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DLN: 93493305000163

Department of the Treasury

Return of Organization Exempt From Income Tax

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

2012

OMB No 1545-0047

Open to Public

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

		2042	<u> </u>	24 24 224 2 242 1 1	40.04.04			Inspection	
B Ch		applicable	endar year, or tax year beginning C Name of organization AMERICAN SPEECH-LANGUAGE-HEA	ng 01-01-2012 , 2012, and ending	12-31-20	D Emple	-	entification number	
	me cha	=	Doing Business As			53-0	24047	⁷ 4	
_	nal retu minate		2200 RESEARCH BOULEVARD	mail is not delivered to street address) Ro	om/suite	E Teleph	one nur	mber	
	ended		Suite City or town, state or country, and	ZIP + 4		(301) 296-	5700	
— _{Арр}	olication	n pending	ROCKVILLE, MD 208503289			G Gross	receipts	\$ 85,081,586	
			F Name and address of pri	ncıpal officer	Н	(a) Is this a group	retur		
			ARLENE A PIETRANTON 2200 RESEARCH BOULEV ROCKVILLE, MD 2085032			affiliates?		「Yes ▼ No	
			<u> </u>		"			uded?	
I Ta	x-exen	npt status	501(c)(3) 501(c)(6)	(insert no) 4947(a)(1) or 527		(c) Group exemp	tion nu	ımber ►	
J W	ebsite	e:► ww	w asha org		"	(c)			
			Corporation Trust Association	on Cother 🕨		L Year of formation 1	947 N	State of legal domicile KS	
Pa	rt I		ımary	on or most significant activities					
Governance		EMPOW HEARIN	ERING AND SUPPORTING SPE	EECH-LANGUAGE PATHOLOGIS' VOCACY, ADVANCING COMMUI					
	2	Check th	his box দ if the organization d	scontinued its operations or dispo	sed of m	ore than 25% of its	net a	ssets	
Activities &	3	Number	of voting members of the govern	ning body (Part VI, line 1a)			3	16	
Ĕ	4	Number	of independent voting members	of the governing body (Part VI, lin	e 1b) .		4	16	
ទូ				calendar year 2012 (Part V, line 2	-		5	290	
•			•	necessary)			6	565	
	1			Part VIII, column (C), line 12 . from Form 990-T, line 34			7a 7b	1,340,830 -338,825	
		Tree unite	Tacca basiness taxable meeme			Prior Year	1 /5	Current Year	
	8	8 Contributions and grants (Part VIII, line 1h)				116	971	234,708	
E E	9	Progra	am service revenue (Part VIII, l	ine 2g)	[47,491	612	48,476,475	
Ravenue	10	Inves	tment ıncome (Part VIII, colum	n (A), lines 3, 4, and 7d)	[3,213,244		6,691,171	
ш	11		revenue (Part VIII, column (A)	<u> </u>	1,150	1,147,136			
	12			. (must equal Part VIII, column (A		51,972	620	56,549,490	
	13			t IX, column (A), lines 1–3)		1,770	919	898,116	
	14			IX, column (A), line 4)			0	0	
Ø	15	Saları 5–10		ee benefits (Part IX, column (A), lı	nes	28,677	.421	31,252,471	
Expenses	16a		•	, column (A), line 11e)	–	0		0	
χĐe	ь		indraising expenses (Part IX, column (E						
Ш	17		= • • • • • • • • • • • • • • • • • • •	lines 11a-11d, 11f-24e)	l	. 16,684,656 16,472,69			
	18	Total	expenses Add lines 13–17 (mi	ıst equal Part IX, column (A), lıne 2	25)	47,132,996 48,623			
	19	Reven	ue less expenses Subtract line	18 from line 12		. 4,839,624 7,9			
% € & € &						Beginning of Curre	ent	End of Year	
10 de	20	Total	assets (Part X, line 16)		. Ի	105,702	660	113,422,201	
사 전 문 문	21					84,295		81,886,078	
žĒ	22	Net as	ssets or fund balances Subtract	: line 21 from line 20		21,407	,584	31,536,123	
	rt II	Sign	nature Block		-		<u>'</u>		
Unde my k	20 21 22 rt III r pena nowled	Total Total Net as Sign alties of dge and	assets (Part X, line 16) liabilities (Part X, line 26) . ssets or fund balances Subtract lature Block perjury, I declare that I have ex		mpanyıng	Beginning of Curre Year 105,702 84,295 21,407 g schedules and st	.660 .076 .584	113,422, 81,886, 31,536, nts, and to the best	
Sign	<u> </u>	**** Signa	*** ature of officer			2013-10-22 Date			
Here		ARLE	ENE A PIETRANTON CEO						
		F	Print/Type preparer's name	Preparer's signature	Date	Check If	PTIN		
Paid	t	<u> </u>	Frank Giardini			self-employed		_	
	- pare		Firm's name F Grant Thornton LLP			Firm's EIN 🕨			
	On		Firm's address 🟲 2010 CORPORATE RID	GE SUITE 400		Phone no (70	3) 847-7	7500	
		,	MCLEAN, VA 22102						

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

✓ Yes No

Form	990 (2012)				Page
Par					<u> </u>
		·	e to any question in this Part III .		
1	Briefly describe	the organization's mission			
See Schedule O Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?					
2			rogram services during the year wh	ıch were not listed on	└── Yes 🔽 No
	If "Yes," describe	e these new services on Schedi	ule O		
3			significant changes in how it condu	cts, any program	┌ Yes ┌ No
	If "Yes," describe	e these changes on Schedule O			
4	expenses Section	on 501(c)(3) and 501(c)(4) org	anizations are required to report the		
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	language, and hea Association and stir	ring scientists in the United States and	internationally, ASHA promotes the individu	ual and collective professional intere	sts of the members of the
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	appropriate acaden	nic and clinical preparation of individua	als entering the profession and provides mai	intenance of current knowledge and	skills of those within the
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
				gation and prevention of disorders o	f human communication and
	Other program	services (Describe in Schedule	.0.)		

) (Revenue \$

0 including grants of \$

0

(Expenses \$

Total program service expenses ►

Part IV	Checklist of	Required	Schedules
---------	--------------	----------	-----------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{f colored}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
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,	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	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	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Pell	Statements Regarding Other 1RS Filings and Tax Compliance			_
	Check if Schedule O contains a response to any question in this Part V	•	 Yes	l No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 259		1 65	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1 c	Yes	
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		INC
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
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		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	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		
h	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 organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
_		8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1				
_	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from members or snareholders			
b	against amounts due or received from them)	_		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
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			
c	Enter the amount of reserves on hand			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management

	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? $$.	5		Νo
6	Did the organization have members or stockholders?	6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
Sa	ection B. Policies (This Section B requests information about policies not required by the Internal R		~ .	
36	ection B. Policies (This Section B requests information about policies not required by the Internal R	event	ie Coa	e.)
36	ection B. Policies (This Section B requests information about policies not required by the Thternal R	event	yes	e.) No
	Did the organization have local chapters, branches, or affiliates?	10a		
10a				No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a		No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a	Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes	No
10a b 11a b 12a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b	Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c	Did the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? 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? The organization's CEO, Executive Director, or top management official	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14 15 a b	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	No

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed▶
- 18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply
 - Own website Another's website Upon request Other (explain in Schedule O)
- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization FYVONNE KANKAM-BOADU 2200 RESEARCH BLVD ROCKVILLE, MD (301) 296-8648

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

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, or 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) A verage hours per week (list any hours for related	more pers and	than on is	one bot	not box h ar or/tr	offic ustee	ess er e)	from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
(1) Shelly S Chabon	10 0	х		х				0	0	(
President (2) Patricia A Prelock	10 0										
President-Elect	100	x						0	0	(
(3) Paul R Rao	10 0										
Past president		X						0	0	(
(4) Nancy B Alarcon	10 0										
Chair of SLP Council		X						0	0	(
(5) Wayne A Foster	10 0										
		Х						0	0	(
Chair of Audiology Council (6) Jaynee A Handelsman	10 0										
	100	х						0	0	(
VP for Audiology Practice (7) Carolyn W Higdon	10.0										
(7) Carolyn W Higuon	10 0	х						0	0	(
VP for Finance											
(8) Karen I Kırk	10 0	x						0	0	(
VP for Science and Research											
(9) Barbara J Moore	10 0	×						0	0	(
VP for Planning								Ŭ	Ů		
(10) Robert E Novak	10 0	l x						0	0	(
VP, Standards&Ethics Audiology		^							O		
(11) Gail J Richard	10 0	l ,									
VP for SLP		X						0	0	(
(12) Theresa H Rodgers	10 0										
VP,Govt Relation & Policy		X						0	0	(
(13) Neil T Shepard	10 0										
VP,Academic Affairs, Audiology		Х						0	0	(
(14) Jennifer B Watson	10 0				\vdash						
VP Standards & Ethics in SLP		х						0	0	(
(15) M Jeanne Wilcox	10 0	-			\vdash						
, ,		х						0	0	(
VP,Academic Affairs in SLP (16) Carlin F Hageman	10	<u> </u>			\vdash						
		х						0	7,200	(
NSSLHA National Advisor					<u> </u>						
(17) Arlene A Pietranton	60 0			х				381,162	0	162,470	
Chief Executive Officer	2 0					1		i	_	,	

Part VII

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers	than on is	one bot	not box h ar	checl (, unle n office	ess er)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
18) Chuck Cochran	50 0			Х				264,534	0	93,469	
Chief Staff for Operations								,		,	
19) Vicki Deal William Chief Staff for Multicultural	50 0				х			218,156	0	37,473	
20) Lemmieta Mcneilly Chief Staff for Speech lang	50 0				х			211,251	0	27,599	
21) Margaret Rogers	50 0										
Chief Staff for Science & rese	5				Х			223,368	0	17,032	
22) Vıc Glastone	50 0								_		
Chief Staff Officer Aud					X			121,080	0	33,302	
23) Martin Rome	50 0					х		172,701	0	25,144	
Chief Staff Officer for Com	2 25					_ ^		172,701	U	25,144	
24) Michael Guerrieri	50 0					x		177,478	0	32,696	
Director of information system								177,170		32,030	
25) Stan Dublinske Genior advisor for Planning	50 0					x		145,651	0	63,685	
26) Rob Mullen	50 0					х		141,014	0	51,244	
Oir National Center for EBP	50.0				_						
27) Yvonne Kankam-Boadu Director of Finance	50 0 2 5					х		160,390	0	28,729	
1b Sub-Total	<u> </u>		<u> </u>			<u> </u>		<u> </u>			
c Total from continuation sheets to Pa	art VII, Section A					►					
d Total (add lines 1b and 1c)						►		2,216,785	7,200	572,849	
c Total from continuation sheets to Pa	art VII, Section A	those	· ·		bove	*	rec		7,200		

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes</i> ," <i>complete Schedule J for such individual</i>	3		No
4	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		l v	1
	<i>παννισσά</i>	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If</i> "Yes," complete Schedule J for such person	5		No

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
LEVY Restaurants , 2301 S Lake Shore Dr CHICAGO IL 60616	Food	354,593
Grant Thornton LLP , 33960 Treasury Center CHICAGO IL 60694	Auditing Service	245,166
Apextech LLC , 2300 North Pershing Drive ARLINGTON VA 22210	П	223,270
Clean Polish-Mid Atlantic , 4 Research Place Suite 230 ROCKVILLE MD 20850	Cleaning	217,689
Kilpatrick Townsend Stockton LLP , 1100 Peachtree St NE Suite 2800 ATLANTA GA 30309	Professional service	166,552

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 ►12

Part V		Statement o	T KEVENUE ule O contains a respor	nse 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
s g	1a	Federated cam	paigns 1a					
ons, Gifts, Grants Similar Amounts	ь	Membership du	es 1b					
Gr. mo	С	Fundraising eve	ents 1c					
fts, r A	d	Related organiz	ations 1d					
Gř rila		e Government grants (contributions) 1e		214,708				
ns, Sin	e	_			ļ			
ıtio er :	f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	20,000				
tributio Other	g	Noncash contribution	ons included in lines	į	į			į
Contributions, Gifts, Grants and Other Similar Amounts	h	•	s 1a-1f		234,708			
				Business Code				
inue	2a	MEMBER DUES		900099	33,976,222	33,976,222		
Program Serwice Revenue	ь	CONVENTION REVE	ENUE	900099	4,266,359	4,266,359		
	С	SUBSCRIPTIONS A	ND PUBLICATIONS	900099	1,565,941	1,565,941		
	d	ADVERTISING	_	541800	1,500,065		1,500,065	
	e	CONTINUING EDUC	CATION	900099	2,958,742	2,958,742		
	f	All other progra	ım service revenue		4,209,146	4,209,146		
₽.	g	Total. Add lines	s 2a – 2f		48,476,475			
	3		ome (including dividen					
		and other simila	ar amounts)	•	959,753			959,753
	4		tment of tax-exempt bond	· · · · . +	985,973			985,973
	5	Royalties	(L) Dool	(u) Darranal	903,973			963,973
	6a	Gross rents	(ı) Real 504,919	(II) Personal				
	ь	Less rental	782,526					
	c	expenses Rental income	-277,607	0				
		or (loss)	me or (loss)		-277,607		-159,235	-118,372
	d	Net rental incol	(i) Securities	(II) O ther	277,007		133,233	110,372
	7a	Gross amount						
		from sales of assets other	28,392,392	5,085,596				
	ь	than inventory Less cost or						
		other basis and sales expenses	27,749,518	52				
	С	Gain or (loss)	642,874	5,085,544				
	d	Net gain or (los	s)		5,731,418			5,731,418
ம்	8a	Gross income f events (not inc						
Other Revenue		\$						
eve		of contributions See Part IV, lin	reported on line 1c)					
ੌ. Œ		•	а					
the	ь	Less direct ex	penses b					
•	C		loss) from fundraising) I	events 🛌	0			
	9a	Gross income f See Part IV, lin	rom gaming activities					
		•	а					
	Ь		penses b					
	C		loss) from gaming activ	vities	0			
	10a	Gross sales of returns and allo						
	h	loss seet of "	a l					
	b c		oods sold b (loss) from sales of inve	entory	0			
		Miscellaneous		Business Code				
	11a	MISCELLANEC	DUS REVENUE	900099	438,770	438,770		
	b							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d		438,770			
	12	Total revenue.	See Instructions	🗚	56,549,490	47,415,180	1,340,830	7,558,772
		_			30,343,430	17,713,100		Form 990 (2012)

Form	990 (2012)				Page 10
	IX Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response to any question in this Pa	rt IX			<u> </u>
	ot include amounts reported on lines 6b, o, 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	849,966			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	38,150			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	10,000	0		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and				
	key employees	1,850,884			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	20,572,810			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	3,938,462			
9	Other employee benefits	3,250,643			
10	Payroll taxes	1,639,672			
11	Fees for services (non-employees)				
а	Management	0			
ь	Legal	131,467			
c	Accounting	147,498			
d	Lobbying	158,203			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	267,166			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,253,821			
12	Advertising and promotion	0			
13	Office expenses	2,526,488			
14	Information technology	937,519			
15	Royalties	0			
16	Occupancy	942,659			
17	Travel	665,667			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	2,432,375			
20	Interest	916,974			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	3,000,161			
23	Insurance	205,842			
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)				
а	UBI TAX	250			
b	PUBLICATIONS	1,533,993			
С	CAA/PSB SITE VISITS	185,711			
d	EMPLOYMENT COSTS	166,901			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	48,623,282	0		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Par	t X	Balance Sheet Check if Schedule O contains a response to any question in this Part X			
		, , , , , , , , , , , , , , , , , , , ,	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	0	1	0
	2	Savings and temporary cash investments	26,093,631	2	30,699,183
	3	Pledges and grants receivable, net	16,547	3	70,753
	4	Accounts receivable, net	480,079	4	2,186,019
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	5	0
ts	6	Loans and other 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) Complete Part II of Schedule L	0	6	0
Assets		Niches and Issue vessionable wat	0	7	0
₹ ¥	7	Notes and loans receivable, net	0		18,482
	8	Inventories for sale or use	1,735,377	8	<u> </u>
	9 10a	Prepaid expenses and deferred charges	, ,	9	1,304,388
	b	Complete Part VI of Schedule D Less accumulated depreciation		100	45,506,400
	11	Investments—publicly traded securities	29,846,832	11	33,336,921
	12	Investments—other securities See Part IV, line 11	20,040,002	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	1,271,748	15	300,055
	16	Total assets. Add lines 1 through 15 (must equal line 34)	105,702,660	16	113,422,201
	17	Accounts payable and accrued expenses	4,941,878	17	4,797,166
	18	Grants payable	4,541,576	18	4,757,100
		• ,	27,009,592	19	28,523,290
	19 20	Deferred revenue	21,009,392	20	20,323,290
		·	0	21	0
es es	21	Escrow or custodial account liability Complete Part IV of Schedule D	9	21	
Liabilitie	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>.e</u>		persons Complete Part II of Schedule L	0 25 072 244	22	0
	23	Secured mortgages and notes payable to unrelated third parties	25,672,311	23	24,098,465
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	26,671,295	25	24,467,157
	26	Total liabilities. Add lines 17 through 25	84,295,076	26	81,886,078
		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	21,407,584	27	31,536,123
<u> </u>	28	Temporarily restricted net assets	0	28	0
Ξ	29	Permanently restricted net assets	0	29	0
· Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► ☐ and complete lines 30 through 34.			
0	30	Capital stock or trust principal, or current funds		30	
휲	31	Paid-in or capital surplus, or land, building or equipment fund		31	
Assets	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net #	33	Total net assets or fund balances	21,407,584	33	31,536,123
ź	34	Total liabilities and net assets/fund balances	105,702,660	34	113,422,201
		. Sta. Habilities and nec assets/fully balances	100,702,000	J-1	Form 990 (2012)

Par	t XI Reconcilliation of Net Assets			<u> </u>	-9
	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		56,5	549,490
2	Total expenses (must equal Part IX, column (A), line 25)	2		48,6	523,282
3	Revenue less expenses Subtract line 2 from line 1	3		7,9	26,208
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		21,4	107,584
5	Net unrealized gains (losses) on investments	5		2,0	89,561
6	Donated services and use of facilities	6		- 2	232,658
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		3	345,428
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		31,5	36,123
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. $ abla$
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νo
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain i Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

DLN: 93493305000163

OMB No 1545-0047

Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Political Campaign and Lobbying Activities

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 the organization **Employer identification number** AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION 53-0240474 Complete if the organization is exempt under section 501(c) or is a section 527 organization. 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). 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 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? 3 Was a correction made? ☐ Yes ┌ No If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function activities Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b Did the filing organization file Form 1120-POL for this year? 4 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 **(c)** EIN (e) A mount of political (a) Name (b) Address (d) A mount paid from contributions received filing organization's and promptly and funds If none, enter -0directly delivered to a separate political organization If none, enter-0-

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sch	nedule C (Form 990 or 990-EZ) 2012					Page 2
Pa	art II-A Complete if the organization	is exempt under	section 501(c)(3) and fil	ed Form 5768	(election
_	under section 501(h)). Check ► if the filing organization belongs to a	an affiliated group (and	lict in Part IV os	ach affiliated are	un mambar's nam	o addross EIN
	expenses, and share of excess lobb	ying expenditures)		_	up member s nam	e, address, LTN
<u>B</u>	Check Frifthe filing organization checked box	x A and "limited contro	ıl" provisions apı	oly		
	Limits on Lobbying E (The term "expenditures" means an		l .)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public o	pınıon (grass roots lob	bying)			
b	Total lobbying expenditures to influence a legisla	ative body (direct lobb	yıng)			
c	Total lobbying expenditures (add lines 1a and 1b	o)				
d	O ther exempt purpose expenditures					
e	Total exempt purpose expenditures (add lines 1c	c and 1d)				
f	Lobbying nontaxable amount Enter the amount fo	rom the following table	ın both			
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
	Not over \$500,000	20% of the amount on li	ne 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the	e excess over \$1,000	0,000		
	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				
	Grassroots nontaxable amount (enter 25% of lin	e 1f)				
_	Subtract line 1g from line 1a If zero or less, ente	•		-		
i	Subtract line 1f from line 1c If zero or less, ente			-		
_	If there is an amount other than zero on either lin		organization file	Form 4720 rep	ortina	1
-	section 4911 tax for this year?					┌ Yes ┌ No
_	4-Voor Av	veraging Period U	Inder Section	F01/b)		
	(Some organizations that made a scolumns below. See the	section 501(h) el	ection do not	have to cor		ne five
	Lobbying Expe	enditures During	4-Year Avera	ging Period		1
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2a	Lobbying nontaxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots nontavable amount					

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N	TO			ГС	ige <u>J</u>
	filed Form 5768 (election under section 501(h)).	(8	a)		(b)	
For e activ	rach "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying rity.	Yes	No	A	moun	t
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					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	O ther activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c))(5), o	r se	ctio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		⊢	1		No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		No
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1		3	3,976	5,222
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).					
а	Current year	2a				7,734
b	Carryover from last year	2b				7,810
C	Total	2c				0,076
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3			1,387	7,992
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5			-1,428	3,068

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 (affiliated group list), Part II-A, line 2, and Part II-B, line 1 Also, complete this part for any additional information

Identifier Return Reference Explanation

DLN: 93493305000163

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

► 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.

Supplemental Financial Statements

Open to Public Inspection

	me of the organization		Emp	ployer identification number
4M t	ERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION		53-	0240474
Pa	organizations Maintaining Donor Advorganization answered "Yes" to Form 990			
		(a) Donor advised funds		(b) Funds and other accounts
	Total number at end of year			
	Aggregate contributions to (during year)			
	Aggregate grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or		or adv	rsed Yes No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benef conferring impermissible private benefit?			
a	rt III Conservation Easements. Complete if	the organization answered "Yes" to	Forr	n 990, Part IV, line 7.
	Purpose(s) of conservation easements held by the org Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space	or education) Preservation of an Preservation of a c	ertifie	ed historic structure
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	g quaimed conservation contribution in ti	ne iorr	
	T	-		Held at the End of the Year
a	Total number of conservation easements	-	2a	
b	Total acreage restricted by conservation easements		2b	
d	Number of conservation easements on a certified histonumber of conservation easements included in (c) acquisitoric structure listed in the National Register	` ` '	2c 2d	
	Number of conservation easements modified, transferr	ے ed. released. extinguished. or terminate:	d bv tl	he organization during
	the tax year 🛌	. , , ,	,	J J
	Number of states where property subject to conservati			
	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		— Iling of	f violations, and Yes No
	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	nents (during the year
	Amount of expenses incurred in monitoring, inspecting	ı, and enforcıng conservatıon easements	durın	g the year
	Does each conservation easement reported on line 2(of and section 170(h)(4)(B)(II)?	d) above satisfy the requirements of sec	tion 1	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial ents	state	ments that describes
3 li	t III Organizations Maintaining Collection Complete of the organization answered "Y		or Ot	her Similar Assets.
а	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	or rese	earch in furtherance of public
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, o		
	(i) Revenues included in Form 990, Part VIII, line 1			▶ \$
	(ii) Assets included in Form 990, Part X			▶ \$
	If the organization received or held works of art, histor following amounts required to be reported under SFAS		r finan	
а	Revenues included in Form 990, Part VIII, line 1			► \$
b	Assets included in Form 990, Part X			<u></u> -

Part	Organizations Maintaining Co	llections of Art	t, His	toric	al Tr	eası	ires, or Ot	the	r Similar	Asse	ets (co	ntınued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other reco	rds, cl	heck a	ny of t	he fol	lowing that a	re a	sıgnıfıcant	use of	its	
а	Public exhibition		d	Γ	Loan	orexc	hange progra	ams				
b	Scholarly research		e	Γ	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	aın hov	w they	furthe	er the	organızatıon'	sex	empt purp	ose in		
5	During the year, did the organization solicit of								ıılar	_		_
	assets to be sold to raise funds rather than t										Yes	No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answered	1 "Y	es" to For	m 990	J,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other asse	ets i	not	Г	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII $$	I and complete the	e follov	wing ta	ble		_					
							_			Amou	ınt	
C	Beginning balance						_	1c				
d	Additions during the year						<u> </u>	1d				
e	Distributions during the year						<u> </u>	1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 21?	,						Γ	Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	e expla	anatıoı	n has b	been p	provided in Pa	art >	KIII			Γ
Pai	t V Endowment Funds. Complete											
4-	Danis and the same halo and	(a)Current year	(b)Prior y	ear	b (c) ⊺	wo years back	(d)	Three years b	ack (e	:)Four ye	ears back
1a	Beginning of year balance											
b	Contributions									-		
С	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 curr	ent year end balan	ce (lır	ne 1g,	colum	n (a))	held as					
а	Board designated or quasi-endowment ►											
b	Permanent endowment ►											
c	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c show	uld equal 100%										
3a	Are there endowment funds not in the posses	ssion of the organiz	zatıon	that a	re held	dand	admınıstered	for	the			
	organization by (i) unrelated organizations		_	_			_		_	3a(i)	Yes	No
	(ii) related organizations				• •			•		3a(ii)		
b	If "Yes" to 3a(II), are the related organization		d on S	Schedi	ıle R?			٠.		3b		
4	Describe in Part XIII the intended uses of th	e organization's er	ndowm	ent fu	nds							
Par	t VI Land, Buildings, and Equipme	nt. See Form 99	90, Pa									
	Description of property				Cost or (invest		(b) Cost or oth basis (other		(c) Accumu depreciat		(d) Boo	ok value
1a	and						7,834,	685				7,834,685
b i	Buildings		•				36,800,	167	4,62	25,961	32	2,174,206
c l	easehold improvements						1,636,	988	48	39,092		1,147,896
d i	Equipment						18,432,	339	14,20	08,865		4,223,474
_ e (Other						126,	139		T		126,139
	. Add lines 1a through 1e <i>(Column (d) must e</i>						•					5,506,400

Part VIII Investments—Other Securities. Se	<u>se Form 990, Part X, line 12</u>	2.	
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)		Cost or end-o	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F		
Part VIII Investments—Program Related.	See Form 990 Part X line	13	
(a) Description of investment type	(b) Book value		od of valuation
(a) Description of Investment type	(b) Book value		f-year market value
		Cost of elia-o	. , car market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	P-		
Part IX Other Assets. See Form 990, Part X			
(a) Des	cription		(b) Book value
Total. (Column (b) must equal Form 990. Part X. col.(B) line	15.)		
		<u></u>	
Part X Other Liabilities. See Form 990, Par	rt X, line 25.		<u> </u>
Part X Other Liabilities. See Form 990, Par			
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability	rt X, line 25.	<u>.</u>	
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes	rt X, line 25. (b) Book value 0		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES	(b) Book value 0 2,206,009		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY	(b) Book value 0 2,206,009 18,760,167		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY	(b) Book value 0 2,206,009		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
(a) December of leability	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		
Part X Other Liabilities. See Form 990, Part 1 (a) Description of liability Federal income taxes PAYABLE TO AFFILIATES PENSION LIABILITY MORTGAGE INTEREST PAYABLE	(b) Book value 0 2,206,009 18,760,167 65,992		

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	59,499,590
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a 2,089,561		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	2,434,740
3	Subtract line 2e from line 1	3	57,064,850
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 267,166		
b	Other (Describe in Part XIII) 4b -782,526		
c	Add lines 4a and 4b	4c	-515,360
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	56,549,490
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	49,371,050
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	1,015,184
3	Subtract line 2e from line 1	3	48,355,866
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 267,166		
b	Other (Describe in Part XIII)		
C	Add lines 4a and 4b	4c	267,416
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	48,623,282

Part XIII 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, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Part X, Line 2		The Association recognizes tax positions on a "more likely than not" threshold. This applies to positions taken or expected to be taken in a tax return. The Association does not believe it has any material uncertain tax positions.
Part XI, Line 2d		Pension Related Gain \$296,456 Gain on interest rate swap \$48,972 Unrelated Business Income Tax -\$250 Rounding \$1 - Total \$345,179
Part XI, Line 4b		Reclass of Rental Expenses \$(782,526)
Part XII, Line 2d		Reclass of Rental Expenses \$782,526 Part XII, Line 4b Reclass of Unrelated Business Income Tax \$250

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DLN: 93493305000163

OMB No 1545-0047

Open to Public Inspection

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION **Employer identification number**

53-0240474

Pa	"Yes" to Form 990, Par	n on Activitient IV, line 14b.	es Outside th	e United States. Co	omplete if the organiza	ation answered
1	For grantmakers. Does the o			s to substantiate the a	mount of the grants o	 or
	assistance, the grantees' elig					
	the grants or assistance?					✓ Yes
2	For grantmakers. Describe in the United States.	n Part V the on	ganızatıon's pı	ocedures for monitorii	ng the use of grant fui	nds outside
3	Activites per Region (The follow	ung Part I, line 3	B table can be du	iplicated if additional spa	ice 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	Grantmakıng		10,000
3a	Sub-total	0	0			10,000
t	Total from continuation sheets					

c Totals (add lines 3a and 3b)

10,000

Part IV,				000. Part II can be o	•			T
(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
		East Asia and the Pacific	Contribution	10,000				
2 Enter total nu tax-exempt b	mber of reciple y the IRS, or fo	ent organizations lis or which the grante	ted above that are ree or counsel has pro	ecognized as chariti ovided a section 501	es by the foreign c (c)(3) equivalency	country, recognized letter	as	1
B Enter total nu	mber of other	organizations or er	itities					0

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
		+	1		,		
		+ +		'	+		+
		+		'	+		+
		+	<u> </u>		 		+
	 		 		 	 	+
					<u> </u>		
					<u> </u>	<u> </u>	
							<u> </u>
			1				
		+ + +			,		1
		+ + +			+		
	 	+			+		+
	 		<u> </u>		-		+
	 		 		 	 	
			 		<u> </u>	 	
						1	

Part IV Foreign Forms

1	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)	Γ	Y	'es	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organizationmay 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)	Γ	Y	'es	্য	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)	Г	Y	'es	<u> </u>	Νo
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, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Γ	Υ	'es	<u> </u>	Νo
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)	Г	Υ	'es	<u> -</u>	Νo
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).	Γ	Υ	'es	<u> </u>	No

Schedule F (Form 990) 2012

Part V	Suppl	emental	Inform	natio

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 (see instructions).

I dentifier	ReturnReference	Explanation
Schedule F, Part I, Line 2		ASHA RECEIVED A CONFIRMATION FROM THE GRANT RECEIPIENT ON WHAT PROJECT THE FUNDS WERE USED

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Schedule I (Form 990)

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.

OMB No 1545-0047

2012

DLN: 93493305000163

pen to Public

Department of the Treasury Internal Revenue Service Name of the organization

Attach to Form 990

Inspection

Employer identification number

AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION 53-0240474 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes 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. Part II can be duplicated if additional space is needed. (e) A mount of non-(h) Purpose of grant (a) Name and address of (b) EIN (c) IRC Code section (d) Amount of cash (f) Method of (g) Description of ıf applıcable valuation non-cash assistance or assistance organization grant cash or government assistance (book, FMV, appraisal, other) (1) A merican Speech 52-6055761 501(c)(3) 279,563 Contribution Language Hearing Foundation 2200 Research Blvd Rockville, MD 20850 (2) SDSU Research 95-6042721 501(c)(3) 14,550 Multicultural grants Foundation 5250 Campanile Drive San Diego, CA 92182 (3) Jackson State University 64-6000507 501(c)(3) 7,794 Multicultural grants PO Box 17250 Jackson, MS 39217 (4) Marquette University 39-0806251 501(c)(3) 11,980 Multicultural grants PO Box 1881 Milwaukee, WI 53201 (5) University of Maryland 52-6002033 Government 14,978 Multicultural grants College Park 4101 Chesapeake Bldg College Park, MD 20742 (6) Georgia SLHA 58-1396095 501(C)(6) 34,000 Stipend & RMBRS 20423 Se Rd 7 F6-491 Boca Raton, FL 33498 (7) Colorado SLHA 84-0745204 7,000 Personnel grant 501(c)(6) P O Box 345 Sedalia, CO 90135 (8) Connecticut SLHA 06-0957671 501(C)(3) 7,000 Personnel Grant 213 Black Ln Newington, CT 06111 (9) National Assoc for 53-0196545 501(C)(3) 400,000 Contribution Hearing & Speech Action 2200 Research Blvd Rockville, MD 20850

7

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Audiology/Hearing Science Research Travel Award	21	10,500			
(2) Student Research Travel Award	23	11,500			
(3) Student Ethics Essay Award	3	1,500			
(4) MSLP	31	4,650			
(5) Students Preparing for Academic & Research Careers	10	10,000			

Part IV Supplemental Information.

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
SCH I, PART I, LINE 2		For grantees supported through ASHA grants, the procedures for monitoring use of grant funds are established on a per-grant basis. Applications are reviewed by ASHA grant issuing departments. Once grantees are selected, grant activities are monitored throughout the life of the grant. Budgets submitted with the grant application, as well as throughout the life of the grant, are reviewed and unclear items are questioned and clarified before final approval or rejection. Grantees typically submit a mid-term report in addition to a year end report reflecting progress made, budget, scope, etc. The final report is due upon grant project completion and includes a summary of all approved changes, and any product(s) developed using grant funds. Sometimes the final report is reviewed before final grant funding is disbursed.

(a) Name and address of

organization

(h) Purpose of grant

or assistance

non-cash assistance

Software ID:

Software Version:

ıf applıcable

EIN: 53-0240474

grant

Name: AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

cash

(f) Method of

valuation

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (e) A mount of non-**(b)** EIN (c) IRC Code section (d) Amount of cash (g) Description of

or government				assistance	(book, FMV, appraisal, other)	
American Speech Language Hearing Foundation2200 Research Blvd Rockville,MD 20850	52-6055761	501(c)(3)	279,563			Contribution
SDSU Research Foundation 5250 Campanile Drive San Diego,CA 92182	95-6042721	501(c)(3)	14,550			Multicultural grants
Jackson State UniversityPO Box 17250 Jackson,MS 39217	64-6000507	501(c)(3)	7,794			Multicultural grants
Marquette UniversityPO Box 1881 Milwaukee,WI 53201	39-0806251	501(c)(3)	11,980			Multicultural grants
University of Maryland College Park4101 Chesapeake Bldg College Park,MD 20742	52-6002033	Government	14,978			Multicultural grants
Georgia SLHA 20423 Se Rd 7 F6-491 Boca Raton, FL 33498	58-1396095	501(C)(6)	34,000			Stipend & RMBRS
Colorado SLHAP O Box 345 Sedalia,CO 90135	84-0745204	501(c)(6)	7,000			Personnel grant
Connecticut SLHA 213 Black Ln Newington, CT 06111	06-0957671	501(C)(3)	7,000			Personnel Grant
National Assoc for Hearing & Speech Action2200 Research Blvd Rockville, MD 20850	53-0196545	501(C)(3)	400,000			Contribution

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DLN: 93493305000163

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

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AMI	erican speech-language-hearing association		53-0240474			
Pa	rt I Questions Regarding Compensation		·		_	
					Yes	No
1a	Check the appropriate box(es) if the organization prov 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Γ	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the org			1b		
2	Did the organization require substantiation prior to redirectors, trustees, and the CEO/Executive Director,			2		
3	Indicate which, if any, of the following the filing organ organization's CEO/Executive Director Check all the used by a related organization to establish compensa	at appl	y Do not check any boxes for methods			
	✓ Compensation committee	굣	Written employment contract			
	Independent compensation consultant		Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, P or a related organization	art VI	I, Section A, line 1a with respect to the filing organizatio	n		
а	Receive a severance payment or change-of-control p	aymer	nt?	4a		Νo
b	Participate in, or receive payment from, a supplemen	tal non	nqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-ba	sed co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pro	vide th	ne applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must For persons listed in Form 990, Part VII, Section A, compensation contingent on the revenues of					
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in Form 990, Part VII, Section A, compensation contingent on the net earnings of	lıne 1 a	ı, dıd the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," de		• • • • • • • • • • • • • • • • • • • •	7		
8	Were any amounts reported in Form 990, Part VII, pa subject to the initial contract exception described in in Part III	aid or a	accured pursuant to a contract that was	8		
9	If "Yes" to line 8, did the organization also follow the	rebutt	able presumption procedure described in Regulations			

section 53 4958-6(c)?

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)(1)-(111) 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 and Title	(B) Breakdown of	f W-2 and/or 1099-MI:	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of	(F) Compensation
	(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation	benefits	columns (B)(ı)-(D)	reported as deferred in prior Form 990
See Additional Data Table							

Schedule J (Form 990) 2012

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

Identifier	Return Reference	Explanation
Schedule J, Part II		Employees with amounts listed on Line I, column C - Retirement and other deferred compensation ASHA has a defined benefit (DB) retirement plan covering most employees hired before January 1, 2003, and a defined contribution (DC) plan for other eligible employees hired on or after the date. The defined benefit plan is based on the actuarial calculation of the change in the lump sum value of accrued benefit. This calculation varies based on compensation, years of service, and age. The defined contribution plan amount is based on a percentage of salary.
Schedule J, Part II	l e	THE OFFICERS, KEY EMPLOYEES, AND HIGHEST COMPENSATED EMPLOYEES OF AMERICAN SPEECH- LANGUAGE-HEARING ASSOCIATION WORK 50+HOURS PER WEEK

Schedule J (Form 990) 2012

Software ID: Software Version:

EIN: 53-0240474

Name: AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
Arlene A Pietranton	(ı) (ıı)	1	0	79,007 0	136,747 0	25,729 0	543,638 0	0	
Chuck Cochran	(I) (II)	1	0	25,707 0	64,897 0	28,572 0	358,003 0	0	
Vicki Deal William	(I) (II)	1	0	991 0	12,393 0	25,080 0	255,629 0	0	
Lemmieta Mcneilly	(I) (II)	1	0	18,987 0	0	27,599 0	238,850 0	0	
Margaret Rogers	(I) (II)	1	0	1,881	0	17,032 0	240,400 0	0	
Vic Glastone	(I) (II)	1	0	3,252 0	16,013 0	17,289 0	154,382 0	0	
Martin Rome	(I)	1	0	2,179 0	0	25,144 0	197,845 0	0	
Michael Guerrieri	(I) (II)		2,994 0	812 0	5,174 0	27,522 0	210,174	0	
Stan Dublinske	(I) (II)	1	2,662 0	3,705 0	52,876 0	10,809 0	209,336	0	
Rob Mullen	(I) (II)		2,584 0	683 0	23,871 0	27,373 0	192,258 0	0	
Yvonne Kankam-Boadu	(I) (II)		2,602	7,631 0	0	28,729 0	189,119 0	0	

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION	Employer identifi	cation number
	53-0240474	

ldentifier	Return Reference	Explanation
PART III, LINE 1	Organization's Mission	ASHA EMPOWERING AND SUPPORTING SPEECH-LANGUAGE PATHOLOGISTS, AUDIOLOGISTS, AND SPEECH, LANGUAGE, AND HEARING SCIENTISTS BY ADVOCATING ON BEHALF OF PERSONS WITH COMMUNICATION AND RELATED DISORDERS, ADVANCING COMMUNICATION SCIENCE, AND PROMOTING EFFECTIVE HUMAN COMMUNICATION PART VI, SECTION A, LINE 4 Changes to Organization's governing documents in 2012, the following aspects of the Organization's Bylaws were amended Editorial of the Bylaws By a simple majority vote of its members, the Board of Directors may make editorial changes so long as they do not change substance or meaning Such changes shall include (a) Changing the placement of one or more sentences, (b) The numbering of articles or sections, (c) Changing approved terminology in order to make it uniform or consistent, and (d) Punctuation, capitalization, spelling, grammar, details of style, and other purely editorial matters. These changes shall take effect upon such action, and shall be followed by proper publication to the Membership Composition of the Board of directors and Executive officer title ASHA's Board of Directors was increased to 17 to include the NSSLHA National Advisor as a full voting member of the Board of Directors ASHA also changed the title of the Executive Director of the Association to Chief Executive Officer. Fellowship Award. An international Affiliate may be awarded fellowship, an award recognizing professional or scientific achievement, on approval by two-thirds of the vote of the Committee on Honors. Advisory Council. Each Advisory Council will have 54 members. 1 from each of the 50 states, 1 from the District of Columbia, 1 from the National Student Speech Language Hearing. Association (NSSLHA), 1 from members who reside outside the United States, and 1 who resides in a U.S. Territory and who is distinct from the member who resides outside the United States.

Identifier	Return Reference	Explanation
PART VI, SECTION A, LINE 6	ORGANIZATION MEMBERS AND STOCKHOLDERS	ASHA is a professional membership association with 166,000 members and affiliates who are audiologists, speech-language pathologists, and speech, language, and hearing scientists. Asha's membership consists of the following. Certified audiologists, Certified speech-language pathologists, Dually certified, Speech language hearing scientists, and Non certified.

ldentifier	Return Reference	Explanation
PART VI, SECTION A, LINE 7A	ELECTION OF GOVERNING BODY MEMBERS	ASHA members elect its board of directors by voting as follows 1)Asha members who are certified audiologists vote for Board of Directors (BOD) candidates for audiology-designated BOD offices 2)Asha members who are certified speech-language pathologists vote for BOD candidates for the speech-language-pathology-designated BOD offices 3)Asha's entire membership vote for non-professional specific BOD officers

ldentifier	Return Explanation Reference								
PART VI, SECTION A, LINE 11A	FORM 990 REVIEW PROCESS	ASHA's form 990 is prepared and detailed reviewed by its outside accountants, Grant Thornton, a final draft of the form 990 will be detailed reviewed by ASHA's finance staff, director of finance, chief staff officer for operations, and chief executive officer before presenting the 990 to the board of directors prior to filing							

ldentifier	Return Reference	Explanation
PART VI, SECTION B, LINE 12C	MONITORING AND ENFORCEMENT OF CONFLICT OF INTEREST POLICY	The conflict of interest policy is reviewed annually for BOARD OF DIRECTORS and on an on-going bases for all employees Each Board of Director and Employee is expected to avoid any action or involvement that would compromise the Association. This includes the following 1) Having a financial interest, or a family member with a financial interest, in an outside concern from which ASHA purchases goods or services. 2) Conducting business on behalf of ASHA with a member of the director's or employee's family or a business organization in which the director or employee or a member of his or her family has a significant interest. In the event a volunteer leader wishes to partake in an activity or association that would create or appear to create a conflict of interest, the volunteer leader must disclose the proposed outside activity or association to the chair of the board or committee. The chair shall decide whether the outside activity or association can be accommodated in such a way that the conflict of interest is avoided without resulting in significant hardship to ASHA. This may include requiring the volunteer leader to recuse himself or herself from making business or policy decisions on behalf of ASHA that are related to or in conflict with the outside activity or association and from recommending or providing input for such decisions. If the chair decides that ASHA is able to make an accommodation that would eliminate a conflict of interest without imposing significant hardship on the organization, and if the volunteer leader is agreeable to it, the volunteer leader may engage in the outside activity or association. In the event that the ASHA president believes he or she has a potential conflict, he or she should disclose the outside activity or association to the immediate past president.

ldentifier	Return Reference	Explanation
PART VI, SECTION B, LINE 15A & 15B	COMPENSATION PROCESS	Annually ASHA contracts with Quatt Associates, outside consultants, to provide an independent and market driven compensation package for the executive director and all staff positions. The following elements are included in the process for determining compensation for these positions. 1)Quatt Associates reviews all of the positions, including the Executive Director's position. The BOD approves and works directly with the consultant regarding the Executive Director's position. 2)Quatt Associates provides market data for the determination of compensation for the Executive Director and all other positions. 3)The President documents the discussion regarding compensation for the Chief Executive Officer's position and forwards instructions to the Chief Staff officer for Operations. 4)All other staff position salary ranges are established (based on Quatt's review), subject to the approval of Chief Executive Officer. The organization does not have a review process for compensation for the Board of Director since the board members do not get compensation from the organization.

Identifier	Return Reference	Explanation
PART VI, SECTION B, LINE 19	DOCUMENT AVAILABILITY	ASHA posts its bylaws and audited financial statements on the organization's website. The articles of incorporation and conflict of interest policy are available upon request.

Identifier	Return Reference	Explanation
Part XI, Line 9	Other Changes in net assets	Pension Related gain \$296,456 Gain on interest rate sw ap \$48,972 Total \$345,428

DLN: 93493305000163

2012

OMB No 1545-0047

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SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

Name of the organization AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION Employer identification number

53-0240474

				53-024047	4			
Part I Identification of Disregarded Entities (Cor	nplete if the organizatio	n answered "Yes" to	Form 990, Par	t IV, line 33.)				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct contr entity			
(1) FALLSGROVE HOLDING LLC 2200 research boulevard ROCKVILLE, MD 20850	PROP OWNER	MD	504,919		ASHA		-	
Part II Identification of Related Tax-Exempt Organizations during		f the organization a	nswered "Yes"	to Form 990, Pa	rt IV, line 34 be	cause it ha	ad on	e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	on Public charity st (if section 501(c	(f) (atus Direct coi (atus)(3)) enti	ntrolling S	(g) Section 5 (13) con entit	
(1) AMERICAN SPEECH LANGUAGE HEARING FOUND	educational	MD	501(c)(3)	9	ASHA	 	Yes Yes	No
2200 RESEARCH BLVD	ou a data o man				, 2			İ
ROCKVILLE, MD 20850 52-6055761								
(2) NAT ASSOC FOR HEARING AND SPEECH ACT	educational	DC	501(c)(3)	11A	ASHA		Yes	
2202 RESEARCH BLVD								
ROCKVILLE, MD 20850 53-0196545								İ
(3) ASHA POLITICAL ACTION COMMITTEE	political	KS	527		ASHA			No
2202 RESEARCH BLVD								
ROCKVILLE, MD 20850 52-1515473								
(4) NAT STUDENT SPEECH LANG HEARING ASSOC	educational	MD	501(c)(3)	9	ASHA		Yes	
2202 RESEARCH BLVD								
ROCKVILLE, MD 20850 52-0976011								

(a) Name, address, and EIN o related organization	f	(b) Primary activit	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income	(g) Share of end-of-yea assets	(h Disprop r allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	ral or	(k) Percenta ownersh
					514)			Yes	No		Yes	No	
V Identification of Related Or line 34 because it had one or r	ganizations Taxa nore related organi	ble as a Corpo	ration is a cor	or Trust (poration or	Complete if trust during	the organı the tax ye	zatıon ar ar.)	iswere	d "Ye	s" to Form	990,	Part	:IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controll entity	(e) Type of enti (C corp, S corp, or trust)		total Share e of	(g) e of end- year ssets		(h) ercentage wnership	Section (b) conti	(13)	
											Yes		No

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule					Yes	No						
1 D	ırıng the tax year, dıd the orgranızatıon engage ın any of the following transactions with one or more relat	ted organizations lis	sted in Parts II-IV?										
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No						
b	Gift, grant, or capital contribution to related organization(s)				1b	Yes							
c	Gift, grant, or capital contribution from related organization(s)				1 c		No						
d	Loans or loan guarantees to or for related organization(s)				1 d		No						
e	Loans or loan guarantees by related organization(s)				1e		No						
f	Dividends from related organization(s)				1f		No						
g	Sale of assets to related organization(s)				1g		No						
h	h Purchase of assets from related organization(s)												
i	i Exchange of assets with related organization(s)												
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No						
k	k Lease of facilities, equipment, or other assets from related organization(s)												
1	l Performance of services or membership or fundraising solicitations for related organization(s)												
m	m Performance of services or membership or fundraising solicitations by related organization(s)												
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes							
0	Sharing of paid employees with related organization(s)				10	Yes							
р	Reimbursement paid to related organization(s) for expenses				1р	Yes							
q	Reimbursement paid by related organization(s) for expenses				1q	Yes							
r	Other transfer of cash or property to related organization(s)				1r		No						
s	Other transfer of cash or property from related organization(s)				1s		No						
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete the		· •										
	(a) Name of other organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount II	nvolved							
ee A	ditional Data Table												

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

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 re	garding exclu	sion for ce		nent	partnerships				`	,		_	
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512- 514)	org	(e) all partners section 501(c)(3) anizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
												1	

Part VII Supplemental Information

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

Identifier Return Reference Explanation

Software ID: Software Version:

EIN: 53-0240474

Name: AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION

--> Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of other organization	(b) Transaction type(a-s)	(c) A mount I nvolved	(d) Method of determining amount involved
American Speech Language Hearing Foundation	b	279,563	FMV
American Speech Language Hearing Foundation	I	139,592	FMV
American Speech Language Hearing Foundation	n	99,267	FMV
American Speech Language Hearing Foundation	0	133,391	FMV
American Speech Language Hearing Foundation	q	449,152	FMV
National Assoc for Hearing and Speech Action	b	400,000	FMV
National Assoc for Hearing and Speech Action	Q	60,272	FMV