUBLIC ON ITS WEB SITE. THE ORGANIZATION MAKES LIMITED REVENUE AND EXPENSE FIGURES AVAILABLE IN ITS ANNUAL REPORT, WHICH IS AVAILABLE ON ITS WEB SITE. THE ORGANIZATION MAKES ITS CONFLICT OF INTEREST POLICY, WHISTLEBLOWER POLICY, DOCUMENT RETENTION AND DESTRUCTION POLICY, AND ALL OTHER POLICIES ADOPTED BY THE BOARD OF DIRECTORS OR THE ASSEMBLY, AVAILABLE ON ITS WEBSITE.