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DLN: 93493193006003

Form **990**

Department of the Treasury

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)

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

OMB No 1545-0047

Open to Public Inspection

Internal Revenu	ie Service	F The orga	mzacion may nav	re to use a copy	or this return to :	sacisty s	state reporting	requirein	ents	Inspection
A For the	2011 ca		ortax year begin	ning 09-01-2011	and ending 08	-31-201	2	D Emplo	ver id	entification number
B Check if a		C Name of orga ASAE FOUNDA						D Emplo	yer iu	entification number
Address c	change	Doing Busine	cc Ac					52-13 E Teleph		
Name cha	ange	Doing Busine.	33 73					•		
Initial reti	urn	Number and	street (or PO box i	f mail is not delivere	d to street address)	Room/su	ııte	(202)		
Terminate	ed	1575 I STREE	ET NW		·			G Gross re	eceipts	\$ 6,824,302
Amended	l return	City or town,	state or country, ar	nd ZIP + 4						
 Applicatio	on pendina	WASHINGTON	1, DC 20005							
	,	F Name	and address of p	rincipal officer			11/-> 7 11			•
			GRAHAM IV	incipal officer			H(a) Is th affilia		retur	n for □Yes ▼No
			TREET NW GTON,DC 2000) E						
		WASHING	310N,DC 2000	75			H(b) Are al			
Tax-exer	mpt status	▼ 501(c)(3)	501(c)()	¶(insert no.) [4947(a)(1) or \Box 5	27	I _	o," attach ıp exempt		(see instructions)
	<u>.</u>			. (H(c) Grou	ip exempt	1011 110	illiber F
		/W ASAECEN					<u> </u>			
		Corporation	Trust Associa	ntion Other 🕨			L Year of fo	rmation 19	83 I	M State of legal domicile DC
Part I	Sum	mary								
	THEAS	AE FOUNDAT	ganization's mis TION IS PRIMAF ARCH IN AREAS	RILY FOCUSED	ONADVANCIN	G KNOV				MANAGEMENT BY DEVELOPING
governance 5			PROFESSIONA NG ASSOCIATI				OF ASSOCIA	M NOITA	ANAG	GEMENT INTO THE
<u> </u>										
¥										
<u>ت</u> 2	Check th	nis box 🛏 if	the organization	discontinued its	operations or di	sposed	of more than 2	5% of its	net a	ssets
Activities &	Number	of voting mem	nbers of the gove	rning body (Part	VI, line 1a) .				3	10
ૄ 4	4 Number of independent voting members of the governing body (Part VI, line 1b) .								4	0
ਹ ਿ 5	Total nur	mber of indivi	duals employed i	ın calendar year	2011 (Part V , lır	ne 2a)			5	0
⁴ 6	Total nur	mber of volun	teers (estımate ı	fnecessary) .					6	1,400
7a	Total uni	related busine	ess revenue from	Part VIII, colur	mn (C), line 12				7a	0
ь	Net unre	lated busines	s taxable income	e from Form 990	-T, line 34 .	•			7b	0
							Prio	r Year		Current Year
8	9 Program service revenue (Part VIII, line 2g)						514,		579	522,233
Ĕ 9								543,2	217	116,737
9 10								2,015,3	_	1,688,620
_ 11								128,0	032	155,376
12			lines 8 through :				e	3,201,1	174	2,482,966
13			amounts paid (Pa						0	0
14			or members (Par						0	0
15			pensation, emplo							
8	5-10)		, , ,	,	,	••			0	0
Session de la companya de la company	Profes	sıonal fundraı	ısıng fees (Part I	X, column (A), lı	ne 11e)				0	0
<u>ਜੋ</u> ਾ	Total fu	ndraising expens	ses (Part IX, column	(D), line 25) ► 373,	005					
17	Other	expenses (Pa	art IX, column (A), lines 11a-11d	d,11f-24e) .			2,076,9	913	1,852,446
18		·='	d lınes 13–17 (n	· ·		-		2,076,9	913	1,852,446
19	Reven	ue less exper	nses Subtract lir	ne 18 from line 1	2			1,124,2		630,520
පිලී								g of Curre	nt	End of Year
90 m 1 m m	T = L = 1	occata (Dest.)	/ line 16\				Y	'ear) O E	20.265.062
Fund Balances Fund Balances 50			<pre>(, line 16) t X, line 26) .</pre>					19,878,2	_	20,265,862
절 등 21 교육 22			t X, line 26) . Dalances Subtra					8,140,3 11,737,9	-	7,101,431
Part II		ature Bloc		cenne z I nom n	116 20	• •		11,/3/,	, , , ,	13,104,431
			e that I have exan	nined this return.	including accomp	anyina s	chedules and s	tatements.	and t	o the best of my
	and belie									f which preparer has any
	****	**					20	013-07-12		
Sign	Signa	ture of officer						ate		
Here		I H GRAHAM IV F								
		or print name a								
	Preparer	s L			Date		Check If			yer identification number
Paid	signature		I G KOSNETT				self- employed 🕨 🦳	(see insti P0029072		5)
Preparer's	Firm's na	ame (or yours	TATE AND TRYON		<u>I</u>		. , ,			
Use Only	ıf self-er	nployed),	2021 L STREET NV	W SHITTE 400				EIN ▶ 52	2-18559	942
	audiess,	and ZIF T 4						Phone no	· (2	202) 293-2200
			WASHINGTON DO	20026					•	

	<u> </u>				
Par	Statement of Programme Check if Schedule O cont				দ
1	Briefly describe the organization	n's mission			
LEAU ASSO COM	ASAE FOUNDATION IS PRIMA DERSHIP BY CONDUCTING RES OCIATIONS BECOME MORE IN IMUNITY, THE FOUNDATION M I GENERATION OF ASSOCIATI	EARCH IN AREAS THAT NOVATIVE WITH THE H AINTAINS A RIGOROUS	NO ONE ASSOCIATIO HELP OF ASAE MEMBER	ON CAN UNDERTAKE ON I RS AND FRIENDS OF THE A	TS OWN AND HELPING ASSOCIATION
2	Did the organization undertake a the prior Form 990 or 990-EZ?				Yes 🔽 No
	If "Yes," describe these new ser	vices on Schedule O			
3	Did the organization cease cond services?				▼ Yes No
4	Describe the organization's progexpenses Section 501(c)(3) an grants and allocations to others	d 501(c)(4) organizations	and section 4947(a)(1)) trusts are required to repo	
4a	(Code) (Expe	enses \$ 1,014,256	ıncludıng grants of \$) (Revenue \$	113,262)
	RESEARCH THE FOUNDATION'S RELEADERS FOCUS ON CRITICAL FACTO FINDINGS BY EXECUTIVES AND BOARI RESEARCH HAS BEEN PRODUCED ON	RS TO ENHANCE THEIR ORGAN OS THROUGH RIGOROUSLY DES	IZATIONS THE FOUNDATION I SIGNED SECONDARY, QUALITAT	IMPLEMENTS AND FACILITATES TH FIVE AND QUANTITATIVE METHOD	IE APPLICATION OF RESEARCH
4b	(Code) (Expe	enses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expe	nses \$	ıncludıng grants of \$) (Revenue \$)
4d	Other program services (Desc	•) (D	,
	(Expenses \$	including grants of) (Revenue \$)
4e	Total program service expenses	s► \$ 1,014,25	6		

CHECKIIST OF REGULE CO SCHEDULE	art IV	Checklist o	f Required	Schedule
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	·		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
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		No
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		No
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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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	Yes	
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		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νo
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, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

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

•	•
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
а	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable			
	1a 3			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
_				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
a.	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			
j.	return			
D	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)			
la	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
la	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		Νo
ь	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			
	· · · · · · · · ·			
ia	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
0	were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			_
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
_	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year			
-	,			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	7-		NI -
£	Contract?	7e		No No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a			
	Form 1098-C?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess			
	business holdings at any time during the year?	8		
ı	Sponsoring organizations maintaining donor advised funds.			
2	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
_	facilities			
1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
-	year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by			
	the states in which the organization is licensed to issue qualified health plans [13b]			
С	Enter the aggregate amount of reserves on hand 13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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

Se	ction A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax							
Id	year							
b	b Enter the number of voting members included in line 1a, above, who are independent							
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		No				
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		No				
4								
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No				
6	Did the organization have members or stockholders?	6		Νo				
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	Yes					
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	Yes					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b								
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							
Se	ection B. Policies (This Section B requests information about policies not required by the Internal							
Re	venue Code.)							
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a		No				
Ь	10b							
11a								
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review the Form 990	11a	Yes					
	bescribe in Schedule of the process, if any, used by the organization to review the Form 550							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
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	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	Did the organization have a written document retention and destruction policy?	14	Yes					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	Other officers or key employees of the organization	15b		No				
16a	16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
h	taxable entity during the year?	16a		No				
D	16h							
organization's exempt status with respect to such arrangements?								
17	List the States with which a copy of this Form 990 is required to be filed▶							
	· ·							

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.

Own website Another's website Vpon 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 See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization HEIDI ELLIS ROBEY
 1575 I STREET NW
 WASHINGTON, DC 20005

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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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) A verage hours per week (describe	(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-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations
(1) JOSEPH M MCGUIRE CAE CHAIRMAN, ASAE FOUNDATION	1 00	х		х				0	0	0
(2) ARLENE A PIETRANTON PHD FASAE CAE SECRETARY/TREASURER	1 00	х		х				0	0	0
(3) PETER J O'NEIL FASAE CAE IMMEDIATE PAST CHAIRMAN, CHAIR ASAE	1 00	Х		х				0	0	0
(4) DAVID A DUBOIS CMP FASAE CAE BOARD MEMBER	1 00	х						0	0	0
(5) MATTHEW R D'UVA FASAE CAE BOARD MEMBER	1 00	х						0	0	0
(6) DENNIS D EDWARDS BOARD MEMBER	1 00	х						0	0	0
(7) ABE ESHKENAZI CSCP FACHE CPA CAE BOARD MEMBER	1 00	х						0	0	0
(8) SUSAN K NEELY CAE BOARD MEMBER	1 00	х						0	0	0
(9) ANN T TURNER PHD FASAE CAE BOARD MEMBER	1 00	х						0	0	0
(10) SCOTT D WILEY FASAE CAE BOARD MEMBER	1 00	х						0	0	0
(11) JOHN GRAHAM IV PRESIDENT & CEO	1 00			х				0	2,877,106	62,040
(12) SUSAN ROBERTSON EXEC VP ASAE, PRESIDENT ASAE FOUNDATION	15 00			Х				162,400	243,600	54,380
(13) HEIDI ROBEY VP OF FINANCE & CHIEF FINANCIAL OFFICER	2 50			Х				11,658	163,210	22,535
(14) MONICA DIGNAM CHIEF RESEARCH OFFICER & MANAGING DIRECTOR	30 00				х			144,610	36,153	38,191
(15) REGINALD HENRY CHIEF INFORMATION OFFICER	2 50				Х			12,867	180,151	33,984
(16) AMY LEDOUX SENIOR VP, MEETINGS & EXPOSITIONS	50				Х			2,000	148,031	18,306
(17) JOHN R LEE IV CHIEF MARKETING & COMMUNICATIONS OFFICER	80				х			3,462	169,647	18,452
										Form 990 (2011)

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

	(A) Name and Title	(B) Average hours per week (describe hours	unles an	on (d e tha	n one son er ar	e bo ıs b nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Est amour comp fro organi	(F) Imated It of other ensation m the zation and lated
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former			1	nizations
	ROBERT SKELTON FADMINISTRATIVE OFFICER	2 50				х			12,480	174,71	0	42,366
											-	
								<u> </u> ▶				
1b c	Sub-Total	O Part VII Sect	· ·	•	•	•		<u> </u>				
	Total (add lines 1b and 1c)			<u></u>	•			 	349,477	3,992,608		290,254
2	Total number of individuals (inclu \$100,000 of reportable compens					ed a	above)) who	received more tha	an		
											Ye	s No
3	Did the organization list any form on line 1 a? <i>If</i> "Yes," complete School					y e	mploy	ee, o	or highest compens	ated employee		
4	For any individual listed on line 1					•	ation:	• and :	• • • • • • • • • • • • • • • • • • •	n from the	3	No
7	organization and related organiza											
	ındıvıdual			•		•	•	•			4 Ye	s
5	Did any person listed on line 1a r services rendered to the organiza								_		5	No
	-	,	•							L	<u> </u>	1 110
Se	ection B. Independent Cont											
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax ye	the organization										
	Nam	(A) e and business add	ress						Desc	(B) ription of services	Com	(C)
	Total number of independent contr	antara (maludia	- h	a + 1		+- +	.h.a.a.l	l.a.t.a.				

\$100,000 of compensation from the organization $\blacktriangleright 0$

Form 99								Page 9
Part \	<u>/1111</u>	Statement of	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
Contributions, gifts, grants and other similar amounts	1a	Federated cam						311
gra	Ь	•	ies 1b	472.622				
tš, ⊞	C		ents 1c					
<u> </u>	d		zations 1d					
a Eige	e	Government grant			ļ			ļ
er.	f	All other contributions are similar amounts in	ons, gifts, grants, and 1f ot included above	349,610				
き	g		ibutions included in					
돌	h		 sla-1f	.	522,233			
<u>ပု က</u>	"	Total. Add lilles	5 1d-11		322,233			
a E		DECEADOU		Business Code				
Program Service Revenue	2a	RESEARCH		900099	113,262	113,262		
<u>æ</u>	Ь	SPONSORSHIPS		900099	3,475			3,475
M C é	c							
Š	d							
Ē	e							
E S	f	All other progra	am service revenue					
ΔŤ	g	Total. Add line:	s 2a-2f		116,737			
	3	Investment inc	ome (including dividen	ds, interest				
		and other simil	aramounts)	▶ [679,346			679,346
	4	Income from inves	stment of tax-exempt bond	proceeds 🕨				
	5	Royalties .	<u> </u>		8,102			8,102
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	C	Rental income or (loss)						
	d		me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of	3,838,807	1,254,000				
		assets other than inventory						
	ь	Less cost or other basis and	4,083,533	0				
		sales expenses						
	C	Gain or (loss)	-244,726	1,254,000	4 000 274			1 000 274
	d	Net gain or (los		,▶	1,009,274			1,009,274
Other Revenue	8a	events (not inc \$172 of contributions	:,623 s reported on line 1c)					
æ		See Part IV, lir	ne 18					
<u>ē</u>	ь	less directer	penses b	405,077 257,803				
₹	c		(loss) from fundraising		147,274			147,274
	9a	Gross income f	rom gaming activities ne 19 a					
	b c		penses b (loss) from gaming acti					
	10a	Gross sales of returns and allo	ınventory, less					
	b	=	oods sold b (loss) from sales of inv	entory ►				
	<u> </u>	Miscellaneous		Business Code				1
	11a							
	ь							
	c							
	d	All other reven	ue					
	e	Total. Add lines						
				▶				
	12	Total revenue.	See Instructions .	▶	2,482,966	113,262	C	1,847,471

PERSONNEL SALARY EXPENS

organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

OVERHEAD ALLOCATION

PERSONNEL BENEFITS

Form 990 (2011) Page **10** 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 (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fund raising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22 Grants and other assistance to governments, 3 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 . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 7 Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 10 Fees for services (non-employees) 11 Management Legal Lobbying Professional fundraising See Part IV, line 17 . . Investment management fees 86,470 86,470 170,254 170,227 g Other 27 31,035 Advertising and promotion . . . 31,050 15 12 135,774 Office expenses 226,329 64,854 13 25,701 14 Information technology 15 Royalties . . 16 17 38,600 20,914 17,686 Payments of travel or entertainment expenses for any federal, state, or local public officials

673,757

420,251

109,564

369,536

242,357

56,581

179,558

49,070

30,425

124,663

128,824

22,558

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	1,120,728	2	494,334
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	145,956	4	43,913
	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 $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ Complete Part II of			
w		Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
SS	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	7,404	9	13,295
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 265,363			
	b	Less accumulated depreciation 10b 194,264	103,956	10c	71,099
	11	Investments—publicly traded securities	18,500,161	11	19,643,221
	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		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	19,878,205	16	20,265,862
	17	Accounts payable and accrued expenses .	118,200	17	123,378
	18	Grants payable		18	
	19	Deferred revenue	30,000	19	4,000
	20	Tax-exempt bond liabilities		20	
ιń.	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
운		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	7,992,105	25	6,974,053
	٦.	D	8,140,305	-	7,101,431
	26	Total liabilities. Add lines 17 through 25	8,140,303	26	7,101,431
φ		through 29, and lines 33 and 34.			
ănc	27	Unrestricted net assets	11,697,066	27	13,080,597
<u> 88</u>	28	Temporarily restricted net assets	40,834	28	83,834
	29	Permanently restricted net assets	,	29	<u> </u>
r Fund Balance		Organizations that do not follow SFAS 117, check here ► and complete lines 30 through 34.			
ō	30	Capital stock or trust principal, or current funds		30	
sets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Ass	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	11,737,900	-	13,164,431
Net	34	Total liabilities and net assets/fund balances	19 878 205	-	20 265 862

Par	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		2.4	182,966
2	Total expenses (must equal Part IX, column (A), line 25)	2			352,446
3	Revenue less expenses Subtract line 2 from line 1	3			530,520
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		11,7	737,900
5	Other changes in net assets or fund balances (explain in Schedule O)	5		7	796,01
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		13,1	164,431
Par	TYPE Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			৮	
1	Accounting method used to prepare the Form 990			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?	[2b	Yes	
С	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were i	ssued		103	
	on a separate basis, consolidated basis, or both				
	☐ Separate basis ☐ Both consolidated and separated basis			1	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the r audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

OMB No 1545-0047

Public Charity Status and Public Support SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

ASAE FOUNDATION

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.

Inspection **Employer identification number**

									52-1300				
	rt I			blic Charity Sta		_		•		nstruction	ons		
he	organız —			te foundation becaus			= -						
1	L		· ·	ion of churches, or as			-	b)(1)(A)(i)	•				
2	<u> </u>			d in section 170(b)(1									
3		•		perative hospital se	-								
4	Γ			h organızatıon operat ıty, and state	ted in conjur	nction with a	a hospital des	cribed in se	ection 170(b)	(1)(A)(ii	i). Enter	the	
5	Γ	_	•	erated for the beneficerated for the beneficerated for the beneficerated P	_	e or univers	sity owned or o	perated by	a governmer	ntal unit c	lescribed	d in	
6	Г			local government or	•	tal unit des	cribed in sect	ion 170(b)(1)(A)(v).				
7	<u>\</u>	An orga describ	anızatıon the	at normally receives	a substanti					from the	general p	oublic	
_	_			(A)(vi) (Complete P									
8				described in sectior							_		
9	J	_		at normally receives					· ·	•	-	_	SS
				rities related to its ex									
				oss investment inco						tax) fror	n busine	sses	
	_			ganızatıon after June 	•			•	•				
LO	<u> </u>	_		ganized and operated		-							
11	ı	one or the box	more public	ganized and operated ly supported organiz ibes the type of supp b Type I	ations desci orting organ	ribed in sec ni <u>za</u> tion and	tion 509(a)(1) or sectior es 11e thro	1509(a)(2) S ugh 11h	ee secti)(3).	Check
e f g	1	other the section If the ocheck the Since A	nan foundat 509(a)(2) rganization his box august 17, 2	ox, I certify that the ion managers and other received a written do 2006, has the organi	her than one	or more pu	iblicly support	Type I, Typ	ations describ	oed in sec	ction 50	9 (a)(1	L) or
			g persons? rson who di	rectly or indirectly c	ontrols eith	er alone or	together with	nersons de	scribed in (ii)	١	Г	Yes	No
				governing body of th			_	persons de	Seribed III (II)		11g(i)	103	140
			•	er of a person descri		_	Lucion			—	11g(ii)		
			-	lled entity of a perso			above?			<u> </u>	11g(iii)		
h				ng information about						Ľ	9(/		
							(2)						
	(i) Name suppor rganiza	of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is th organizat col (i) lis your gove docume	e ion in ted in erning	(v) Did you no organizat col (i) of suppo	tify the tion in f your	(vi Is th organiza col (i) org	ne tion in ganized		(v A mou supp	int of
				instructions))	Yes	No	Yes	No	Yes	No			
ot a	.1												

instructions

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify

	under Part III. If the	e organization f	ails to qualify u	inder the tests li	<u>isted below, ple</u>	ase co	mplete I	Part III.)
	ection A. Public Support		_	Т Т				
Cale	endar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2	011	(f) Total
1	In) Gifts, grants, contributions, and membership fees received (Do not include any "unusual"	1,047,53	4 666,903	3 788,729	514,579		670,629	3,688,374
_	grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3	1,047,53	4 666,903	788,729	514,579		670,629	3,688,374
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included or line 1 that exceeds 2% of the amount shown on line 11, column	1						1,035,320
6	(f) Public Support. Subtract line 5 from line 4							2,653,054
S	ection B. Total Support		1					
	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 20	011	(f) Total
7	A mounts from line 4	1,047,534	666,903	788,729	514,579		670,629	3,688,374
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	630,635	1,232,567	1,590,009	423,041		687,449	4,563,701
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets							
11	Total support (Add lines 7 through 10)	(5.5.00				1 1		8,252,075
12	Gross receipts from related activiti					12		38,669,120
13	First Five Years If the Form 990 is check this box and stop here			, third, fourth, or fi	fth tax year as a !	501(c)(3	3) organız	ration, ▶
<u></u>	ection C. Computation of Pub Public Support Percentage for 201			11 column (f))		44		22.150.0/
1 4 15	Public Support Percentage for 201			II Column (1))		14		32 150 %
		•	·		no 14 := 33 : '00'	15	ab a clus	47 370 %
b	33 1/3% support test—2011. If the and stop here. The organization qua 33 1/3% support test—2010. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization meeorganization	alifies as a public organization did n qualifies as a pu — 2011. If the orga tion meets the "fa	y supported orga not check the bo iblicly supported anization did not d acts and circums	nization x on line 13 or 16a organization check a box on line tances" test, chec	a, and line 15 is 3 e 13, 16a, or 16b k this box and st o	33 1/3% and line	or more, e 14 Explain	► check this ► ✓
b 18	10%-facts-and-circumstances test 15 is 10% or more, and if the organiza Explain in Part IV how the organiza supported organization Private Foundation If the organizationstructions	nization meets the tron meets the "fa	e "facts and circu acts and circums	mstances" test, c tances" test The	heck this box and organization qual	d stop he Ifies as a	e re. a publicly	▶ □

Schedule A (Form 990 or 990-EZ) 2011 Page 3 Part III Support Schedule for Organizations Described in IRC 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 (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2007 **(b)** 2008 (c) 2009 (d) 2010 (e) 2011 (f) Total ın) Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 13 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f)) 15 15 Public support percentage from 2010 Schedule A, Part III, line 15 16 16 Section D. Computation of Investment Income Percentage

Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))

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

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

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

more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Investment income percentage from 2010 Schedule A, Part III, line 17

17

18

17

18

▶[

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).
	Facts And Circumstances Test
	Explanation

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493193006003

OMB No 1545-0047

Inspection

Department of the Treasury

SCHEDULE D (Form 990)

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

Name of the organization ASAE FOUNDATION

Internal Revenue Service ► Attach to Form 990. ► See separate instructions. Employer identification number 52-1300485 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶_ Number of states where property subject to conservation easement is located -Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year -Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art.

- historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
 - (i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2011

Part	Organizations Maintaining Co	llections of Art	, His	<u>tori</u>	cal Tre	asur	es, or O	ther	Similar As	sets	(cor	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check an	y of th	e foll	_		_		se of its collec	tion		
а	Public exhibition		d	\sqcap	Loan o	rexch	ange progi	ams				
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's c Part XIV	ollections and expla	ın how	v the	/ further	the or	ganızatıor	's ex	empt purpose	ın		
5	During the year, did the organization solicit assets to be sold to raise funds rather than								ılar	ΓYe	es	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an ar	ements. Comple	ete ıf	the	organız	ation			es" to Form 9	990,		
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interme	ediary	for c	ontrıbutı	ions oi	rotherass	ets n		⊢ γ∈	es	┌ No
b	If "Yes," explain the arrangement in Part XI	/ and complete the	follow	ıng ta	able		Г					
_							F	_	Ar	nount		
C	Beginning balance						-	1c				
d	Additions during the year						-	1d				
e	Distributions during the year						-	1e				
f	Ending balance						L	1f				
2a	Did the organization include an amount on F	orm 990, Part X, line	e 21?							∏ Y∈	es	∏ No
	If "Yes," explain the arrangement in Part XIV											
Pa	t V Endowment Funds. Complete									L		DI
1a	Beginning of year balance	(a)Current Year 10,029,070	(B)	Prior \	rear ,183,135	(c) I W	o Years Back 8,570,07	+`-	Three Years Back 10,357,14	+	our ye	ears Back
_	Contributions	10,023,070			,103,133		0,370,07	_	10,557,11	+		
b	Investment earnings or losses	850,284		1	,338,102		983,73	7	-1,329,27	3		
c d	Grants or scholarships	030,201		-,	,330,102		703,72	+	1,323,27	1		
u e	Other expenditures for facilities	532,255			492,167		395,67	4	457,790	5		
-	and programs	332,233			.52,107		233,01		137,73	1		
f	Administrative expenses											
g	End of year balance	10,347,099		10,	029,070		9,158,13	5	8,570,072	2		
2	Provide the estimated percentage of the year	rend balance held a	as									
а	Board designated or quasi-endowment	99 720 %										
ь	Permanent endowment ► 0 240 %											
c	Term endowment ► 0 040 %											
3a	Are there endowment funds not in the posse	ssion of the organiza	atıon t	hat a	re held	and ad	lmınıstere	d for t	the			
	organization by	J									⁄es	No
	(i) unrelated organizations			•					3a	(i)		No
	(ii) related organizations					•			3a(No_
	If "Yes" to 3a(II), are the related organization							•	3	b		
4	Describe in Part XIV the intended uses of the					`						
2611	t VI Land, Buildings, and Equipme	ent. See Form 99	о, Ра				l			. 1		
	Description of property) Cost or		(b) Cost or basis (oth		(c) Accumulate depreciation	ed ((d) Bo	ok value
1a	Land		•									
b	Buildings		•									
C	_easehold improvements											
a	Equipment						26	5,363	194,	264		71,099
u												
e	Other											

Part VII Investments—Other Securities. See	Form 990, Part X, line 1	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	. ,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		12
Part VIII Investments—Program Related. See		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III		(h) Pasik walus
(a) Descrip	otion	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)	
Part X Other Liabilities. See Form 990, Part X	(, line 25.	
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes		
DUE TO AFFILIATES	6,974,053	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	6,974,053	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,482,966
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,852,446
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	630,520
4	Net unrealized gains (losses) on investments	4	796,011
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	796,011
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,426,531
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	3,536,780
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d 257,803		
e	Add lines 2a through 2d	2e	1,053,814
3	Subtract line 2e from line 1	3	2,482,966
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)		
C	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	2,482,966
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	2,110,249
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	257,803
3	Subtract line 2e from line 1	3	1,852,446
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		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	1,852,446

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

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 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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS		BOARD DESIGNATED FUND, THE CORPUS OF WHICH IS TO REMAIN INTACT AND THE INVESTMENT INCOME FROM WHICH IS TO BE USED FOR RESEARCH BENEFITING THE ASSOCIATION COMMUNITY AN ESTABLISHED SPENDING POLICY OF 5-7% OF THE AVERAGE OF THE PORTFOLIO AS OF DECEMBER 31 FOR THE PRIOR 3 YEARS IS USED TO DETERMINE THE ANNUAL BUDGET SUBMITTED FOR BOARD APPROVAL
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR INCOME TAX POSITIONS TAKEN THEREFORE, MANAGEMENT HAS NOT IDENTIFIED ANY UNCERTAIN INCOME TAX POSITIONS AT A MINIMUM, THE FISCAL YEARS ENDING AUGUST 31, 2009 THROUGH 2012 REMAIN OPEN FOR EXAMINATION BY TAXING AUTHORITIES
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSE 257,803
PART XIII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSE 257,803

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DLN: 93493193006003

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

Supplemental Information Regarding

Fundraising or Gaming Activities

Open to Public Inspection

ame of the organization SAE FOUNDATION				Employer ide	ntification number
SAE FOUNDATION				52-1300485	
Part I Fundraising Act	tivities. Complete	e if the organiza	tion answered "Yes"	to Form 990, Part IV	, line 17.
Indicate whether the organ Mail solicitations Internet and e-mail so Phone solicitations In-person solicitations Did the organization have a or key employees listed in If "Yes," list the ten highes to be compensated at leas	licitations s a written or oral agre Form 990, Part VII st paid individuals or	e f g ement with any inc) or entity in conne entities (fundraise	Solicitation of non Solicitation of government Special fundraising dividual (including office ection with professional ers) pursuant to agreem	n-government grants vernment grants ng events rs, directors, trustees fundraising services? ents under which the fu	
(i) Name and address of Individual or entity (fundraiser) otal	(ii) Activity organization is regis	(iii) DId fundraiser have custody or control of contributions? Yes No	(iv) Gross receipts from activity co solicit funds or has be	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization

Pai	t II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 FOOD & WINE CLASSIC (event type)	(b) Event #2 SILENT AUCTION (event type)	(c) O ther Events 2 (total number)	(d) Total Events (Add col (a) through col (c))
ELE	1	Gross receipts	253,075	148,396	176,229	577,700
Revenue	2	Less Charitable contributions	126,538		46,085	172,623
	3	Gross income (line 1 minus line 2)	126,537	148,396	130,144	405,077
	4	Cash prizes				
မှာ	5	Non-cash prizes			23,726	23,726
euse	6	Rent/facility costs		10,741	12,946	23,687
Expenses	7	Food and beverages			35,137	35,137
Direct	8	Entertainment				
Δ	9	Other direct expenses .	48,620	58,102	68,531	175,253
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)	🛌	(257,803)
	11	Net income summary Combine li	nes 3 and 10 in column (d	d)		147,274
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		'Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
		Gross revenue				
penses	2	Cash prizes				
	3	Non-cash prizes				
Dreat D	4	Rent/facility costs				
<u>D</u>	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	┌ Yes	┌ Yes	
	7	Direct expense summary Add lines	s 2 through 5 in column (d)	•	()
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	mn (d)	<u> </u>	
9 a b	Is th	er the state(s) in which the organiza he organization licensed to operate No," Explain	gaming activities in each	of these states?		· Fyes Fno
	Wer	re any of the organization's gaming l	ıcenses revoked, suspen	ded or terminated during	the tax year?	· · Fyes Fno

Sche	dule G (Form 990 or 990-EZ) 20	11			Page 3
11	Does the organization operate ga	aming activities with nonmembers? .		Г _{Yes} Г	- No
12	Is the organization a grantor, be	neficiary or trustee of a trust or a mem	per of a partnership or other entity		
	formed to administer charitable (gamıng?		· · · · F Yes F	- No
13	Indicate the percentage of gamii	ag activity operated in		1 1	
a				13a	
b					
14		f the person who prepares the organiza		<u> </u>	
	Name ►				
	Address ►				
	revenue?	ntract with a third party from whom the			- No
		ed by the third party 🟲 \$			
С	If "Yes," enter name and address	S			
	Name 🟲				
	Address ►				
16	Gaming manager information				
	Name 🟲				
	Gaming manager compensation I	\$ \$			
	Description of services provided	>			
17 a		Employee er state law to make charitable distribu		· · ·	- No
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		-
_		activities during the tax year > \$		hadala C /	
Par	t IV Complete this part to proceed instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see	
	Identifier	ReturnReference	Explana	tion	
		•	•		

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DLN: 93493193006003

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

ASAE FOUNDATION 52-1300485 **Questions Regarding Compensation** Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain 1b 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? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee 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? 4a Νo 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. 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? Yes Yes Any related organization? If "Yes," to line 5a or 5b, describe in Part III 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? Yes 6b Yes Any related organization? If "Yes," to line 6a or 6b, describe in Part III 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 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo

section 53 4958-6(c)?

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

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

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base (ii) Bonus & incentive compensation		(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) JOHN GRAHAM IV	(I) (II)	0 600,187	0 146,083	0 2,130,836	- 1	0 49,900	_		
(2)SUSAN ROBERTSON	(I) (II)	123,668 185,503		10,404 15,606	11,760 17,640	14,322 21,483			
(3) HEIDI ROBEY	(I) (II)	10,078 141,096		641 8,973	1,339 18,750	498 6,976			
(4) MONICA DIGNAM	(I) (II)	122,576 30,644		14,166 3,542		19,074 4,769			
(5) REGINALD HENRY	(I) (II)	11,886 166,409		81 1,137	1,525 21,344	1,576 22,065			
(6) AMY LEDOUX	(I) (II)	1,862 137,820		27 2,017		65 4,794			
(7) JOHN R LEE IV	(I) (II)	3,232 158,368		38 1,871	369 18,083	106 5,179			
(8) ROBERT SKELTON	(1)	11,335 158,687				1,847 25,863			

Part III Supplemental Information

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

Identifier Return	Explanation
PART I, LINE	501(C)(6) ORGANIZATION ACCORDINGLY, HIS COMPENSATION, WHILE DETERMINED BY ASAE, TAKES INTO ACCOUNT BOTH ASAE AND THE FOUNDATION'S MISSIONS AND GOALS THE ASAE & THE FOUNDATION COMPENSATION PROGRAM IS TARGETED TO PROVIDE COMPETITIVE TOTAL COMPENSATION LEVELS (INCLUDING BOTH ANNUAL CASH COMPENSATION AND SUPPLEMENTAL BENEFITS) FOR HIGHLY COMPETITIVE PERFORMANCE COMPENSATION IS BENCHMARKED AGAINST DATA DEVELOPED BY INDEPENDENT CONSULTANTS USING SURVEYS COMPRISED OF ORGANIZATIONS WITH SIMILAR INDIVIDUAL MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS, BOTH REGIONAL AND NATIONAL THESE ORGANIZATIONS ARE SIMILAR TO ASAE & THE FOUNDATION IN MAGNITUDE, COMPLEXITY, AND SCOPE OF RESPONSIBILITY, AND THEY ARE
	REPRESENTATIVE OF THE VARIOUS MARKETS IN WHICH ASAE & THE FOUNDATION COMPETE FOR TALENT TOTAL CASH COMPENSATION IS TARGETED AT THE COMPETITIVE RANGE OF 85% - 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES, DEPENDING ON TENURE AND EXPERIENCE OF THE CEO CONSISTENT WITH THIS STRATEGY, THE FOLLOWING PRINCIPLES PROVIDE A FRAMEWORK FOR ASAE & THE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM TOTAL ANNUAL CASH COMPENSATION (CONSISTING OF BASE PAY AND A VARIABLE, AT-RISK INCENTIVE) IS POSITIONED AT 85% - 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES, THE MIX OF TOTAL COMPENSATION ELEMENTS WILL REFLECT COMPETITIVE MARKET REQUIREMENTS AND STRATEGIC BUSINESS NEEDS, COMPENSATION IS LINKED TO BOTH QUALITATIVE AND BEHAVIORAL EXPECTATIONS, AND KEY OPERATIONAL AND STRATEGIC METRICS, AND COMPENSATION WILL BE DIFFERENTIATED ON THE FOLLOWING BASIS BASE PAY ON RELATIVE RESPONSIBILITY, ANNUAL INCENTIVES - ON PERFORMANCE, AND SUPPLEMENTAL BENEFITS - ON LONG-TERM PERFORMANCE BASE PAY DETERMINED BY INDIVIDUAL PERFORMANCE AND COMPARISONS TO SIMILAR POSITIONS IN INDIVIDUAL MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS PAY IS ESTABLISHED BASED ON JOB RESPONSIBILITY, LEVEL OF EXPERIENCE, INDIVIDUAL CONTRIBUTION TO THE BUSINESS, ANALYSES OF COMPETITIVE INDUSTRY PRACTICE AND VARIOUS OTHER QUALITATIVE AND QUANTITATIVE PERFORMANCE FACTORS
PART I, LINE 4B	ASAE CEO JOHN GRAHAM SERP PAYOUT, \$2,093,272 BASED ON THE CEO'S CONTRACT, AT THE ATTAINMENT OF AGE 62, VESTED RIGHTS TO THE SERP BENEFITS WERE REACHED AND THEREFORE BECAME SUBJECT TO INCOME TAX ONE OF THE OPTIONS AVAILABLE TO ASAE WAS TO DISTRIBUTE THE TAXABLE BENEFIT TO THE CEO AT THAT TIME, WITH ALL RELATED TAX IMPLICATIONS THIS DISTRIBUTION TOOK PLACE IN 2011 IN THE AMOUNT OF \$2,093,272 THE ASAE BOARD OF DIRECTORS REVIEWED THE TERMS OF THE DISTRIBUTION AND APPROVED THE DISTRIBUTION AS BEING CONSISTENT WITH THE CONTRACTUAL AGREEMENTS SEE SCHEDULE J, PAGE 2, COLUMN (F)
PART I, LINE 5	THE FOUNDATION'S CEO IS ALSO CEO OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES, A RELATED SECTION 501(C)(6) ORGANIZATION THE CEO'S COMPENSATION, ACCORDINGLY, IS DETERMINED THROUGH A PROCESS CONDUCTED BY ASAE THAT PROCESS IS AS FOLLOWS THE CEO'S ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARABLE GROUP AS DESCRIBED IN THE ANSWER (ON ASAE'S FORM 990) TO PART VI, QUESTION 15 THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH ASAE AND THE FOUNDATION THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS ANNUAL INCENTIVE PAY IS NOT DETERMINED AS A SPECIFIC PERCENTAGE OF REVENUES, RATHER, REVENUES ARE UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE
PART I, LINE 6	THE FOUNDATION'S CEO IS ALSO CEO OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES, A RELATED SECTION 501(C)(6) ORGANIZATION THE CEO'S CONTINGENT COMPENSATION, ACCORDINGLY, IS DETERMINED THROUGH A PROCESS CONDUCTED BY ASAE THAT PROCESS IS AS FOLLOWS THE CEO'S TARGET ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARABLE GROUP AS DESCRIBED IN THE ANSWER (ON ASAE'S FORM 990) TO PART VI, QUESTION 15 THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH ASAE AND THE FOUNDATION THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS ANNUAL INCENTIVE PAY IS NOT DETERMINED AS A SPECIFIC PERCENTAGE OF NET EARNINGS, RATHER, NET EARNINGS ARE UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE

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As Filed Data -

DLN: 93493193006003

Schedule L

Department of the Treasury

(Form 990 or 990-EZ)

Transactions with Interested Persons

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

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

OMB No 1545-0047

2011

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Internal Revenue Service										Inspec	tion	
Name of the organization ASAE FOUNDATION										tion numbe	er	
D		/-		(-)(2)		(-)(4)		2-13004				
Part I Excess Benefit Train Complete if the organization										ine 40h		
1 (a) Name of disq			100 0111011				n of transaction				(c) Corrected?	
										Yes	No	
2 Enter the amount of tax impossection 4958	, on line From zation a (b) L or fro	 e 2, abo Intere	ve, reimburs	oed by the sons. orm 990	e organization .		n 990-l	•	+ \$ - \$ - ', line 38 - ved - d or	a (g) Writt		
	То	From				Yes	No	Yes	No	Yes	No	
Total				▶ \$								
Complete if the orga						/, line 2	27.					
(a) Name of interested pers	on	(een interested pei ganization	rson	(c) A n	nount of g	rant or ty	pe of assis	stance	

Part IV Business Transactions Involving Interested Persons.

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

Complete ii the organizatio	ili aliswereu Tes Oli	ruilli 990, Pait IV, III	ie zoa, zob, di zoc.		
(a) Name of interested person	(b) Relationship between interested (c) A mount of person and the transaction		(d) Description of transaction	(e) Sharing of organization's revenues?	
	organization			Yes	No
` '	COMMON BOARD MEMBERS		PLEASE SEE SCHEDULE R FOR ALL REPORTABLE TRANSACTIONS BETWEEN THE FOUNDATION AND THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES		No

Part V Supplemental Information

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

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

Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493193006003

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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 to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization ASAE FOUNDATION

Employer identification number

52-1300485

ldentifier	Return Reference	Explanation
CHANGES IN PROGRAM SERVICES	FORM 990, PART III, LINE 3	THE LEARNING CENTER FACILITY CEASED OPERATIONS IN MAY 2011

Identifier	Return Reference	Explanation
		LINE 1A ASAE HAS A EXECUTIVE COMMITTEE, WHICH CONSISTS OF THE OFFICERS OF ASAE AND THE CHAIRMAN OF ASAE BUSINESS SERVICES, INC. IT MAY ACT IN THE PLACE OF THE BOARD OF DIRECTORS WHEN AUTHORITY IS DESIGNATED BY THE BOARD OR IN EMERGENCY MATTERS WHERE EXECUTIVE COMMITTEE ACTION IS TEMPORARY AND SUBJECT TO RATIFICATION BY THE BOARD LINE 1B MANY OF THE BOARD MEMBERS OF ASAE ARE ALSO BOARD MEMBERS OF A RELATED SECTION 501(C)(3) ENTITY, ASAE FOUNDATION AS SUCH, THOSE BOARD MEMBERS TECHNICALLY ARE NOT INDEPENDENT, AS ASAE FOUNDATION IS CONSIDERED TO BE "AN ENTITY MORE THAN 35% OWNED" AND IS THEREFORE AN "INTERESTED PERSON" FOR SCHEDULE L REPORTING PURPOSES PLEASE SEE SCHEDULES L AND R FOR MORE INFORMATION

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7A	FOUNDATION DIRECTORS OTHER THAN EX-OFFICIO DIRECTORS ARE NOMINATED BY THE LEADERSHIP COMMITTEE OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) AND ELECTED BY THE BOARD OF DIRECTORS OF ASAE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 7B	THE APPROVAL OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES (ASAE) BOARD OF DIRECTORS IS REQUIRED, SHOULD THE FOUNDATION WISH TO SEPARATE FROM ASAE OR TAKE MAJOR STEPS TOWARD SUCH SEPARATION

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

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	EACH BOARD MEMBER AND EXECUTIVE STAFF MEMBER IS REQUIRED TO ANNUALLY COMPLETE AND SUBMIT A DISCLOSURE FORM FORM AN MATERIAL CHANGES OR ADDITIONS TO THE SUBMITTED INFORMATION AREE D LIRING THE COURSE OF THE YEAR A CHECKLIST IS MAINTAINED AND FOLLOW UP IS DONE LINTIL ALL FORMS ARE REFURNED ONCE ALL FORMS ARE RECEIVED. THE CEO REVIEWS THE DISCLOSURES ANY AFFIRM ATIVE RESPONSE DEBINED UNUSUAL OR WHICH MAY AFFEAR TO CONSTITUTE AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST IS REFERRED TO THE AUDIT COMMITTEE FOR DETERMINATION THE AUDIT COMMITTEE MAY SEEK THE GUIDANCE OF COUNSEL AND MAKE SUCH LETERMINATION WHICH THE PRESENCE OF THE INDIVIDUAL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION. THE AUDIT COMMITTEE MAY CONCLUDE THAT THIS DETERMINATION IS HOULD BE MADE BY THE FULL BOARD OF DIRECTORS OF A SAE, THE FOUNDATION, OR ABSI, AND REFER THE MATTER SHALL BE REF BRIED TO THE APPROPRIATE BOARD (WITH OR WITHOUT A RECOMMENDATION FROM THE AUDIT COMMITTEE FOR ITS CONSIDERATION, DELIBERATION AND RESOLUTION, WITH THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE PRESENCE OF THE NOW DULL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESOLUTION OF ALL CONFLICT OF INTEREST MATTERS NOVLYWEMENT IN SUCH TRANSACTION OR PET THE AUDIT COMMITTEE FOR THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESOLUTION OF ALL CONFLICT OF INTEREST MATTERS NOVLYWEMENT OF REMBERS OF SUCH BOARD OF THE AUDIT COMMITTEE CONSIDERATION THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESOLUTION OF ALL CONFLICT OF RITERST THAT THE AND NOVLYWEMENT OF THE AUDIT COMMITTEE CONSIDERATION THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESOLUTION OF ALL CONFLICT OF RITERST, IT SHALL FIRST REQUEST ADDITIONAL INFORM ATON THE DISTONAL OR OF THE PERSENCE OF THE AUDIT COMMITTEE FROM THE APPROPRIATE A PARTICULAR RELATIONSHIP OR TRANSACTION OR PERSONAL OR THE WITH THE ADDITIONAL OR THE APPROPRIATE OR THE AUDIT CONFLIC

Identifier Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	RE-EXISTING RELATIONSHIPS WITH INDIVIDUALS THAT PREVIOUSLY HAVE BEEN DISCLOSED TO, AND WAI VED BY, THE AUDIT COMMITTEE OR THE BOARD OF THE RELEVANT ORGANIZATION (A) THE INDIVIDUAL MUST DISCLOSE TO THE APPLICABLE CHAIRMAN IN ADVANCE OF ANY RELATED ACTION TO BE TAKEN BY THE BOARD HIS/HER INTENT TO SEEK TO PROVIDE GOODS OR SERVICES AS A PAID VENDOR TO ASAE, THE FOUNDATION, OR ABSI, OR TO RECEIVE A GRANT OR CONTRACT FROM ONE OF THE THREE ORGANIZATION S, (B) THE INDIVIDUAL MUST RECUSE HIMSELF/HERSELF FROM ALL DELIBERATIONS AND VOTING RELATE D TO THE CONTEMPLATED ACTION, (C) IF THE VALUE OF THE TRANSACTION EXCEEDS \$5,000, ASAE, THE FOUNDATION, OR ABSI MUST, THROUGH A REQUEST FOR PROPOSAL PROCESS, HAVE SOLICITED PROPOSA LS BROADLY FROM OTHER QUALIFIED VENDORS / PROSPECTIVE GRANT OR CONTRACT RECIPIENTS AND REC EIVED (OR ATTEMPTED TO RECEIVE) WRITTEN BIDS FROM AT LEAST THREE SUCH INDIVIDUALS / ENTITI ES (INCLUDING THE INDIVIDUAL IN QUESTION), (D) THE BOARD MUST DETERMINE (WITHOUT THE PRESE NCE OR PARTICIPATION OF THE INDIVIDUAL) THAT THE TRANSACTION IS FAIR AND IN THE BEST INTER ESTS OF ASAE, THE FOUNDATION, OR ABSI BASED ON ALL OF THE FACTS AND CIRCUMSTANCES, AND SUC H DETERMINATION (INCLUDING THE FACT THAT IT WAS MADE IN THE ABSENCE OF THE INDIVIDUAL) SHA LL BE DOCUMENTED AS PART OF THE RELEVANT MEETING MINUTES (ALL COMPETING BIDS RECEIVED SHAL L BE RETAINED AS WELL), AND (E) IF SELECTED, THE INDIVIDUAL MAY NOT PARTICIPATE IN ANY PRO CESS BY WHICH HIS/HER PERFORMANCE AS A VENDOR / GRANT OR CONTRACT RECIPIENT IS EVALUATED

FORMISSO. THE FOUNDATION IS STAFFED BY SAKEDIM COVERS AS ASSOCIATED AND VISION SOURCE EVALUATION IN TIS SOURCE PART VI. SECTION BY COMPRIBATION THAN ERSPONSIBLE TO BY SETEM WITH THE ASKEDIAN FOR FORMANCE EVALUATION AND COMPRIBATION THAN ERSPONSIBLE TO BY SETEM WITH THE ASKEDIAN OF PRECIOUS BY CHARGED WITH BESIGNING THAT THE ANNUAL EVALUATION IS CONDUCTED AND COMPRIBATION STABLES BY A COMPRISATION COMPRI	Identifier	Return Reference	Explanation
FOUNDATION OTHER KEY OFFICERS/EM PLOYEES UNDER BY LAW AND CEO CONTRACT, THE BALANCE		FORM 990, PART VI, SECTION B,	IOLICY MANUAL, AND CONSISTS OF THE FOLLOWING PRESIDENTS CON EPRFORMANCE EVALUATION AND COMPENSATION THIS RESPONSEILTY IS VESTED WITH THE ASAE BOARD OF DIRECTORS THE ASA E BOARD OF DIRECTORS IS CHARGED WITH BISLENGS THAT THE ANNUAL EVALUATION IS CONDUCTED AND COMPENSATION ESTABLISHED A COMPENSATION COMPENSATION OF THE BOARD, AND CHARMAN ELECT WILL RECOMMEND COMPENSATION LEVELS TO THE ASAE BOARD OF DIRECTORS IN ADDITION. THE PRESIDENT AND CEOS ANNUAL OBJECTIVES ARE APPROVED BY THE ASAE BOARD OF DIRECTORS. IN ADDITION THE PRESIDENT AND CEOS ANNUAL OBJECTIVES ARE APPROVED BY THE RESPONSATION FOR DIRECTORS. IN ADDITION THE PRESIDENT AND CEOS ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOS ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOS ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOS ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOSE ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOSE ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOSE ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOSE ANNUAL OBJECTIVES ARE APPROVED BY THE PRESIDENT AND CEOSE AND MEMBERS SERVICE BY CEOSE AND CEOSE A

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	OF STAFF ARE UNDER THE AUTHORITY OF CEO STAFF COMPENSATION POLICY DECISIONS TAKE INTO CON SIDERATION ASAE'S OVERALL FINANCIAL CONDITION, EQUITY WITHIN THE ORGANIZATION, AND COMPETITIVE SALARY PLANNING ASAE'S HUMAN RESOURCES DEPARTMENT IS RESPONSIBLE FOR ADMINISTRATION OF AND ONGOING INTERNAL REVIEW OF ALL COMPENSATION PLANS AND POLICIES THIS COMPENSATION REVIEW HELPS ASAE MAINTAIN AND ADMINISTER A COMPENSATION PLANS AND POLICIES THIS COMPENSATION REVIEW HELPS ASAE MAINTAIN AND ADMINISTER A COMPENSATION PLANT THAT ACCURATELY ADMINISTRAT ION PROGRAM'S) CONSIST OF THE FOLLOWING JOB EVALUATION THIS IS A SYSTEMATIC METHOD OF DETERMINING THE VALUE OF EACH JOB WITHIN THE ASSOCIATION, INCLUDING REVIEW OF SKILLS, ED UCATIONAL PREREQUISITES AND CONTRIBUTION TO THE ORGANIZATION SALARY STRUCTURE POSITI ONS ARE EVALUATED AND POSITIONS WITH SIMILAR VALUES ARE PLACED IN A SALARY GRADE THAT IS REVIEWED IN TERMS OF ITS COMPETITIVENESS WITHIN THE MARKET AND OUR ORGANIZATIONAL NEEDS EA CH GRADE HAS A MINIMUM, WHICH IS THE LOWEST RECOMMENDED SALARY TO BE OFFERED TO AN INDIVID UAL WHO MEETS THE MINIMUM QUALIFICATIONS OF THE POSITION, A MIDPOINT, REPRESENTING THE SALARY AT WHICH A FULLY QUALIFIED AND EXPERIENCED STAFF MEMBER WHO SATISFACTORILY PERFORMS AL L THE SPECIFICATIONS OF A POSITION IS PAID WITHIN THE MARKETPLACE, AND A MAXIMUM, WHICH IS THE UPPER LIMIT OF THE SALARY RANGE. A THIRD PARTY IS ENGAGED PERIODICALLY TO REVIEW THE COMPENSATION PACKAGE OF THE EXECUTIVE STAFF AND/OR FULL STAFF RELATIVE TO BASE COMPENSATION, BONUS AND INCENTIVE PROGRAMS COMPARATIVE TO MARKET SALARY BUDGET AND GUIDELINES - A SAE'S ANNUAL SALARY BUDGET IS DEVELOPED ANNUALLY IN ORDER TO ALLOCATE MONIES NEEDED TO MAINTAIN STAFF MEMBER SALARIES AT COMPETITIVE LEVELS, SUBJECT TO BUDGETARY LIMITATIONS AN AN NUAL MERIT POOL IS DEVELOPED AND APPROVED AS PART OF THE BUDGET CYCLE. THE CHIEF ADMINISTRATIVE OFFICER IS RESPONSIBLE FOR THE ADMINISTRATION OF THE PROGRAM, AND ALL INCREASES ARE SUBJECT TO THE APPROVAL OF THE EXPENDING THE PROGRAM.

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION C, LINE 19	SOME GOVERNING DOCUMENTS ARE AVAILABLE ON THE WEBSITE - FOUNDATION BY LAWS, STRATEGIC FRAMEWORK - WHAT WE DO AND OUR PROMISE, CODE OF CONDUCT AND BOARD CONTACT INFORMATION THE CONFLICT OF INTEREST POLICY IS CURRENTLY NOT POSTED, BUT PROVIDED AS A SAMPLE DOCUMENT UPON REQUEST PUBLIC INSPECTION COPIES OF THE 990 ARE PROVIDED UPON REQUEST

ldentifier	Return Reference	Explanation				
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 796,011				

Identifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PRIOR YEAR

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Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

(Form 990)

plete if the organization	n answered "Yes"	on Form 990. Par		85		
(b) Primary activity				(f) Direct controlling entity		
nizations (Complete if the tax year.)	the organization	answered "Yes" o	n Form 990, F	Part IV, line 34 becaus	se it had	one
(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity stat (if section 501(c)(cus (f) Direct controlling 3)) entity	organ	rolled iization
MEMBERSHIP ORGANIZATION AND VOICE OF THE ASSOCIATION PROFESSION	DC	501(C)(6)			Yes	No
	(b) Primary activity nizations (Complete if the tax year.) (b) Primary activity MEMBERSHIP ORGANIZATION AND VOICE OF THE	(b) Primary activity (c) Legal domicile (state or foreign country) nizations (Complete if the organization the tax year.) (b) Primary activity (c) Legal domicile (state or foreign country) Legal domicile (state or foreign country) MEMBERSHIP ORGANIZATION AND VOICE OF THE ASSOCIATION PROFESSION DC	(c) Legal domicile (state or foreign country) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.) Complete if the organization answered "Yes" of the tax year.)	plete if the organization answered "Yes" on Form 990, Part IV, line 33.) (b) (c) (d) (d) (e) End-of-year assets or foreign country) Inizations (Complete if the organization answered "Yes" on Form 990, Fithe tax year.) (b) (c) (d) (e) End-of-year assets or foreign country) (b) (c) (d) (e) Exempt Code section (if section 501(c)) MEMBERSHIP ORGANIZATION AND VOICE OF THE ASSOCIATION PROFESSION DC 501(C)(6)	(c) Legal domicile (state or foreign country) Total income End-of-year assets Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because the tax year.) (b)	plete if the organization answered "Yes" on Form 990, Part IV, line 33.) Column

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h Disprop allocat	rtionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j Genei mana partr	al or ging	(k) Percentage ownership
							Yes	No		Yes	No	
	RENTAL OF HEADQUARTERS BUILDING	DC	N/A									
								·			·	
								·				

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) ASAE BUSINESS SERVICES INC 1575 EYE STREET NW WASHINGTON, DC 20005 52-1066386	INSURANCE AND OTHER SERVICES	DC	N/A	С			
(2) ASAE INSURANCE COMPANY 1575 EYE STREET NW WASHINGTON, DC 20005 03-0335958	INSURANCE AND OTHER SERVICES	DC	N/A	С			

r Other transfer of cash or property from related organization(s)

ched	dule R (Form 990) 2011		P	age 3
Par	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 Du	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
b	Gift, grant, or capital contribution to related organization(s)	1b		No
С	Gift, grant, or capital contribution from related organization(s)	1c	Yes	;
d	Loans or loan guarantees to or for related organization(s)	1d		No
e	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f	Yes	
g	Purchase of assets from related organization(s)	1 g		No
h	Exchange of assets with related organization(s)	1h		No
i	Lease of facilities, equipment, or other assets to related organization(s)	1i		No
				1
j	Lease of facilities, equipment, or other assets from related organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for related organization(s)	1k		No
ı	Performance of services or membership or fundraising solicitations by related organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	1	No
n	Sharing of paid employees with related organization(s)	1n		No
				1
o	Reimbursement paid to related organization(s) for expenses	10	Yes	
р	Reimbursement paid by related organization(s) for expenses	1 p		No
-				1
а	Other transfer of cash or property to related organization(s)	1q	+	No

2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) AM SOCIETY OF ASSN EXECUTIVES	0	3,128,580	PER OVERHEAD ALLOC
(2) AM SOCIETY OF ASSN EXECUTIVES	R	42,288	PUB ROYALTIES/DONATIONS
(3) ASAE SERVICES INC	С	30,000	ANNUAL DONATION
(4) ASAE SERVICES INC	R	406,861	EXPENSE REIMB/SPONSOR
(5) AM SOCIETY OF ASSN EXECUTIVES	F	1,254,000	3RD PARTY VALUATION
(6)			

1r Yes

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No			

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011