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Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

OMB No 1545-0047

**2011**Open to Public  
Inspection

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

**A** For the 2011 calendar year, or tax year beginning **OCT 1, 2011** and ending **SEP 30, 2012****B** Check if applicable

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization**ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS**

Doing Business As

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

**2231 CRYSTAL DRIVE**

Room/suite

**450**

City or town, state or country, and ZIP + 4

**ARLINGTON, VA 22202****F** Name and address of principal officer: **PAUL JARRIS****SAME AS C ABOVE****D** Employer identification number**35-1044487****E** Telephone number**202-371-9090****G** Gross receipts \$ **18,114,141.****H(a)** Is this a group return for affiliates? ☐ Yes ☒ No**H(b)** Are all affiliates included? ☐ Yes ☐ No

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

**H(c)** Group exemption number ▶**I** Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **WWW.ASTHO.ORG****K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1942** **M** State of legal domicile: **DC****Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities	<b>SEE PART III, LINE 1.</b>	
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>15</b>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>15</b>
	<b>5</b>	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	<b>5</b>	<b>89</b>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>15</b>
	Revenue	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>
<b>b</b>		Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
<b>8</b>		Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
<b>9</b>		Program service revenue (Part VIII, line 2g)	<b>15,961,952.</b>	<b>17,920,617.</b>
<b>10</b>		Investment income (Part VIII, column (A), lines 3, 4, and 7)	<b>143,150.</b>	<b>169,112.</b>
<b>11</b>		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>7,697.</b>	<b>5,716.</b>
<b>12</b>		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>59,667.</b>	<b>18,696.</b>
<b>13</b>		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>16,172,466.</b>	<b>18,114,141.</b>
<b>14</b>		Benefits paid to or for members (Part IX, column (A), line 4)	<b>1,224,029.</b>	<b>3,417,412.</b>
<b>15</b>		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>0.</b>	<b>0.</b>
Expenses	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>6,808,795.</b>	<b>7,473,441.</b>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25)	<b>0.</b>	<b>0.</b>
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>7,890,166.</b>	<b>7,187,058.</b>
	<b>18</b>	Total expenses - Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>15,922,990.</b>	<b>18,077,911.</b>
	<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>249,476.</b>	<b>36,230.</b>
Net Assets or Fund Balances	<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
	<b>21</b>	Total liabilities (Part X, line 26)	<b>5,985,091.</b>	<b>6,346,846.</b>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>3,556,333.</b>	<b>3,881,858.</b>

**Part II Signature Block**

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

Sign Here	Signature of officer	<i>Paul E. Jarris, MD</i>	Date	<b>2/15/13</b>
	Type or print name and title	<b>PAUL JARRIS, EXECUTIVE DIRECTOR</b>		
Paid Preparer Use Only	Print/Type preparer's name	<i>Terri McKnight</i>	Date	<b>2/14/13</b>
	Preparer's signature	<i>Terri McKnight</i>	Check if self-employed <input type="checkbox"/>	PTIN <b>P00543022</b>
Firm's name	Firm's name	<b>GELMAN, ROSENBERG &amp; FREEDMAN</b>	Firm's EIN	<b>52-1392008</b>
	Firm's address	<b>4550 MONTGOMERY AVE SUITE 650N BETHESDA, MD 20814-2930</b>	Phone no.	<b>(301) 951-9090</b>

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

☒ Yes ☐ No

616 25

SCANNED MAR 14 2013

ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS

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**Part III** Statement of Program Service Accomplishments

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

☒ X

1 Briefly describe the organization's mission

**FORMULATE & INFLUENCE THROUGH COLLECTIVE ACTION THE ESTABLISHMENT OF  
SOUND PUBLIC HEALTH POLICY & TO ASSIST & SERVE STATE AND TERRITORIAL  
HEALTH DEPARTMENTS IN THE DEVELOPMENT & IMPLEMENTATION OF PROGRAMS &  
POLICIES FOR THE PUBLIC'S HEALTH & THE PREVENTION OF DISEASE.**

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

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

4a (Code ) (Expenses \$ **8,113,407.** including grants of \$ **2,206,433.** ) (Revenue \$ **40,427.** )  
**SEE SCHEDULE O.**

4b (Code ) (Expenses \$ **4,827,772.** including grants of \$ **1,185,980.** ) (Revenue \$ )  
**SEE SCHEDULE O.**

4c (Code ) (Expenses \$ **2,334,723.** including grants of \$ **24,999.** ) (Revenue \$ )  
**SEE SCHEDULE O.**

4d Other program services (Describe in Schedule O.)

(Expenses \$ **2,774,603.** including grants of \$ ) (Revenue \$ **128,685.** )

4e Total program service expenses **18,050,505.**

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132002  
02-09-12

SEE SCHEDULE O FOR CONTINUATION(S)

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**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	<b>1</b> X	
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>	<b>4</b> X	
<b>5</b> 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? <i>If "Yes," complete Schedule C, Part III.</i>	<b>5</b>	X
<b>6</b> 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? <i>If "Yes," complete Schedule D, Part I.</i>	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>	<b>7</b>	X
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	<b>8</b>	X
<b>9</b> 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? <i>If "Yes," complete Schedule D, Part IV.</i>	<b>9</b>	X
<b>10</b> 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>	<b>10</b>	X
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>	<b>11a</b> X	
<b>b</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? <i>If "Yes," complete Schedule D, Part VII.</i>	<b>11b</b>	X
<b>c</b> 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? <i>If "Yes," complete Schedule D, Part VIII.</i>	<b>11c</b>	X
<b>d</b> 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? <i>If "Yes," complete Schedule D, Part IX.</i>	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	<b>11e</b> X	
<b>f</b> 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)? <i>If "Yes," complete Schedule D, Part X.</i>	<b>11f</b> X	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.</i>	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	X
<b>b</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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV.</i>	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	<b>16</b> X	
<b>17</b> 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? <i>If "Yes," complete Schedule G, Part I.</i>	<b>17</b>	X
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>	<b>18</b>	X
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<b>X</b>	
<b>22</b> 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? <i>If "Yes," complete Schedule I, Parts I and III</i>		<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	<b>X</b>	
<b>24a</b> 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		<b>X</b>
<b>24b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>24c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>24d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		<b>X</b>
<b>25b</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? <i>If "Yes," complete Schedule L, Part I</i>		<b>X</b>
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i>		<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		<b>X</b>
<b>28</b> 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)		
<b>28a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		<b>X</b>
<b>28b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		<b>X</b>
<b>28c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		<b>X</b>
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		<b>X</b>
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>35b</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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		<b>X</b>
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		<b>X</b>
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i>		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	<b>X</b>	

**Note.** All Form 990 filers are required to complete Schedule O

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

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1a</b>	78		
<b>1b</b>	0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>X</b>	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2a</b>	89		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		<b>X</b>
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		<b>X</b>
<b>b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<b>X</b>
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>X</b>
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		<b>X</b>
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	<b>X</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>X</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		<b>X</b>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>X</b>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>X</b>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	<b>N/A</b>	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?	<b>N/A</b>	
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?	<b>N/A</b>	
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>N/A</b>	
<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>N/A</b>	
<b>11a</b>			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>N/A</b>	
<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	<b>N/A</b>	
<b>b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand		
<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
<b>14b</b>			

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

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

**Section A. Governing Body and Management**

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

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

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

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **NONE**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website    ☐ Another's website    ☒ Upon request

**19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization **ROSE-ELLA SLAVIN - 202-371-9090**  
**2231 CRYSTAL DRIVE, NO. 450, ARLINGTON, VA 22202**

132006  
01-23-12

Form 990 (2011)

**ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS**

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID LAKEY PRESIDENT	7.50	X		X				0.	0.	0.
(2) JOSE' THEIR MONTERO PRESIDENT-ELECT	7.50	X		X				0.	0.	0.
(3) JOHN AUERBACH IMMEDIATE PAST PRESIDENT	7.50	X		X				0.	0.	0.
(4) MARY CURRIER SECRETARY-TREASURER	7.50	X		X				0.	0.	0.
(5) PAUL HALVERSON PAST PRESIDENT	7.50	X		X				0.	0.	0.
(6) JEWEL MULLEN REPRESENTATIVE, REGION I	5.00	X						0.	0.	0.
(7) NIRAV R. SHAH REPRESENTATIVE, REGION II	5.00	X						0.	0.	0.
(8) KARYL THOMAS RATTAY REPRESENTATIVE, REGION III	5.00	X						0.	0.	0.
(9) DON WILLIAMSON REPRESENTATIVE, REGION IV	5.00	X						0.	0.	0.
(10) EDWARD EHLINGER REPRESENTATIVE, REGION V	5.00	X						0.	0.	0.
(11) TERRY L. CLINE REPRESENTATIVE, REGION VI	5.00	X						0.	0.	0.
(12) JOANN SCHAEFER REPRESENTATIVE, REGION VII	5.00	X						0.	0.	0.
(13) TERRY L. DWELLE REPRESENTATIVE, REGION VIII	5.00	X						0.	0.	0.
(14) JIM GILLAM REPRESENTATIVE, REGION IX	5.00	X						0.	0.	0.
(15) MARY C. SELECKY REPRESENTATIVE, REGION X	5.00	X						0.	0.	0.
(16) PAUL JARRIS EXECUTIVE DIRECTOR	37.50			X				314,366.	0.	59,092.
(17) MARY CHILDRESS COO (THROUGH 04/12)	37.50			X				167,690.	0.	26,896.



**ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS**

Form 990 (2011)

35-1044487 Page **8**

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ROSE-ELLA SLAVIN CHIEF FINANCIAL OFFICER	37.50			X				0.	0.	0.
(19) JAMES BLUEMENSTOCK CHIEF PROGRAM OFFICER	37.50				X			200,446.	0.	32,372.
(20) JAMES PEARSON CHIEF PROGRAM OFFICER	37.50				X			196,128.	0.	35,101.
(21) SHARON MOFFAT CHIEF PROGRAM OFFICER	37.50				X			175,466.	0.	23,529.
(22) NICOLE KUNDO CHIEF PUBLIC POLICY	37.50					X		139,396.	0.	29,936.
(23) LACY FEHRENBACH-MAROSFALV CHIEF MEMBER SERVICES	37.50					X		113,747.	0.	30,018.
(24) SHAWN POLK CHIEF OF STAFF	37.50					X		117,226.	0.	20,076.
(25) CATHERINE SELLERS SENIOR DIRECTOR	37.50					X		103,996.	0.	21,633.
(26) ALBERT TERRILLION SENIOR DIRECTOR	37.50					X		101,138.	0.	25,584.
<b>1b Sub-total</b>								1,629,599.	0.	304,237.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								1,629,599.	0.	304,237.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **16**

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

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
IEM, INC., 2400 ELLIS ROAD, SUITE 200, RESEARCH TRIANGLE PARK, NC 27709	ANTIVIRAL PHARMACY DISPENSING DRILLS	255,215.
AMERICAN TECHNOLOGY SERVICES, 2730 PROSPERITY AVE., #250, FAIRFAX, VA 22031	SYSTEMS SUPPORT	251,354.
F.S. TAYLOR & ASSOCIATES, PC, 1420 N ST., NW, STE 100, WASHINGTON, DC 20005	ACCOUNTING & MANAGEMENT SERVICES	222,447.
CORNERSTONE GOV'T. AFFAIRS, LLC, 300 INDEPENDENCE AVE., SE, WASHINGTON, DC 20003	LOBBYING SUPPORT	180,040.
SYSTEMS RESEARCH & APPLICATIONS PO BOX 34880, ALEXANDRIA, VA 22334	PROJECT PLANNING	154,497.

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **10**

Form **990** (2011)

**ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS**

Form 990 (2011)

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**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	1 a	Federated campaigns	1a				
	b	Membership dues	1b	1465950.			
	c	Fundraising events	1c				
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	13,750,102.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2704565.			
	g	Noncash contributions included in lines 1a-1f \$					
	h	<b>Total.</b> Add lines 1a-1f			17,920,617.		
<b>Program Service Revenue</b>	2 a	CONFERENCE & MEETING	Business Code 900099	166,862.	166,862.		
	b	SPEAKER HONORARIUMS	900099	2,250.	2,250.		
	c						
	d						
	e						
	f	All other program service revenue					
	g	<b>Total.</b> Add lines 2a-2f			169,112.		
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts)		5,716.			5,716.
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real (ii) Personal				
	b	Less: rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b	Less: cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8 a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from fundraising events					
	9 a	Gross income from gaming activities See Part IV, line 19	a				
	b	Less: direct expenses	b				
	c	Net income or (loss) from gaming activities					
10 a	Gross sales of inventory, less returns and allowances	a					
b	Less: cost of goods sold	b					
c	Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>				Business Code			
11 a	MISCELLANEOUS	900099	18,696.			18,696.	
b							
c							
d	All other revenue						
e	<b>Total.</b> Add lines 11a-11d			18,696.			
12	<b>Total revenue.</b> See instructions.			18,114,141.	169,112.	0.	24,412.

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**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	3,408,412.	3,408,412.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	9,000.	9,000.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,314,503.	784,036.	530,467.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,821,623.	3,914,524.	907,099.	
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)	365,596.	312,009.	53,587.	
9 Other employee benefits	539,200.	438,574.	100,626.	
10 Payroll taxes	432,519.	339,963.	92,556.	
11 Fees for services (non-employees):				
a Management				
b Legal	80,029.	36,561.	43,468.	
c Accounting	36,874.		36,874.	
d Lobbying	180,000.		180,000.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	2,798,690.	2,150,983.	647,707.	
12 Advertising and promotion				
13 Office expenses	403,750.	163,861.	239,889.	
14 Information technology				
15 Royalties				
16 Occupancy	566,827.	5,747.	561,080.	
17 Travel	1,788,149.	1,695,439.	92,710.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	732,855.	654,841.	78,014.	
20 Interest	14,747.		14,747.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	198,495.		198,495.	
23 Insurance	17,624.		17,624.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>ALLOCATION OF G&amp;A</b>	0.	3,968,943.	-3,968,943.	
b <b>DUES &amp; SUBSCRIPTIONS</b>	156,905.	131,708.	25,197.	
c <b>REPAIRS &amp; MAINTENANCE</b>	67,663.	16,112.	51,551.	
d <b>BAD DEBT EXPENSE</b>	10,524.	10,524.		
e All other expenses	133,926.	9,268.	124,658.	
25 <b>Total functional expenses.</b> Add lines 1 through 24e	18,077,911.	18,050,505.	27,406.	0.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing	300.	1	300.
	2 Savings and temporary cash investments	2,296,304.	2	1,957,735.
	3 Pledges and grants receivable, net	2,730,435.	3	3,413,410.
	4 Accounts receivable, net	287,852.	4	519,083.
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	213,699.	9	61,273.
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 1,701,282.		
	b Less accumulated depreciation	10b 1,347,151.	10c	354,131.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	40,914.	15	40,914.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34).	5,985,091.	16	6,346,846.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses	1,459,376.	17	1,941,302.
	18 Grants payable		18	
	19 Deferred revenue	1,168,735.	19	1,092,600.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L.		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	928,222.	25	847,956.
	26 <b>Total liabilities.</b> Add lines 17 through 25.	3,556,333.	26	3,881,858.
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
27 Unrestricted net assets		2,428,758.	27	2,464,988.
28 Temporarily restricted net assets			28	
29 Permanently restricted net assets			29	
<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
30 Capital stock or trust principal, or current funds			30	
31 Paid-in or capital surplus, or land, building, or equipment fund			31	
32 Retained earnings, endowment, accumulated income, or other funds			32	
33 <b>Total net assets or fund balances</b>		2,428,758.	33	2,464,988.
34 <b>Total liabilities and net assets/fund balances</b>	5,985,091.	34	6,346,846.	

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**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☐

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	18,114,141.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	18,077,911.
<b>3</b>	Revenue less expenses Subtract line 2 from line 1	<b>3</b>	36,230.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	2,428,758.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	0.
<b>6</b>	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	2,464,988.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☐**1** Accounting method used to prepare the Form 990. ☐ Cash ☒ Accrual ☐ Other \_\_\_\_\_

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.

**2a** Were the organization's financial statements compiled or reviewed by an independent accountant?**b** Were the organization's financial statements audited by an independent accountant?**c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

**d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis**3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	X	

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## ASSOCIATION OF STATE AND

Schedule A (Form 990 or 990-EZ) 2011 TERRITORIAL HEALTH OFFICIALS

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,226,745.	12,598,012.	13,949,586.	15,961,952.	17,920,617.	73,656,912.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	13,226,745.	12,598,012.	13,949,586.	15,961,952.	17,920,617.	73,656,912.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						6,526,805.
<b>6 Public support.</b> Subtract line 5 from line 4						67,130,107.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4	13,226,745.	12,598,012.	13,949,586.	15,961,952.	17,920,617.	73,656,912.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	50,348.	16,422.	10,130.	7,697.	5,716.	90,313.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)	49,448.	3,894.	12,144.	59,667.	18,696.	143,849.
<b>11 Total support.</b> Add lines 7 through 10						73,891,074.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	1,688,139.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> ► <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	90.85 %
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14	<b>15</b>	90.54 %
<b>16a 33 1/3% support test - 2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input checked="" type="checkbox"/>		
<b>b 33 1/3% support test - 2010.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>17a 10% -facts-and-circumstances test - 2011.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>b 10% -facts-and-circumstances test - 2010.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► <input type="checkbox"/>		

Schedule A (Form 990 or 990-EZ) 2011

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
<b>2</b> 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						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12)						
<b>14 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

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

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17	<b>18</b>	%

**19a 33 1/3% support tests - 2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

**b 33 1/3% support tests - 2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ☐

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



**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

**2011**

Open to Public  
Inspection

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.**

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

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

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

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

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

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

Name of organization	<b>ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS</b>	Employer identification number	<b>35-1044487</b>
----------------------	--	--------------------------------	-------------------

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV
- 2 Political expenditures ▶ \$ \_\_\_\_\_
- 3 Volunteer hours \_\_\_\_\_

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

132041  
01-27-12

## ASSOCIATION OF STATE AND

Schedule C (Form 990 or 990-EZ) 2011 TERRITORIAL HEALTH OFFICIALS

35-1044487 Page 2

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

- A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)		25,950.													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		233,553.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		259,503.													
<b>d</b> Other exempt purpose expenditures		17818408.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		18077911.													
<b>f</b> Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		250,000.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-		0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

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

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2a</b> Lobbying nontaxable amount	775,186.	851,188.	946,150.	1,000,000.	3,572,524.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					5,358,786.
<b>c</b> Total lobbying expenditures	133,000.	248,765.	274,014.	259,503.	915,282.
<b>d</b> Grassroots nontaxable amount	193,797.	212,797.	236,538.	250,000.	893,132.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,339,698.
<b>f</b> Grassroots lobbying expenditures				25,950.	25,950.

Schedule C (Form 990 or 990-EZ) 2011

## ASSOCIATION OF STATE AND

Schedule C (Form 990 or 990-EZ) 2011 TERRITORIAL HEALTH OFFICIALS

35-1044487 Page 3

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

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

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

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

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

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

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

**Part IV** Supplemental Information

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

**SCHEDULE D**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

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

OMB No 1545-0047

**2011**

Open to Public  
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Name of the organization **ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS**

Employer identification number  
**35-1044487**

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$ _____
b Assets included in Form 990, Part X	▶ \$ _____

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a ☐ Public exhibition      d ☐ Loan or exchange programs
- b ☐ Scholarly research      e ☐ Other \_\_\_\_\_
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIV

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

- |  | (a) Current year | (b) Prior year | (c) Two years back | (d) Three years back | (e) Four years back |
|--|------------------|----------------|--------------------|----------------------|---------------------|
| 1a Beginning of year balance                     |                  |                |                    |                      |                     |
| b Contributions                                  |                  |                |                    |                      |                     |
| c Net investment earnings, gains, and losses     |                  |                |                    |                      |                     |
| d Grants or scholarships                         |                  |                |                    |                      |                     |
| e Other expenditures for facilities and programs |                  |                |                    |                      |                     |
| f Administrative expenses                        |                  |                |                    |                      |                     |
| g End of year balance                            |                  |                |                    |                      |                     |
- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment ► \_\_\_\_\_ %
- b Permanent endowment ► \_\_\_\_\_ %
- c Temporarily restricted endowment ► \_\_\_\_\_ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) unrelated organizations   | 3a(i)  |    |
| (ii) related organizations  | 3a(ii) |    |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b     |    |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		435,171.	238,689.	196,482.
d Equipment		748,879.	595,672.	153,207.
e Other		517,232.	512,790.	4,442.
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				354,131.

Schedule D (Form 990) 2011

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

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

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

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

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

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

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CAPITAL LEASE OBLIGATIONS	176,596.
(3) REFUNDABLE ADVANCES	323,371.
(4) DEFERRED RENT LIABILITY	347,989.
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶	

847,956.

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

132053  
01-23-12

Schedule D (Form 990) 2011

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	18,114,141.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	18,077,911.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	36,230.
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	36,230.

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

1	Total revenue, gains, and other support per audited financial statements	1	18,114,141.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	18,114,141.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	18,114,141.

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

1	Total expenses and losses per audited financial statements	1	18,077,911.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	18,077,911.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	18,077,911.

**Part XIV Supplemental Information**

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

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

**(FASB) RELEASED FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR**

**REPORTING UNCERTAINTY IN INCOME TAXES. FOR THE YEARS ENDED SEPTEMBER 30,**

**2012 AND 2011, ASTHO HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10**

**AND DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER**

**RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. THE FEDERAL FORM**

**990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IS SUBJECT TO**

**EXAMINATION BY THE INTERNAL REVENUE SERVICE, GENERALLY FOR THREE YEARS**

**Part XIV** Supplemental Information (continued)

AFTER IT IS FILED.



**SCHEDULE F**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Statement of Activities Outside the United States**▶ Complete if the organization answered "Yes" to Form 990,  
Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2011**Open to Public  
Inspection

Name of the organization

**ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS**

Employer identification number

**35-1044487****Part I** **General Information on Activities Outside the United States.** Complete if the organization answered "Yes"  
to Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ **Yes** ☐ **No**
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
EAST ASIA AND THE PACIFIC	0	0	GRANTS TO RECIPIENTS LOCATED IN REGION		9,000.
<b>3 a Sub-total</b>	0	0			9,000.
<b>b Total from continuation sheets to Part I</b>	0	0			0.
<b>c Totals (add lines 3a and 3b)</b>	0	0			9,000.

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

Schedule F (Form 990) 2011

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any

recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

**Part II can be duplicated if additional space is needed.**

[illegible]

**2** Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by

the IRS, or for which the grantee has provided a section 501(c)(3) equivalency letter

**3** Enter total number of other organizations or entities



**Part IV Foreign Forms**

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

Schedule F (Form 990) 2011

**Part V** Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

SCHEDULE F, PART I, LINE 2: PROGRAM STAFF IDENTIFY APPROPRIATE  
SUB-RECIPIENTS THROUGH A RFP PROCESS; PAYMENT OF FUNDS IS TIED TO  
PERFORMANCE BY INVOKING SPECIFIC MILESTONES WHICH TRIGGER THE  
DISBURSEMENT OF FUNDS. ALL INVOICES ARE REVIEWED AND APPROVED BY A GRANTS  
MANAGER PRIOR TO PAYMENT TO INSURE COMPLIANCE WITH TERMS.

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization **ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS** Employer identification number  
**35-1044487**

**Part I** General Information on Grants and Assistance

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

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

**Part II** Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN ACADEMY OF PEDIATRICS 141 NORTHWEST POINT BLVD ELK GROVE VILLAGE, IL 60007	36-2275597	501(C)(3)	24,652.	0.			NURSE TRIAGE LINE PROJECT
AMERICAN NURSES ASSOCIATION 8515 GEORGIA AVENUE, SUITE 400 SILVER SPRING, MD 20910	13-1893923	501(C)(3)	125,506.	0.			IMMUNIZATION ADVOCACY
ARIZONA DEPARTMENT OF HEALTH SERVICES - 150 N. 18TH AVENUE, SUITE 520 - PHOENIX, AZ 85007	86-6004791	GOVERNMENT	66,000.	0.			H1N1 POLICY BARRIERS
CONNECTICUT DEPARTMENT OF PUBLIC HEALTH - 410 CAPITOL AVENUE - HARTFORD, CO 06134	06-6000798	GOVERNMENT	37,833.	0.			LEGAL PREPAREDNESS AND SOCIAL DISTANCING
EMORY UNIVERSITY 1599 CLIFTON ROAD, 4TH FLOOR ATLANTA, GA 30322	58-0566256	501(C)(3)	229,853.	0.			ENGAGING PARTNERS FOR PANDEMIC INFLUENZA
HARVARD SCHOOL OF PUBLIC HEALTH 677 HUNTINGTON AVENUE, ROOM 1012 BOSTON, MA 02115	04-2103580	501(C)(3)	832,882.	0.			META-LEADERSHIP DEVELOPMENT

**2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **29.**

**3** Enter total number of other organizations listed in the line 1 table **1.**

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

Schedule I (Form 990) (2011)

# ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS

## Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARVARD UNIVERSITY-OFFICE OF SPONSORED PROGRAMS - 1350 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	91,657.	0.			LEADERSHIP TRAINING TO NEW STATE HEALTH OFFICIALS
HEALTH RESEARCH & EDUCATIONAL TRUST - 155 N. WACKER DRIVE, SUITE 400 - CHICAGO, IL 60606	36-2203931	501(C)(3)	75,000.	0.			RESPIRATORY PERSONAL PROTECTION EQUIPMENT 2012 ASSESSMENT TO OF US ACUTE CARE HOSPITAL PROJECT.
INDIANA STATE DEPARTMENT OF HEALTH 2 N. MERIDIAN ST., 5-E INDIANAPOLIS, IN 46204	35-6000158	GOVERNMENT	5,000.	0.			INTEGRATING PUBLIC HEALTH CONSIDERATIONS TO ADDRESS CLIMATE CHANGE
MAINE NETWORK OF HEALTH COMMUNITIES - 15 HOSPITAL DRIVE - YORK, ME 03909	01-0742339	501(C)(3)	12,500.	0.			BUILDING CAPACITY FOR HEALTH IMPACT ASSESSMENT
MARYLAND HEALTH & MENTAL HYGIENE 201 W. PRESTON STREET BALTIMORE, MD 21202	52-6002033	GOVERNMENT	44,000.	0.			LEGAL PREPAREDNESS AND SOCIAL DISTANCING
MINNESOTA DEPARTMENT OF HEALTH P.O. BOX 64975 ST. PAUL, MN 55164	41-6007162	GOVERNMENT	40,490.	0.			CLIMATE CHANGE
NAPHSIS 962 WAYNE AVENUE SILVER SPRING, MD 20910	52-2265888	501(C)(3)	155,777.	0.			VITAL RECORDS
NATIONAL INDIAN HEALTH BOARD 926 PENNSYLVANIA AVENUE, SE WASHINGTON, DC 20003	23-7226316	501(C)(3)	192,166.	0.			LEADERSHIP TRIAL HEALTH
NGA 444 NORTH CAPITOL STREET WASHINGTON, DC 20001	23-7391796	501(C)(3)	247,696.	0.			STATE HEALTH POLICY

Schedule I (Form 990)

# ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NH DEPT. OF ENVIRONMENTAL SERVICES 29 HAZEN DRIVE CONCORD, NH 03302	02-6000618	GOVERNMENT	9,337.	0.			CLIMATE CHANGE & PUBLIC HEALTH CAPACITY BUILDING
NORTH CAROLINA INSTITUTE OF PUBLIC HEALTH (NCIPH) - CAMPUS BOX 8165, UNC - CHAPEL HILL, NC 27599	56-6001393	501(C)(3)	-17,664.	0.			LEADERSHIP DEVELOPMENT TO PUBLIC HEALTH OFFICIALS (AMOUNT RECOVERED FROM PRIOR YEAR)
NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD - 2121 SW BROADWAY, SUITE 300 - PORTLAND, OR 97201	93-0718154	501(C)(3)	188,802.	0.			LEADERSHIP TRIAL HEALTH
OREGON DEPARTMENT OF HUMAN SERVICES - 800 NE OREGON STREET, SUITE 930 - PORTLAND, OR 97232	93-6001752	GOVERNMENT	44,000.	0.			SOCIAL DISTANCING
PACIFIC ISLAND HEALTH OFFICERS ASSOCIATION (PIHOA) - 345 QUEEN ST. - HONOLULU, HI 96813	20-0298040	501(C)(3)	50,000.	0.			INFRASTRUCTURE
PUBLIC HEALTH LAW RESEARCH 1719 NORTH BROAD STREET PHILADELPHIA, PA 19122	26-3710746	501(C)(3)	24,999.	0.			LEGAL INTERVENTIONS TO REDUCE HEALTHCARE ASSOCIATED INFECTIONS
REGENTS OF THE UNIVERSITY OF MINNESOTA - 200 OAK STREET SE - PHILADELPHIA, MN 55485	41-6007513	501(C)(3)	319,011.	0.			AT-RISK POPULATIONS
RHODE ISLAND PUBLIC HEALTH INSTITUTE - BOX G-S121-2 - PROVIDENCE, RI 02912	50-0474726	501(C)(3)	9,040.	0.			CLIMATE CHANGE & PUBLIC HEALTH CAPACITY BUILDING
SAINT LOUIS UNIVERSITY 221 NORTH GRANT BLVD ST. LOUIS, MO 63108	43-0654872	501(C)(3)	153,768.	0.			LEADERSHIP TRAINING

Schedule I (Form 990)



# ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS

35-1044487

Page 1

Schedule I (Form 990)

## Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SARPY & ASSOCIATES, LLC 1955 OLD BALLARD FARM LANE CHARLOTTESVILLE, VA 22901	20-6222676		12,439.	0.			EFFECTIVENESS OF STATE HEALTH LEADERSHIP INITIATIVE
THE AMERICAN COLLEGE OF OBSTETRICS AND GYNECOLOGISTS - P.O. BOX 96920 - WASHINGTON, DC 20090	36-2217981	501(C)(3)	256,656.	0.			VACCINATION COVERAGE IN PREGNANT WOMEN
THE KEYSTONE CENTER 1628 STS. JOHN ROAD KEYSTONE, CO 80435	84-0688506	501(C)(3)	84,735.	0.			VACCINE SAFETY
UNIVERSITY OF NORTH CAROLINA AT CHAPEL HILL - 209 SOUTH ROAD - CHAPEL HILL, NC 27599	56-1118388	501(C)(3)	34,793.	0.			STATE HEALTH LEADERSHIP INITIATIVE PROGRAM
UNIVERSITY OF PITTSBURGH 4200 FIFTH AVENUE PITTSBURGH, PA 15213	25-0965591	501(C)(3)	48,185.	0.			PUBLIC HEALTH LAW & SCIENCE
WISCONSIN DEPT. OF NATURAL RESOURCES* - P.O. BOX 7921 - MADISON, WI 53707	39-6006436	GOVERNMENT	9,299.	0.			CLIMATE CHANGE & PUBLIC HEALTH CAPACITY BUILDING

Schedule I (Form 990)

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

Part IV

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

SCHEDULE I, PART I, LINE 2: PROGRAM STAFF IDENTIFY APPROPRIATE

SUB-RECIPIENTS THROUGH A RFP PROCESS; PAYMENT OF FUNDS IS TIED TO

PERFORMANCE BY INVOKING SPECIFIC MILESTONES WHICH TRIGGER THE DISBURSEMENT

OF FUNDS. ALL INVOICES ARE REVIEWED AND APPROVED BY A GRANTS MANAGER PRIOR

TO PAYMENT TO INSURE COMPLIANCE WITH TERMS.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No 1545-0047

**2011**

Open to Public  
Inspection

Department of the Treasury  
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

► Complete if the organization answered "Yes" to Form 990,  
Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization

**ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS**

Employer identification number

**35-1044487**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,  
Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items

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

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or  
reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

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

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

- |   |   |
|---|---|
| <input type="checkbox"/> Compensation committee                         | <input checked="" type="checkbox"/> Written employment contract                     |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input type="checkbox"/> Form 990 of other organizations                | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing  
organization or a related organization

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.**

**5** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation  
contingent on the revenues of

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III

**6** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation  
contingent on the net earnings of

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III

**7** For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments  
not described in lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the  
initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

Yes No

<b>1b</b>		
<b>2</b>		
<b>4a</b>		<b>X</b>
<b>4b</b>		<b>X</b>
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>	<b>X</b>	
<b>8</b>		<b>X</b>
<b>9</b>		

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

Schedule J (Form 990) 2011

**ASSOCIATION OF STATE AND**

**TERRITORIAL HEALTH OFFICIALS**

35-1044487

Page 2

Schedule J (Form 990) 2011

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

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

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

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 PAUL JARRIS	(i)	268,466.	45,900.	0.	36,938.	22,154.	373,458.
	(ii)	0.	0.	0.	0.	0.	0.
2 MARY CHILDRESS	(i)	167,690.	0.	0.	19,704.	7,192.	194,586.
	(ii)	0.	0.	0.	0.	0.	0.
3 JAMES BLUEMENSTOCK	(i)	187,922.	12,524.	0.	23,552.	8,820.	232,818.
	(ii)	0.	0.	0.	0.	0.	0.
4 JAMES PEARSON	(i)	185,017.	11,111.	0.	23,045.	12,056.	231,229.
	(ii)	0.	0.	0.	0.	0.	0.
5 SHARON MOFFAT	(i)	175,466.	0.	0.	20,617.	2,912.	198,995.
	(ii)	0.	0.	0.	0.	0.	0.
6 NICOLE KUNDO	(i)	139,396.	0.	0.	16,379.	13,557.	169,332.
	(ii)	0.	0.	0.	0.	0.	0.
7	(i)						
	(ii)						
8	(i)						
	(ii)						
9	(i)						
	(ii)						
10	(i)						
	(ii)						
11	(i)						
	(ii)						
12	(i)						
	(ii)						
13	(i)						
	(ii)						
14	(i)						
	(ii)						
15	(i)						
	(ii)						
16	(i)						
	(ii)						

Schedule J (Form 990) 2011

Part III Supplemental Information

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

PART I, LINE 7: THE FOLLOWING INDIVIDUALS RECEIVED NON-FIXED PAYMENTS

(BONUSES) DURING THE YEAR:

PAUL JARRIS (\$45,900)

JAMES BLUMENSTOCK (\$12,524)

JAMES PEARSON (\$11,111)

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

ASSOCIATION OF STATE AND  
TERRITORIAL HEALTH OFFICIALS

Employer identification number

35-1044487

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

PUBLIC HEALTH PRACTICE:

ASTHO ENGAGES IN NATIONAL DISCUSSIONS ON THE EMERGENCY CARE DRUG  
SHORTAGE ISSUE

IN RESPONSE TO SEVERAL INQUIRIES MADE BY STATE HEALTH OFFICIALS, ASTHO  
LEADERSHIP ACTIVELY ENGAGED IN THE NATIONAL DISCUSSION ON THE MOST  
RECENT SERIOUS SHORTAGE OF EMERGENCY CARE DRUGS. THIS INCLUDED  
ATTENDING A MEETING SPONSORED BY HHS/ASPR ON APRIL 16 COVERING FEDERAL  
EFFORTS TO REDUCE SHORTAGES, THE IMPACT OF DRUG SHORTAGES ON EMERGENCY  
CARE, ECONOMIC CAUSES OF DRUG SHORTAGES, AND COPING AND MITIGATION  
STRATEGIES WITH EMS AND EMERGENCY/TRAUMA CARE. FOLLOWING THIS MEETING,  
DR. NICOLE LURIE, HHS ASSISTANT SECRETARY FOR PREPAREDNESS AND  
RESPONSE, AND HER KEY STAFF DISCUSSED THE HIGHLIGHTS OF THIS MEETING  
WITH OUR MEMBERSHIP DURING AN ALL-S.H.O. CALL ON APRIL 20. WE HAVE HAD  
SEVERAL FOLLOW-UP DISCUSSIONS WITH OUR FEDERAL PARTNERS AND, AS A  
RESULT, ASPR ASKED ASTHO TO CONVENE A WORK GROUP COMPRISED OF NATIONAL  
LEADERS TO DEVELOP GUIDANCE AND OPTIONS ON VIABLE SHORT-TERM COPING AND  
MITIGATION STRATEGIES. THE WORKGROUP MET ON JULY 12-13 AND FEATURED  
APPROXIMATELY 45 INDIVIDUALS REPRESENTING 13 NATIONAL ASSOCIATIONS IN  
THE FIELDS OF PUBLIC HEALTH, EMERGENCY MEDICAL SERVICES, AND  
TRAUMA/EMERGENCY CARE SECTORS, AND KEY FEDERAL LEADERSHIP AND SUBJECT  
MATTER EXPERTS. THE DISCUSSIONS AND SHARED INFORMATION WILL LEAD TO THE  
DEVELOPMENT OF USEFUL TOOLS AVAILABLE BY THE END OF SEPTEMBER 2012,  
INCLUDING SUCCINCT SUMMARIES OF THE PROS AND CONS OF VARIOUS STRATEGIES  
ALONG WITH REFERENCE TO USEFUL RESOURCES CURRENTLY BEING CREATED AND  
USED IN THE FIELD.

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

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

132211  
01-23-12

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**PREVENTING PRESCRIPTION DRUG MISUSE, ABUSE AND DIVERSION ACROSS THE  
CONTINUUM**

ASTHO IS SUPPORTING STATES IN THE ASSESSMENT, IMPLEMENTATION, AND  
EVALUATION OF MULTILEVEL INTERVENTIONS AND POLICY STRATEGIES TO REDUCE  
THE MORBIDITY AND MORTALITY ASSOCIATED WITH PRESCRIPTION DRUG MISUSE AT  
THE POPULATION LEVEL, WHILE BALANCING CONCERNS OF ACCESS TO EFFECTIVE  
PAIN TREATMENT OPTIONS AT THE INDIVIDUAL AND COMMUNITY LEVELS. ASTHO  
FOCUSES ON HELPING STATES TO PLAN STRATEGICALLY ACROSS A CONTINUUM  
(PREVENTION, MONITORING/SURVEILLANCE, DIVERSION, AND  
TREATMENT/RECOVERY), ASSESSING THE FEASIBILITY OF POLICIES, AS WELL AS  
THE LEVEL OF PRIORITIZATION NEEDED TO STRENGTHEN OR MODIFY CURRENT  
EFFORTS IN THE STATE. WITH THE SUPPORT OF CDC, FIVE STATE TEAMS MET IN  
APRIL TO DISCUSS PLANS FOR MULTILEVEL POLICY INTERVENTIONS IN RESPONSE  
TO LARGE-SCALE INCREASES IN PRESCRIPTION OPIOID OVERDOSE DEATHS. THESE  
STATE TEAMS DEVELOPED SHORT AND LONG TERM ACTION STEPS AND ASTHO IS  
CONTINUING TO SUPPORT STATES IN THIS WORK AND TO GENERATE AWARENESS ON  
THE IMPACT OF PRESCRIPTION DRUGS ACROSS THE LIFESPAN.

**FOOD SAFETY**

THE FOLLOWING PRIORITY ACTIVITIES ASSOCIATED WITH FOOD SAFETY WERE  
CONDUCTED:

- CONGRESSIONAL STAFF BRIEFING ON FOOD SAFETY: ON NOV. 1, 2011, ASTHO,  
NACCHO, AND CONGRESSWOMAN ROSA DELAURO (D-CT) HOSTED A BRIEFING FOR  
CONGRESSIONAL STAFFERS TITLED, "FOOD SAFETY SURVEILLANCE: WHAT IS A  
FOODBORNE ILLNESS OUTBREAK? HOW CAN THEY BE PREVENTED?"

- WHITE HOUSE EXERCISE ON FOOD DEFENSE: ON NOV. 16, ASTHO PARTICIPATED

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IN A SENIOR LEVEL EXERCISE ON INTENTIONAL FOOD CONTAMINATION AT THE WHITE HOUSE. SENIOR OFFICIALS FROM HHS (ASPR, CDC, FDA) AND USDA ALSO ATTENDED THE EXERCISE. THE GOALS OF THE EXERCISE WERE TO EXAMINE THE ROLES, RESPONSIBILITIES, AND AUTHORITIES FOR GUIDING A UNIFIED FEDERAL RESPONSE TO INTENTIONAL FOOD CONTAMINATION OF OVERSEAS ORIGIN AND ASSESS THE EFFICACY OF THE PROCESSES FOR INFORMATION SHARING AMONG FEDERAL, STATE, LOCAL, TERRITORIAL, TRIBAL, AND PRIVATE-SECTOR PARTNERS.

- FOOD SAFETY ADVISORY GROUP MEETING: ASTHO HOSTED ITS FIRST FOOD SAFETY ADVISORY GROUP MEETING ON MARCH 1. THE MEETING PROVIDED AN OPPORTUNITY FOR THE FOOD SAFETY ADVISORY GROUP TO PROVIDE POLICY DIRECTION, INFORMATION, AND ADVICE ON HOW TO STRENGTHEN STATE FOODBORNE DISEASE PREVENTION AND CONTROL PROGRAMS TO ASTHO'S ENVIRONMENTAL HEALTH POLICY COMMITTEE.

- CONFIDENTIALITY AGREEMENTS WITH FDA: ASTHO HAS BEEN PARTNERING WITH FDA TO GET ALL STATE AND TERRITORIAL HEALTH OFFICIALS UNDER A 20.88 CONFIDENTIALITY AGREEMENT SO FDA IS ABLE TO SHARE NONPUBLIC INFORMATION WITH MEMBERS PRIOR TO PUBLIC RELEASE. THIS WOULD PROVIDE MORE TIME FOR ASTHO MEMBERS TO PREPARE FOR THE PUBLIC RELEASE OF NEW INFORMATION. IN ADDITION, ASTHO HAS BEEN ASKED TO SIGN A SIMILAR AGREEMENT SO ASTHO STAFF CAN BE AWARE OF THE SAME INFORMATION AS MEMBERS SO THAT ASTHO IS IN THE BEST POSITION POSSIBLE TO SUPPORT AND ASSIST MEMBERS.

- CDC'S NEW MULTI-STATE OUTBREAK EFFORTS: IN RESPONSE TO CDC'S CONCERN OVER CURRENT CAPACITY AND CAPABILITY TO RAPIDLY DETECT AND RESPOND TO FOODBORNE OUTBREAKS THAT SPAN MULTIPLE STATES, CDC HAS



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APPROACHED ASTHO TO HELP BRING TOGETHER STATE AND TERRITORIAL HEALTH OFFICIALS TO DISCUSS THE TOPIC. DR. JUDY MONROE, DIRECTOR OF CDC'S OFFICE OF STATE, TERRITORIAL, LOCAL, AND TRIBAL SUPPORT (OSTLTS), CONVENED A SMALL, HIGH-LEVEL WORKGROUP ON JULY 23 COMPRISED OF MEMBERS FROM ASTHO, NACCHO, AND CSTE, WHOSE CHARGE IS TO EXAMINE THIS ISSUE AND PROVIDE ACTIONABLE RECOMMENDATIONS FOR IMPROVEMENT. SPECIFIC TASKS OF THE GROUP INCLUDE IDENTIFYING POLICY BARRIERS THAT MUST BE OVERCOME TO FACILITATE MORE TIMELY AND EFFECTIVE COLLECTION AND SHARING OF DATA, PINPOINTING STANDARDIZED TOOLS AND RESOURCES NEEDED TO IMPROVE RESPONSE, AND DISCUSSING MODELS AND BEST PRACTICES THAT CAN BE CONSIDERED TO IMPROVE REGIONAL SHARING OF SERVICES AND COMMUNICATIONS AND COORDINATION.

#### HYDRAULIC FRACTURING DISCUSSIONS

ASTHO CONTINUES TO CONVENE STATE HEALTH OFFICIALS AND OTHER AGENCY STAFF TO DISCUSS THE PUBLIC HEALTH ISSUES RELATED TO HYDRAULIC FRACTURING AND THE ACTIONS STATES ARE TAKING TO ADDRESS SUCH CONCERNS. ORGANIZED CALLS WERE HELD IN NOVEMBER 2011 AND JUNE 2012 WHEN THE GROUP DISCUSSED RECENT NATIONAL DISCUSSIONS ON FRACKING AND HEALTH, STATE UPDATES, AND NEXT STEPS FOR ASTHO. THROUGH ITS SAFE WATER WORKGROUP, ASTHO ALSO ORGANIZED A SPEAKER SERIES TO DISCUSS FRACKING. IN ADDITION, ASTHO STAFF PARTICIPATED IN A MAY MEETING ORGANIZED BY THE INSTITUTE OF MEDICINE'S ROUNDTABLE ON ENVIRONMENTAL HEALTH SCIENCES, RESEARCH, AND MEDICINE ON THE USE OF HEALTH IMPACT ASSESSMENTS (HIAS) TO EVALUATE THE POTENTIAL HUMAN HEALTH IMPACTS OF THE SHALE GAS EXTRACTION PROCESS, AS WELL AS A FOLLOW-UP MEETING HELD BY ATSDR/CDC. ASTHO HAS AND WILL CONTINUE TO DISSEMINATE UPDATES AND NEW RESOURCES WITH SHOS AND STATE ENVIRONMENTAL HEALTH DIRECTORS AS THEY BECOME

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AVAILABLE. FRACKING WAS ALSO FEATURED IN THE ENVIRONMENTAL HEALTH  
SESSION AT THE SENIOR DEPUTIES ANNUAL MEETING HELD ON JULY 18 AT WHICH  
TIME THE COMMONWEALTH OF PENNSYLVANIA SHARED ITS EXPERIENCES AND  
APPROACH TO THIS CHALLENGING ISSUE.

#### HEALTHCARE-ASSOCIATED INFECTIONS (HAI)

ASTHO AND CDC HAVE COLLABORATED SINCE JULY 2010 TO ADVANCE STATE-LEVEL  
HAI PREVENTION EFFORTS. IN JANUARY 2012, ASTHO AND CDC RELEASED A  
REPORT, "POLICIES FOR ELIMINATING HEALTHCARE-ASSOCIATED INFECTIONS:  
LESSONS FROM STATE STAKEHOLDER ENGAGEMENT," AS A COMPANION TO THE  
TOOLKIT "ELIMINATING HEALTHCARE-ASSOCIATED INFECTIONS: STATE POLICY  
OPTIONS." THE NEW REPORT SUMMARIZES THE OUTCOMES OF STAKEHOLDER  
MEETINGS AND PHONE CONSULTATIONS REGARDING THE EARLY IMPACT OF HAI  
POLICIES IN STATES. ASTHO AND CDC INITIATED TWO EVALUATION PROJECTS  
THIS YEAR, EXAMINING THE IMPACT OF LEGAL INTERVENTIONS AND PREVENTION  
COLLABORATIVES IN REDUCING HAI.

#### ANTIVIRAL DISTRIBUTION AND OPTIMIZATION PROJECT

CDC, ASTHO, AND NACCHO HAVE BEEN ENGAGED IN AN EXPLORATORY PROJECT THAT  
EXAMINES THE CURRENT SYSTEM OF ANTIVIRAL MANAGEMENT AND DISTRIBUTION  
AND A NEW APPROACH UTILIZING THE PRIVATE SECTOR FOR DISTRIBUTION AND  
DISPENSING DURING A PANDEMIC. CDC CREATED AN ALTERNATIVE APPROACH  
BUILDING FROM THE LESSONS LEARNED FROM THE 2009 H1N1 PANDEMIC. THE  
APPROACH WOULD SHIFT MOST OF THE RESPONSIBILITY FOR ANTIVIRAL  
DISTRIBUTION AND DISPENSING TO PRIVATE-SECTOR SYSTEMS THAT ALREADY  
HANDLE DISTRIBUTION, DISPENSING, AND TRACKING OF PHARMACEUTICALS ON A  
DAILY BASIS. STATE AND LOCAL HEALTH DEPARTMENTS WOULD FOCUS ON  
DISTRIBUTION TO POPULATIONS THEY ARE DESIGNED TO SUPPORT, INCLUDING

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**PUBLIC HEALTH CLINICS AND UNIQUE POPULATIONS FOR WHICH MAINSTREAM  
SYSTEMS MAY NOT BE SUITABLE OR EASILY ACCESSIBLE. ASTHO HAS WORKED  
WITH CDC TO TEST THE CAPACITY OF PHARMACIES UNDER PANDEMIC LIKE  
CONDITIONS, PROVIDED INPUT FROM AN ADVISORY COMMITTEE ON SPECIFIC  
ISSUES OF INTEREST TO STATE PUBLIC HEALTH DEPARTMENTS, AND DEVELOPED A  
VARIETY OF REPORTS INCLUDING LESSONS LEARNED FROM H1N1 AND LEGAL  
ISSUES. THE NEXT STEP WILL BE FOR CDC AND HHS TO DETERMINE IF THIS  
PROJECT WILL PROGRESS TO POLICY DEVELOPMENT. ASTHO WILL CONTINUE TO  
WORK WITH CDC ON THIS PROJECT IN THE YEAR TO COME.**

**PANDEMIC AND SEASONAL INFLUENZA**

**ASTHO HAS BEEN WORKING WITH VARIOUS PARTNERS THROUGHOUT THE YEAR TO  
DEVELOP IMPROVED WAYS TO INCREASE ACCESS TO INFLUENZA VACCINE FOR  
DIFFERENT GROUPS AS ONE WAY TO PREPARE FOR A PANDEMIC. ASTHO  
COLLABORATED WITH THE AMERICAN CONGRESS OF OBSTETRICIANS AND  
GYNECOLOGISTS TO FURTHER IMPROVE INFLUENZA VACCINATIONS AMONG PREGNANT  
WOMEN, ASTHO CONTINUES TO CONVENE A GROUP OF PUBLIC HEALTH AND PHARMACY  
STAKEHOLDERS TO EXPAND PARTNERSHIP OPPORTUNITIES IN VACCINE DELIVERY,  
AND ASTHO IS WORKING WITH THE EMORY INTERFAITH HEALTH PROGRAM TO BUILD  
RELATIONSHIPS WITHIN NETWORKS OF FAITH-BASED AND COMMUNITY  
ORGANIZATIONS THAT EXTENDS REACH TO VULNERABLE, AT-RISK, AND MINORITY  
POPULATIONS FOR PREVENTION AND TREATMENT OF INFLUENZA. FINALLY, ASTHO  
WORKS IN PARTNERSHIP WITH THE CENTER FOR INFECTIOUS DISEASE RESEARCH  
AND POLICY (CIDRAP) TO COLLECT AND POST USEFUL PRACTICES FOR BOTH  
SEASONAL INFLUENZA RESPONSE AND FUTURE PANDEMIC PLANNING AND  
PREPAREDNESS EFFORTS.**

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### IMMUNIZATIONS - CHANGING LANDSCAPE

AS A RESULT OF THE CHANGING HEALTH CARE LANDSCAPE, THE FEDERAL SECTION 317 FUNDING FOR IMMUNIZATIONS IS CHANGING TOO. IN PREVIOUS YEARS STATES USED 317 FUNDS PRIMARILY TO PROVIDE IMMUNIZATIONS TO UNINSURED AND UNDERINSURED CHILDREN. WITH THE INCREASED ACCESS TO INSURANCE AND FIRST-DOLLAR COVERAGE FOR IMMUNIZATIONS, CDC IS SHIFTING THE FOCUS OF 317 TO ADULT POPULATIONS. ASTHO CONTINUES TO WORK CLOSELY WITH CDC TO ENABLE AN ONGOING CONVERSATION ABOUT THE IMPACT OF THESE CHANGES AT THE STATE LEVEL. ASTHO ALSO CONTINUES TO ENGAGE THE CDC ON THIRD-PARTY BILLING, DEPUTIZATION OF VFC TO LOCAL HEALTH DEPARTMENTS, THE IMPORTANCE OF IMMUNIZATION INFRASTRUCTURE THROUGH WORK WITH THE NATIONAL VACCINE ADVISORY COMMITTEE, AND PROMOTING THE OPPORTUNITY TO UTILIZE THE INCREASED REIMBURSEMENT RATE FOR VACCINE ADMINISTRATION AND DETERMINE WAYS TO MEASURE THE IMPACT.

### DENGUE OUTBREAK IN THE PACIFIC

IN NOV. 2011 AT THE REQUEST OF THE CDC, THE WORLD HEALTH ORGANIZATION, AND THE HEALTH MINISTRIES OF THE AFFECTED ISLANDS-AND CONSISTENT WITH OUR RECENTLY PROMULGATED REGIONAL RESPONSE PLAN-ASTHO JOINED THE INTERNATIONAL HUMANITARIAN RESPONSE TO THE RECENT DENGUE OUTBREAK IN THE FEDERATED STATES OF MICRONESIA AND THE REPUBLIC OF THE MARSHALL ISLANDS BY SOLICITING DONATIONS OF DEET-CONTAINING INSECT REPELLENT, WHICH LED TO DONATIONS OF MORE THAN \$100,000 WORTH OF INSECT REPELLENT.

### LESSONS FROM FUKUSHIMA NUCLEAR REACTOR RADIATION CRISIS

IN JUNE 2012, ASTHO PREPARED AND RELEASED, ON BEHALF OF THE NATIONAL ALLIANCE FOR RADIATION READINESS (NARR), A REPORT ENTITLED "FUKUSHIMA NUCLEAR REACTOR RADIATION CRISIS: A NATIONAL REVIEW OF THE US DOMESTIC

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**PUBLIC HEALTH AND MEDICAL RESPONSE." THIS WAS THE OUTPUT STEMMING FROM  
A MID-NOVEMBER 2011 NATIONAL REVIEW CONDUCTED BY THE NARR OF U.S.  
PUBLIC HEALTH AND MEDICAL RESPONSE TO DOMESTIC CONCERNS ARISING FROM  
THE MARCH 2011 INCIDENT AT THE JAPANESE FUKUSHIMA DAIICHI NUCLEAR  
POWER. MORE THAN 70 INDIVIDUALS REPRESENTING 17 NATIONAL PUBLIC  
HEALTH, MEDICAL, AND EMERGENCY MANAGEMENT ASSOCIATIONS AND 10 FEDERAL  
AGENCIES OR OPERATING DIVISIONS PARTICIPATED. KEY RECOMMENDATIONS FROM  
THE REPORT INCLUDE:**

- NEED STRONGER, MORE VISIBLE FEDERAL LEADERSHIP**
- NEED MORE PROACTIVE, TIMELY PUBLIC INFORMATION AND EDUCATION**
- LEVERAGE PUBLIC AND PRIVATE RESOURCES FOR A MORE ROBUST WHOLE  
COMMUNITY RESPONSE**
- CONTINUE TO INVEST FOR A PREPARED PUBLIC HEALTH ENTERPRISE**
- IMPROVE PREPAREDNESS AND RESILIENCE FOR THE FUTURE BY LEARNING FROM  
THE PAST**

**NARR HOPES THE REVIEW WILL PROVIDE VALUABLE INSIGHTS ON THE  
SELF-ASSESSED STRENGTHS AND GAPS OF THE COLLECTIVE RESPONSE AND SERVE  
AS A RESOURCE FOR POLICYMAKERS AND EMERGENCY PLANNERS FOR FUTURE  
ACTIONS LEADING TO MORE EFFECTIVE PREPARATION FOR, RESPONSE TO, AND  
RECOVERY FROM RADIATION OR NUCLEAR INCIDENTS. ASTHO IS THE DESIGNATED  
LEAD FOR THE NARR, WHICH IS FUNDED BY CDC'S NATIONAL CENTER FOR  
ENVIRONMENTAL HEALTH.**

#### **ADMINISTRATIVE PREPAREDNESS**

**IN COLLABORATION WITH ASPR, CDC, AND NACCHO, ASTHO IS WORKING TO  
DEVELOP GUIDELINES AND RECOMMENDATIONS THAT IDENTIFY BARRIERS,**

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CHALLENGES, AND POTENTIAL SOLUTIONS THAT STATE AND LOCAL HEALTH DEPARTMENTS ENCOUNTER WHEN ATTEMPTING TO ACCEPT, ALLOCATE, SPEND, MONITOR, AND REPORT ON FEDERAL FUNDING DURING A DISASTER. AN ENVIRONMENTAL SCAN DEVELOPED BY THE HARVARD SCHOOL OF PUBLIC HEALTH WORKING WITH ASTHO AND NACCHO RESULTED IN PRELIMINARY FINDINGS THAT WERE PRESENTED TO THE ASTHO FISCAL OFFICERS MEETING IN SANTA FE, NM IN APRIL. TOGETHER WITH PARTNERS FROM THE NATIONAL GOVERNORS ASSOCIATION, COUNCIL OF STATE GOVERNMENTS, NATIONAL ASSOCIATION OF STATE BUDGET OFFICERS, NATIONAL ASSOCIATION OF STATE PROCUREMENT OFFICIALS, AND NATIONAL ASSOCIATION OF STATE PERSONNEL EXECUTIVES, ASTHO WILL DEVELOP A REPORT THAT WILL DETAIL SOLUTIONS, PROMISING PRACTICES, AND MODELS STATE AND LOCAL HEALTH DEPARTMENTS EMPLOY TO OVERCOME THESE CHALLENGES. ASTHO HAS ENGAGED MEMBERS FOR PARTICIPATION IN FOCUS GROUPS FOR THE PROJECT. BEYOND THE EXPERIENCE OF THE H1N1 PANDEMIC RESPONSE, THIS PROJECT IS GUIDED BY THE PRINCIPLES THAT PARTNERSHIPS ARE THE FOUNDATION OF THESE EFFORTS AND THAT STATE AND LOCAL CAPABILITIES MUST BE HOMEGROWN. RECOMMENDATIONS FOR THE PROJECT COME FROM THE PRACTICE COMMUNITY AND ARE DESIGNED TO TRANSLATE ADMINISTRATIVE ACTIVITIES INTO PREPAREDNESS CAPABILITY. THE RECOMMENDATIONS WILL FOCUS ON: LEVERAGING PERSONNEL RESOURCES, DEVELOPING PROCEDURES, AND ESTABLISHING NEW TOOLS. FOLLOWING VETTING BY SEVERAL ASTHO AFFINITY GROUPS, THE FINAL REPORT WILL BE COMPLETED, PRESENTED, AND DISTRIBUTED IN SEPTEMBER 2012.

NEMA/ASTHO PREPAREDNESS POLICY JOINT WORK GROUP ACTIVITIES OVER THE LAST TWO YEARS, ASTHO HAS DEVELOPED A MUCH STRONGER PARTNERSHIP WITH THE NATIONAL EMERGENCY MANAGEMENT ASSOCIATION (NEMA) ON SEVERAL ACTIVITIES. A JOINT POLICY WORKGROUP HAS MET TWICE TO ADDRESS ISSUES OF COMMON CONCERN INCLUDING MEDICAL COUNTERMEASURES.

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FUNCTIONAL NEEDS SHELTERING REQUIREMENTS, AND THE NATIONAL PREPAREDNESS REPORT.

THESE MEETINGS HAVE INCLUDED RELEVANT FEDERAL PARTNERS AND HAVE SIGNIFICANTLY ADVANCED THE DIALOGUE OF A CLOSER WORKING RELATIONSHIP BETWEEN PUBLIC HEALTH AND EMERGENCY MANAGEMENT. NEMA AND ITS ASSOCIATED PARTNERS SUCH AS THE EMAC ADVISORY NETWORK AND THE NATIONAL HOMELAND SECURITY CONSORTIUM HAVE BROUGHT ASTHO AND ITS MEMBERS INTO NEW PARTNERSHIPS AND ACTIVITIES. PROMINENT AMONG THOSE WAS THE EMAC MUTUAL AID WORKSHOP HELD IN DES MOINES, IA IN MAY, WHICH INCLUDED PUBLIC HEALTH PARTICIPATION FOR THE FIRST TIME. THE SUCCESS OF THIS PARTNERSHIP HAS NOW CREATED DISCUSSIONS ABOUT EXPANDING THE ALLIANCE TO INCLUDE OTHER PARTNERS WITH SIMILAR CONCERNS SUCH AS THE NATIONAL GOVERNOR'S ASSOCIATION HOMELAND SECURITY ADVISORS.

NATIONAL HEALTH SECURITY PREPAREDNESS INDEX PROJECT (NHSPI) INITIATED THIS YEAR, THIS CDC-FUNDED PROJECT IS DESIGNED TO CREATE A SET OF COMMON NATIONAL INDICATORS THAT CAN BE APPLIED TO A HIGH-LEVEL ASSESSMENT OF PROGRESS IN ACHIEVING THE HEALTH PREPAREDNESS CAPABILITIES AND DRIVE CONTINUOUS QUALITY IMPROVEMENT. THIS AMBITIOUS PROJECT IS INTENDED TO MEET MULTIPLE NEEDS OF MANY STAKEHOLDERS AT ALL LEVELS OF GOVERNMENT. ASTHO HAS CONVENED SEVERAL WORKGROUPS TO DIRECT THIS INITIATIVE. KEY COMPONENTS OF THE PROJECT INCLUDE:

- THE NHSPI STEERING COMMITTEE (CHAIRER BY DR. JOHN LUMPKIN, ROBERT WOODS JOHNSON FOUNDATION AND ASTHO ALUMNUS) SERVING AS A HIGH-LEVEL POLICY SETTING GROUP CONSISTING OF PROMINENT PREPAREDNESS LEADERS FROM ACROSS THE PUBLIC HEALTH ENTERPRISE.

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- THE GOVERNANCE COMMITTEE IS CREATING A GOVERNANCE PLAN FOR THE  
LONG-TERM OWNERSHIP OF THE INDEX AND THE PROCESS FOR CHANGE AND  
RELEVANCE OF THE INDEX OVER TIME.

- THE COMMUNICATION/STAKEHOLDER ENGAGEMENT WORKGROUP IS IDENTIFYING  
RELEVANT STAKEHOLDERS TO THE PROJECT AND DEVELOPS COMMUNICATION  
STRATEGIES TO INCORPORATE STAKEHOLDER FEEDBACK DURING THE DEVELOPMENT  
OF THE INDEX.

- THE MODEL DESIGN/MEASUREMENT WORKGROUP IS IN THE PROCESS OF  
DEVELOPING THE FRAMEWORK FOR THE INDEX, SELECTS THE INDICATORS AND  
CREATES AN ALGORITHM FOR EVALUATION.

IN ADDITION TO THE ROLE OF CONVENER AND SUPPORT ON THE PROJECT TEAM,  
ASTHO DEVELOPED A WEBSITE FOR THE NHPPI PROJECT WHICH SERVES AS A  
PORTAL FOR BIDIRECTIONAL STAKEHOLDER FEEDBACK AND ENGAGEMENT. ASTHO AND  
CDC PROJECT STAFFS HAVE PRESENTED INFORMATION ABOUT THE NHPPI AT  
SEVERAL PUBLIC HEALTH CONFERENCES INCLUDING: THE ANNUAL PREPAREDNESS  
SUMMIT, THE CDC BOARD OF SCIENTIFIC COUNSELORS, AND THE PUBLIC HEALTH  
ACCREDITATION BOARD (PHAB). THE INDEX WILL BE A MULTIYEAR INITIATIVE,  
GRADUALLY INCORPORATING MORE DISCIPLINES IN THE FIELD OF PREPAREDNESS.  
AS THE PROJECT CONTINUES TO EVOLVE, WE WILL ENGAGE ADDITIONAL PARTNERS  
AND FEEDBACK FROM AFFECTED STAKEHOLDERS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

PUBLIC HEALTH PERFORMANCE:

PUBLICATION-JANUARY 2012

MADAMALA, K., SELLERS, K., BEITSCH, L., PEARSOL, J., AND JARRIS, P.

QUALITY IMPROVEMENT AND ACCREDITATION READINESS IN STATE PUBLIC HEALTH



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AGENCIES. JOURNAL OF PUBLIC HEALTH MANAGEMENT AND PRACTICE. 18 (1):  
9-18, 2012.

JPHMP LINK: [HTTP://WWW.NCBI.NLM.NIH.GOV/PUBMED/22139305](http://www.ncbi.nlm.nih.gov/pubmed/22139305)

JPHMP HIGHLIGHT: THERE WERE 3 SPECIFIC OBJECTIVES OF THIS STUDY. THE  
FIRST OBJECTIVE WAS TO EXAMINE THE PROGRESS OF STATE AND TERRITORIAL  
HEALTH ASSESSMENT, HEALTH IMPROVEMENT PLANNING, PERFORMANCE MANAGEMENT,  
AND QUALITY IMPROVEMENT (QI) ACTIVITIES AT STATE AND TERRITORIAL HEALTH  
AGENCIES, AND COMPARE FINDINGS TO THE 2007 FINDINGS WHEN AVAILABLE. A  
SECOND OBJECTIVE WAS TO EXAMINE RESPONDENT INTEREST AND READINESS FOR  
NATIONAL VOLUNTARY ACCREDITATION. A FINAL OBJECTIVE WAS TO EXPLORE  
ORGANIZATIONAL FACTORS (E.G., LEADERSHIP AND CAPACITY) THAT MAY  
INFLUENCE QI OR ACCREDITATION READINESS.

#### PUBLICATION-MAY 2012

KIRKWOOD, J. AND JARRIS, P.E. (2012) STATE OF PUBLIC HEALTH: ALIGNING  
HEALTH INFORMATICS ACROSS THE PUBLIC HEALTH ENTERPRISE. JOURNAL OF  
PUBLIC HEALTH MANAGEMENT AND PRACTICE. 18 (3): 288-290.

THIS COLUMN DISCUSSES THE ROLE OF THE GOVERNMENTAL PUBLIC HEALTH  
ENTERPRISE IN CREATING A UNIFIED AND COORDINATED ACTION THAT ENSURES  
THAT PUBLIC HEALTH INFORMATICS TRANSFORM HEALTH INFORMATION INTO  
ACTIONABLE INTERVENTIONS THAT IMPROVE HEALTH FOR ALL.

#### PUBLICATION-JULY 2012

OGDEN, LL; SELLERS, K; SAMMARTINO, C; BUEHLER, JW; BERNET, PM. FUNDING  
FORMULAS FOR PUBLIC HEALTH ALLOCATIONS: FEDERAL AND STATE STRATEGIES.  
JOURNAL OF PUBLIC HEALTH MANAGEMENT AND PRACTICE, 2012, 18(4), 309-316.  
THIS ARTICLE HIGHLIGHTS FINDINGS FROM A SURVEY OF STATE HEALTH AGENCIES  
ON THEIR USE OF FUNDING FORMULAS IN MAKING RESOURCE-ALLOCATION

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DECISIONS.

PUBLICATION-JULY 2012

LEIDER, JP; SELLERS, KS; SHAH, G; PEARSOL, J; JARRIS, PE. PUBLIC HEALTH  
SPENDING IN 2008: ON THE CHALLENGE OF INTEGRATING PHSSR DATA SETS AND  
THE NEED FOR HARMONIZATION. JOURNAL OF PUBLIC HEALTH MANAGEMENT AND  
PRACTICE, 2012, 18(4), 355-363.

THIS RESEARCH ARTICLE COMBINES FINANCIAL DATA FROM ASTHO AND NACCHO  
PROFILE SURVEYS TO GIVE A MORE COMPLETE PICTURE OF HEALTH DEPARTMENT  
SPENDING.

PUBLICATION-JULY 2012

JARRIS, PE; LEIDER, JP; RESNICK, B; SELLERS, K; YOUNG, JL. STATE OF  
PUBLIC HEALTH: BUDGETARY DECISION MAKING DURING TIMES OF SCARCITY.  
JOURNAL OF PUBLIC HEALTH MANAGEMENT AND PRACTICE, 2012, 18(4), 390-392.  
THIS COLUMN PRESENTS PRELIMINARY FINDINGS FROM THE BUDGET-SETTING AND  
PRIORITIES STUDY AND THE PRINCIPLES DISCUSSED DURING ASTHO'S 2011  
WINTER MEETING.

LAUNCH OF NEW QUALITY IMPROVEMENT DEMONSTRATION PROJECTS

ASTHO, WITH SUPPORT PROVIDED BY A GRANT FROM THE ROBERT WOOD JOHNSON  
FOUNDATION, IS PLEASED TO ANNOUNCE THE LAUNCH OF A NATIONAL  
DEMONSTRATION INITIATIVE ON QUALITY IMPROVEMENT (QI) PRACTICES IN STATE  
PUBLIC HEALTH PROGRAMS. FIVE STATE HEALTH AGENCIES HAVE BEEN SELECTED  
TO PARTICIPATE IN THE INITIATIVE BASED ON A COMPETITIVE REQUEST FOR  
APPLICATION ANNOUNCED IN DECEMBER 2011. THE PURPOSE OF THE NATIONAL  
DEMONSTRATION PROJECT IS TO INCREASE STATE READINESS FOR ACCREDITATION,  
DEMONSTRATE THE VALUE OF ACCREDITATION/QI, IMPROVE INTEGRATION OF

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**SERVICES AMONG STATE PUBLIC HEALTH PROGRAMS, AND USE STANDARD**

**METHODOLOGY TO MANAGE BUDGETS IN DIFFICULT TIMES. THE TRAINING FOR THE  
SELECTED STATES BEGAN IN MARCH WITH A TWO-DAY, IN-PERSON TRAINING AND  
WILL CONTINUE THROUGHOUT THE INITIATIVE THROUGH ON-SITE TRAININGS,  
WEBINARS, AND CONFERENCE CALLS.**

**EXPANSION OF ASTHO TA TO STATES THROUGH NPHII**

**ASTHO CONTINUES TO WORK CLOSELY WITH THE NATIONAL PUBLIC HEALTH  
IMPROVEMENT INITIATIVE (NPHII), NATIONAL PARTNERS, AND CDC OSTLTS TO  
COORDINATE TECHNICAL ASSISTANCE TO NPHII GRANTEES. TECHNICAL ASSISTANCE  
REQUESTS HAVE BEEN FOR SUPPORT ON VARIOUS ACCREDITATION PREPARATION  
TOPICS, INCLUDING REQUESTS FOR ASTHO'S ON-SITE ACCREDITATION WORKSHOP  
TO FACILITATE AN INTERNAL SELF-ASSESSMENT AGAINST THE PHAB STANDARDS  
FOR A DOCUMENTATION AND EVIDENCE READINESS ASSESSMENT. OTHER REQUESTS  
INCLUDE TIMELINE DEVELOPMENT FOR ACCREDITATION, WORKFORCE PLANNING, AND  
ASSISTANCE WITH THE DEVELOPMENT OF PHAB PREREQUISITES. ASTHO HAS ALSO  
CONVENED A WORKGROUP TO STUDY RETURN ON INVESTMENT (ROI) FOR PUBLIC  
HEALTH AGENCIES.**

**SUPPORT OF NATIONAL PUBLIC HEALTH DEPARTMENT ACCREDITATION**

**ASTHO CONTINUES TO SUPPORT VOLUNTARY NATIONAL ACCREDITATION THROUGH THE  
PUBLIC HEALTH ACCREDITATION BOARD AND PROVIDE TECHNICAL ASSISTANCE AND  
RESOURCES TO STATE HEALTH AGENCIES SEEKING ACCREDITATION. IN APRIL  
ASTHO ORGANIZED AN ACCREDITATION COORDINATOR LEARNING COMMUNITY, A PEER  
NETWORK WHERE MEMBERS EXCHANGE ACCREDITATION-RELATED RESOURCES AND  
ENGAGE WITH COLLEAGUES IN OTHER STATE HEALTH AGENCIES FOR THE PURPOSES  
OF SUCCESSFULLY SERVING AS AN ACCREDITATION COORDINATOR AND LEADING AN  
APPLICATION PROCESS. TO DATE, ASTHO HAS CONVENED THE GROUP TWICE AND**

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**FEATURED PHAB STAFF AND TWO STATE ACCREDITATION APPLICANTS AS SPEAKERS.**

**ASTHO HAS ALSO LAUNCHED A WEB-BASED SOCIAL NETWORK WHERE MEMBERS CAN  
SHARE PROMISING PRACTICES AND RESOURCES.**

**THE PUBLIC HEALTH AGENCY, SYSTEMS, AND COMMUNITY HEALTH IMPROVEMENT  
TRAINING**

**THE PUBLIC HEALTH AGENCY, SYSTEMS, AND COMMUNITY HEALTH IMPROVEMENT  
TRAINING (FORMERLY KNOWN AS THE NPHPSP ANNUAL TRAINING) WAS MAY 8-9 IN  
ATLANTA. THIS YEAR'S TRAINING OFFERED OPPORTUNITIES TO LEARN ABOUT  
PUBLIC HEALTH AGENCY ACCREDITATION, SYSTEMS PERFORMANCE STANDARDS,  
QUALITY IMPROVEMENT, HEALTH ASSESSMENT, AND IMPROVEMENT PLANNING, AND  
HOW ALL OF THESE SUPPORT AN OVERALL PUBLIC HEALTH IMPROVEMENT STRATEGY.  
THE TRAINING EMPHASIZED PREPARING FOR PUBLIC HEALTH ACCREDITATION BOARD  
(PHAB) ACCREDITATION AND IMPLEMENTING THE NEWLY RE-ENGINEERED NPHPSP  
TOOLS. ASTHO STAFF PRESENTED ON THE FOLLOWING TOPICS DURING THE  
TWO-DAY TRAINING:**

- HEALTH ASSESSMENT, IMPROVEMENT PLANNING, AND STRATEGIC PLANNING 101**
- HEALTH ASSESSMENT AND IMPROVEMENT PLANNING 201: PUTTING IT ALL  
TOGETHER**
- ENGAGING LEADERSHIP AND GAINING BUY-IN**
- PRIORITIZATION METHODS**
- THE NUTS AND BOLTS OF STATE HEALTH IMPROVEMENT PLANNING**
- FACILITATING THE STATE NPHPSP**

**NATIONAL PUBLIC HEALTH IMPROVEMENT INITIATIVE (NPHII) GRANTEE MEETING  
THE NATIONAL PUBLIC HEALTH IMPROVEMENT INITIATIVE (NPHII) GRANTEE  
MEETING WAS MAY 9-11 IN ATLANTA. THE GOALS OF THE MEETING INCLUDED**

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**EMPOWERING PERFORMANCE IMPROVEMENT STAFF BY EXPANDING AND ENHANCING  
THEIR TECHNICAL KNOWLEDGE AND SKILLS, AND IDENTIFYING AND DISCUSSING  
HOW BEST TO SUPPORT SUSTAINED PERFORMANCE IMPROVEMENT PRACTICES ACROSS  
PUBLIC HEALTH JURISDICTIONS. THE OUTCOME OF THE MEETING INCLUDED AN  
INCREASED KNOWLEDGE OF PERFORMANCE IMPROVEMENT PRACTICES AND TOOLS AS  
WELL AS NETWORK BUILDING AMONG PERFORMANCE IMPROVEMENT MANAGERS, NPHII  
GRANTEES, CAPACITY BUILDING ASSISTANCE PARTNERS, AND OTHERS WHO MAY  
SERVE AS RESOURCES. ASTHO STAFFED A KIOSK DURING THE TRAINING IN ORDER  
TO PROVIDE WRITTEN RESOURCES TO GRANTEES AS WELL AS ANSWER QUESTIONS  
RELATED TO PROVIDING TECHNICAL ASSISTANCE TO THE STATE HEALTH AGENCIES.  
ASTHO STAFF PRESENTED ON THE FOLLOWING TOPICS DURING THE TRAINING:**

- NPHII NATIONAL PARTNERS UPDATE**
- ENGAGING LEADERSHIP AND GAINING BUY-IN**
- HEALTH ASSESSMENTS AND IMPROVEMENT PLANNING: NUTS AND BOLTS**

**ASTHO PROFILE SURVEY**

**THE 2012 ASTHO PROFILE SURVEY IS SCHEDULED TO BE IN THE FIELD IN  
SEPTEMBER AND OCTOBER. THIS SURVEY IS THE MOST IMPORTANT SOURCE OF  
INFORMATION ON STATE AND TERRITORIAL HEALTH AGENCIES.**

**FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:**

**PUBLIC HEALTH PROMOTION AND DISEASE PREVENTION:**

**MAXIMIZING THE COMMUNITY HEALTH IMPACT OF COMMUNITY HEALTH NEEDS  
ASSESSMENTS CONDUCTED BY TAX-EXEMPT HOSPITALS**

**ASTHO CONVENED SIX NATIONAL PUBLIC HEALTH ORGANIZATIONS TO DEVELOP A  
CONSENSUS STATEMENT ON COMMUNITY HEALTH NEEDS ASSESSMENTS (CHNA) WITH**

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SPECIFIC RECOMMENDATIONS TO IRS FOR RULES THAT AFFECT TAX-EXEMPT

HOSPITALS. THE AMERICAN PUBLIC HEALTH ASSOCIATION, THE ASSOCIATION OF  
SCHOOLS OF PUBLIC HEALTH, THE NATIONAL ASSOCIATION OF COUNTY AND CITY  
HEALTH OFFICIALS, NATIONAL ASSOCIATION OF LOCAL BOARDS OF HEALTH,  
NATIONAL NETWORK OF PUBLIC HEALTH INSTITUTES, AND PUBLIC HEALTH  
FOUNDATION ALL JOINED ASTHO IN THIS EFFORT. THESE ASSESSMENTS AND  
STRATEGIES ENSURE THAT HOSPITALS HAVE THE INFORMATION THEY NEED TO  
MATCH BENEFITS WITH THE NEEDS OF THEIR COMMUNITIES. THEY ALSO PROVIDE  
AN OPPORTUNITY TO IMPROVE COORDINATION OF HOSPITAL COMMUNITY BENEFITS  
WITH OTHER EFFORTS TO IMPROVE COMMUNITY HEALTH. BY STATUTE, THE CHNAS  
MUST TAKE INTO ACCOUNT INPUT FROM "PERSONS WHO REPRESENT THE BROAD  
INTERESTS OF THE COMMUNITY SERVED BY THE HOSPITAL FACILITY, INCLUDING  
THOSE WITH SPECIAL KNOWLEDGE OF OR EXPERTISE IN PUBLIC HEALTH." WITH  
SUPPORT FROM CDC, ASTHO IS CONTINUING ITS WORK TO DEVELOP RESOURCES AND  
TOOLS TO SUPPORT STATE HEALTH AGENCIES IN THEIR WORK WITH NONPROFIT  
HOSPITALS TO ASSURE CHNAS HAVE THE OPTIMUM UTILITY AND AVOID  
DUPLICATION.

PUBLICATION-- FEBRUARY 2012

JOHNSON, T. STATE ENVIRONMENTAL HEALTH PROGRAMS VARY WIDELY, ASTHO  
SURVEY FINDS. THE NATION'S HEALTH. 41(10): 9.

NATION'S HEALTH LINK:

[HTTP://THENATIONSHEALTH.AFHAPUBLICATIONS.ORG/CONTENT/41/10/9.EXTRACT](http://thenationshealth.afhapublications.org/content/41/10/9.extract)

NATION'S HEALTH HIGHLIGHT: DESPITE SHRINKING BUDGETS, THE  
RESPONSIBILITIES OF SOME STATE ENVIRONMENTAL HEALTH PROFESSIONALS HAVE  
EXPANDED TO ADDRESS NEW ISSUES, ACCORDING TO A RECENT SURVEY FROM THE  
ASSOCIATION OF STATE AND TERRITORIAL HEALTH OFFICIALS.

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PUBLICATION-MAY 2012

PLISKA, E.S. 2012. IMMIGRANTS AND CANCER. ENCYCLOPEDIA OF IMMIGRANT  
HEALTH. EDS. S. LOU & M. SAJATOVIC. DRESDEN, GERMANY: SPRINGER-VERLAG  
PUBLISHING.

THE "IMMIGRANTS AND CANCER" ENTRY IN THE ENCYCLOPEDIA OF IMMIGRANT  
HEALTH INCLUDES THE MOST COMMON TYPES OF CANCERS AMONG IMMIGRANTS, THE  
DISPARITIES WITHIN THE CANCER TYPES, AND THE VARIOUS BARRIERS (E.G.  
LANGUAGE, CULTURE, ACCESS TO HEALTHCARE) THAT INFLUENCE THE INCIDENCE  
OF CANCERS AMONG IMMIGRANT POPULATIONS.

HEALTHY BABIES

IN OCTOBER 2011, THE ASTHO PRESIDENT ISSUED A PRESIDENTIAL CHALLENGE TO  
ALL STATE AND TERRITORIAL HEALTH OFFICIALS (SHOS) TO IMPROVE BIRTH  
OUTCOMES BY REDUCING INFANT MORTALITY AND PREMATUREITY IN THE UNITED  
STATES. AS PART OF THE PRESIDENT'S CHALLENGE, ASTHO WAS PROUD TO BE A  
PARTNER IN THE JANUARY 2012 HRSA-SPONSORED INFANT MORTALITY SUMMIT. THE  
SUMMIT BROUGHT TOGETHER STATE TEAMS LED BY SHOS AND FEATURED  
REPRESENTATIVES FROM MEDICAID, GOVERNOR'S OFFICES, LEGISLATIVE STAFF,  
HOSPITALS, ACADEMIA, AND OTHER PARTNER ORGANIZATIONS. AT PRESS TIME, 46  
STATES AND THE DISTRICT OF COLUMBIA HAD TAKEN THE ASTHO PRESIDENT'S  
CHALLENGE PLEDGE TO REDUCE PREMATUREITY BY 8 PERCENT BY 2014 (FROM 2009  
BASELINE), WHICH AFFORDS THEM A UNIQUE PARTNERSHIP OPPORTUNITY WITH THE  
MARCH OF DIMES. THE PLEDGE AFFIRMS THE STATE HEALTH AGENCY'S SUPPORT OF  
PROGRAMS AND POLICIES THAT REDUCE THE PREMATURE BIRTH RATE AND BUILDS  
WIDER AWARENESS OF THE STATE'S PREMATUREITY RATES AND OTHER RELATED  
MATERNAL AND CHILD HEALTH INDICATORS. ASTHO HAS DEVELOPED A  
COMPREHENSIVE WEBSITE (WWW.ASTHO.ORG/HEALTHYBABIES) TO PROVIDE

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**RESOURCES TO STATE HEALTH AGENCIES, INCLUDING EXAMPLES OF STATE WAIVERS  
AND MEDICAID AND HOSPITAL POLICIES.**

**WITH THE SUPPORT OF HRSA, CDC, AND CMS, ASTHO IS PURSUING A THREE-TIER  
APPROACH TO CONTINUE TO SUPPORT THE HEALTHY BABIES INITIATIVE: 1)  
SUPPORTING REGIONS IV, V, AND VI STATE TEAM PARTICIPATION IN HRSA'S  
COLLABORATIVE INFORMATION AND INNOVATION NETWORK (COIN); 2) WORKING  
WITH ALL STATE AND TERRITORIAL HEALTH OFFICIALS (STHOS) AND THEIR  
LEADERSHIP TEAMS TO DEVELOP AND SHARE RESOURCES; AND 3) ENGAGING OTHER  
NATIONAL PARTNERS TO COORDINATE EFFORTS FOR MAXIMUM IMPACT.**

**PUBLIC HEALTH AND PRIMARY CARE INTEGRATION STRATEGIC MAPPING  
ASTHO CONVENED MEMBERS AND NATIONAL EXPERTS TO DEVELOP A PUBLIC HEALTH  
AND PRIMARY CARE STRATEGIC MAP DESIGNED TO GUIDE OUR COLLECTIVE WORK  
OVER THE NEXT SEVERAL YEARS. IN PARTNERSHIP WITH IOM, AND WITH FUNDING  
FROM HRSA AND THE UNITED HEALTH FOUNDATION, THIS STRATEGIC MAPPING  
SESSION WAS HELD ON JULY 25-26. INVITEES INCLUDED STATE HEALTH  
OFFICIALS, REPRESENTATIVES FROM KEY FEDERAL AGENCIES, PRIMARY CARE  
PROVIDERS, REPRESENTATIVES FROM HEALTH DELIVERY SYSTEMS, IOM COMMITTEE  
MEMBERS, AND OTHER CRITICAL STAKEHOLDERS WORKING IN THE AREA OF HEALTH  
SYSTEMS IMPROVEMENT. THE MEETING WAS INFORMED BY IOM REPORTS: "PRIMARY  
CARE AND PUBLIC HEALTH: EXPLORING INTEGRATION TO IMPROVE POPULATION  
HEALTH" AND "AN ENVIRONMENTAL SCAN OF INTEGRATED APPROACHES FOR  
DEFINING AND MEASURING TOTAL POPULATION HEALTH." THE STRATEGIC MAPPING  
MEETING HAS RESULTED IN A DRAFT STRATEGIC PLAN WITH 3-YEAR TARGETED  
GOALS, OBJECTIVES, AND ACTION STEPS. THIS PLANNING WILL CONTINUE BY  
IDENTIFYING OPPORTUNITIES FOR COLLABORATION AND PARTNERSHIP BETWEEN THE  
PRIMARY CARE AND PUBLIC HEALTH SECTORS TO COMBINE RESOURCES AND ACHIEVE**



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**IMPROVED QUALITY OF CARE, LOWER HEALTHCARE COSTS, AND IMPROVED HEALTH  
FOR POPULATIONS.**

#### **HEALTH-IN-ALL-POLICIES PROJECT**

**ASTHO BEGAN A 5-YEAR PROJECT WITH NCEH/CDC IN FALL 2011 WITH THE  
PRIMARY FOCUS OF EDUCATING AND EMPOWERING STATE HEALTH LEADERSHIP TO  
PROMOTE HEALTH-IN-ALL-POLICIES APPROACHES. ASTHO FORMED A NATIONAL  
STEERING COMMITTEE COMPRISED OF STATE HEALTH AGENCY STAFF TO GUIDE THE  
IMPLEMENTATION OF THIS EFFORT AND PROVIDE EXPERTISE ON RESOURCES,  
POLICY, AND PROCESSES. THE STEERING COMMITTEE HAD THEIR FIRST MEETING  
ON APRIL 5 AND DISCUSSED THE BENEFITS AND CHALLENGES OF A  
HEALTH-IN-ALL-POLICIES APPROACH, CAME TO CONSENSUS ON A DEFINITION OF  
HEALTH-IN-ALL-POLICIES, SHARED SUCCESS STORIES AND BEST PRACTICES FROM  
STATES, AND PROVIDED ASTHO WITH SUGGESTIONS FOR IMPLEMENTATION  
STRATEGIES. THE INFORMATION WILL BE COMPILED INTO RESOURCES, WHICH WILL  
BE DISTRIBUTED TO STATE HEALTH LEADERSHIP LATER THIS YEAR. ASTHO ALSO  
FORMED AN ADVISORY GROUP, COMPRISED OF STAFF FROM OUTSIDE OF ASTHO'S  
MEMBERSHIP, THAT PROVIDE AN EXTERNAL PERSPECTIVE ON THE BEST WAYS TO  
WORK WITH OTHER SECTORS TO INCLUDE HEALTH IN THEIR CONSIDERATIONS.  
ASTHO'S ENVIRONMENTAL HEALTH, PREVENTION, SURVEY, AND STATE HEALTH  
POLICY TEAMS ARE WORKING TOGETHER ON HEALTH-IN-ALL-POLICIES ACTIVITIES  
AND THE DEVELOPMENT OF NEW RESOURCES.**

#### **HEALTH EQUITY**

**ASTHO CONTINUES TO LEAD IN MULTIPLE AREAS ON THE WORK OF HEALTH EQUITY  
AS GUIDED BY THE ASTHO HEALTH EQUITY STRATEGIC MAP CROSS PROGRAM.  
ASTHO HAS PRODUCED CASE STUDIES ON THE ECONOMIC IMPACT OF HEALTH  
EQUITY. AN INTRODUCTORY STORY AND FOUR CASE STUDIES HAVE BEEN COMPLETED**

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ON ALASKA, MARYLAND, MINNESOTA, AND OREGON, AS WELL AS A REGIONAL CASE STUDY OF HEALTH EQUITY PROGRAMS FROM LOUISIANA TO TEXAS, THE SOUTHERN REGION OF THE UNITED STATES. THE CASE STUDIES HAVE BEEN DISSEMINATED TO ASTHO PARTNERS AND MEMBERS AND ARE ON THE WEBSITE. ADDITIONALLY, ASTHO HOSTED A WEBINAR ON "MAKING THE ECONOMIC CASE FOR HEALTH EQUITY: TRIBAL AND STATE SOLUTIONS".

IMPORTANTLY, ASTHO SUPPORTS THE AFFILIATE HEALTH EQUITY SUBCOMMITTEE. THE SUBCOMMITTEE MEETS MONTHLY TO DISCUSS AFFILIATE INVOLVEMENT IN HEALTH EQUITY ISSUES AND IDENTIFICATION AND SHARING OF PROMISING PRACTICES IN STATE HEALTH AGENCIES TO ADDRESS HEALTH DISPARITIES. FOR EXAMPLE, IN JULY 2012 THE SUBCOMMITTEE PRESENTED TO THE FULL AFFILIATE COUNCIL ON HEALTH EQUITY RESOURCES FROM COLORADO, WASHINGTON STATE, AND NATIONAL ASSOCIATION OF CHRONIC DISEASE DIRECTORS. THE AFFILIATE COUNCIL VOTED TO APPROVE THE JOINT POSITION STATEMENT ON HEALTH EQUITY WHICH IS POSTED ON ASTHO'S WEBSITE.

UNITED HEALTH FOUNDATION FUNDING ASTHO TO SUPPORT STATE HEALTH AGENCIES  
ASTHO HAS BEEN AWARDED A GRANT TO SUPPORT STATES IN RESPONDING TO THE UNITED HEALTH FOUNDATION'S (UHF'S) "AMERICA'S HEALTH RANKINGS: A CALL TO ACTION." USING 22 YEARS OF AMERICA'S HEALTH RANKINGS, WE WILL IDENTIFY STATES THAT HAVE IMPROVED THEIR RANKINGS IN SELECTED MEASURES. THROUGH CLOSE COORDINATION WITH UHF DATA ANALYSIS, INTERVIEWS, AND OTHER RESEARCH TECHNIQUES, WE WILL IDENTIFY FACTORS THAT HAVE CONTRIBUTED TO THE IMPROVED RANKINGS. WE WILL DELIVER THREE OUTCOMES FROM THIS RESEARCH: (I) REPORTS THAT DOCUMENT AND ANALYZE THE RESEARCH FINDINGS, (II) PRESENTATIONS AT PUBLIC HEALTH MEETINGS AND CONFERENCES, INCLUDING ASTHO'S ANNUAL MEETING, AT WHICH WE WILL HONOR STATES

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**DEMONSTRATING NOTABLE IMPROVEMENT WITH AN ANNUAL AWARD, AND (III) A  
LEARNING COLLABORATIVE THAT SUPPORTS ACTIVE SHARING OF KNOWLEDGE AND  
EXPERIENCES AMONG STATE PUBLIC HEALTH LEADERS.**

**FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:**

**CROSS-CUTTING PROGRAMS:**

**STATE HEALTH LEADERSHIP INITIATIVE: HELPING OUR NEW MEMBERS SUCCEED  
NETWORKING AND PUBLIC POLICY MEETING  
SESSIONS FOCUSED ON LEVERAGING THE POWER OF THE POSITION OF STATE  
HEALTH OFFICIAL; BUILDING SUCCESSFUL RELATIONSHIPS WITH YOUR GOVERNOR,  
STATE AND FEDERAL POLICYMAKERS, THE MEDIA, AND LOCAL PUBLIC HEALTH  
OFFICIALS; ACCREDITATION; AND PEER SUPPORT.**

**LEADERSHIP FOR NEW HEALTH OFFICIALS (HARVARD)**

**ASTHO WELCOMED NINE NEW STATE AND TERRITORIAL HEALTH OFFICIALS AT  
LEADERSHIP FOR NEW HEALTH OFFICIALS JULY 29-AUGUST 3 AT THE HARVARD  
KENNEDY SCHOOL OF GOVERNMENT. IN ADDITION TO SESSIONS ON STRATEGY,  
DIRECTING A STATE HEALTH AGENCY, COMMUNICATIONS, LEADING DURING A  
CRISIS, AND BUDGET PRIORITIZATION, THIS YEAR'S PROGRAM INCLUDES NEW  
CASE STUDIES ON REORGANIZATIONS AND CROSS-JURISDICTIONAL SHARING OF  
SERVICES. PARTICIPANTS ALSO WERE TO HAVE RECEIVED EXECUTIVE COACHING  
BASED ON THEIR SELF- AND 360-DEGREE ASSESSMENTS AND WERE INVITED TO  
SHARE AN INNOVATION FROM THEIR STATE OR TERRITORY. AS IN THE PAST TWO  
YEARS, POTENTIAL MENTORS ATTENDED THE PROGRAM TO FOSTER NETWORKING,  
PEER-TO-PEER TECHNICAL ASSISTANCE, AND FACILITATE MORE INTENTIONAL  
MENTOR-MENTEE MATCHES.**

**WINTER MEETING**

132212  
01-23-12

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

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TWENTY-NINE STATE AND TERRITORIAL HEALTH OFFICIALS PARTICIPATED IN OUR  
STRATEGIC CONVERSATIONS ABOUT BUDGET PRIORITIZATION, REORGANIZATIONS,  
ACCREDITATION, AND THE IMPACTS OF HEALTH REFORM, AMONG OTHER THINGS.  
MEMBERS FOUND THE WORKSHOP DISCUSSIONS HELPFUL, SAYING THEY "GOT BEYOND  
THE POLITICS" AND HELPED THEM THINK CREATIVELY ABOUT APPROACHES TO  
DELIVERING PUBLIC HEALTH SERVICES THAT MEET THE PUBLIC'S NEEDS.

ASTHO STAFF WORKED WITH PUBLIC HEALTH SYSTEMS RESEARCHER TO SYNTHESIZE  
THE DECISION FRAMEWORKS DISCUSSED AT OUR WINTER MEETING WITH THOSE  
IDENTIFIED THROUGH LAST FALL'S BUDGET PRIORITIZATION SURVEY. THIS  
INFORMED A PUBLICATION IN THE JOURNAL OF PUBLIC HEALTH MANAGEMENT AND  
PRACTICE AND CONTINUES TO INFORM ADDITIONAL TOOLS FOR ASTHO'S MEMBERS.  
SEVERAL OTHER RECENT ACTIVITIES HAVE EVOLVED OUT OF THIS MEETING,  
INCLUDING ASTHO'S INVOLVEMENT IN THE CONSENSUS STATEMENT REGARDING THE  
COMMUNITY BENEFIT ACCOUNTABILITY OF TAX-EXEMPT HOSPITALS TO BE REPORTED  
ON THE IRS-990 AND WORK TO ASSESS THE FEASIBILITY OF FEE-FOR-SERVICE  
REVENUE GENERATION AND ACTION PLANS TO SUPPORT STATES IN THE TRANSITION  
TO THIS MODEL.

#### INDIVIDUALIZED SERVICES AND FUNDING

NINE NEW HEALTH OFFICIALS ARE ACTIVELY ENGAGED IN MENTORING  
RELATIONSHIPS. ASTHO CONTINUOUSLY WORKS WITH ALL HEALTH OFFICIALS WHO  
HAVE SERVED TWO YEARS OR LESS TO MATCH THEM TO A MENTOR WHO CAN PROVIDE  
A SAFE SPACE TO SHARE CHALLENGES AND STRATEGIES.

AN ASTHO EXECUTIVE HAS VISITED TWELVE OF THE NEW HEALTH OFFICIALS.  
THESE VISITS PROVIDE NEW MEMBERS AN ORIENTATION TO ASTHO AND ENABLE  
ASTHO TO BETTER UNDERSTAND THE CHALLENGES EACH NEW MEMBER FACES.

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THIS YEAR, NINE HEALTH OFFICIALS USED THEIR PROFESSIONAL DEVELOPMENT  
FUND AND SIX STATES HAVE RECEIVED STRATEGIC PLANNING GRANTS THROUGH  
SHLI.

**ASTHO ANNUAL MEETINGS**

MORE THAN 200 PUBLIC HEALTH LEADERS, INCLUDING 37 STATE AND TERRITORIAL  
HEALTH OFFICIALS, ATTENDED EACH OF THE TWO ANNUAL MEETINGS HELD THIS  
YEAR - IN PORTLAND, OR IN OCTOBER 2011 AND IN AUSTIN, TX IN SEPTEMBER  
2012.

**ASSISTING MEMBERS WITH FEE-FOR-SERVICE REVENUE GENERATION**

IN AN EFFORT TO SUPPORT STATES AND TERRITORIES AS WE APPROACH 2014 WHEN  
MOST IN THE U.S. POPULATION WILL BE INSURED, ASTHO SURVEYED STATE  
HEALTH AGENCIES TO ASSESS THEIR NEEDS AND PRACTICES IN THE AREA OF  
GENERATING REVENUE BY CHARGING FEES FOR SERVICES. ASTHO USED THIS  
INFORMATION TO ENGAGE SEVERAL AFFILIATES AND PARTNERS TO MAXIMIZE THE  
SUPPORT AND TECHNICAL ASSISTANCE AVAILABLE TO STATE HEALTH AGENCIES IF  
THEY NEED TO GENERATE MORE REVENUE FROM FEES IN THE FUTURE. WE ARE ALSO  
IN CONTINUOUS DIALOGUE WITH THE ADMINISTRATION TO HELP THEM UNDERSTAND  
THE COMPLEXITIES OF THIS ISSUE FOR STATES AND TERRITORIES AND TO CREATE  
A SMOOTH TRANSITION TO A FEE-FOR-SERVICE MODEL WHERE APPROPRIATE.

**ONLINE COMMUNITY OF PRACTICES INITIATIVE LAUNCHED TO IMPROVE ACCESS TO  
YOUR COLLEAGUES**

ASTHO CURRENTLY SUPPORTS 10 DIFFERENT PEER NETWORKS, INCLUDING THE  
STATE HEALTH OFFICIALS. WE ALSO ENGAGE 15 FORMALLY RECOGNIZED  
COMMITTEES THAT SUPPORT THE ASTHO BOARD OF DIRECTORS WITH GUIDANCE AND

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**EXPERTISE. ASTHO IS WORKING TO CREATE MORE USER-FRIENDLY ONLINE  
COMMUNITIES OF PRACTICE. THE ONLINE COMMUNITIES OF PRACTICE WILL  
FEATURE MORE EASILY SEARCHED DOCUMENT SHARING, DISCUSSION BOARDS, AND  
OTHER COMMON SOCIAL INTERNET FEATURES.**

**2012 CHIEF FISCAL OFFICERS SPRING WORKSHOP**

**ASTHO HELD ITS FOURTH ANNUAL CFO SPRING WORKSHOP ON APRIL 23-25 IN  
SANTA FE, NM. FISCAL REPRESENTATIVES FROM 27 STATE HEALTH AGENCIES AS  
WELL AS REPRESENTATIVES FROM CDC ATTENDED THE MEETING. TOPICS INCLUDED  
A NEW PUBLIC HEALTH UNIFORM DATA SYSTEM, INCREASING REVENUE FROM  
BILLING AND COLLECTIONS, THE RECENT IOM REPORT ON PUBLIC HEALTH  
FINANCE, ASTHO'S PROFILE AND BUDGET CUTS SURVEYS, ADMINISTRATIVE  
PREPAREDNESS, AND HEALTH INSURANCE EXCHANGES.**

**STATE LEGISLATIVE LIAISON PEER NETWORK**

**ASTHO'S STATE HEALTH POLICY AND PUBLIC HEALTH LAW WORK SUPPORTS STATE  
HEALTH AGENCIES IN THEIR EFFORTS TO ADVANCE PUBLIC HEALTH POLICIES  
PRIMARILY THROUGH ONGOING COMMUNICATION WITH THE STATE LEGISLATIVE  
LIAISON (SLL) PEER NETWORK. EVERY SIX WEEKS, THE PEER NETWORK CONVENES  
THROUGH A CONFERENCE CALL TO SHARE INFORMATION AND STRATEGIES. THESE  
CALLS OFTEN REVEAL LEGISLATIVE TRENDS, OPPORTUNITIES, AND CHALLENGES  
FACING MANY STATE HEALTH AGENCIES. TOPICS HAVE INCLUDED: STRENGTHENING  
IMMUNIZATION EXEMPTIONS, VACCINATION OF HEALTH CARE WORKERS, STATE  
MEDICAL MARIJUANA PROGRAMS, CONSOLIDATION AND REGIONALIZATION OF LOCAL  
HEALTH DEPARTMENTS, AND HEALTH-IN-ALL-POLICIES. ON THESE CALLS, ASTHO  
HIGHLIGHTS THE WORK OF OTHER NATIONAL ORGANIZATIONS THAT MAY IMPACT  
PUBLIC HEALTH AND STATE HEALTH AGENCIES. IN ADDITION TO THE CALLS,  
ASTHO STAFF DEVELOPED A PROSPECTUS FOR THE 2012 STATE LEGISLATIVE**

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SESSIONS, REGULARLY PRESENTS STATE LEGISLATIVE TRENDS BEFORE ASTHO  
POLICY COMMITTEES AND OTHER PEER NETWORKS, FACILITATES PEER-TO-PEER  
TECHNICAL ASSISTANCE REQUESTS AMONG THE SLL PEER NETWORK, AND HOLDS AN  
ANNUAL IN-PERSON SLL MEETING IN JULY.

3RD NEW SENIOR DEPUTIES ORIENTATION AND 19TH ANNUAL SENIOR DEPUTIES  
MEETING

THROUGH ITS COOPERATIVE AGREEMENT WITH CDC AND WITH FUNDING FROM THE DE  
BEAUMONT FOUNDATION, THE SENIOR DEPUTIES COMMITTEE, IN PARTNERSHIP WITH  
ASTHO STAFF, SUCCESSFULLY LED THE NEW SENIOR DEPUTIES ORIENTATION AND  
ANNUAL MEETING HELD JULY 16-19 IN BOSTON. AS MANY AS 30 RECENTLY  
APPOINTED SENIOR DEPUTIES AND INVITED EXPERIENCED SENIOR DEPUTIES  
PARTICIPATED IN THE ORIENTATION.

THE SENIOR DEPUTIES ANNUAL MEETING HAD THE LARGEST EVER NUMBER OF  
REGISTRANTS (100), REPRESENTING 46 STATES AND TERRITORIES. THE THEME OF  
THE SENIOR DEPUTY ANNUAL MEETING WAS "PUBLIC HEALTH - AN INVESTMENT IN  
THE FUTURE," AND THE PURPOSE OF THE MEETING WAS TO DEMONSTRATE THAT  
PUBLIC HEALTH AND PREVENTION IS A WORTHWHILE INVESTMENT. THE SESSIONS  
WERE STRUCTURED AROUND FIVE KEY ELEMENTS FOR A STATE HEALTH DEPARTMENT  
TO ACHIEVE SUCCESS: STRONG PARTNERSHIPS, A SKILLED WORKFORCE, EFFECTIVE  
COMMUNICATION, THE APPROPRIATE USE OF MODERN TECHNOLOGY, AND THE  
ABILITY TO SHOW THE RETURN ON INVESTMENT IN OUR EFFORTS. PARTICIPANTS  
NETWORKED AND EXCHANGED IDEAS AROUND THE FOLLOWING SESSIONS: MAKING THE  
CASE FOR PUBLIC HEALTH: WHAT IS THE ROI, PARTNERING WITH THE HEALTH  
CARE SYSTEM; POLITICAL STRATEGIES FOR STATE HEALTH DEPARTMENTS, AND  
HEALTH DEPARTMENT OF THE FUTURE. THROUGHOUT THE MEETING, SENIOR  
DEPUTIES WERE PROVIDED TOOLS AND RESOURCES TO ASSIST THEM WITH

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STRENGTHENING THEIR STATE HEALTH DEPARTMENT.

EXPENSES \$ 1,308,291. INCLUDING GRANTS OF \$ 0. REVENUE \$ 1,800.

#### MEMBERSHIP

EXPENSES \$ 860,177. INCLUDING GRANTS OF \$ 0. REVENUE \$ 126,885.

#### GOVERNMENT RELATIONS:

APPROPRIATE FEDERAL FUNDING FOR PUBLIC HEALTH PROGRAMS IN FY 2012 ON DEC. 17, 2011 CONGRESS PASSED THE FY12 APPROPRIATIONS BILL, WHICH INCLUDED EITHER LEVEL OR INCREASED FUNDING FOR 80 PERCENT OF ASTHO'S LEGISLATIVE PRIORITIES FOR THE YEAR. ASTHO STAFF AND MEMBERS CONDUCTED NO LESS THAN 224 MEETINGS WITH CONGRESS AND ADMINISTRATION OFFICIALS DURING THE FY12 APPROPRIATIONS SEASON, WHICH UNDOUBTEDLY AFFECTED STATE PUBLIC HEALTH'S SUCCESS IN SECURING APPROPRIATE FUNDING LEVELS FOR THESE VITAL PUBLIC HEALTH PROGRAMS. IN ADDITION TO IN-PERSON MEETINGS, ASTHO STAFF AND MEMBERS TOOK PART IN TWO ACTION ALERTS DURING THE APPROPRIATIONS SEASON FOCUSED ON PUBLIC HEALTH PROGRAMS BROADLY AND THE PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT, IN PARTICULAR.

#### SAVE THE PREVENTION AND PUBLIC HEALTH FUND STRATEGY

ASTHO DEVELOPED A "SAVE THE PREVENTION AND PUBLIC HEALTH FUND" STRATEGY AS TASKED BY THE JOINT COUNCIL IN DECEMBER 2010. SINCE THAT TIME, THERE HAVE BEEN SEVEN ATTEMPTS TO CUT OR ELIMINATE THE FUND. ASTHO, ALONG WITH OTHER KEY PARTNERS INCLUDING THE TRUST FOR AMERICA'S HEALTH, THE AMERICAN PUBLIC HEALTH ASSOCIATION, THE NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS, AND 760 OTHER ORGANIZATIONS, HAVE DEVELOPED AND SENT LETTERS TO CONGRESS, THE PRESIDENT, AND THE

SECRETARY OF HEALTH AND HUMAN SERVICES; PARTICIPATED IN ADVOCACY DAYS

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AND ACTION ALERTS; AND CONDUCTED HUNDREDS OF LEGISLATIVE AND  
ADMINISTRATION VISITS TO SUPPORT THE FUND. UNFORTUNATELY, ON FEBRUARY  
22 THE MIDDLE CLASS TAX RELIEF AND JOB CREATION ACT CUT \$6.25 BILLION  
FROM THE FUND TO PAY FOR A 10-MONTH EXTENSION OF THE SUSTAINABLE GROWTH  
RATE "DOC FIX." THROUGH FY2022, HOWEVER, \$13.5 BILLION REMAINS IN THE  
FUND SO ASTHO'S EFFORTS TO SAVE THE FUND WILL CONTINUE.

#### 2012 ASTHO HILL DAY

ASTHO HELD ITS ANNUAL HILL DAY IN MARCH, PROVIDING STATE HEALTH  
OFFICIALS WITH THE OPPORTUNITY TO MEET WITH THE U.S. CONGRESS AND THE  
ADMINISTRATION TO DISCUSS ASTHO'S ADVOCACY AGENDA AND BUILD  
RELATIONSHIPS AND CONNECTIONS WITH FEDERAL POLICYMAKERS. THIS YEAR, 17  
STATE HEALTH OFFICIALS PARTICIPATED. ASTHO'S TARGETED ADVOCACY AGENDA  
FOR 2012 (FY 2013), DEVELOPED THROUGH EXTENSIVE DISCUSSION BY MEMBERS  
OF THE GOVERNMENT RELATIONS COMMITTEE, FOCUSES ON FUNDING SUPPORT FOR  
THE SAME CRITICAL PUBLIC HEALTH PROGRAMS AS THE PRIOR YEAR. DURING THE  
WEEK OF HILL DAY, ASTHO'S BOARD MET WITH A NUMBER OF ADMINISTRATION  
OFFICIALS. IN ADDITION, ASTHO MEMBERS PARTICIPATED IN MEETINGS WITH 59  
CONGRESSIONAL OFFICES IN BOTH THE HOUSE OF REPRESENTATIVES AND THE  
SENATE.

COORDINATED STRONGER ALIGNMENT OF ADVOCACY WITH AFFILIATES AND OTHER  
PUBLIC HEALTH PARTNERS

ALTHOUGH ASTHO'S FEDERAL ADVOCACY AGENDA IS TARGETED ON A FEW KEY  
PUBLIC HEALTH PROGRAMS, ASTHO STAFF STAYS ENGAGED ON A VARIETY OF OTHER  
PUBLIC HEALTH PRIORITIES THROUGH EFFECTIVE AND ONGOING COORDINATION  
WITH ASTHO'S AFFILIATE ORGANIZATIONS AND OTHER PUBLIC HEALTH PARTNERS.

NOTABLY, ASTHO AND ITS PARTNER NACCHO COMMONLY SEND JOINT LETTERS ON

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TOPICS OF MUTUAL INTEREST AND CONDUCT JOINT MEETINGS ON CAPITOL HILL,  
INCLUDING A SERIES OF MEETINGS HELD LATE OCT. 2011 IN WHICH WE MET WITH  
CONGRESSIONAL LEADERS SHOWING A UNITED PUBLIC HEALTH ENTERPRISE.

ASTHO'S FEDERAL GOVERNMENT RELATIONS TEAM ALSO HOLDS CONFERENCE CALLS  
THREE TIMES PER MONTH WITH THE FEDERAL GOVERNMENT RELATIONS AND  
LEADERSHIP STAFF OF THE AFFILIATES TO COORDINATE MESSAGE STRATEGIES AND  
LEGISLATIVE AGENDAS.

EXPENSES \$ 606,135. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 4: THE BY-LAWS WERE AMENDED IN  
SEPTEMBER 2012 TO ALLOW AN ALUMNI MEMBER TO SERVE ON THE BOARD OF DIRECTORS  
WITHOUT A VOTE.

FORM 990, PART VI, SECTION A, LINE 6: ASTHO MEMBERS ARE THE CHIEF HEALTH  
OFFICIALS OF THE PUBLIC HEALTH AGENCY OF EACH OF THE UNITED STATES, THE  
U.S. TERRITORIES, AND THE DISTRICT OF COLUMBIA. ALSO ALUMNI MEMBERS MAY  
CHOOSE TO PAY DUES AND RETAIN AN ADVISORY ROLE TO THE ASSOCIATION'S  
MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS ELECT THE VOTING  
MEMBERS OF THE GOVERNING BODY ANNUALLY.

FORM 990, PART VI, SECTION A, LINE 7B: THE MEMBERSHIP ASSEMBLY REVIEWS THE  
ACTIONS AND RECOMMENDATIONS OF THE BOARD OF DIRECTORS AT LEAST ANNUALLY.  
THE MEMBERSHIP APPROVES ALL ASSOCIATION POLICY STATEMENTS AND REVIEWS THE  
ASSOCIATION'S PRIORITIES AND STRATEGIC PLAN.

FORM 990, PART VI, SECTION B, LINE 11: THE AUDIT COMMITTEE IS PROVIDED

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WITH A COPY OF THE IRS FORM 990 FOR REVIEW AND APPROVAL PRIOR TO FILING THE FORM WITH THE IRS. ALL MEMBERS OF THE GOVERNING BODY RECEIVE A COPY OF THE FILED IRS FORM 990.

FORM 990, PART VI, SECTION B, LINE 12C: THE WRITTEN CONFLICT OF INTEREST POLICY IS ANNUALLY DISTRIBUTED AND SIGNED BY THE DIRECTORS, OFFICERS, SENIOR STAFF MEMBERS, AND MEMBERS OF COMMITTEES THAT HAVE BEEN DELEGATED THE POWER OF THE BOARD OF DIRECTORS.

ANY CONFLICTS OF INTEREST ARE INVENTORIED BY THE CHIEF OF MEMBER SERVICES AND DISCLOSED TO THE FULL BOARD. THE AUDIT COMMITTEE IS TASKED WITH MONITORING AND ADMINISTERING COMPLIANCE. THE AUDIT COMMITTEE CAN REFER MATTERS TO THE EXECUTIVE COMMITTEE, WHO HAS FINAL AUTHORITY ON RESOLUTION OF CONFLICTS OF INTEREST FOR ITS MEMBERS, INCLUDING EXPULSION.

FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE EXECUTIVE COMMITTEE. OVERSIGHT WAS DELEGATED TO THE PRESIDENT AND PRESIDENT-ELECT WHO WORKED WITH A COMPENSATION SPECIALIST. THE PROCESS WAS DOCUMENTED. THE SALARY FOR OTHER STAFF IS DETERMINED BY THE EXECUTIVE DIRECTOR BASED ON PERFORMANCE REVIEWS AND MARKET SURVEYS. THE EXECUTIVE DIRECTOR'S LAST SALARY REVIEW WAS CONDUCTED IN JUNE 2012.

FORM 990, PART VI, SECTION C, LINE 19: THE ASSOCIATION'S AUDITED FINANCIAL STATEMENTS, GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.