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# $\mathsf{Form}\, 990$

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)

2012

OMB No 1545-0047

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

Open to Public Inspection

	roi tile	2012 Caleridal year, or tax year beginning and end	iiig		<u> </u>
В	Check if applicable	C Name of organization		D Employer identifi	cation number
	Addres change	ASSOCIATION OF SMALL BUSINESS DEV. CENTI	R		
	Name change	Doing Business As		01-0	365191
	Initial		m/suite	E Telephone numbe	•
F	Termin	·	,50.10		
7=	lated  Amend			G Gross receipts \$	2,019,129.
늗	—lreturn ⊟Applica	City, town, or post office, state, and ZIP code  BURKE, VA 22015	ŀ		
_	Jtiòn pendin	BURKE, VA 22015		H(a) Is this a group re	
		F Name and address of principal officer.C. EDWARD ROWE, III		for affiliates?	Yes X No
		SAME AS C ABOVE		H(b) Are all affiliates inc	
		empt status: 501(c)(3) _X_ 501(c)( 6 ) ◀ (insert no.) 4947(a)(1) or	527	If "No," attach a	list (see instructions)
		e: ► WWW.ASBDC-US.ORG		H(c) Group exemption	
			L Year o	of formation: 1979 N	M State of legal domicile: ME
LP.	art I	Summary			
a)	1	Briefly describe the organization's mission or most significant activities TO SUP1	PORT	ITS MEMBER	S IN THEIR
ဋ		EFFORTS TO ASSIST THE DEVELOPMENT OF SMALL	BUS	INESS IN TH	E U.S.
T.	2	Check this box   if the organization discontinued its operations or disposed of the continued its operations.			
š	3	Number of voting members of the governing body (Part VI, line 1a)		3	10
ĕ	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	10
త క	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	10
ii.				6	0
Activities & Governance	6	Total number of volunteers (estimate if necessary)		<del></del>	
ĕ	/ a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.
Revenue				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		0.	0.
	9	Program service revenue (Part VIII, line 2g)		1,937,195.	1,860,298.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		<u>61,087.</u>	77,850.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		<u> </u>	430.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		<u>1,999,142.</u>	1,938,578.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		595,575.	637,080.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ē	. b	Total fundraising expenses (Part IX, column (D), line 25)	. —		
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,291,922.	1,191,473.
	18	Total expenses Add lines 13-17 (must equal Part IX, column (À), line 25)		1,887,497.	1,828,553.
	10	Revenue less expenses Subtract line 18 from line 12	٦٥٢	111,645.	110,025.
Net Assets or	g 13			ginning of Current Year	· · · · · ·
sts.	8 20	Total assets (Part X, line 16)	137	2,767,990.	End of Year 2,955,381.
SSI	20	·	1 <u>#</u>	74,174.	
et	21	Total liabilities (Part X, line 26)  Net assets or fund balances Subtract line 21 from line 20  OGDEN. LIT	<del>     </del>		62,177.
<u></u>	<u>22</u> art II	Net assets or fund balances Subtract line 21 from line 20 UGUCN, UI		2,693,816.	2,893,204.
_				<del>-                                    </del>	
		Ities of perjury, I declare that I have examined this return, including accompanying schedules and			ly knowledge and belief, it is
true	e, correc	t, and complete. Declaration of preparer (other tha <del>n offi</del> cer) is based on all information of which p	preparer	has any knowledge.	/
		& Cashillan		× [1/08/a	(013
Sig	gn 💮	Signature of officer		Daxe /	
He	re	C. EDWARD ROWE, III, PRESIDENT AND CEO			<del></del>
		Type or print name and title			
		Print/Type preparer's name Preparer's signature,	0	ate Check	PTIN
Pai	d	STEVEN M. COLLINS Sleve VI. Collins	<u>-                                    </u>	11/7/13 If self-employ	P00090521
Pre	parer	Firm's name MURRAY & CAVANAUGH, P.C., CPA'S		Firm's EIN	54-1152891
	Only	Firm's address 1901 N. FT. MYER DR., SUITE 1100			
	•	ARLINGTON, VA 22209-1688		Phone no. (	703) 527-8012
Ma	y the IF	RS discuss this return with the preparer shown above? (see instructions)			X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

	rt III   Statement of Program Service Accomplishments
rai	<del></del>
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	TO REPRESENT THE COLLECTIVE INTEREST OF OUR MEMBERS BY PROMOTING,
	INFORMING, SUPPORTING AND CONTINUOUSLY IMPROVING THE SMALL BUSINESS
	DEVELOPMENT CENTERS NETWORK, WHICH DELIVERS NATIONWIDE EDUCATIONAL
	ASSISTANCE TO STRENGTHEN SMALL/MEDIUM BUSINESS MANAGEMENT, THEREBY
2	Did the organization undertake any significant program services during the year which were not listed on
	the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X 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 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 \$ Including grants of \$ ) (Revenue \$ )
	THE ASSOCIATION REPRESENTS THE COLLECTIVE INTERESTS OF ITS MEMBERS BY
	PROMOTING, INFORMING, SUPPORTING AND CONTINUOUSLY IMPROVING THE SMALL
	BUSINESS DEVELOPMENT CENTERS NETWORK, WHICH DELIVERS NATIONWIDE
	EDUCATIONAL ASSISTANCE TO STRENGHTEN SMALL/MEDIUM BUSINESS MANAGEMENT,
	THEREBY CONTRIBUTING TO THE GROWTH OF LOCAL, STATE AND NATIONAL
	A MEDIUM OF COMMUNICATION AND EXCHANGE OF INFORMATION AMONG THE
	MEMBERS. THE ASSOCIATION ALSO FACILITATES THE PURCHASE OF WORKSHOP
	MATERIALS OF VALUE TO THE MEMBERS' SMALL BUSINESS DEVELOPMENT CENTERS
	COUNSELORS.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	SINCE 1994 THE SMALL BUSINESS ACT PROVIDES THAT THE U.S. SMALL BUSINESS
	ADMINISTRATION (SBA) CONTRACT WITH THE ASSOCIATION TO PROVIDE FOR AN
	ACCREDITATION PROCESS FOR THE SMALL BUSINESS DEVELOPMENT CENTER
	PROGRAM. THE SBA IS REQUIRED TO CONSIDER THE RESULTS OF THE
	ACCREDITATION PROCESS WHEN EVALUATING THE PERFORMANCE OF A SMALL
	BUSINESS DEVELOPMENT CENTER (SBDC) FOR PURPOSES OF EXTENDING OR
	RENEWING ITS COOPERATIVE AGREEMENT. THE ASSOCIATION PERFORMS AN
	ACCREDITATION ON EACH SBDC GRANTEE ONCE EVERY FOUR YEARS. THE
	ASSOCIATION PROVIDES WRITTEN REPORTS OF THE RESULTS OF EACH
	ACCREDITATION TO THE SBA FOR ITS USE. THE ACCREDITATION PROCESS USED IS
	BASED ON ESTABLISHED GUIDELINES AND EDUCATION AND TRAINING IS TO BE
	PROVIDED TO THE ASSOCIATION'S MEMBERS ON A REGULAR BASIS.
4c	(Code) (Expenses \$
	Other program as well (Describe in Schedule O.)
40	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
<u>4e</u>	Total program service expenses
23200	

				T
4	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		Yes	<u>No</u>
1	If "Yes," complete Schedule A	1		¥
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
•	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	X	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		<u>X</u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u>X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	44-	х	
b	Part VI  Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a	Λ	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	110		
Ŭ	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
_	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	ļ	X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Ves." complete Schedule F. Parts Land IV	1/16		x
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	14b	<del>                                     </del>	
13	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			<del></del>
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
-	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III .	19	ļ	X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
<u>b</u>	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	000	<u></u>
		Form	uuri	(2012)

Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II X 21 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 29 If "Yes," complete Schedule I, Parts I and III 22 X Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 X 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified 26 X person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 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 X of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a Х b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b

director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29

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

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,

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

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

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

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

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

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

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O

Form 990 (2012)

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35a

35b

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X

X

X

X

X

Х

X

Par	Check if Schedule O contains a response to any question in this Part V			<u></u>
	, and the second of the second		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 9			1,0
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 10			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	,		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		<u> </u>
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country.			
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.	_		v
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?  Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a_		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	50		
Va	any contributions that were not tax deductible as charitable contributions?	6a		х
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Ou		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year		,	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e_		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		-
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		-
	Sponsoring organizations maintaining donor advised funds.  Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	- 55		<u> </u>
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them)	)		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		İ	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<del> </del>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		<del> </del>
	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
_	organization is licensed to issue qualified health plans	1		
	Enter the amount of reserves on hand  Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<del>  **</del>
	1 100, mad it mod a 1 of m 120 to report sheet payments. In 110, provide an explanation in confidence of		000	(2012)

232005 12-10-12 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		=			X
Sec	tion A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	1	0		
	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.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other			
	officer, director, trustee, or key employee?			2		X
3	Did the organization delegate control over management duties customarily performed by or under the	ne dire	ct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?			3		X_
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 wa	as filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		5	ļ	X
6	Did the organization have members or stockholders?			6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or			
	more members of the governing body?			7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	stockh	olders, or			
	persons other than the governing body?			7b	X	L
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	1	X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ached	at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u> </u>	X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code )			<u> </u>
					Yes	
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		<del> </del>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	ly befo	re filing the form?	11a	X	<del> </del>
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	_	<del> </del>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X	<del> </del>
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe			
	ın Schedule O how this was done			120	X	<del> </del>
13	Did the organization have a written whistleblower policy?			13	-	X
14	Did the organization have a written document retention and destruction policy?			14		X
15	Did the process for determining compensation of the following persons include a review and approve	-	naependent			1
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	,				v
а ,	The organization's CEO, Executive Director, or top management official			15a		X
b	Other officers or key employees of the organization			15b	+	X
16-	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	ma=4 :	uth a			
юа	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment V	viula	- مه		
h	taxable entity during the year?  If "Yes " did the organization follow a written policy or procedure requiring the organization to evaluate	ita ita :	narticipation	16a	+	X
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization or the organization of the organ		-			
	exempt status with respect to such arrangements?	ınzalıc	113	16b		
Sec	tion C. Disclosure			1 100	Ц	
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 (Sect	ion 501(c)(3)s only	) availe	 ble	
	for public inspection. Indicate how you made these available. Check all that apply	. ,000		, availa	2.0	
	Own website Another's website X Upon request Other (explain	ın Sc	hedule (O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co		•	and fina	ıncial	
	statements available to the public during the tax year		2	III IÇ		
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the organi	zation <sup>.</sup>	<b>•</b>	
	THE ORGANIZATION - 703-764-9850				_	
	8990 BURKE LAKE ROAD, BURKE, VA 22015					
232006 12-10-		·		For	m <b>990</b>	(2012)

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

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

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

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

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per week	box	not c , unle cer ar	Pos heck ss pe	more rson	than is bot	h an	( <b>D</b> ) Reportable compensation from	<b>(E)</b> Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) ALLAN ADAMS	4.00	٠,								0
DIRECTOR	4 00	X	<b>├</b>					0.	0.	0.
(2) CHRISTIAN CONROY	4.00	٠,								•
DIRECTOR	4 00	X						0.	0.	0.
(3) JAMES HECKMANN	4.00					ļ		0.	١	^
DIRECTOR	4.00	X	├-					Ų.	0.	0.
(4) MARY PETERS	4.00	X			ŀ			0.	0.	0.
DIRECTOR (F) WARK DEMOTILE.	4.00	^	├					0.	<u> </u>	
(5) MARK PETRILLI DIRECTOR	4.00	X						0.	0.	0.
(6) BRETT ROGERS	4.00	1	-					1	0.	
DIRECTOR	3.00	x						0.	0.	0.
(7) GAYLE R. KUGLER	4.00								0.	<u> </u>
DIRECTOR - TERM ENDED 2012		X				ļ		0.	0.	0.
(8) JAMES KING	4.00					Г				
BOARD CHAIR		X		x				0.	0.	0.
(9) GEORGIANNA PARKIN	4.00									
BOARD VICE CHAIR		X		X		1		0.	0.	0.
(10) DIANE HOWERTON	4.00									
BOARD SECRETARY		X		Х				0.	0.	0.
(11) MICHAEL YOUNG	4.00									
TREASURER		X		X	<u> </u>	<u> </u>	<u> </u>	0.	0.	0.
(12) AL SALGADO	4.00									
BOARD CHAIR - TERM ENDED 2012		X		X				0.	0.	0.
(13) MARC KING	4.00								_	
BOARD VICE CHAIR - TERM ENDED 2012	<del> </del>	X		X			ļ	0.	0.	0.
(14) C. EDWARD ROWE, III	40.00	-								
PRESIDENT/CEO	1		<u> </u>	X		<u> </u>	<b>├</b>	158,373.	0.	14,660.
(15) DONNA ETTENSON	40.00	-						100 015		7 505
VP OPERATIONS						X		106,215.	0.	7,585.
			-		_					
		1								
222007 12 10 12										Form 990 (2012)

		Check if Schedule O cont	ains a response	to any question i	n this Part VIII			
	•				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
nts nts	1 a	Federated campaigns	1a	-				
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues	1b					
s, ( Am	С	Fundraising events	1c					
a gi	d	Related organizations	1d					
JS,	е	Government grants (contribut	ions) 1e					
tio S I	f	All other contributions, gifts, gran	ts, and					
혈美		sımılar amounts not ıncluded abo	ve <b>1f</b>					
Ę	9	Noncash contributions included in lines	1a-1f \$					
<u>8</u> 8	h	Total. Add lines 1a-1f		<b></b>				
				Business Code				
<u>8</u>	2 a	CONFERENCES & MEETINGS		900099	1,220,175.			1,220,175.
P G	b	MEMBERSHIP DUES		900099	473,075.	473.075.		
Program Service Revenue	C	TECHNICAL & TRAINING S	ERVICES	900099	95,324.	95,324.		
Re Ja	d	ACCREDITATION PROGRAM		900099	65,549,	65,549.		,
5_	е	WORKSHOP CHARGES		611710	6,175.	6,175.		
-	f	All other program service reve	nue					
	9			<b>•</b>	1,860,298.			
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)			73,713.			73,713.
	4	Income from investment of tax	k-exempt bond p	roceeds				·
	5	Royalties		<b>•</b>				<u></u>
	_		(i) Real	(II) Personal				
		Gross rents	<u></u>					
	b	•	ļ <del></del>	-				
	C	, ,	L					
	_ d	` '		() ()			<del></del>	
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	84,688.					
	b	Less cost or other basis		l i				
		and sales expenses	80,551.					
	C	` ,	4,137,	<u> </u>				
	d	Net gain or (loss) Gross income from fundraisine	m ayanta (nat	<u> </u>	4,137.			4,137.
Jue	оа	including \$	of					
Š		contributions reported on line						
Other Reven		Part IV, line 18	•					
ige	h	Less direct expenses	. a b					
Ò		Net income or (loss) from fund						
		Gross income from gaming ac	<del>-</del>					<del></del>
	• •	Part IV, line 19	а					
	b	Less direct expenses	b					
		Net income or (loss) from gam						
		Gross sales of inventory, less	_				*****	
		and allowances	а					
	b	Less cost of goods sold	b					
		Net income or (loss) from sale		<b></b>				
		Miscellaneous Revenu		Business Code				
ĺ	11 a	MISCELLANEOUS		900099	430.	430,		
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>—</b>	430.			
2022	12	Total revenue. See instructions.		<b>▶</b>	1,938,578,	640 553.	0.	1 298 025
23200 12-10-	12					<u> </u>		Form <b>990</b> (2012)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1 Gran	nts and other assistance to governments and				
orga	anizations in the United States. See Part IV, line 21				
2 Gra	ints and other assistance to individuals in				<del></del>
the	United States See Part IV, line 22				
Gra	ints and other assistance to governments,				
orga	anizations, and individuals outside the				
Unit	ted States See Part IV, lines 15 and 16				
Ben	nefits paid to or for members				
Cor	mpensation of current officers, directors,				
trus	stees, and key employees	177,206.			
Com	npensation not included above, to disqualified				
pers	sons (as defined under section 4958(f)(1)) and				
pers	sons described in section 4958(c)(3)(B)				
Oth	er salaries and wages	357,358.			
Pen	sion plan accruals and contributions (include				
	tion 401(k) and 403(b) employer contributions)	13,375.			
	er employee benefits	50,244.			
	vroll taxes	38,897.			
-	es for services (non-employees):	•			-
	nagement				
<b>b</b> Leg		1,460.			
	counting	35,406.			
	bbying	, , ,			
	fessional fundraising services. See Part IV, line 17				
	estment management fees	14,381.			
	her (If line 11g amount exceeds 10% of line 25,				
-	imn (A) amount, list line 11g expenses on Sch O.)	29,333.			
	vertising and promotion	98,763.			
	ce expenses	52,136.			
	ormation technology	2,053.			
	valties	2,055.			·
	cupancy	13,801.			
Trav	· · · · · · · · · · · · · · · · · · ·	90,155.			
	ments of travel or entertainment expenses	70,133.			<del></del>
	any federal, state, or local public officials				
	nferences, conventions, and meetings	774,440.			
	erest	440.			·
	ments to affiliates	770.	<del></del> .		
•	preciation, depletion, and amortization	1,519.			
-	urance	6,860.			
	er expenses. Itemize expenses not covered	0,000.			
abov 24e	amount exceeds 10% of line 25, column (A) bunt, list line 24e expenses on Schedule 0.)				
	IPACT ASSESSMENT	23,009.		<u> </u>	
	D DEBTS	21,000.	-		
	SOCIATION DUES AND SU	11,989.			
	RKSHOP MATERIALS	4,877.			
	other expenses	9,851.			
	Il functional expenses. Add lines 1 through 24e	1,828,553.			
	It costs Complete this line only if the organization	±,020,000			
	orted in column (B) joint costs from a combined				
	Cational campaign and fundraising solicitation.				
caut	there If following SOR 98-2 (ASC 958-720)	ĺ			

ı dı	T. A	Check if Schedule O contains a response to an	v question in this Part X			
	`	2,0000000000000000000000000000000000000	, 4000.00.00.00.00.00.00.00.00.00.00.00.00	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		142,037.	1	257,817.
	2	Savings and temporary cash investments	994,102.	2	1,014,923.	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		171,078.	4	69,533.
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compens	ated employees. Complete			
		Part II of Schedule L			5	
	6	Loans and other receivables from other disqual	fied persons (as defined under			
		section 4958(f)(1)), persons described in section	1 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of sec	tion 501(c)(9) voluntary			
	•	employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		3,450.	7	0.
Ass	8	Inventories for sale or use		28,275.	8	23,400.
	9	Prepaid expenses and deferred charges		25,439.	9	44,337.
	10a	Land, buildings, and equipment cost or other				
		basis Complete Part VI of Schedule D	10a 33,024.			
	ь	Less: accumulated depreciation	10b 28,055.	6,488.	10c	4,969.
	11	Investments - publicly traded securities		1,397,121.	11	4,969. 1,540,402.
	12	Investments - other securities See Part IV, line	11		12	
	13	Investments - program-related. See Part IV, line	11		13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		15		
	16	Total assets. Add lines 1 through 15 (must equ	2,767,990.	16	2,955,381.	
	17	Accounts payable and accrued expenses	65,674.	17	62,177.	
	18	Grants payable			18	
	19	Deferred revenue	L	8,500.	19	0.
	20	Tax-exempt bond liabilities		,	20	
S	21	Escrow or custodial account liability Complete	Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and forme	r officers, directors, trustees,			
jab		key employees, highest compensated employe	es, and disqualified persons			
_		Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrel	ated third parties	<u> </u>	23	
	24	Unsecured notes and loans payable to unrelate	d third parties		24	**
	25	Other liabilities (including federal income tax, pa	-			
		parties, and other liabilities not included on lines	s 17-24). Complete Part X of			
		Schedule D	-	54 454	25	60 455
	26	Total liabilities. Add lines 17 through 25		74,174.	26	62,177.
		Organizations that follow SFAS 117 (ASC 956				
Ses	1	complete lines 27 through 29, and lines 33 ar	nd 34.	0 602 016		0 000 004
Fund Balances	27	Unrestricted net assets	<u> </u>	2,693,816.	27	2,893,204.
Bal	28	Temporarily restricted net assets	-		28	
힡	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (A				
SO		and complete lines 30 through 34.				
set	30	Capital stock or trust principal, or current funds		· · · · · · · · · · · · · · · · · · ·	30	
As	31	Paid-in or capital surplus, or land, building, or e	F .		31	
Net Assets or	32	Retained earnings, endowment, accumulated in	icome, or other tunds	2 602 016	32	2 002 204
_	33	Total net assets or fund balances	}	2,693,816.	33	2,893,204.
	34_	Total liabilities and net assets/fund balances		2,767,990.	34	2,955,381.

Form 990 (2012)

	990 (2012) ASSOCIATION OF SMALL BUSINESS DEV. CENTR	01-0	36519	1 Pa	ge <b>12</b>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				
	·				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>38,5</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,8	<u>28,5</u>	<u>53.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3	1	<u>10,0</u>	<u> 25.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,6	93,8	16.
5	Net unrealized gains (losses) on investments	5		89,3	<u>63.</u>
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	2,8	93,2	04.
Pai	t 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 X Accrual Other		_ [	Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			<b></b>
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewe	on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis			.   ,,	
b	Were the organization's financial statements audited by an independent accountant?		2	b X	_
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separa	e basis,		-	
	consolidated basis, or both				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		_2	c	X
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				1
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the S	ngle Audit			
	Act and OMB Circular A-133?		3	а	<u>X</u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ııred audıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3		
			Fo	rm <b>990</b>	(2012)

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

# **Political Campaign and Lobbying Activities**

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

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

► See separate instructions.

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.

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 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) organiza	tions. Complete Part III.		······································	······································				
Nan	ne of organization				Employer identification number				
		TION OF SMALL BU	SINESS DEV.	CENTR	01-0365191				
Pa	art I-A Complete if the org	ganization is exempt und	er section 501(c	) or is a section 527 o	organization.				
2	Provide a description of the organiz Political expenditures Volunteer hours	zation's direct and indirect politic	al campaign activities	s in Part IV. ▶ \$	S				
Ps	art I-B Complete if the ord	ganization is exempt und	er section 501/c	1/31					
	Enter the amount of any excise tax			<u>,,,∪,.</u> ▶ §					
	Enter the amount of any excise tax	• •			·				
	If the organization incurred a section	, ,		•	Yes No				
	Was a correction made?	·	•		Yes No				
t	off "Yes," describe in Part IV								
Pa	art I-C Complete if the org	ganization is exempt und	er section 501(c	), except section 501	(c)(3).				
1	Enter the amount directly expended	d by the filing organization for se	ction 527 exempt fun	ction activities	S				
2	Enter the amount of the filing organ	nization's funds contributed to ot	her organizations for	section 527					
	exempt function activities			▶ \$	S				
3	Total exempt function expenditures	s Add lines 1 and 2 Enter here a	nd on Form 1120-PO	L,					
	line 17b			▶ \$	S				
	Did the filing organization file Form	<u>•</u>			L Yes L No				
5	Enter the names, addresses and er			_	• •				
	made payments. For each organization contributions received that were pr				· · · · · · · · · · · · · · · · · · ·				
	political action committee (PAC) If		•	•	ato bogregated faria of a				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political				
	(a) Name	(b) Address	(C) EIIV	filing organization's funds. If none, enter -0-	contributions received and promptly and directly delivered to a separate political organization If none, enter -0				
	·								
			·						
			<del> </del>						

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

Schedule C (Form 990 or 990-EZ) 2012

232041 01-07-13

Schedule C (Form 990 or 990-EZ) 2012  Part II-A   Complete if the org	ASSOC janizatio	IATION on is exer	OF SMALL E	BUSINESS DEV.	CENT 01-	0365191 Page 2
(election under sec			•	• • • • • • • • • • • • • • • • • • • •		
A Check  if the filing organiza	tion belon	gs to an affil	ated group (and list i	n Part IV each affiliated	group member's na	me, address, EIN,
expenses, and sha		_	• • •	·	•	
. — ' '		, ,	nd "limited control" pr	ovisions apply.		
Limi	ts on Lob	bying Expe			(a) Filing organization's totals	(b) Affiliated group totals
				-		-
1a Total lobbying expenditures to infl	*			-	<del></del> -	<del> </del>
b Total lobbying expenditures to infl		-	ly (direct lobbying)	-		<u> </u>
c Total lobbying expenditures (add t		d 1b)	•	-		
d Other exempt purpose expenditur	es					· <del>  </del>
e Total exempt purpose expenditure	es (add line	es 1c and 1d	)			
f Lobbying nontaxable amount Ent	er the amo	unt from the	following table in bo	th columns		
If the amount on line 1e, column (a) of	or (b) is:	The lob	bying nontaxable am	ount is:		
Not over \$500,000		20% of	the amount on line 1e			
Over \$500,000 but not over \$1,00	0,000	\$100,00	0 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5	00,000	\$175,00	0 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17			0 plus 5% of the exce			
Over \$17,000,000	,,	\$1,000,0	•			
		<u> </u>				
g Grassroots nontaxable amount (er	nter 25% o	f line 1f)				
h Subtract line 1g from line 1a. If zer						<del>                                     </del>
i Subtract line 1f from line 1c. If zero				Ì	<del> </del>	
j If there is an amount other than ze	•		line 1, did the organia	ration file Form 4720		
•		51 IIII <del>C</del> 111 OI	ille 11, did tile organiz	adon me Form 4720		Yes No
reporting section 4911 tax for this	year r	4 V A		· Cantina 504/h)		res No
		at made a s		າ Section ອບ າ(n) n do not have to comp es 2a through 2f on pa		
	Lob	bying Exper	nditures During 4-Ye	ar Averaging Period		
		<del></del>	<del>-</del>	T		
Calendar year	(a)	2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) Total
(or fiscal year beginning in)						
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))						
, , , , , , , , , , , , , , , , , , , ,						
c Total lobbying expenditures						
C . otal loopying experiences						
d Grassroots nontaxable amount						
e Grassroots ceiling amount						1
(150% of line 2d, column (e))	İ					
(10070 01 mio 20, colui m (c))	<del>                                     </del>					
Grassroots lobbying expenditures						

Schedule C (Form 990 or 990-EZ) 2012

Schedule C (Form 990 or 990-EZ) 2012 ASSOCIATION OF SMALL BUSINESS DEV. CENT 01-0365191 Page 3

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

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(t	)
of the	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
9	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
_	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
g g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			·	<del></del>
i	Other activities?			<del></del>	
i	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				-
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), sect	ion 501(c)	(5), or se	ction	
	501(c)(6).			Yes	No
	Managaria Abada akallu ali (200), ay managa duga yang daga akalla ku manabaya				NO
1	Were substantially all (90% or more) dues received nondeductible by members?		1	X	v
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		X X
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	d "No," O	· ·	t III-A, lir	ne 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	tical			
	Current year		2a		
	Carryover from last year		<u>2b</u>		
C	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		_
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex-				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and expenditure next year?	political			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5		
	t IV Supplemental Information  Delete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; IP art II-B, line 1. Also, complete this part for any additional information	Part II-A (affili	ated group	list), Part II	-A, line 2,

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

➤ 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.

2012
Open to Public Inspection

Name of the organization

Employer identification number

		LL BUSINESS DEV. CENTR	
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds of	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	e 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	d funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be us	sed only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose co	onferring
	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Pai	rt IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or		orically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
	T. I		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	musture useluded in (s)	2b
C	Number of conservation easements on a certified historic st	• ,	2c
a	Number of conservation easements included in (c) acquired	after 6/17/06, and not on a historic structure	
3	listed in the National Register  Number of conservation easements modified, transferred, re	sleaged extragrished or terminated by the	2d
3	year	neased, extinguished, or terminated by the e	riganization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	·	
_	violations, and enforcement of the conservation easements	* '	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, and enforcing conservation easements dur	ring the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)	)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	ion easements in its revenue and expense s	tatement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ition's financial statements that describes th	e organization's accounting for
_	conservation easements		<u> </u>
Pa	rt III Organizations Maintaining Collections of		ner Similar Assets.
	Complete if the organization answered "Yes" to Form	<del></del>	
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex		ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that described and one of the described and		
D	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of publi	ic service, provide the following amounts
	relating to these items:		<b>L</b> ¢
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
2	(ii) Assets included in Form 990, Part X  If the organization received or held works of art, historical tre	easures or other similar assets for financial of	Tain provide
-	the following amounts required to be reported under SFAS		ga, p.04100
а	Revenues included in Form 990, Part VIII, line 1	To place dealing to these items	<b>▶</b> \$
b	Assets included in Form 990, Part X		► \$ ► \$

Sche <b>Par</b>		TION OF SM Collections of A						-036519 <b>\ssets</b> (conti	
3	Using the organization's acquisition, accessi	on, and other record	ds, chec	k any of the	following tha	at are a sign	ificant use	of its collection	n items
	(check all that apply).			•	_	_			
а	Public exhibition	(	d 🔲	Loan or exc	hange progra	ams			
b	Scholarly research	6			· · ·				
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and expla	in how th	ney further t	he organizati	on's exemp	t purpose i	n Part XIII	
5	During the year, did the organization solicit of								
	to be sold to raise funds rather than to be ma							Yes	☐ No
Pai	t IV Escrow and Custodial Arran					"Yes" to Fo	rm 990. Pa		
	reported an amount on Form 990, Pa			J				,	
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	ns or other as	sets not inc	cluded		
	on Form 990, Part X?		,					Yes	☐ No
h	If "Yes," explain the arrangement in Part XIII	and complete the fo	allowing	table:					
-			g					Amoun	ıt .
С	Beginning balance						1c		
d	Additions during the year						1d		-
e	Distributions during the year						1e		
f	Ending balance						1f		<del></del>
2a	Did the organization include an amount on F	orm 990 Part X line	217					Yes	No
	If "Yes," explain the arrangement in Part XIII			n has been	provided in	Part XIII			<b>=</b> "
Pai									
		(a) Current year	T	rior year	(c) Two year	1	Three years	hack (e) Fou	r years back
1a	Beginning of year balance	(a) canon you	(6)	iioi you.	(0) 1110 you	io baon (a)	111100 30010	Suon (C) . ou	. yours busic
b	Contributions								
c	Net investment earnings, gains, and losses								
d	Grants or scholarships								
e	Other expenditures for facilities		†					-	
C	and programs							İ	
	Administrative expenses								
g	End of year balance				1				
2	Provide the estimated percentage of the cur	rent vear end halan	ce (line 1	a column (s	a)) held as			I	
a	Board designated or quasi-endowment	rent year one balan	%	9, 001011111 (6	<i>2))</i> 11010 00.				
b	Permanent endowment	%							
c	Temporarily restricted endowment								
·	The percentages in lines 2a, 2b, and 2c show								
32	Are there endowment funds not in the posse		zation th:	at are held a	ind administe	ered for the	organizatio	ın	
oa	by	ossion of the organiz	Lation till	at are ricid a	ard darriinsed	5100 101 1110	organizatio		Yes No
	(i) unrelated organizations							3a(i)	103 110
	(ii) related organizations							3a(ii)	
b	If "Yes" to 3a(ii), are the related organization:	s listed as required i	on Sche	dule R?	•			3b	
4	Describe in Part XIII the intended uses of the	•							<u> </u>
	rt VI Land, Buildings, and Equipm				•				
	Description of property	(a) Cost or o		1	or other	(c) Accı	umulated	(d) Boo	k value
	becompaint or property	basis (invest			(other)		ciation	(4, 500	Traids
	Land	<del>`` </del>	•		· · ·	•			
b	Buildings								
c	Leasehold improvements							<del></del>	
d	Equipment			1	4,600.	1	1,305	•	3,295.
e	· ·				8,424.		6,750		1,674.
	I. Add lines 1a through 1e (Column (d) must e	equal Form 990, Par	t X, colui						4,969.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 ASSOCIATI	ON OF SMALL BUS	INESS DEV. CENT	TR 01-0365191 Page
Part VII Investments - Other Securities.  (a) Description of security or category (including name of security)			Cost or end-of-year market value
Financial derivatives	(b) DOOK Value	(C) Welliod of Valuation.	Cost of one of your market value
2) Closely-held equity interests			· · · · · · · · · · · · · · · · · · ·
3) Other			
(A)			
(B)		<del> </del>	
(C)		-	
(D)			
(E)			
(F)			
(G)			
(H)			
(1)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related			
(a) Description of investment type	(b) Book value	(c) Method of valuation	Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.	<u> </u>		
Part IX Other Assets. See Form 990, Part X,			(IA) De alcuelus
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)	<del></del>		
(5)	· · · · · · · · · · · · · · · · · · ·		
(6)			
(7)			
(8)			
(9)			
(10)	2) (no. 15.)		
Fotal. (Column (b) must equal Form 990, Part X, col (be Part X Other Liabilities. See Form 990, Part X)	t Y line 25	<del></del>	
(a) Description of liability	1. A, III16 25.	(b) Book value	
······································		(0) 2001 1000	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
	B) line 25.)		
		rganization's financial statems	ents that reports the organization's
(8) (9) (10) (11)  Total. (Column (b) must equal Form 990, Part X, col (l) 2. FIN 48 (ASC 740) Footnote In Part XIII, provide the liability for uncertain tax positions under FIN 48 (A)	ne text of the footnote to the o		

	t XI Reconciliation of Revenue per Audited Financial Stateme	ESS I	DEV. CENTR ith Revenue per R	01- eturi	0365191 Page 4
1	Total revenue, gains, and other support per audited financial statements			1	2,027,941.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	89,363.		
b	The state of the s	2b			
-	Recoveries of prior year grants	2c			
d		2d	<del>.</del>		
_	Add lines 2a through 2d	_ <u>Zu</u> ]		20	89,363.
	Subtract line 2e from line 1	•		2e	1,938,578.
3	•	•		3	1,330,370.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	· ·	4b			
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			_5_	1,938,578.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expenses per	Retu	
1	Total expenses and losses per audited financial statements .			1	1,828,553.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities .	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII )	2d	<u></u> .		
	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	1,828,553.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1.				1,020,333.
-	Investment expenses not included on Form 990, Part VIII, line 7b	1 4-1			
a	Other (Describe in Part XIII )	4a 4b			
	,	4D	<del> </del>		^
_	Add lines 4a and 4b			4c	1.828.553.
<u>5</u>	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) rt XIII Supplemental Information		<del></del>	5	1,828,553.
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part I e 2; Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to				2b; Part V, line 4; Part
				Sche	dule D (Form 990) 2012

### SCHEDULE J (Form 990)

# **Compensation Information**

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

Compensated Employees, and The Compensated Employees

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

2012

OMB No 1545-0047

open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

► Attach to Form 990. ► See separate instructions

ASSOCIATION OF SMALL BUSINESS DEV. CENTR

Employer identification number 01-0365191

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items.			1
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	İ		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		1	
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b_		<u> </u>
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?	2		ــــــ
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	j		
	establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee X Written employment contract		i	
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
7	organization or a related organization			
а		4a		_x_
b		4b		X
c		4c		X
_	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of			
а	The organization?	_5a		
b	Any related organization?	5b		<u> </u>
	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			ĺ
	contingent on the net earnings of:			
	The organization?	6a		<u> </u>
b	Any related organization?	_6b_		<u> </u>
	If "Yes" to line 6a or 6b, describe in Part III			1
7	, , , , , , , , , , , , , , , , , , , ,	_		
_	not described in lines 5 and 6? If "Yes," describe in Part III	7		<del> </del>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			1
_	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		<del> </del>
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			1
	Regulations section 53.4958·6(c)?	9		L

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

Schedule J (Form 990) 2012

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed Schedule J (Form 990) 2012

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

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	ple	(E) Total of columns	
(A) Name and Title	•	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)-(b)(B)	reported as deferred in prior Form 990
(1) C. EDWARD ROWE III	9	158,373.	0	0.	0	14,660.	173,033.	0.
SIDENT/CEO	:	0	0	0	:	0	0	
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	(E)							
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	Θ							
	(ii)							
	Θ							
	(1)							
	8							
	(iii)							
232112				ć			Sched	Schedule J (Form 990) 2012

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

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

Schedule O (Form 990 or 990-EZ) (2012)

232211
01-04-13

Name	of the organization							Employer identification number
		ASSOCIATION	OF	SMALL	BUSINESS	DEV.	CENTR	Employer identification number 01-0365191
<b></b>								
THE	PUBLIC.							
							<u>-</u>	<del></del>
		<u>-</u>			_			
					•	_		
							· · · · · · · · · · · · · · · · · · ·	
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	_							
				<del></del>				

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

Name of the organization

Part I

# Related Organizations and Unrelated Partnerships

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

2012 Open to Public Inspection

OMB No 1545-0047

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

**Employer identification number** 01-0365191 ASSOCIATION OF SMALL BUSINESS DEV. CENTR

_				(g) on 512(b)(13) controlled entity?	2		
(f) t controlling entity			Į.	(g) Section 512(b)(13) controlled entity?	Yes	×	
Direct			related tax-exem	(f) Direct controlling entity			
(e) End-of-year assets			e or more			N/A	
-			ause it had on	(e) Public charity status (if section	501(c)(3)) 170(B)(1)	(A) (VI)	
(d) Total income			art IV, line 34 beca	(d) Exempt Code section	SECTION 1.	501(C)(3) (7	
(c) Legal domicile (state or foreign country)			swered "Yes" to Form 990, P	(c) Legal domicile (state or foreign country)	35	VIRGINIA 50	
(b) Primary activity			tions (Complete if the organization an	(b) Primary activity	TO SUPPORT EDUCATION AND RESEARCH RELATED TO SMALL	BUSINESS INDUSTRY, V	
(a) Name, address, and EIN (if applicable) of disregarded entity			Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)	(a) Name, address, and EIN of related organization	FOUNDATION FOR SMALL BUSINESS DEVELOPMENT - 554-1776460, 8990 BURKE LAKE ROAD, BURKE, VA	22015	

Schedule R (Form 990) 2012

01 - 0365191CENTR ASSOCIATION OF SMALL BUSINESS DEV.

Page 2

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

Schedule R (Form 990) 2012

	ntage rship									
₹.	General or Percentage managing ownership partner?  Yes No				_					
9	General or managing partner?		 _		_	ļ				
(9)	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)									
ε	Disproportion- ate allocations? Yes No								-	
(6)	Share of end-of-year assets									
Œ	Share of total income									
(e)	Predominant income (related, unrelated, excluded from tax under sections 512-514)									
(p)	Direct controlling entity									
(၁)	Legal domicile (state or foreign country)			·						
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

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

	(13) olled ty?	No								
٦	S12(R	Yes								
3	Percentage 512(b)(13) ownership controlled									
	Share of end-of-year									
	Share of total income									
(e)	Type of entity (C corp, S corp,	or trusty								
(p)	Legal domicile Direct controlling Type of entity (C corp., S corp., foreign				·					
(0)	Legal domicile (state or foreign	country)								
(q)	Primary activity									
(a)	Name, address, and EIN of related organization									

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Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35b, or 36)

<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	ş
1 During the tax year, did the organization engage in any of the following transactior	ns with one or more re	transactions with one or more related organizations listed in Parts II-IV?	n Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		×
<b>b</b> Gift, grant, or capital contribution to related organization(s)				4		×
c Gift, grant, or capital contribution from related organization(s)				10		×
				14		×
				<b>-</b>		×
<ul><li>f Dividends from related organization(s)</li></ul>				<b>=</b>	1	×
g Sale of assets to related organization(s)				1g		×
h Purchase of assets from related organization(s)				ŧ	1	×
i Exchange of assets with related organization(s)				¥		×
j Lease of facilities, equipment, or other assets to related organization(s)				ï		×
k   pase of facilities primment or other assets from related organization(s)				<del>*</del>		×
				:		,
Performance of services or membership or fundraising solicitations for related organization(s)	janization(s)			<b>-</b>		4 >
m Performance of services or membership or fundraising solicitations by related organization(s)	anization(s)			╫	;	4
<ul> <li>Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)</li> </ul>	tion(s)			+	×	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				9	1	×
						>
				2 ,	>	4
q Heimbursement paid by related organization(s) for expenses				9	4	
r Other transfer of cash or property to related organization(s)				<b>+</b>		×
s Other transfer of cash or property from related organization(s)				1s		×
2 If the answer to any of the above is "Yes," see the instructions for information on	who must complete the	is line, including covered i	mation on who must complete this line, including covered relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	nvolved		
(£)						
(2)						
(2)						
(4)						
(9)						
(9)						
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Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37)

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

	ntage ship						
3	Code V-UBI General or Percentage amount in box 20 managing ownership of Schedule K-1 partner? (Form 1065) Yes No						
s	General or managing partner?	 _					
	8 × 20 (5)		<del></del>				
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	amour of Scl						
ε	Disproportionate allocations?						
_					 <del>- · · · · · · · · · · · · · · · · · · ·</del>		
(b)	Share of end-of-year assets			'			
	end:	:					
-							
9	Share of total income					•	
٦	Sha						
-							
(e)	Are all 501(c)(3) 0rgs 2 No No No No No No No No No No No No No						
	icome ated, n tax 12-514)						
ਉ	Predominant income parties sec (related, unrelated, ons 201(c)(3) excluded from tax under section 512-514) yes No						
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Part VII	(Form 990) 2012 Supplemental Info	rmation					
		ovide additional informatio	n for responses t	o questions on Sch	edule R (se	e instructions)	
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