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DLN: 93493191002164

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

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

Open to Public

A Fo	r the 2	2012 cal	endar year, or tax year beginnir	ng 09-01-2012 , 2012, and end	ding 08-31	L-2013			<u> </u>		
	eck ıf ap		C Name of organization	•			D Emplo	yer iden	tification number		
	dress cha		ASAE FOUNDATION				52-13	300485			
┌ Na	me chan	nge	Doing Business As								
┌ Ind	tıal returi	n	Number and street (or P.O. box if i	mail is not delivered to street address)	Room/suit	te					
Г Те	rmınated	j	1575 I STREET NW	Hall is not delivered to street dudressy	, Room, san			one numb			
┌ Am	ended re	eturn	City or town, state or country, and	ZIP + 4			(202)	(202) 326-9550			
		pending	WASHINGTON, DC 20005				G Gross r	eceints ¢	4,820,503		
	•		F Name and address of pri	ncipal officer		H(a) Io	this a group		<u> </u>		
			JOHN H GRAHAM IV				iliates?	returni	or		
			1575 I STREET NW WASHINGTON,DC 20005	5					F., F.,		
			,						ed? 「Yes 「No see instructions)		
I Ta	x-exem _l	pt status	▽ 501(c)(3) □ 501(c)() ◀	(insert no) 4947(a)(1) or 5	527						
J W	ebsite	: ► ww	/W ASAECENTER ORG			H(c) G	roup exempt	ion num	ber 🟲		
V For	m of org	anization	Corporation Trust Association	on C Othor Its		I Voor o	f formation 19	192 M 6	State of legal domicile DC		
	rt I		mary	on pomer p		L fear o	i ioiiiiatioii 19	03 M 3	state of legal dofficile. DC		
			escribe the organization's missi	on or most significant activities							
Governance	E	XISTIN	CTING RESEARCH IN AREAS NG AND NEW PROFESSIONAL AND HELPING ASSOCIATIO	S WHO WILL LEAD THE PROF	ESSION						
ŝ	2 C	heck th	nis box দ if the organization d	iscontinued its operations or di	sposed o	f more tha	n 25% of its	net ass	ets		
Activities &	l							1 - 1			
ij	1		of voting members of the govern	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '				3 4	11		
Z E	1		of independent voting members mber of individuals employed in					5	0		
∢	1		mber of volunteers (estimate if	·				6	1,400		
	1		related business revenue from F	• •				7a	0		
	b N	let unre	lated business taxable income	from Form 990-T, line 34 .				7b	0		
						Р	rior Year		Current Year		
	8	Contri	butions and grants (Part VIII, I	ıne 1h)			522,	233	567,805		
	9	Progra	am service revenue (Part VIII, l	ıne 2g)		116,		35,130			
Ravenue	10		tment income (Part VIII, colum				1,688,		2,031,806		
_	11		revenue (Part VIII, column (A)				155,	376	-11,145		
	12		revenue—add lines 8 through 1:				2,482,	966	2,623,596		
	13		s and sımılar amounts paıd (Par					0	32,022		
	14	Benefi	ts paid to or for members (Part	IX, column (A), line 4)			0		0		
Ø	15	Saları 5–10)	es, other compensation, employ	ee benefits (Part IX, column (A	(), lines			0	0		
Expenses	16a	,	<i>)</i> ssional fundraising fees (Part IX	. column (A), line 11e)			0	0			
÷.	ь		indraising expenses (Part IX, column (I								
ш	17		expenses (Part IX, column (A),		 .		1,866,653				
	18		expenses Add lines 13-17 (mi				1,852,		1,898,675		
	19	Reven	ue less expenses Subtract line	18 from line 12			630,	520	724,921		
\$ &						Beginn	ing of Curre	nt	End of Year		
Sets Ses	20	Total	assets (Part X, line 16)				Year 20,265,	862	22,237,153		
Not Assets or Fund Balances	21		liabilities (Part X, line 16)			. —	7,101,		7,267,950		
8 8 8	22		ssets or fund balances Subtract				13,164,		14,969,203		
Pa	tΠ		ature Block				, /		, ,,===		
my k prepa	nowled arer has	ge and s any ki	ature of officer								
Her	e		N H GRAHAM IV PRESIDENT/CEO e or print name and title								
			Print/Type preparer's name	Preparer's signature	Da	ate (Check I if	PTIN			
Paid	d		DEBORAH G KÖSNETT				self-employed	P002907			
	pare:		Firm's name F TATE AND TRYON				Firm's EIN ► 5	2-185594	2		
	Ise Only Firm's address ► 2021 L STREET NW SUITE 400				1	Phone no (202	293-220	00			
	— ,	,	WASHINGTON, DC 20	0036							

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Par	t III	Statement of Program S Check if Schedule O contains				
1	Briefl	y describe the organization's m	ssion			
LEAD ASSO COM	DERSH DCIAT MUNI	IP BY CONDUCTING RESEAR IONS BECOME MORE INNOV	CH IN AREAS THAT ATIVE WITH THE H AINS A RIGOROUS	NO ONE ASSOCIATI HELP OF ASAE MEMBE	IN ASSOCIATION MANAGEM ON CAN UNDERTAKE ON ITS RS AND FRIENDS OF THE ASS THAT SUPPORTS THE KNOWL	OWN AND HELPING OCIATION
2		e organization undertake any s ior Form 990 or 990-EZ? .				┌ Yes ┌ No
	If "Ye	s," describe these new services	on Schedule O			
3	servi	e organization cease conductin es?			ducts, any program	┌ Yes ┌ No
	If "Ye	s," describe these changes on S	Schedule O			
4	expen		l (c)(4) organizations	s are required to report	ee largest program services, as the amount of grants and allocat	
4a	(Code) (Expenses \$	1,181,274	ıncludıng grants of \$	32,022) (Revenue \$	31,000)
	LEAD! FINDI	RS FOCUS ON CRITICAL FACTORS TO	ENHANCE THEIR ORGAN ROUGH RIGOROUSLY DES	IZATIONS THE FOUNDATION SIGNED SECONDARY, QUALITA	OFIT MANAGEMENT BY PROVIDING RESO I IMPLEMENTS AND FACILITATES THE AI ATIVE AND QUANTITATIVE METHODS T DNOMY	PPLICATION OF RESEARCH
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$)
	(Code	e) (Expenses \$		ıncludıng grants of \$) (Revenue \$)
	(004)	, (Expenses 4		melaamig grants or p	, (Nevenue \$,
	O+ha	r program services (Describe ii	Schedule O \			
-ru		enses \$	including grants o	f \$) (Revenue \$)
4e	Tota	l program service expenses 🕨	1,181,274			
		<u> </u>	· · · · · · · · · · · · · · · · · · ·			

Part IV	Checkli	st 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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 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^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, 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		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	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		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the 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	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more 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		No
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		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, 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 IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, 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		No
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36	Yes	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2012)

Par	Statements Regarding Other IRS 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 3			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	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		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
	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
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
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		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
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		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	H		
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.	\vdash		
	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		
LO	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	.		
l 1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	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	Į ļ		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Νo
h	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	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		No
		_		
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	eveni	ıe Cod	e.)
Se		evenu	<i>ie Cod</i> Yes	e.)
		evenu 10a		
10a	ection B. Policies (This Section B requests information about policies not required by the Internal R			No
10a b	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 b	Did the organization have local chapters, branches, or affiliates?	10a 10b	Yes	No
10a b 11a b 12a	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 12a	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	Did the organization have local chapters, branches, or affiliates?	10a 10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes Yes	No
10a b 11a b 12a b c 13 14	Did the organization have local chapters, branches, or affiliates?	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 14	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 No
10a b 11a b 12a b c 13 14 15	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 whistleblower 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 No
10a b 11a b 12a b c 13 14 15 a b	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 filling 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 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 Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	10a 10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No No

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection Indicate how you made these available Check all that apply
 - ☐ O wn website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►HEIDI ELLIS ROBEY 1575 I STREET NW WASHINGTON, DC (202) 626-2723

<u>Part VII</u> 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	more pers and	than on is	one bot	not box h ar	offic ustee	ess er e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation	
	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)	from the organization and related organizations	
(1) ARLENE A PIETRANTON PHD FASAE CAE	1 00	V		V				0	0	0	
CHAIRMAN, ASAE FOUNDATION	2 00	X		X				ľ	U	U	
(2) SUSAN K NEELY CAE	1 00	.,		,,						-	
SECRETARY/TREASURER	2 00	X		Х				0	0	0	
(3) JOSEPH M MCGUIRE CAE	1 00										
IMMEDIATE PAST CHAIRMAN	2 00	X		Х				0	0	0	
(4) DAVID A DUBOIS CMP FASAE CAE	1 00										
		Х						0	0	0	
BOARD MEMBER (5) MATTHEW R D'UVA FASAE CAE	2 00										
	1 00	х						0	0	0	
BOARD MEMBER	2 00										
(6) DENNIS D EDWARDS	1 00	l x						0	0	0	
BOARD MEMBER	2 00									_	
(7) ELENA GERSTMANN PHD CAE	1 00	×						0	0	0	
BOARD MEMBER	2 00	^						Ĭ	O	0	
(8) RICHARD B GREEN CASE FASAE	1 00	,,									
BOARD MEMBER	2 00	X						0	0	0	
(9) MATTHEW R SHAY CAE	1 00										
BOARD MEMBER	2 00	X						0	0	0	
(10) SCOTT D WILEY FASAE CAE	1 00										
DOADD MEMBED		Х						0	0	0	
BOARD MEMBER (11) ANN T TURNER PHD FASAE CAE	2 00										
		х						0	0	0	
BOARD MEMBER (12) JOHN GRAHAM UV	2 00	<u> </u>			<u> </u>		_				
•	1 00			х				0	915,886	224,076	
PRESIDENT & CEO, ASAE	36 50				<u> </u>				·		
(13) SUSAN ROBERTSON	18 70			x				206,624	206,624	33,000	
EXEC VP ASAE, PRESIDENT ASAE FOUNDATION	18 80			<u> </u>				200,024	200,024	33,000	
(14) HEIDI ROBEY	2 80			х				13,488	170,437	22,637	
VP OF FINANCE & CHIEF FINANCIAL OFFICER	34 70			^				13,488	170,437	22,637	
(15) REGINALD HENRY	3 50				ļ ,.						
CHIEF INFORMATION OFFICER	34 00				X			19,732	191,677	24,571	
(16) ROBERT SKELTON	2 00										
CHIEF ADMINISTRATIVE OFFICER	25.50				Х			11,009	195,413	29,311	
(17) JOHN R LEE IV	35 50 3 30	-					\vdash				
					х			16,650	175,469	19,980	
CHIEF MARKETING & COMMUNICATIONS OFFICER	34 20										

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

(A) Name and Title	(B) Average hours per week (list any hours	A verage hours per more than one box, unless week (list any hours any hours any hours hours per more than one box of the more than one box, unless compensation from the any hours and a director/trustee) organization organization organization (W. 2/1000)								(F Estim amount o compen from	ated of other sation the
	or 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)	organiz and re organiz	lated
(18) AMY LEDOUX	50				X			2,175	160,978		19,428
SENIOR VP, MEETINGS & EXPOSITIONS	37 00							·			
(19) SHARON MOSS	33 50				х			135,153	16,138		10,012
CHIEF RESEARCH OFFICER (20) STEPHEN PEELER	4 00 33 50										
VP, DEVELOPMENT						х		99,870	11,924		16,581
(21) KEITH SKILLMAN	6 00 7 50										
VP, PUBLISHING	4 00					Х		20,658	82,634		19,941
1b Sub-Total			•			<u> </u>					
c Total from continuation sheets to Par	t VII, Section A					▶□					
d Total (add lines 1b and 1c)						•		525,359	2,127,180		419,537
Total number of individuals (including \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more than			
										Yes	No
3 Did the organization list any former off on line 1a? If "Yes," complete Schedule					·pio	yee, o • •	r nig	inest compensate	employee 3		No
4 For any individual listed on line 1a, is to organization and related organizations individual									om the	Yes	
5 Did any person listed on line 1a receive services rendered to the organization?									dividual for		No
Section B. Independent Contract	ors										
Complete this table for your five higher compensation from the organization R	st compensated									tay year	_
	(A) business address			-	muu	, yeur			(B) on of services	(C Comper)
Total number of independent contractor \$100,000 of compensation from the org		not lim	ıted	to th	iose	listed	dabo	ove) who received	more than		

Form 99								Page 9
Part \	/	Statement o	o f Revenue ule O contains a respon	se to any question i	n this Part VIII			
				se to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
र र	1a	Federated cam	paigns 1a					
am	ь	Membership du	es 1b					
يَّ ق	С	Fundraising eve	ents 1c	219,028				
ffs,	d	Related organiz	zations 1d					
છ્≝	e	Government grants	s (contributions) 1e					
Sir		_		348,777	ļ			
iği je	f	similar amounts no	ons, gifts, grants, and 1f ot included above					
를	g	Noncash contribution 1a-1f \$	ons included in lines		j			
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1 a - 1 f	[567,805			
				Business Code				
in.	2a	MEETINGS & EXPO		900099	25,000	25,000		
94 94	ь	RESEARCH		900099	6,000	6,000		
- P	c	SPONSORSHIPS		900099	4,130			4,130
₩. ₩	d				,]			†
ૐ ⊆	e	-	_					
Program Service Revenue	f	All other progra	am service revenue					
Ş.	g	Total Add lines	s 2a-2f		35,130			
	3		ome (including dividence		·			
		and other simil	aramounts)	🟲 📙	742,174			742,174
	4		stment of tax-exempt bond p	· · · · · ·	5.601			5.601
	5	Royalties			5,601			5,601
	6a	Gross rents	(ı) Real	(II) Personal				
	ь	Less rental						
	c	expenses Rental income						
		or (loss)						
	d	Net rental inco	me or (loss) (i) Securities	(II) O ther				
	7a	Gross amount						
		from sales of assets other	1,880,930	1,192,867				
	ь	than inventory Less cost or						
		other basis and sales expenses	1,784,165	0				
	С	Gain or (loss)	96,765	1,192,867				
	d	Net gain or (los	ss)		1,289,632			1,289,632
٨	8a	Gross income f events (not inc	=					
ž			,028					
•		of contributions See Part IV, lin	reported on line 1c)					
Ģ.		See Fare IV, III	a	395,996				
Other Revenue	b	Less direct ex	penses b	412,742				
õ	С	Net income or (loss) from fundraising (events	-16,746			-16,746
	9a		rom gaming activities ne 19					
		See Fait IV, III	a					
	b	Less direct ex	penses b					
	С	Net income or ((loss) from gaming activ	/ities 				
	10a	Gross sales of returns and allo						
		recums and all	a a					
	ь	Less cost of g	oods sold b					
	С	Net income or (loss) from sales of inve	entory 🛌				
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	С							
	d	All other reven	L					
	е	Total. Add lines		•				
	12	Total revenue.	See Instructions	· · · •	2,623,596	31,000	(2,024,791

	990 (2012)				Page 10
	Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete all columns All	other organizati	ions must comp	lete column (Δ.)	
36000	Check if Schedule O contains a response to any question in this Pa				.
Do no	ot include amounts reported on lines 6b,		(B)	(c)	(D)
	o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations		expenses	general expenses	expenses
•	in the United States See Part IV, line 21	32,022	32,022		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and				
	key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	94,750	63,615	31,135	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	303,232	292,062	174	10,996
12	Advertising and promotion	39,275	1,255		38,020
13	Office expenses	38,153	15,179	1,711	21,263
14	Information technology	,	,	,	· · ·
15	Royalties				
16	Occupancy				
17	Travel	45,485	26,899		18,586
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	13,132	23,333		
19	Conferences, conventions, and meetings	33,202	11,031	4,816	17,355
20	Interest	,-32	,-31	.,	
21	Payments to affiliates				-
22	Depreciation, depletion, and amortization	32,857		32,857	
23	Insurance			·	
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	PERSONNEL SALARY ALLOCA	600,385	313,440	188,159	98,786
b	OVERHEAD ALLOCATION	558,618	361,723	123,237	73,658
С	PERSONNEL BENEFIT ALLOC	98,680	51,723	31,914	15,043
d	TROPHIES & AWARDS	9,328	3,767		5,561
e	All other expenses	12,688	8,558		4,130
25	Total functional expenses. Add lines 1 through 24e	1,898,675	1,181,274	414,003	303,398
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)			,	

Form 990 (2012)
Part X Balance Sheet

		Check if Schedule O contains a response to any question in this Part X	1		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	_
	2	Savings and temporary cash investments	494,334	2	679,692
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	43,913	4	47,880
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
Assets	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		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	13,295	9	2,181
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 265,363			·
	Ь	Less accumulated depreciation 10b 227,121	71,099	10c	38,242
	11	Investments—publicly traded securities	19,643,221	11	21,469,158
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	20,265,862	16	22,237,153
-	17	Accounts payable and accrued expenses	123,378	17	83,888
	18	Grants payable		18	
	19	Deferred revenue	4,000	19	0
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
ilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
Liabili		persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule			
		D	6,974,053		7,184,062
	26	Total liabilities. Add lines 17 through 25	7,101,431	26	7,267,950
يە دارى		Organizations that follow SFAS 117 (ASC 958), check here ► ✓ and complete			
ဋ	27	lines 27 through 29, and lines 33 and 34. Unrestricted net assets	13,080,597	27	14,854,766
<u>ଟ</u>	28		83,834	28	114,437
<u> </u>	29	Temporarily restricted net assets	05,054	29	114,437
Fund Balance	29	·		29	
Assets or Fi		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
SE SE	30	Capital stock or trust principal, or current funds		30	
SSE	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
₹	33	Total net assets or fund balances	13,164,431	33	14,969,203
_	34	Total liabilities and net assets/fund balances	20,265,862	34	22,237,153

Pai	Reconcilliation of Net Assets Check if Schedule O contains a response to any question in this Part XI				୮
	check it believate of contains a response to any question in this rate XI		<u> </u>	<u> </u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,6	523,596
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3			, 724,921
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			164,431
5	Net unrealized gains (losses) on investments	5			79,851
6	Donated services and use of facilities	6			,
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		14,9	969,203
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				. 区
				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		No
	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				l
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	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				l
С	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?	it 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?	е	За		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	required	3b		

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As Filed Data -

DLN: 93493191002164

Employer identification number

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

ASAE FOUNDATION

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

Open to Public Inspection

									52-1300					
Pai				blic Charity Sta				•	 	instructions	5.			
The o	rganı	zation is	not a priva	te foundation becaus	eitis (Forl	ines 1 thro	ugh 11, chec	k only one	box)					
1	Г	A chur	ch, convent	ion of churches, or a	ssociation of	fchurches	described in s	section 170	(b)(1)(A)(i)	•				
2	Γ	A scho	ool describe	d in section 170(b)(1	L)(A)(ii). (At	tach Scheo	dule E)							
3	Γ	A hosp	oital or a coo	perative hospital se	rvice organiz	zatıon desc	rıbed ın secti	on 170(b)(:	1)(A)(iii).					
4	Γ	A med	ıcal researc	h organization opera	ted ın conjun	ction with a	a hospital des	cribed in s	ection 170(b)	(1)(A)(iii).	Enter the			
_	_			ity, and state										
5	ļ	_	-	erated for the benefi	_	or univers	ity owned or o	operated by	/ a governme	ntal unit des	cribed in			
	_			(A)(iv). (Complete P	•									
6		A fede	ral, state, or	local government o	r government	tal unit des	cribed in sect	ion 170(b)	(1)(A)(v).					
7	✓	_		at normally receives		•	support from	n a governn	nental unit or	from the ger	neral public			
	_			on 170(b)(1)(A)(vi).			mandata Dant I	T \						
8 9	<u> </u>			described in section					ubutione moi	mbarabın faa	a and areas			
9	ı			at normally receives										
				rities related to its e										
										section 511 tax) from businesses				
4.0	_			ganızatıon after June 										
10	<u> </u>	-		ganızed and operated										
11	ı	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check												
		the box that describes the type of supporting organization and complete lines 11e through 11h												
				b Type II c						Non-function	ally integrated			
e	Γ	By che	cking this b	ox, I certify that the	organization	ıs not conf	trolled directl	y or indirec	tly by one or	more disqua	lified persons			
		other t	han foundat	on managers and ot	her than one	or more pu	blicly suppor	ted organiz	ations descri	bed in section	on 509(a)(1) or			
_			n 509(a)(2)				26.1.1.1							
f			organization this box	received a written d	etermination	from the H	RS that it is a	Type I, Ty	pe II, or I yp	e III suppor	ting organization,			
g				2006, has the organ	ızatıon accer	oted any gif	t or contribut	ion from an	v of the		,			
9			ng persons?		,	, , , , , , , , , , , , , , , , , , ,			,					
		(i) A p	erson who d	irectly or indirectly o	controls, eith	er alone or	together with	persons d	escribed in (i	ı) <u> </u>	Yes No			
		and (III) below, the	governing body of th	ne supported	organizatio	n?			119	g(i)			
		(ii) A f	amıly memb	er of a person descr	ıbed ın (ı) ab	ove?				119	g(ii)			
		(iii) A	35% contro	lled entity of a perso	n described	ın (ı) or (ıı)	above?			11 g	ı(iii)			
h		Provid	e the followi	ng information about	the support	ed organiza	tıon(s)							
(i) Nan	ne of	(ii) EIN	(iii) Type of	(iv) Is ¹	the	(v) Did yo		(vi) Is	s the	(vii) A mount of			
	uppo			organization	organizati		the organ		organiza		monetary			
organization		ation		(described on	col (i) lis		ın col (i)	'	col (i) or	. .	support			
				lines 1-9 above or IRC section	your gove docume	_	suppo	10.	in the	0 3 .				
				(see										
				instructions))	Yes	No	Yes	No	Yes	No	1			
					1 63	140	1.03	170	1 63	140	+			
						-	+		-	+	+			
Total											+			

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (d) 2011 (c) 2010 (e) 2012 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 666,903 788,729 514,579 670,629 567,805 3,208,645 include any "unusual grants ") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 666,903 788,729 514,579 670,629 567,805 3,208,645 4 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 338,140 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 2,870,505 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 666,903 788,729 514,579 670,629 567,805 3,208,645 Amounts from line 4 Gross income from interest, dividends, payments received on 1,232,567 1,590,009 423,041 687,449 747,775 4,680,841 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 7,889,486 through 10) **12** Gross receipts from related activities, etc (see instructions) 12 25,398,300 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) 14 36 380 % Public support percentage for 2011 Schedule A, Part II, line 14 15 32 150 % 16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┢┎ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2012 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) 2012 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt

	purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or						
	business under section 513			-			
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2,						
/a	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and 3						
_	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6)						
_Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
	in) ►	(u) 2000	(6) 2003	(6) 2010	(4) 2011	(6) 2012	(1) 10tai
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
	sources						
Ь	Unrelated business taxable income (less section 511 taxes)						
	from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support. (Add lines 9, 10c,						
	11, and 12)			Librari Corretto con	6.01	E04(-)(2)	
14	First five years. If the Form 990 is for	or the organization	on's first, second	i, thira, fourth, or	ππη tax year as a	1 501(c)(3) org	anization, ►
	check this box and stop here	a Cunnaut Da					<u> </u>
	ction C. Computation of Public			12		T I	
15	Public support percentage for 2012			13, column (T))		15	
16	Public support percentage from 2011	L Schedule A, Pa	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	me Percenta	ge			
17	Investment income percentage for 20				nn (f))	17	
					. , ,		
18	Investment income percentage from					18	
19a	33 1/3% support tests—2012. If the o						ıd lıne 17 ıs not ▶□

33 1/3% support tests—2011. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

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

Schedule A (Form 990 or 990-EZ) 2012

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DLN: 93493191002164

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

emai	Revenue Service F- Attach to For	m 990. ► See separate instructions.		Inspection
	ne of the organization FOUNDATION			loyer identification number
Pai	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 advise funds are the organization's property, subject to the organization \ensuremath{S}		nor adv	rsed ryes rNo
	Did the organization inform all grantees, donors, and d used only for charitable purposes and not for the beneficonferring impermissible private benefit?			
ar	t III Conservation Easements. Complete if	the organization answered "Yes" t	to Forn	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 Complete lines 2a through 2d if the organization held a	or education) Preservation of ar Preservation of a	certifie	d historic structure
	easement on the last day of the tax year	a qualifica conscivation contribution in	ciic ioiii	ii oi a conscivation
				Held at the End of the Year
1	Total number of conservation easements		2a	
	Total acreage restricted by conservation easements		2b	
	Number of conservation easements on a certified history	oric structure included in (a)	2c	
	Number of conservation easements included in (c) acc historic structure listed in the National Register	quired after 8/17/06, and not on a	2d	
	Number of conservation easements modified, transfer the tax year -	red, released, extinguished, or terminate	ed by th	ne organization during
	Number of states where property subject to conservat	ion easement is located be		
	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?			violations, and
	Staff and volunteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easer	ments o	during the year
	Amount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easement	s durin	g the year
	Does each conservation easement reported on line 2(and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sec	ction 17	70(h)(4)(B)(ı)
	In Part XIII, describe how the organization reports colbalance sheet, and include, if applicable, the text of the organization's accounting for conservation easements.	e footnote to the organization's financia		
iri	Organizations Maintaining Collection Complete if the organization answered "Y		or Ot	her Similar Assets.
ı	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asseservice, provide, in Part XIII, the text of the footnote to	ets held for public exhibition, education,	or rese	arch in furtherance of public
•	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar assesservice, provide the following amounts relating to thes	l 16 (ASC 958), to report in its revenue ets held for public exhibition, education,	statem	ent and balance sheet
	(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			• •
	Revenues included in Form 990, Part VIII, line 1			▶ \$
,	Assets included in Form 990, Part X			. <u></u>
	A 3 3 C C 3 M C I G G G G G G G G G G G G G G G G G G			F Y

Par	Organizations Maintaining Co	<u>llections of Art</u>	t, HIS	<u>torical i</u>	<u>reasui</u>	res, or O	<u>tner</u>	<u>' Similar As</u>	sets ((continued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other reco	ds, ch	neck any of	the follo	wing that a	re a	sıgnıfıcant use	of its	
а	Public exhibition		d	┌ Loar	or exch	ange progr	ams			
b	Scholarly research		e	┌ Othe	er					
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and expla	ain hov	w they furth	er the o	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organization solicit of								_	_
	assets to be sold to raise funds rather than t		-						┌ Yes	l No
Par	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an					answered	α "Υ€	es" to Form S	990,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?			•		r other ass	ets n	ot	┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I and complete the	follov	ving table		_				
								Ar	nount	
C	Beginning balance						1c			
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	e 21?						┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anation has	been pr	ovided in P	art X	III		. 「
Pa	rt V Endowment Funds. Complete				es" to F	orm 990,	Part	IV, line 10.		
		(a)Current year	(b)	Prior year		-	+	hree years back	(e)Four	years back
1a	Beginning of year balance	10,347,099		10,029,07		9,183,135	<u> </u>	8,570,072		10,357,141
Ь	Contributions						<u> </u>			
С	Net investment earnings, gains, and losses	1,404,827		850,28	1	1,338,102		983,737		-1,329,273
d	Grants or scholarships									
е	Other expenditures for facilities and programs	569,425		532,25	5	492,167	,	395,674		457,796
f	Administrative expenses									
g	End of year balance	11,182,501		10,347,09	Э	10,029,070		9,158,135		8,570,072
2	Provide the estimated percentage of the curr	ent year end balan	ce (lın	ie 1g, colur	nn (a)) h	eld as				
а	Board designated or quasi-endowment ►	99 750 %								
b	Permanent endowment - 0 220 %									
c	Temporarily restricted endowment ► 0 0 The percentages in lines 2a, 2b, and 2c show	20 % uld equal 100%								
3a	Are there endowment funds not in the posses organization by	ssion of the organiz	ation	that are he	ld and a	dmınıstered	l for t	:he 	Ye	s No
	(i) unrelated organizations						•	3a		No
_	(ii) related organizations							3a(No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIII the intended uses of the	•			· · ·		•	3	b	
	t VI Land, Buildings, and Equipme				10					
T G I	Description of property	inc. See Form 52	70, 10	(a) Cost	or other	(b)Cost or		(c) Accumulate	ed (d)) Book value
				basıs (ınv	estment)	basis (oth	er)	depreciation		
	Land									
	Buildings									
	Leasehold improvements									
	Equipment					265	5,363	227,	121	38,242
	O + h = r							,		· ·
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			ımn (B), lınd	= 10(c).)			>		38,242

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.	
(a) Description of security or category	(b)Book value	(c) Metho	d of valuation
(including name of security)		Cost or end-of	-year market value
(1)Financial derivatives			
(2)Closely-held equity interests Other			
Other			
- 1 (0) (1) (1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	_		
((-,	o Form 000 Part V June	12	
Part VIII Investments—Program Related. Se (a) Description of investment type	(b) Book value		d of valuation
(a) Bescription of investment type	(B) Book value		year market value
Table (Calcar (b) and and 5 and 000 Bat V and (0) for 42)	•		
Part IX Other Assets. See Form 990, Part X, col (B) line 13)			
(a) Descri			(b) Book value
	•		, ,
Total (Calumer (b) mount again Forms 2000 Part V and (B) line 11	- 1	_	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15 Part X Other Liabilities. See Form 990, Part X			
1 (a) Description of liability	(b) Book value		
	. ,		
Federal income taxes DUE TO AFFILIATES	7 1 9 4 0 6 2		
DUE TO ATTIEIATES	7,184,062		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	7,184,062		
2 Fin 48 (ASC 740) Footnote In Part XIII provide the ter	vt of the footnote to the organ	nization's financial statem	ents that reports the

	·		
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue p	oer R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	4,116,189
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	1,492,593
3	Subtract line 2e from line 1	3	2,623,596
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,623,596
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	Return
1	Total expenses and losses per audited financial statements	1	2,311,417
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	412,742
3	Subtract line 2e from line 1	3	1,898,675
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,898,675

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
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	,	BOARD DESIGNATED FUND, THE CORPUS OF WHICH IS TO REMAIN INTACT AND THE INVESTMENT INCOME FROM WHICH IS TO BE USED FOR RESEARCH BENEFITING THE ASSOCIATION COMMUNITY AN ESTABLISHED SPENDING POLICY OF 5-7% OF THE AVERAGE OF THE PORTFOLIO AS OF DECEMBER 31 FOR THE PRIOR 3 YEARS IS USED TO DETERMINE THE ANNUAL BUDGET SUBMITTED FOR BOARD APPROVAL
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR INCOME TAX POSITIONS TAKEN THEREFORE, MANAGEMENT HAS NOT IDENTIFIED ANY UNCERTAIN INCOME TAX POSITIONS AT A MINIMUM, THE FISCAL YEARS ENDING AUGUST 31, 2010 THROUGH 2013 REMAIN OPEN FOR EXAMINATION BY TAXING AUTHORITIES
PART XI, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSE 412,742
PART XII, LINE 2D - OTHER ADJUSTMENTS		SPECIAL EVENT EXPENSE 412,742

DLN: 93493191002164

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding

Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

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

Open to Public Inspection

	ne of the organization						Employer iden	tification number
1 D A	E FOUNDATION						52-1300485	
Pa	rt I Fundraising Act	ivities. Complete	ıf the o	rganızatı	on answered "Yes" t	to Forn	າ 990, Part IV	, lıne 17.
1	Indicate whether the organ	ızatıon raısed funds	through ar	ny of the 1	following activities Che	eck all t	hat apply	
а	Mail solicitations			e	☐ Solicitation of non	ı-goverr	nment grants	
b	Internet and email soli	citations		f	Solicitation of gov	ernmen	t grants	
C	Phone solicitations			g	Special fundraisin	g event	s	
d	In-person solicitations							
2a	Did the organization have a or key employees listed in							Γ _{Yes} Γ _{No}
b	If "Yes," list the ten highes to be compensated at least			undraiser	rs) pursuant to agreeme	ents und	ler which the fun	draiser is
((i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No				
			+					
Γota	al			>				
3	List all states in which the o	organization is regis [.]	tered or li	censed to	solicit funds or has be	en notif	ied it is exempt	from registration or

Sche	dule	G (Form 990 or 990-EZ) 2012				Page :
Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contributi			
			(a) Event #1 THE CLASSIC	(b) Event #2 SPRINGTIME GOLF	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	273,700	163,495	177,829	615,024
ě.	2	Less Contributions	136,850	68,036	14,142	219,028
<u></u>	3	Gross income (line 1 minus line 2)	136,850	95,459	163,687	395,996
	4	Cash prizes				
မှာ	5	Noncash prizes		19,255	18,576	37,831
) NSe	6	Rent/facility costs		30,885	17,903	48,788
Expenses	7	Food and beverages .		36,398	25,063	61,461
Drea	8	Entertainment				
古	9	Other direct expenses .	30,733	99,689	134,240	264,662
	10	(412,742				
	11	Direct expense summary Add lin Net income summary Combine lii	_		•	-16,746
Par	t II			'Yes" to Form 990, Pa	rt IV, line 19, or repo	
		\$15,000 on Form 990-EZ, lir	ne 6a. (a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				oingo/progressive bingo	(c) o ther guilling	col (a) through col (c))
Rey	1	Gross revenue				(-7/
enses	2	Cash prizes				
per	3	Non-cash prizes				
Direct Exp	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Г Yes	Г Yes	Г Yes Г Nо	
	7	Direct expense summary Add lines	s 2 through 5 in column (d	1)		
	8	Net gaming income summary Com	hine lines 1 and 7 in colu	mn (d)	•	
						1
9 a		ter the state(s) in which the organiza the organization licensed to operate				
b		'No," explain				
10a	 We	re any of the organization's gaming l				
b		Yes," explain				

70ES	the organization operate gaming	activities with nonlinelinders		· · I Yes I No
.2		neficiary or trustee of a trust or a men		
	formed to administer charitable of	gaming?		· · · · Fyes F No
.3	Indicate the percentage of gamir	ng activity operated in		
а	The organization's facility			13a
b	An outside facility			13b
.4	Enter the name and address of th	ne person who prepares the organizati	on's gaming/special events books	and records
	Name ►			
	Address 🟲			
	revenue?	ntract with a third party from whom the		
	amount of gaming revenue retain	ed by the third party 🟲 \$		
C	If "Yes," enter name and address	s of the third party		
	Name 🟲			
	Address ►			
.6	Gaming manager information			
	Name 🟲			
	Gaming manager compensation I	\$ \$		
	Description of services provided	>		
	☐ Director/officer	Employee	Independent contractor	
.7	Mandatory distributions			
а	Is the organization required unde	er state law to make charitable distrib	utions from the gaming proceeds to	
	retain the state gaming license?			Г _{Yes} Г _{No}
b	Enter the amount of distributions	required under state law distributed t	to other exempt organizations or sp	ent
	<u> </u>	activities during the tax year 🟲 💲		
Par	columns (III) and (v), a	mation. Complete this part to pr and Part III, lines 9, 9b, 10b, 15b ditional information (see instructi	, 15c, 16, and 17b, as applical	
	Identifier	Return Reference	Explana	tion

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Schedule I (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

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

Attach to Form 990

OMB No 1545-0047

DLN: 93493191002164

2012

Open to Public

Open to Public Inspection

Employer identification number

ASAE FOUNDATION						52-1300485	
	Information on Grant					•	
the selection crite	tion maintain records to sub eria used to award the grants V the organization's proced	orassistance?					▼ Yes
	nd Other Assistance t , Part IV, line 21, for any						"Yes" to
(a) Name and addres organization or government	ss of (b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) DESTINATION MARKETING ASSOCIATION INTERNATIONAL (DI 202 M STREET NO 50 WASHINGTON, DC 2	00	501(C)6	5,000				DMAI ROOM BLOCK STUDY
(2) ASSOCIATION O AMERICAN MEDICAL COLLEGES 2450 N STREET NW WASHINGTON, DC 2	L	501(C)3	5,980				PROGRAM SUPPORT
(3) COLORADO NONPROFIT ASSOCIATION 789 SHERMAN STREI SUITE 240 DENVER, CO 80203	84-0942908 ET	501(C)3	6,667				PROGRAM SUPPORT
(4) INTERNATIONAL OF DIECUTTING AND DIEMAKING 651 TERRA COTTA AVENUE SUITE 132 CRYSTAL LAKE,IL 6	D	501(C)6	6,667				PROGRAM SUPPORT
(5) AMERICAN ALLIA OF MUSEUMS 1575 EYE STREET NV 400 WASHINGTON, DC 2	W NO	501(C)3	6,490				PROGRAM SUPPORT
2 Enter total numbe	r of section 501(c)(3) and g	overnment organizations l	isted in the line 1 table	· · · · · ·			3

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

П	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

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
PROCEDURE FOR MONITORING GRANTS IN THE U S	,	SCHEDULE I, PART I, LINE 2 THE FOUNDATION REQUIRES INTERIM PROGRESS REPORTS AND FINAL PROJECT REPORTS FROM AWARD RECIPIENTS IN ADDITION, THE FOUNDATION KEEPS RECORDS OF ALL AWARD ACCEPTANCE FORMS

Schedule I (Form 990) 2012

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DLN: 93493191002164

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

► Attach to Form 990. ► See separate instructions.

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Name of the organization ASAE FOUNDATION

Employer identification number

52-1300485

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
а	The organization?	5a	Yes	
b	Any related organization?	5b	Yes	
	If "Yes," to line 5a or 5b, describe in Part III			
6	For persons listed in Form 990, Part VII, Section A, line $1a$, did the organization pay or accrue any compensation contingent on the net earnings of			
а	The organization?	6a	Yes	
b	Any related organization?	6b	Yes	
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was			
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section $534958-6(c)^{9}$	9		

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	(B) Breakdown of W-2 and/or 1099-MISC compensation			(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990	
(1)JOHN GRAHAM UV PRESIDENT & CEO, ASAE	(i) (ii)	0 632,958	0 153,388	0 129,540	0 21,576	0 211,656	0 1,149,118	0	
(2)SUSAN ROBERTSON EXEC VP ASAE, PRESIDENT ASAE FOUNDAT	(i) (ii)	158,844 158,844	1			6,865 6,865		0	
(3)HEIDI ROBEY VP OF FINANCE & CHIEF FINANCIAL OFFI	(i) (ii)	11,466 144,891				372 4,704	1	0	
(4)REGINALD HENRY CHIEF INFORMATION OFFICER	(i) (ii)	17,192 167,007				943 9,164	1 '	0	
(5)ROBERT SKELTON CHIEF ADMINISTRATIVE OFFICER	(i) (ii)	9,587 170,170				593 10,533		0	
(6)JOHN R LEE IV CHIEF MARKETING & COMMUNICATIONS OFF	(i) (ii)	14,473 152,527			- · · 1	250 2,630	1	0	
(7)AMY LEDOUX SENIOR VP, MEETINGS & EXPOSITIONS	(i) (ii)	1,930 142,850				46 3,434	1	0	
(8)SHARON MOSS CHIEF RESEARCH OFFICER	(i) (ii)	126,755 15,135	1			3,752 448		0	

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

Identifier	Return Reference	Explanation
	PART I, LINE 3	THE FOUNDATION'S CEO IS ALSO CEO OF, AND AN EMPLOYEE OF, THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES, A RELATED SECTION 501(C)(6) ORGANIZATION ACCORDINGLY, HIS COMPENSATION, WHILE DETERMINED BY ASAE, TAKES INTO ACCOUNT BOTH ASAE AND THE FOUNDATION'S MISSIONS AND GOALS THE ASAE & THE FOUNDATION COMPENSATION PROGRAM IS TARGETED TO PROVIDE COMPETITIVE TOTAL COMPENSATION LEVELS (INCLUDING BOTH ANNUAL CASH COMPENSATION AND SUPPLEMENTAL BENEFITS) FOR HIGHLY COMPETITIVE PERFORMANCE COMPENSATION IS BENCHMARKED AGAINST DATA DEVELOPED BY INDEPENDENT CONSULTANTS USING SURVEYS COMPRISED OF ORGANIZATIONS WITH SIMILAR INDIVIDUAL MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS, BOTH REGIONAL AND NATIONAL THESE ORGANIZATIONS ARE SIMILAR TO ASAE & THE FOUNDATION IN MAGNITUDE, COMPLEXITY, AND SCOPE OF RESPONSIBILITY, AND THEY ARE REPRESENTATIVE OF THE VARIOUS MARKETS IN WHICH ASAE & THE FOUNDATION COMPETE FOR TALENT TOTAL CASH COMPENSATION IS TARGETED AT THE COMPETITIVE RANGE OF 85% - 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES, DEPENDING ON TENURE AND EXPERIENCE OF THE CEO CONSISTENT WITH THIS STRATEGY, THE FOLLOWING PRINCIPLES PROVIDE A FRAMEWORK FOR ASAE & THE FOUNDATION'S EXECUTIVE COMPENSATION PROGRAM TOTAL ANNUAL CASH COMPENSATION (CONSISTING OF BASE PAY AND A VARIABLE, AT-RISK INCENTIVE) IS POSITIONED AT 85% - 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES, THE MIX OF TOTAL COMPENSATION ELEMENTS WILL REFLECT COMPETITIVE MARKET REQUIREMENTS AND STRATEGIC BUSINESS NEEDS, COMPENSATION AND STRATEGIC METRICS, AND COMPENSATION WILL BE DIFFERNTIATED ON THE FOLLOWING BASIS BASE PAY - ON RELATIVE RESPONSIBILITY, ANNUAL INCENTIVES - ON PERFORMANCE, AND SUPPLEMENTAL BENEFITS - ON LONG-TERM PERFORMANCE BASE PAY DETERMINED BY INDIVIDUAL PERFORMANCE AND COMPANISONS TO SIMILAR POSITIONS IN INDIVIDUAL MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS PAY IS ESTABLISHED BASED ON JOB RESPONSIBILITY, LEVEL OF EXPERIENCE, INDIVIDUAL CONTRIBUTION TO THE BUSINESS, ANALYSES OF COMPETITIVE INDUSTRY PRACTICE AND V
	PART I, LINE 5	THE FOUNDATION'S CEO IS ALSO CEO OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES, A RELATED SECTION 501(C)(6) ORGANIZATION THE CEO'S COMPENSATION, ACCORDINGLY, IS DETERMINED THROUGH A PROCESS CONDUCTED BY ASAE THAT PROCESS IS AS FOLLOWS THE CEO'S ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARABLE GROUP AS DESCRIBED IN THE ANSWER (ON ASAE'S FORM 990) TO PART VI, QUESTION 15 THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH ASAE AND THE FOUNDATION THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS ANNUAL INCENTIVE PAY IS NOT DETERMINED AS A SPECIFIC PERCENTAGE OF REVENUES, RATHER, REVENUES ARE UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE
	PART I, LINE 6	THE FOUNDATION'S CEO IS ALSO CEO OF THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES, A RELATED SECTION 501(C)(6) ORGANIZATION THE CEO'S CONTINGENT COMPENSATION, ACCORDINGLY, IS DETERMINED THROUGH A PROCESS CONDUCTED BY ASAE THAT PROCESS IS AS FOLLOWS THE CEO'S TARGET ANNUAL INCENTIVE AMOUNT IS DETERMINED BASED ON THE MARKET PRACTICES OF THE COMPARABLE GROUP AS DESCRIBED IN THE ANSWER (ON ASAE'S FORM 990) TO PART VI, QUESTION 15 THE ANNUAL INCENTIVE AWARD IS BASED ON THE ACHIEVEMENT OF PREDETERMINED FINANCIAL, STRATEGIC, BUSINESS, AND INDIVIDUAL GOALS OF BOTH ASAE AND THE FOUNDATION THE PRIMARY QUANTITATIVE FACTORS REVIEWED BY THE BOARD OF DIRECTORS INCLUDE AS FINANCIAL MEASURES NET INCOME, REVENUE, TOTAL MEMBERSHIP AND ACHIEVEMENT OF OTHER BOARD PRIORITIES AS DEFINED EACH YEAR BY THE BOARD OF DIRECTORS ANNUAL INCENTIVE PAY IS NOT DETERMINED AS A SPECIFIC PERCENTAGE OF NET EARNINGS, RATHER, NET EARNINGS ARE UTILIZED AS MERELY ONE FACTOR WITH REGARD TO OVERALL PERFORMANCE

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Schedule L

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

Transactions with Interested Persons

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

2012

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Name of the organ	nızatıon						Em	ploye	r identii	fication	number	
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4958								•	\$			
3 Enter the am	ount of tax, if an	y, on line 2, ab	ove, reimb	ursed by th	e organization			•	F \$			
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(a) Name of	(b) Relationsh				(e)Original	(f)Balance	(a)	In	(h	1)	(i)Wrı	tten
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(a) Name of inte		elationship be		c) A mount o	fassistance	(d) Type of	fassıs	tance	(e)	Purpos	e of assı	stance
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Part IV Business Transactions I	nvolving Interested	l Persons.			f zatıon's	
Complete if the organizatio	n answered "Yes" on F	orm 990, Part IV, lır	ie 28a, 28b, or 28c.			
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sh of organiz reveni	f zatıon's	
				Yes	No	
(1) ASAE	COMMON BOARD MEMBERS	0	PLEASE SEE SCHEDULE R FOR ALL REPORTABLE TRANSACTIONS BETWEEN THE FOUNDATION AND THE AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES		Νo	

Part V Supplemental Information

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

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

Schedule L (Form 990 or 990-EZ) 2012

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SCHEDULE O

As Filed Data -

DLN: 93493191002164

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Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

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

Attach to Form 990 or 990-EZ.

Name of the organization ASAE FOUNDATION

(Form 990 or 990-EZ)

Employer identification number

52-1300485

Identifier	Return Reference	Explanation
	,	ASAE HAS A EXECUTIVE COMMITTEE, WHICH CONSISTS OF THE OFFICERS OF ASAE AND THE CHAIRMAN OF ASAE BUSINESS SERVICES, INC. IT MAY ACT IN THE PLACE OF THE BOARD OF DIRECTORS WHEN AUTHORITY IS DESIGNATED BY THE BOARD OR IN EMERGENCY MATTERS WHERE EXECUTIVE COMMITTEE ACTION IS TEMPORARY AND SUBJECT TO RATIFICATION BY THE BOARD

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

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

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

LINE 12C THE COURSE OF THE YEAR A CHECKLIST IS MAINTAINED AND FOLLOW UP IS DONE LINTIL ALL FO RINS ARE RETURNED ONCE ALL FORMS ARE RECEIVED, THE COD REVIEWS THE DISCLOSURES ANY AFFIRM ATIVE RESPONSE DEEMED UNUSUAL OR WHICH MAY APPEAR TO CONSTITUTE AN ACTUAL, POTBYTIAL OR APPARENT CONFLICT OF INTEREST IS REFERRED TO THE AUDIT COMMITTEE. MAY SEEK THE GUIDANCE OF COUNSEL AND MAKE SUCH DETERMINATION THE AUDIT COMMITTEE. MAY SEEK THE GUIDANCE OF COUNSEL AND MAKE SUCH DETERMINATION HOUT THE PRESE NEE OF THE INDIVIDUAL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION. THE AUDIT COMMITTEE MAY CONCLIDE THAT THIS DETERMINATION SHOULD BE MADE BY THE FULL BOARD OF DIRECTORS OF ASAE. THE FOUNDATION, OR ABSI, AND THE MAITTER SHALL BE REPERRED TO THE APPROPRIATE BOARD (WITH OR WITHOUT A RECOMMENDATION FROM THE AUDIT COMMITTEE) FOR ITS CONSIDERATION. DELIBERATION AND RESCULTION, WITH THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE PRESENCE OF THE HEADSTON AND RESCULTION, WITH THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE TRESSING OF THE HEADSTON AND RESCULTION. WITH THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE PRESENCE OF THE HEADSTON AND RESCULTION WITHOUT THE PRESENCE OF THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE PRESENCE OF THE HEADSTON AND RESCULTION OF ALL CONFILED OF INTEREST MATTERS INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION. THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESULT FOR SHALL ON FINAL AND ADDRESSING AND ADDRESSI	Identifier	Return Reference	Explanation
AT THE OUTSET AND ON AN ONG OING BASIS), BUT THAT THE BOARD MEMBER NEED NOT RESIGN HIS/HER SEAT ON THE BOARD (3) DETE RMINE THAT THE INDIVIDUAL MUST RESIGN FROM HIS/HER SERVICE TO ASAE, THE FOUNDATION, OR ABS I BECAUSE THE ACTUAL, POTENTIAL OR APPARENT CONFLICT IS SO PERVASIVE THAT THE INDIVIDUAL W OULD SELDOM, IF EVER, LIKELY BE ABLE TO ACT IN THE BEST INTERESTS OF THE ORGANIZATION FOR EXAMPLE, IF AN INDIVIDUAL BOARD MEMBER ALSO WORKS FOR A COMPANY THAT PRODUCES EDUCATIONAL PROGRAMS THAT COMPETE WITH MOST OF THE EDUCATIONAL PROGRAMS OF THE FOUNDATION, THE AUDIT COMMITTEE OR FOUNDATION BOARD MAY DETERMINE THAT THE INDIVIDUAL SHOULD RESIGN FROM THE FOU NDATION BOARD (4) THE SPECIAL PROCEDURE BELOW IS APPLICABLE TO ALL INSTANCES IN WHICH A I NDIVIDUAL (OR THE INDIVIDUAL'S COMPANY, ORGANIZATION OR ANOTHER ENTITY FOR WHICH THE INDIVIDUAL SERVES IN A LEADERSHIP, EMPLOYMENT OR OWNERSHIP CAPACITY, OR A MEMBER OF		FORM 990, PART VI, SECTION B,	DISCLOSURE FORM DETAILING ANY SUCH COTHER NITRESTS: THE NOWDUAL ALSO MUST UPDATE THE DISCLOSURE FORM FANN AMTERIAL CHANGES OR ADDITIONS TO THE SUBMITTED NORMATION ARRISE D URNS THE COURSE OF THE YEAR A CHECKLIST IS MAINTAINED AND FOLLOW UP IS DONE UNTIL ALL FORMS ARE RETURNED ONCE ALL FORMS ARE RECEIVED, THE COS REVIEWS THE DISCLOSURES ANY AFFRA ATIVE RESPONSE DEEMED UNUSUAL OR WHICH MAY APPEAR TO CONSTITUTE AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST IS REFERRED TO THE AUDIT COMMITTEE OF DETERMINATION THE AUDIT COMMITTEE BY MAY SEX THE GUIDANCE OF COUNSE. AND MAKE SUCH DETERMINATION THE AUDIT COMMITTEE HID WITHOUT THE FRESSE NCE OF THE INDIVIDUAL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR REALTONSHIP IS UNDER CONSIDERATION THE AUDIT COMMITTEE MAY CONCLUDE THAT THIS DETERMINATION SHOULD BE MADE BY THE FULL BOARD OF DRECTORS OF ASAE. THE FOUNDATION, OR ABS, AND THE MATTER SHALL BE REFERRED TO THE APPROPRIATE BOARD (WITH OR WITHOUT A RECOMMENDATION FROM THE AMTTER SHALL BE REFERRED TO THE APPROPRIATE BOARD WITHOUT ARE RECOMMENDATION FROM THE AUDIT COMMITTEE) FOR IT IS CONSIDERATION THE ASSISTANCE OF LEGAL COUNSEL AND WITHOUT THE PRESENCE OF THE NOW/DUAL WHOSE INVOLVEMENT IN SUCH TRANSACTION OR RELATIONSHIP IS UNDER CONSIDERATION THE APPROPRIATE BOARD SHALL HAVE FINAL AUTHORITY OVER THE RESCULUTION OF ALL CONFLICT OF INTEREST MATTERS INVOLVING THE MEMBERS OF SUCH BOARD IT THE AUDIT COMMITTEE BLUE'S THAT A PARTICULAR RELATIONSHIP OR TRANSACTION MAY PERFESSION AN ACTUAL, POTENTIAL OR APPARENT CONFLICT OF INTEREST MATTERS INVOLVING THE MEMBERS OF SUCH BOARD IS THE AUDIT COMMITTEE BHALL ON THE RELATIONSHIP OR TRANSACTION WE PER VALUE AND WITHOUT THE PRESENT OF THE AUDIT COMMITTEE SHALL ON THE RELATIONSHIP OR TRANSACTION WE PER VALUE AND WITHOUT THE PRESENT OR THE POLLOWING INVOLVED HILD, POTENTIAL OR APPARENT CONFLICT OF INTEREST, THE AUDIT COMMITTEE SHALL ON THE REPORT OF THE ADDITIONAL INFORMATION FROM THE REMOVED HERE AND TH

Identifier Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	STING RELATIONSHIPS WITH INDIVIDUALS THAT PREVIOUSLY HAVE BEEN DISCLOSED TO, AND WAIVED BY, THE AUDIT COMMITTEE OR THE BOARD OF THE RELEVANT ORGANIZATION (A) THE INDIVIDUAL MUST D ISCLOSE TO THE APPLICABLE CHAIRMAN IN ADVANCE OF ANY RELATED ACTION TO BE TAKEN BY THE BOA RD HIS/HER INTENT TO SEEK TO PROVIDE GOODS OR SERVICES AS A PAID VENDOR TO ASAE, THE FOUND ATION, OR ABSI, OR TO RECEIVE A GRANT OR CONTRACT FROM ONE OF THE THREE ORGANIZATIONS, (B) THE INDIVIDUAL MUST RECUSE HIMSELF/HERSELF FROM ALL DELIBERATIONS AND VOTING RELATED TO THE CONTEMPLATED ACTION, (C) IF THE VALUE OF THE TRANSACTION EXCEEDS \$5,000, ASAE, THE FOUN DATION, OR ABSI MUST, THROUGH A REQUEST FOR PROPOSAL PROCESS, HAVE SOLICITED PROPOSALS BRO ADLY FROM OTHER QUALIFIED VENDORS / PROSPECTIVE GRANT OR CONTRACT RECIPIENTS AND RECEIVED (OR ATTEMPTED TO RECEIVE) WRITTEN BIDS FROM AT LEAST THREE SUCH INDIVIDUALS / ENTITIES (IN CLUDING THE INDIVIDUAL IN QUESTION), (D) THE BOARD MUST DETERMINE (WITHOUT THE PRESENCE OR PARTICIPATION OF THE INDIVIDUAL) THAT THE TRANSACTION IS FAIR AND IN THE BEST INTERESTS O F ASAE, THE FOUNDATION, OR ABSI BASED ON ALL OF THE FACTS AND CIRCUMSTANCES, AND SUCH DETERMINATION (INCLUDING THE FACT THAT IT WAS MADE IN THE ABSENCE OF THE INDIVIDUAL) SHALL BE DOCUMENTED AS PART OF THE RELEVANT MEETING MINUTES (ALL COMPETING BIDS RECEIVED SHALL BE RETAINED AS WELL), AND (E) IF SELECTED, THE INDIVIDUAL MAY NOT PARTICIPATE IN ANY PROCESS BY WHICH HIS/HER PERFORMANCE AS A VENDOR / GRANT OR CONTRACT RECIPIENT IS EVALUATED

PART VI, SECTION B, LINE 15A POLICY MANUAL, AND CONSISTS OF THE FOLLOWING PRESIDENT & CEO PERFORMANCE EVALUATION AND COMPENSATION THIS RESPONSIBILITY IS VESTED WITH THE ASAE BOARD OF DIRECTORS THE ASA E BOAD DIRECTORS IS CHARGED WITH ENSURING THAT THE ANNUAL EVALUATION IS CONDUCTED AND COMPENSA ESTABLISHED A COMPENSATION COMMITTEE CONSISTING OF THE IMMEDIATE PAST CHAIRM AN OF THE BO CHAIRMAN OF THE BOARD, THE SECRETARY/TREASURER, AND CHAIRMAN-ELECT WILL R ECOMMEND COMPENSATION LEVELS TO THE ASAE BOARD OF DIRECTORS IN ADDITION, THE PRESIDENT AND CEO'S AN OBJECTIVES ARE APPROVED BY THE ASAE BOARD OF DIRECTORS IT IS THESE AGREED UPON OBJECTIVES THAT ARE USED TO EVALUATE PERFORMANCE EACH YEAR CEO COMPENSATION PHILOSOP HY THE COMPENSATION PACKAGE, VIEWED AS A WHOLE, SHOULD PROMOTE PERFORMANCE-BASED RESULTS LIN TO THE ACHIEVEMENT OF ASAE & THE FOUNDATIONS MISSION AND STRATEGIC GOALS THE COMPENSAT PROGRAM SHOULD ENCOURAGE AN ENTREPREDEURIAL AND MEMBER SERVICE ENVIRONMENT IN COLL ABORATION WITH THE VOLUNTEER LEADERSHIP TO DETERMINE, GUIDE, AND OVERSEE THE EXECUTION OF ACCOMPLISH THE MISSION AND GOALS SET FORTH ABOVE, THE TOTAL COMPENSATION DIRECT AND INC. "SHOULD BE TARGETED ABOVE THE MARKET MEDIAN, YET BE DEMONSTRABLY REASONABLE RE LATIVE THE TOTAL COMPENSATION OFFERED BY ORGANIZATIONS COMPARABLE TO ASAE & THE FOUNDAT ION TO COMPENSATION PHILOSOPHY SHOULD BE VIEWED PERIODICALLY TO ENSURE THAT IT CONTINUES TO BE	Identifier	Return Reference	Explanation
REASONABLE AND COMPETITIVE. CEO COMPENSATION PRACTICES THE ASALE & THE FOUNDATION COMPENS SATION PROGRAM IS TARGETED TO PROVIDE COMPENSATION TOTAL COMPENSATION LEVELS (INCLUDING BC ANNUAL CASH COMPENSATION AND SUPPLEMENTAL BENEFITS) FOR HIGHLY COMPETITIVE PERFORMANCE COMPENSATION IS BENCHMARKED AGAINST DATA DEVELOPED BY INDEPENDENT CONSULTANTS USING SUSTEMBLY CONFIDENCY. AND SEDECH REGIONAL AND NATIONAL THESE ORGANIZATIONS ARE SIMILAR TO ASAE IN MAGNITUR. COMPLEXITY, AND SCOPE OF RESPONSIBILITY, AND THEY ARE REPRESENTATIVE OF THE VARIOUS MARKE WHICH ASAE COMPETES FOR TALENT TOTAL CASH COMPENSATION IS TARGETED AT THE COMPETITIVE OF 58% - 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES, DEPENDING ON TENURE AND EXPERIENCE OF THE CEO. CONSISTENT WITH THIS STRATESY, THE FOLLOWING PRINCIPLES P ROVIDE A FRAMEWORK FOR THE CRO CONSISTENT WITH THIS STRATESY, THE FOLLOWING PRINCIPLES P ROVIDE A FRAMEWORK FOR THE ORGANIZATIONS EXECUTIVE COMPENSATION PROGRAM TOTAL ANNUAL CASH COMPENSATION (CONSISTING OF BASE PAY AND A VARIABLE, AT-RISK INCENTIVE) IS POSITIONED AT 85% 115% OF THE 75TH PERCENTILE OF DEVELOPED MARKET RATES, — THE MIX OF TOTAL COMPENSATION ELEMENTS WILL REFLECT COMPETITIVE WARKET REQUIREMENTS AND STRATEGIC BUSINESS NEEDS, COMPENSATION IS LINKED TO BOTH QUALITATIVE AND BEHAVIORAL EXPECTATIONS, AND KEY OPERA TO AND STRATEGIC METRICS, AND - COMPENSATION WILL BE DIFFERENTIATE ON THE FOLLOWING BASIS BY PAY - ON RELATIVE RESPONSIBILITY, LEVEL OF EXPERIENCE, INDIVIDUAL CONTREDITION TO THE BUSINESS, AND KEY OFFERA TO SHOULD A MEMBERSHIP AND GENERAL NON-PROFIT ORGANIZATIONS PAY IS ESTABLISHED BASED ON JOE RESPONSIBILITY, LEVEL OF EXPERIENCE, INDIVIDUAL CONTREDITION TO THE BUSINESS, AND INDIVIDUAL GOALS THE PRIMARY QUANTITATIVE FREFORMANCE AND COMPENSATION FROM THE ACHIEVEMENT OF THE BUSINESS, AND ALLYSES OF COMPETITIVE INDUSTRY PRACTICE AND VARIOUS OTHER QUALITATIVE AND QUANTITATIVE PREFORMANCE AS		FORM 990, PART VI, SECTION B,	COMPENSATION LEVELS TO THE ASAE BOARD OF DIRECTORS IN ADDITION. THE PRESIDENT AND CEOS ANNUAL OBJECTIVES A REA PERPOVED BY THE ASAE BOARD OF DIRECTORS ITS THESE ACREED UPON DISCRETIVES THAT ARE USED TO EVALUATE PERFORMANCE EACH YEAR CEO COMPENSATION PHILOSOP HY THE COMPENSATION PROCRAGE. VIEWED AS A WHOLE SHOULD PROMOTE PERFORMANCE BASED RESULTS. I. INKED TO THE ACHIEVEMENT OF ASAE & THE FOUNDATIONS MISSION AND STATEGIC GOALS. THE COMPENSATION PROCRAM SHOULD ENCOURAGE AN ENTEPPRENEURAL AND MEMBER SERVICE ENVIRONMENT IN COLL ABORATION WITH THE VOLUMEED LEADERSHIP TO DETERMINE, GUIDE, AND OVERSEE THE EXECUTION OF ASAE & THE FOUNDATIONS STRATEGIC GOALS AND MISSION GIVEN THE UNIQUE SET OF SKILLS NEEDED TO ACCOMPLISH THE MISSION AND GOALS SET FORTH ABOVE, THE TOTAL COMPENSATION — DIRECT AND INDIRECT SHOULD SHOULD SET OF SKILLS NEEDED TO ACCOMPLISH THE MISSION AND GOALS SET FORTH ABOVE, THE TOTAL COMPENSATION— DIRECT AND INDIRECT SHOULD SHOULD SET OF SKILLS NEEDED TO THE TOTAL COMPENSATION OFFETED BY ORGANIZATIONS COMPARABLE TO ASAE & THE FOUNDATION THE COMPENSATION OFFETED BY ORGANIZATIONS COMPARABLE TO ASAE & THE FOUNDATION THE COMPENSATION PHILOSOPHY SHOULD BE VEXIBLE PHILOSOPHY SHOULD BE DOTHED THE REASONABLE READER OF SHOULD SHOU

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15A	EO CONTRACT, THE BALANCE OF STAFF ARE UNDER THE AUTHORITY OF CEO STAFF COMPENSATION POLIC Y DECISIONS TAKE INTO CONSIDERATION ASAE'S OVERALL FINANCIAL CONDITION, EQUITY WITHIN THE ORGANIZATION, AND COMPETITIVE SALARY PLANNING ASAE'S HUMAN RESOURCES DEPARTMENT IS RESPON SIBLE FOR ADMINISTRATION OF AND ONGOING INTERNAL REVIEW OF ALL COMPENSATION PLANS AND POLICIES THIS COMPENSATION REVIEW HELPS ASAE MAINTAIN AND ADMINISTER A COMPENSATION PLAN THAT ACCURATELY AND FAIRLY REFLECTS EACH INDIVIDUAL'S RESPONSIBILITIES AND PERFORMANCE. ASAE'S STAFF SALARY ADMINISTRATION PROGRAM(S) CONSIST OF THE FOLLOWING JOB EVALUATION THIS IS A SYSTEMATIC METHOD OF DETERMINING THE VALUE OF EACH JOB WITHIN THE ASSOCIATION, INCLU DING REVIEW OF SKILLS, EDUCATIONAL PREREQUISITES AND CONTRIBUTION TO THE ORGANIZATION SALARY STRUCTURE POSITIONS ARE EVALUATED AND POSITIONS WITH SIMILAR VALUES ARE PLACED IN A SALARY GRADE THAT IS REVIEWED IN TERMS OF ITS COMPETITIVENESS WITHIN THE MARKET AND OUR ORGANIZATIONAL NEEDS EACH GRADE HAS A MINIMUM, WHICH IS THE LOWEST RECOMMENDED SALARY TO BE OFFERED TO AN INDIVIDUAL WHO MEETS THE MINIMUM QUALIFICATIONS OF THE POSITION, A MIDPO INT, REPRESENTING THE SALARY AT WHICH A FULLY QUALIFIED AND EXPERIENCED STAFF MEMBER WHO S ATISFACTORILY PERFORMS ALL THE SPECIFICATIONS OF A POSITION IS PAID WITHIN THE MARKETPLACE., AND A MAXIMUM, WHICH IS THE LUPTER LIMIT OF THE SALARY RANGE A THIRD PARTY IS ENGAGED PE RIODICALLY TO REVIEW THE COMPENSATION PACKAGE OF THE EXECUTIVE STAFF AND/OR FULL STAFF REL ATIVE TO BASE COMPENSATION, BONUS AND INCENTIVE PROGRAMS COMPARATIVE TO MARKET SALARY BUDGET AND GUIDELINES - ASAE'S ANNUAL SALARY BUDGET IS DEVELOPED ANNUALLY IN ORDER TO BUD GETARY LIMIT OF THE SALARIES AT COMPETITIVE LEVELS, SUBJECT TO BUD GETARY LIMITATIONS AN ANNUAL MERIT POOL IS DEVELOPED AND APPROVED AS PART OF THE PROGRAM, AND ALL INCREASES ARE SUBJECT TO THE APPROVAL OF THE CEO

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

Identifier	Return Reference	Explanation
OTHER FEES	FORM 990, PART IX, LINE 11G	OTHER PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 292,062 MANAGEMENT AND GENERAL EXPENSES 174 FUNDRAISING EXPENSES 10,996 TOTAL EXPENSES 303,232

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

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493191002164

OMB No 1545-0047 2012

Open to Public Inspection

(f)

SCHEDULE R

Related Organizations and Unrelated Partnerships

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

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization **Employer identification number** ASAE FOUNDATION 52-1300485 Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Part I

(b)

Name, address, and EIN (If applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Di	rect controlling entity		
Part II Identification of Related Tax-Exempt Orgor more related tax-exempt organizations duri	anizations (Complete if t ng the tax year.)	the organization ai	nswered "Yes"	to Form 990, F	Part IV,	line 34 because it	: had o	ne
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section Public of (if section)		status 1(c)(3))	tus (f) Direct controlling entity		g) 512(tontrolle tity?
(1) AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES	MEMBERGUIR OR CANIZATION	DC	F01/6)/6)				Yes	No
1575 I ST NW	MEMBERSHIP ORGANIZATION AND VOICE OF THE ASSOCIATION PROFESSION		501(C)(6)					No
WASHINGTON, DC 20005 53-0026940							\perp	
For Dangryork Reduction Act Notice see the Instructions for Form	990	Cat No. 5013	<u> </u>			Schedule P (Forr	n 990) 1	012

(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	enti	ct Iling	(e) Predominant income(related unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop allocat	ortionate	(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana partn	al or ging	(k Percer owne	ntage
(1) 1575 EYE STREET ASSOCIATES LP 1575 EYE STREET NW WASHINGTON, DC 20005		RENTAL OF HEADQUARTERS BUILDING	DC	N/A		311,			Yes	No		Yes	No		
52-1083648															
													_		
													+		
Part IV Identification of Related Or line 34 because it had one or n								ear.)	swer				Par		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Leg domi (state or count	al cile foreign		Direct	ntity (C o	(e) be of entity orp, S corp, or trust)	(f) Share of tota Income		(g) are of er of-year assets	ıd- Perce	ntage ership	:	(i) Section (b)(1 control entity	512 .3) lled y?
(1) ASAE BUSINESS SERVICES INC	INSURANCE AND OTHE SERVICES	ER			N/A	С					\dashv			Yes	No No
1575 EYE STREET NW WASHINGTON, DC 20005 52-1066386		Do													
(2) ASAE INSURANCE COMPANY	INSURANCE AND OTHE SERVICES	ER DO	2		N/A	С									No
1575 EYE STREET NW WASHINGTON, DC 20005 03-0335958															
													_		
							+								
															<u> </u>

(5) AM SOCIETY OF ASSN EXECUTIVES

Part V	Transactions With Related Organizations (Complete of the organiza	ition answei	ed "Yes" to For	m 990, Part IV, l	ine 34, 35b, or 36.)				
Note.	Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule						Yes	No	
1 During t	he tax year, did the orgranization engage in any of the following transactions with one	or more relat	ed organizations	listed in Parts II-I\	/?				
a Rece	pt 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 Gıft, g	grant, or capital contribution from related organization(s)					1 c	Yes		
d Loans	s or loan guarantees to or for related organization(s)					1d		No	
e Loans	s or loan guarantees by related organization(s)					1e		No	
f Divid	ends from related organization(s)					1f		No	
g Sale	g Sale of assets to related organization(s)								
h Purch									
i Excha	i Exchange of assets with related organization(s)								
j Lease	of facilities, equipment, or other assets to related organization(s)					1j		No	
k Lease	e of facilities, equipment, or other assets from related organization(s)					1k		No	
I Perfor	mance of services or membership or fundraising solicitations for related organization	(s)				11		No	
m Perfor	mance of services or membership or fundraising solicitations by related organization	(s)				1m		No	
n Sharır	g of facilities, equipment, mailing lists, or other assets with related organization(s)					1n		No	
o Sharı	ng of paid employees with related organization(s)					10		No	
p Reim	bursement paid to related organization(s) for expenses					1p	Yes		
-	bursement paid by related organization(s) for expenses					1q		No	
r Other	transfer of cash or property to related organization(s)					1r		No	
	transfer of cash or property from related organization(s)					1s	Yes		
2 If the	answer to any of the above is "Yes," see the instructions for information on who must	t complete th	ıs lıne, ıncludıng o	covered relationship	os and transaction thresholds				
	(a) Name of other organization		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	volved		
(1) AM SOCIE	TY OF ASSN EXECUTIVES	В		3,500	SPONSORSHIP				
(2) AM SOCIE	TY OF ASSN EXECUTIVES	S		64,438	PUB ROYALTIES/DONATIONS				
(3) ASAE SER	VICES INC	С		42,500	ANNUAL DONATION & SPONSORSHI	Р			
(4) AM SOCIE	TY OF ASSN EXECUTIVES	P		1,192,867	OVERHEAD ALLOCATION				

G

1,192,867 3RD PARTY VALUATION

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	

Additional Data Return to Form

Software ID: Software Version:

EIN: 52-1300485

Name: ASAE FOUNDATION

Schedule R (Form 990) 2012

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Part VII Supplemental Information

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