** PUBLIC DISCLOSURE COPY **

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)

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

A For the 2011 calendar year, or tax year beginning OCT 1, 2011 and ending SEP 30, 2012

B Check if applicable:

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>ASEE CONVENTION &amp; SEMINAR CORPORATION</td>
</tr>
<tr>
<td>Number and street (or P.O. box if mail is not delivered to street address)</td>
<td>1818 N STREET NW</td>
</tr>
<tr>
<td>City or town, state or country, and ZIP + 4</td>
<td>WASHINGTON, DC 20036</td>
</tr>
<tr>
<td>Name and address of principal officer</td>
<td>NORMAN FORTENBERRY</td>
</tr>
<tr>
<td>Tax-exempt status</td>
<td>X 501(c)(3)</td>
</tr>
<tr>
<td>Website</td>
<td><a href="http://WWW.ASEE.ORG/CONFERENCES">WWW.ASEE.ORG/CONFERENCES</a></td>
</tr>
<tr>
<td>Form of organization</td>
<td>X Corporation</td>
</tr>
<tr>
<td>Year of formation</td>
<td>1991</td>
</tr>
</tbody>
</table>

C Name of organization

D Employer identification number

E Telephone number

G Gross receipts

H(a) Is this a group return for affiliates?

H(b) Are all affiliates included?

I Tax-exempt status: X 501(c)(3) |

J Form of organization: X Corporation

K Website: WWW.ASEE.ORG/CONFERENCES

L Year of formation: 1991

M State of legal domicile: DE

Part I Summary

1 Briefly describe the organization's mission or most significant activities: FOSTER AND SUPPORT ENGINEERING & TECHNOLOGY EDUCATION.

2 Check this box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)

4 Number of independent voting members of the governing body (Part VI, line 1b)

5 Total number of individuals employed in calendar year 2011 (Part VI, line 2a)

6 Total number of volunteers (estimate if necessary)

7a Total unrelated business revenue from Part VIII, column (C), line 12

7b Net unrelated business taxable income from Form 990-T, line 34

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 6c, 9c, 10c, and 11e)

12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)

13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)

16 Professional fundraising fees (Part IX, column (A), line 11e)

17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)

19 Revenues less expenses. Subtract line 18 from line 12

Part II Signature Block

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

Sign Here

EDGAR LUGO, CHIEF FINANCIAL OFFICER

Print/Type preparer's name

KAREN GRIESS

Preparer's signature

Chel 7/3/2013

Preparer's EIN

41-0746749

Use Only

Firm's address

4250 N. FAIRFAX DRIVE, SUITE 1020

ARLINGTON, VA 22203

Phone no. 571-227-9500

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

X Yes 

No

Form 990 (2011)
ASEE CONVENTION & SEMINAR CORPORATION 52-1755430 Page 2

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

FOSTER AND SUPPORT ENGINEERING & ENGINEERING TECHNOLOGY EDUCATION.

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

☐ Yes ☒ No

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

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

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses $ 2,782,592, including grants of $ ) (Revenue $ 2,102,169.)

MEETINGS & CONFERENCES

THE ORGANIZATION PROVIDES ENGINEERING AND ENGINEERING TECHNOLOGY EDUCATORS THE ARENA TO EXCHANGE IDEAS, AFFECT CURRICULUM, ENHANCE TEACHING METHODS, AND NETWORK WITH PEERS.

4b (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

4c (Code: ) (Expenses $ including grants of $ ) (Revenue $ )

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

4e Total program service expenses $ 2,782,592.

Form 990 (2011)

12/02/12

02-09-12

16130730 137216 064-13106300 2011.05090 ASEE CONVENTION & SEMINAR C 064-1391
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Form 990 (2011)  ASEE CONVENTION & SEMINAR CORPORATION  52-1755430  Page 4

Part IV | Checklist of Required Schedules (continued)

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Note: All Form 990 filers are required to complete Schedule O.
Part V
Statements Regarding Other IRS Filings and Tax Compliance
Check if Schedule O contains a response to any question in this Part V

1a Enter the number reported in Box 3 of Form 1096. Enter 0 if not applicable ........................................ 1a 0

1b Enter the number of Forms W-2G included in line 1a. Enter 0 if not applicable 1b 0

1c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gambling winnings to prize winners? ................................................................. 1c

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return ........................................ 2a 0

2b 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

3a Did the organization have unrelated business gross income of $1,000 or more during the year? 3a X

3b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O 3b X

3c 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)? 3c X

3d 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 X

5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b X

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? 6a X

6b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b

7 Organizations that may receive deductible contributions under section 170(c).

7a 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 X

7b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b X

7c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c X

7d If "Yes," indicate the number of Forms 8282 filed during the year. 7d

7e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e X

7f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f X

7g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g N/A

7h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h N/A

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.

9a Did the organization make any taxable distributions under section 4966? N/A 9a

9b Did the organization make a distribution to a donor, donor advisor, or related person? N/A 9b

10 Section 501(c)(7) organizations. Enter: 10

10a Initiation fees and capital contributions included on Part VIII, line 12 ......................... N/A 10a

10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b

11 Section 501(c)(12) organizations. Enter:

11a Gross income from members or shareholders ................................................................. N/A 11a

11b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a

12b If "Yes," enter the amount of tax-exempt interest received or accrued during the year .......... N/A 12b

13 Section 501(c)(29) qualified nonprofit health insurance issuers.

13a Is the organization licensed to issue qualified health plans in more than one state? N/A 13a

Note. See the instructions for additional information the organization must report on Schedule O.

13b 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 13b

13c Enter the amount of reserves on hand 13c

14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X

14b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b

Form 990 (2011)
Section A. Governing Body and Management

1a. Enter the number of voting members of the governing body at the end of the tax year ........................................... 1a 4
   If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.
   b. Enter the number of voting members included in line 1a, above, who are independent ........................................... 1b 3

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 X

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 X

4. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ........................................... 4 X

5. Did the organization become aware during the year of a significant diversion of the organization's assets? ........................................... 5 X

6. Did the organization have members or stockholders? ........................................... 6 X

7a. Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? ........................................... 7a X
   b. Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? ........................................... 7b X

8. Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: ........................................... 8 X
   a. The governing body? ........................................... 8a X
   b. Each committee with authority to act on behalf of the governing body? ........................................... 8b X

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 X

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

10a. Did the organization have local chapters, branches, or affiliates? ........................................... 10a X
   b. If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? ........................................... 10b

11a. Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? ........................................... 11a X
   b. Describe in Schedule O the process, if any, used by the organization to review this Form 990. ........................................... 11b

12a. Did the organization have a written conflict of interest policy? If "No," go to line 13 ........................................... 12a X
   b. Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ........................................... 12b X
   c. Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done ........................................... 12c X

13. Did the organization have a written whistleblower policy? ........................................... 13 X

14. Did the organization have a written document retention and destruction policy? ........................................... 14 X

15. Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? ........................................... 15 X
   a. The organization's CEO, Executive Director, or top management official ........................................... 15a X
   b. Other officers or key employees of the organization ........................................... 15b X
   If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

16a. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ........................................... 16a X
   b. If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? ........................................... 16b X

Section C. Disclosure

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

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

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. ........................................... X

20. State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ........................................... X
   AMERICAN SOCIETY FOR ENGINEERING ED - 202-331-3500
   1818 N. STREET, NW, SUITE 600, WASHINGTON, DC 20036

Form 990 (2011)
### 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 on or within the organization’s tax year.

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

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

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

<table>
<thead>
<tr>
<th>(A) Name and Title</th>
<th>(B) Average hours per week (describe hours for related organizations in Schedule O)</th>
<th>(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)</th>
<th>(D) Reportable compensation from the organization (W-2/1099-MISC)</th>
<th>(E) Reportable compensation from related organizations (W-2/1099-MISC)</th>
<th>(F) Estimated amount of other compensation from the organization and related organizations</th>
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<td>(1) PATRICIA GREENAWALT DIRECTOR OF CONVENTION &amp; SEMINARS</td>
<td>X 40.00</td>
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<td>(2) DON P. GIDDENS PRESIDENT</td>
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<td>(3) WALTER W. BUCHANAN PRESIDENT ELECT</td>
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<td>(F) Estimated amount of other compensation from the organization and related organizations</td>
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<td>103,262.</td>
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<tr>
<td>2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization</td>
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</tr>
<tr>
<td>3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If &quot;Yes,&quot; complete Schedule J for such individual</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? If &quot;Yes,&quot; complete Schedule J for such individual</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If &quot;Yes,&quot; complete Schedule J for such person</td>
<td>Yes</td>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section B. Independent Contractors**

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

<table>
<thead>
<tr>
<th>(A) Name and business address</th>
<th>(B) Description of services</th>
<th>(C) Compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>NONE</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization | 0 |
### Part VIII  Statement of Revenue

<table>
<thead>
<tr>
<th>Contributions, Gifts, Grants and Other Similar Amounts</th>
<th>(A) Total revenue</th>
<th>(B) Related or exempt function revenue</th>
<th>(C) Unrelated business revenue</th>
<th>(D) Revenue excluded from tax under sections 512, 513, or 514</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 a Federated campaigns</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Membership dues</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Fundraising events</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Related organizations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Government grants (contributions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other contributions, gifts, grants, and similar amounts not included above</td>
<td>801,373.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Noncash contributions included in lines 1a-1f</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h Total, Add lines 1a-1f</td>
<td></td>
<td>801,373.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Program Service Revenue</th>
<th>Business Code</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>2 a REGISTRATION FEES</td>
<td>900099</td>
<td>1441706.</td>
<td>1441706.</td>
<td></td>
</tr>
<tr>
<td>c PROCEEDINGS</td>
<td>900099</td>
<td>112,950.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d ADVERTISING</td>
<td>541800</td>
<td>19,000.</td>
<td>19,000.</td>
<td></td>
</tr>
<tr>
<td>e TICKET SALES</td>
<td>900099</td>
<td>14,973.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f All other program service revenue</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Total, Add lines 2a-2f</td>
<td></td>
<td>1967730.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Investment income (including dividends, interest, and other similar amounts) | 663. | 663. |
| Income from investment of tax-exempt bond proceeds |                                  | |
| Royalties                                              | 119. | 119. |

<table>
<thead>
<tr>
<th>Gross rents</th>
<th>(i) Real</th>
<th>(ii) Personal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less: rental expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rental income or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net rental income or (loss)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross amount from sales of assets other than inventory</th>
<th>(i) Securities</th>
<th>(ii) Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less: cost or other basis and sales expenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gain or (loss)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net gain or (loss)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross income from fundraising events (not including $ of contributions reported on line 1c)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>See Part IV, line 18</td>
<td></td>
</tr>
<tr>
<td>Less: direct expenses</td>
<td>b</td>
</tr>
<tr>
<td>Net income or (loss) from fundraising events</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross income from gaming activities. See Part IV, line 19</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Less: direct expenses</td>
<td>b</td>
</tr>
<tr>
<td>Net income or (loss) from gaming activities</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gross sales of inventory, less returns and allowances</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Less: cost of goods sold</td>
<td>b</td>
</tr>
<tr>
<td>Net income or (loss) from sales of inventory</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Miscellaneous Revenue</th>
<th>Business Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>M&amp;C MISCELLANEOUS INCO</td>
<td>900099</td>
</tr>
<tr>
<td>CONFERENCE SERVICE REV</td>
<td>900099</td>
</tr>
<tr>
<td>OTHER MISCELLANEOUS IN</td>
<td>900099</td>
</tr>
<tr>
<td>All other revenue</td>
<td></td>
</tr>
<tr>
<td>e Total, Add lines 11a-d</td>
<td>134,320.</td>
</tr>
</tbody>
</table>

| Total revenue. See instructions. | 2904205. |
|----------------------------------|         |
|                                  | 1955127.|
|                                  | 19,000. |
|                                  | 128,705.|

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<table>
<thead>
<tr>
<th>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</th>
<th>(A) Total expenses</th>
<th>(B) Program service expenses</th>
<th>(C) Management and general expenses</th>
<th>(D) Fundraising expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 Grants and other assistance to individuals in the United States. See Part IV, line 22</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Benefits paid to or for members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5 Compensation of current officers, directors, trustees, and key employees</td>
<td>122,391.</td>
<td>122,391.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Compensation not included above, to disqualified persons (as defined under section 4958(h)(1)) and persons described in section 4958(c)(3)(B)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Other salaries and wages</td>
<td>523,047.</td>
<td>523,047.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)</td>
<td>32,230.</td>
<td>32,230.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Other employee benefits</td>
<td>177,019.</td>
<td>177,019.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10 Payroll taxes</td>
<td>55,390.</td>
<td>55,390.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11 Fees for services (non-employees):</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a Management</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b Legal</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c Accounting</td>
<td>3,380.</td>
<td>3,380.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d Lobbying</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e Professional fundraising services. See Part IV, line 17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f Investment management fees</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g Other</td>
<td>202,479.</td>
<td>202,479.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Advertising and promotion</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Office expenses</td>
<td>156,932.</td>
<td>156,932.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Information technology</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Royalties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Occupancy</td>
<td>1,220.</td>
<td>1,220.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>17 Travel</td>
<td>67,884.</td>
<td>67,884.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>18 Payments of travel or entertainment expenses for any federal, state, or local public officials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Conferences, conventions, and meetings</td>
<td>718,403.</td>
<td>718,403.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 Interest</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Payments to affiliates</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Depreciation, depletion, and amortization</td>
<td>51,044.</td>
<td>51,044.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Insurance</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Other expenses. Itemize expenses not covered above. (1) Miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>a INDIRECT COSTS</td>
<td>572,014.</td>
<td>572,014.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b MISCELLANEOUS</td>
<td>85,331.</td>
<td>85,331.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c HONORARIA</td>
<td>11,482.</td>
<td>11,482.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d REPAIRS AND MAINTENANCE</td>
<td>1,228.</td>
<td>1,228.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e All other expenses</td>
<td>1,118.</td>
<td>1,118.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25 Total functional expenses. Add lines 1 through 24e</td>
<td>2,782,592.</td>
<td>2,782,592.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td>26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Check here if following 260e-2 (ASC 958-720)
### Balance Sheet

<table>
<thead>
<tr>
<th>Assets</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Cash - non-interest-bearing</td>
<td>127,276.</td>
<td>118,000.</td>
</tr>
<tr>
<td>2 Savings and temporary cash investments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 Pledges and grants receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4 Accounts receivable, net</td>
<td>170,673.</td>
<td>104,421.</td>
</tr>
<tr>
<td>5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees’ beneficiary organizations (see instructions)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7 Notes and loans receivable, net</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8 Inventories for sale or use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9 Prepaid expenses and deferred charges</td>
<td>146,953.</td>
<td>190,616.</td>
</tr>
<tr>
<td>10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D</td>
<td>435,543.</td>
<td></td>
</tr>
<tr>
<td>10b Less: accumulated depreciation</td>
<td>433,921.</td>
<td>52,665.</td>
</tr>
<tr>
<td>11 Investments - publicly traded securities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12 Investments - other securities. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13 Investments - program-related. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14 Intangible assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>15 Other assets. See Part IV, line 11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>16 Total assets. Add lines 1 through 15 (must equal line 34)</td>
<td>497,567.</td>
<td>414,659.</td>
</tr>
<tr>
<td>17 Accounts payable and accrued expenses</td>
<td>25,116.</td>
<td>11,471.</td>
</tr>
<tr>
<td>18 Grants payable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19 Deferred revenue</td>
<td>79,070.</td>
<td>91,849.</td>
</tr>
<tr>
<td>20 Tax-exempt bond liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21 Escrow or custodial account liability. Complete Part IV of Schedule D</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22 Payables to current and former officers, directors, trustees, key employees, and highest compensated employees, and disqualified persons. Complete Part II of Schedule L</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23 Secured mortgages and notes payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24 Unsecured notes and loans payable to unrelated third parties</td>
<td></td>
<td></td>
</tr>
<tr>
<td>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</td>
<td>804,754.</td>
<td>601,099.</td>
</tr>
<tr>
<td>26 Total liabilities. Add lines 17 through 25</td>
<td>908,940.</td>
<td>704,419.</td>
</tr>
</tbody>
</table>

### Liabilities

<table>
<thead>
<tr>
<th>Liabilities</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizations that follow SFAS 117, check here □ and complete lines 27 through 29, and lines 33 and 34.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27 Unrestricted net assets</td>
<td>-581,373.</td>
<td>-363,347.</td>
</tr>
<tr>
<td>28 Temporarily restricted net assets</td>
<td>170,000.</td>
<td>73,587.</td>
</tr>
<tr>
<td>29 Permanently restricted net assets</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Net Assets or Fund Balances</th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizations that do not follow SFAS 117, check here □ and complete lines 30 through 34.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30 Capital stock or trust principal, or current funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31 Paid-in or capital surplus, or land, building, or equipment fund</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32 Retained earnings, endowment, accumulated income, or other funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33 Total net assets or fund balances</td>
<td>-411,373.</td>
<td>-289,760.</td>
</tr>
<tr>
<td>34 Total liabilities and net assets/fund balances</td>
<td>497,567.</td>
<td>414,659.</td>
</tr>
</tbody>
</table>
### Part XI | Reconciliation of Net Assets

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Total revenue (must equal Part VIII, column (A), line 12)</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>Total expenses (must equal Part IX, column (A), line 25)</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>Revenue less expenses. Subtract line 2 from line 1</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>Other changes in net assets or fund balances (explain in Schedule O)</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))</td>
<td>6</td>
</tr>
</tbody>
</table>

### Part XII | Financial Statements and Reporting

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>2a</td>
<td>Were the organization's financial statements compiled or reviewed by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2b</td>
<td>Were the organization's financial statements audited by an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>2c</td>
<td>If &quot;Yes&quot; to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?</td>
<td>X</td>
</tr>
<tr>
<td>3a</td>
<td>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</td>
<td>X</td>
</tr>
<tr>
<td>3b</td>
<td>If &quot;Yes,&quot; did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.</td>
<td></td>
</tr>
</tbody>
</table>

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12130730 137216 064-13106300 2011.05090 ASEE CONVENTION & SEMINAR C 064-1391
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.

Name of the organization: ASER CONVENTION & SEMINAR CORPORATION
Employer identification number: 52-1755430

<table>
<thead>
<tr>
<th>Part I</th>
<th>Reason for Public Charity Status</th>
<th>(All organizations must complete this part.) See instructions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state;</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>A community trust described in section 170(b)(1)(A)(vii). (Complete Part II.)</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>An organization organized and operated exclusively to test for public safety. See section 509(a)(4).</td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>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.</td>
<td></td>
</tr>
<tr>
<td>a</td>
<td>Type I</td>
<td>b</td>
</tr>
<tr>
<td>e</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>f</td>
<td>By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).</td>
<td></td>
</tr>
<tr>
<td>g</td>
<td>Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>(ii) A family member of a person described in (i) above?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>(iii) A 35% controlled entity of a person described in (i) or (ii) above?</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Provide the following information about the supported organization(s).

<table>
<thead>
<tr>
<th>(i) Name of supported organization</th>
<th>(ii) EIN</th>
<th>(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))</th>
<th>(iv) Is the organization in col. (i) listed in your governing document?</th>
<th>(v) Did you notify the organization in col. (i) of your support?</th>
<th>(vi) Is the organization in col. (i) organized in the U.S.?</th>
<th>(vii) Amount of support</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMERICAN SOCIETY FOR</td>
<td>37-0730118</td>
<td>7</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>910,077.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total 1 910,077.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
### Part II  Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

#### Section A. Public Support

*Calendar year (or fiscal year beginning in)*

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any “unusual grants.”)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Tax revenues levied for the organization’s benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Total. Add lines 1 through 3</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Public support. Subtract line 5 from line 4.</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

*Calendar year (or fiscal year beginning in)*

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Amounts from line 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Net income from unrelated business activities, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| 11 | **Total support. Add lines 7 through 10** | | | | | 12
| 12 | Gross receipts from related activities, etc. (see instructions) | | | | | |
| 13 | **First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.** | | | | | |

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

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
</table>
| 14 | Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) | | | | | 14
| 15 | Public support percentage from 2010 Schedule A, Part II, line 14 | | | | | 15
| 16a | **33 1/3% support test - 2011.** 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 | | | | | |
| 16b | **33 1/3% support test - 2010.** 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 - 2011.** 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 | | | | | |
| 17b | **10% -facts-and-circumstances test - 2010.** 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 | | | | | |
| 18 | **Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.** | | | | | |

Schedule A (Form 990 or 990-EZ) 2011

16130730 137216 064-13106300 2011.05090 ASEE CONVENTION & SEMINAR C 064-1391
**Part III  Support Schedule for Organizations Described in Section 509(a)(2)**

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

### Section A. Public Support

**Calendar year (or fiscal year beginning in)***

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants&quot;):</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Total. Add lines 1 through 5</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7a</td>
<td>Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7b</td>
<td>Amounts included on lines 1, 2, and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 12 for the year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c</td>
<td>Add lines 7a and 7b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Section B. Total Support

**Calendar year (or fiscal year beginning in)**

<table>
<thead>
<tr>
<th></th>
<th>(a) 2007</th>
<th>(b) 2008</th>
<th>(c) 2009</th>
<th>(d) 2010</th>
<th>(e) 2011</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9</td>
<td>Amounts from line 6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10a</td>
<td>Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10b</td>
<td>Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Add lines 10a and 10b</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td><strong>Other Income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td><strong>Total. Add lines 6, 10b, 11, and 12</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14 First five years, if the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

### Section C. Computation of Public Support Percentage

15 Public support percentage for 2011 (line 6, column (f) divided by line 13, column (f)) | 16% |
16 Public support percentage from 2010 Schedule A, Part III, line 15 | 16% |

### Section D. Computation of Investment Income Percentage

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

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

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

20 Private foundation, if the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions.
** PUBLIC DISCLOSURE COPY **

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
Attach to Form 990, Form 990-EZ, or Form 990-PF.

2011

Name of the organization

<table>
<thead>
<tr>
<th>ASEE CONVENTION &amp; SEMINAR CORPORATION</th>
<th>Employer identification number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>52-1755430</td>
</tr>
</tbody>
</table>

Organization type (check one):

- [x] 501(c)(3) (enter number) organization

- 4947(a)(1) nonexempt charitable trust not treated as a private foundation

- 527 political organization

Filers of:

- Form 990 or 990-EZ
  - [ ] 501(c)(3) exempt private foundation
  - 4947(a)(1) nonexempt charitable trust treated as a private foundation
  - 501(c)(3) taxable private foundation

- Form 990-PF

Check if your organization is covered by the General Rule or a Special Rule.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

- [x] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, $5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) $5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

- For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of $5,000 or more during the year. .......................................................... ▶ $ ______________________

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)
<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>$12,500</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>2</td>
<td></td>
<td>$53,000</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>3</td>
<td></td>
<td>$5,000</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>4</td>
<td></td>
<td>$51,000</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>5</td>
<td></td>
<td>$10,500</td>
<td>Person X, Payroll</td>
</tr>
<tr>
<td>6</td>
<td></td>
<td>$24,750</td>
<td>Person X, Payroll</td>
</tr>
</tbody>
</table>
## ASEE CONVENTION & SEMINAR CORPORATION

### Part I  Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td></td>
<td>$15,000.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>8</td>
<td></td>
<td>$5,000.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>9</td>
<td></td>
<td>$5,000.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>10</td>
<td></td>
<td>$5,000.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>11</td>
<td></td>
<td>$69,470.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
<tr>
<td>12</td>
<td></td>
<td>$9,000.</td>
<td>Person X</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II if there is a noncash contribution.)
<table>
<thead>
<tr>
<th>(a) No.</th>
<th>(b) Name, address, and ZIP + 4</th>
<th>(c) Total contributions</th>
<th>(d) Type of contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td></td>
<td>$25,000.</td>
<td>Person [X]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Payroll [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Noncash [ ]</td>
</tr>
<tr>
<td>14</td>
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<thead>
<tr>
<th>(a) No.</th>
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<th>(d) Type of contribution</th>
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<tbody>
<tr>
<td>25</td>
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<td>Person ☑ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)</td>
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<td>Noncash</td>
</tr>
</tbody>
</table>

(Complete Part II if there is a noncash contribution.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)
## ASEE CONVENTION & SEMINAR CORPORATION

### Employer identification number
52-1755430

### Part I Contributors

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
<th>Total contributions</th>
<th>Type of contribution</th>
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<td>Person X Payroll Noncash</td>
</tr>
<tr>
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<td>Person X Payroll Noncash</td>
</tr>
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### Part I: Contributors

#### (a) No.

#### (b) Name, address, and ZIP + 4

#### (c) Total contributions

#### (d) Type of contribution

<table>
<thead>
<tr>
<th>No.</th>
<th>Name, address, and ZIP + 4</th>
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<td>Noncash</td>
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</table>

(Complete Part II if there is a noncash contribution.)

<table>
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<tr>
<th>No.</th>
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<th>Total contributions</th>
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(Complete Part II if there is a noncash contribution.)

<table>
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(Complete Part II if there is a noncash contribution.)

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(Complete Part II if there is a noncash contribution.)

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(Complete Part II if there is a noncash contribution.)
### Part II  Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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<th>Description of noncash property given</th>
<th>FMV (or estimate) (see instructions)</th>
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Schedule B (Form 990, 990-EZ, or 990-PF) (2011)
### Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than $1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of $1,000 or less for the year. (Enter this information on line 10 of Form 990, Schedule B.)

<table>
<thead>
<tr>
<th>No. from Part I</th>
<th>(b) Purpose of gift</th>
<th>(c) Use of gift</th>
<th>(d) Description of how gift is held</th>
</tr>
</thead>
<tbody>
<tr>
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**Use duplicate copies of Part III if additional space is needed.**

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<th>Transferee’s name, address, and ZIP + 4</th>
<th>Relationship of transferor to transferee</th>
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<tbody>
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**Use duplicate copies of Part III if additional space is needed.**
Supplemental Financial Statements

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

1 Total number at end of year

2 Aggregate contributions to (during year)

3 Aggregate grants from (during year)

4 Aggregate value at end of year

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? □ Yes □ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? □ Yes □ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
   □ Preservation of land for public use (e.g., recreation or education)
   □ Protection of natural habitat
   □ Preservation of open space
   □ Preservation of an historically important land area
   □ Preservation of a certified historic structure

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

2d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered “Yes” to Form 990, Part IV, line 8.

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

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
   (i) Revenues included in Form 990, Part VIII, line 1
   (ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
   (a) Revenues included in Form 990, Part VIII, line 1
   (b) Assets included in Form 990, Part X

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

Schedule D (Form 990) 2011

16130730 137216 064-13106300 2011.05090 ASEE CONVENTION & SEMINAR C 064-1391
Part III | Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3. Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
   a. Public exhibition
   b. Scholarly research
   c. Preservation for future generations
   d. Loan or exchange programs
   e. Other

4. Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? □ Yes □ No

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

1a. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? □ Yes □ No

b. If "Yes," explain the arrangement in Part XIV and complete the following table:

<table>
<thead>
<tr>
<th></th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning balance</td>
<td>1c</td>
</tr>
<tr>
<td>Additions during the year</td>
<td>1d</td>
</tr>
<tr>
<td>Distributions during the year</td>
<td>1e</td>
</tr>
<tr>
<td>Ending balance</td>
<td>1f</td>
</tr>
</tbody>
</table>

2a. Did the organization include an amount on Form 990, Part X, line 21? □ Yes □ No

b. If "Yes," explain the arrangement in Part XIV.

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

1a. Beginning of year balance ........................................

b. Contributions ........................................

c. Net investment earnings, gains, and losses ........................................

d. Grants or scholarships ........................................

e. Other expenditures for facilities and programs ........................................

f. Administrative expenses ........................................

g. End of year balance ........................................

2. Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a. Board designated or quasi-endowment ▴ %

b. Permanent endowment ▴ %

c. Temporarily restricted endowment ▴ %

The percentages in lines 2a, 2b, and 2c should equal 100%.

3a. Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations ........................................

(ii) related organizations ........................................

3b. If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? □ Yes □ No

4. Describe in Part XIV the intended uses of the organization's endowment funds.

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

<table>
<thead>
<tr>
<th>Description of property</th>
<th>(a) Cost or other basis (investment)</th>
<th>(b) Cost or other basis (other)</th>
<th>(c) Accumulated depreciation</th>
<th>(d) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a. Land</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1b. Buildings</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1c. Leasethold improve</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1d. Equipment</td>
<td>27,389</td>
<td>25,767</td>
<td>1,622</td>
<td></td>
</tr>
<tr>
<td>1e. Other</td>
<td>408,154</td>
<td>408,154</td>
<td>0</td>
<td>1,622</td>
</tr>
</tbody>
</table>

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (b), line 10(c).) ▴ 1,622.
### Part VII Investments - Other Securities

<table>
<thead>
<tr>
<th>(a) Description of security or category (including name of security)</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Financial derivatives</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Closely-held equity interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(A)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
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<tr>
<td>(C)</td>
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<tr>
<td>(D)</td>
<td></td>
<td></td>
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<tr>
<td>(E)</td>
<td></td>
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<td>(F)</td>
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<td>(G)</td>
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<tr>
<td>(H)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(I)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col (B) line 12.)

### Part VIII Investments - Program Related

<table>
<thead>
<tr>
<th>(a) Description of investment type</th>
<th>(b) Book value</th>
<th>(c) Method of valuation: Cost or end-of-year market value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
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<tr>
<td>(3)</td>
<td></td>
<td></td>
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<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
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<tr>
<td>(6)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7)</td>
<td></td>
<td></td>
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<tr>
<td>(8)</td>
<td></td>
<td></td>
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<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Col. (b) must equal Form 990, Part X, col (B) line 13.)

### Part IX Other Assets

<table>
<thead>
<tr>
<th>(a) Description</th>
<th>(b) Book value</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
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<td>(5)</td>
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<td>(7)</td>
<td></td>
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<tr>
<td>(8)</td>
<td></td>
</tr>
<tr>
<td>(9)</td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col (B) line 15.)

### Part X Other Liabilities

1. | (a) Description of liability | (b) Book value |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) Federal income taxes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) DUE TO AFFILIATE</td>
<td>601,099</td>
<td></td>
</tr>
<tr>
<td>(3)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(4)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6)</td>
<td></td>
<td></td>
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<tr>
<td>(7)</td>
<td></td>
<td></td>
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<td>(8)</td>
<td></td>
<td></td>
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<tr>
<td>(9)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(10)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(11)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) 601,099

FIN 48 (ASC 740-10-60-5). In Part X, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740-10-60-5). 

2. 601,099

Schedule D (Form 990) 2011
### Part XI | Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

1. Total revenue (Form 990, Part VIII, column (A), line 12) \( \text{1} \)
2. Total expenses (Form 990, Part IX, column (A), line 25) \( \text{2} \)
3. Excess (or deficit) for the year. Subtract line 2 from line 1 \( \text{3} \)
4. Not unrealized gains (losses) on investments \( \text{4} \)
5. Donated services and use of facilities \( \text{5} \)
6. Investment expenses \( \text{6} \)
7. Prior period adjustments \( \text{7} \)
8. Other (Describe in Part XIV) \( \text{8} \)
9. Total adjustments (net). Add lines 4 through 8 \( \text{9} \)
10. Excess (or deficit) for the year per audited financial statements. Combine lines 3 and 9 \( \text{10} \)

### Part XII | Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

### Part XIII | Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

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

### Part XIV | Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 6; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS.** THE GUIDANCE CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENTS. THE GUIDANCE FURTHER PRESCRIBES RECOGNITION AND MEASUREMENT OF TAX PROVISIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED. THE ADOPTION OF THIS STANDARD HAD NO IMPACT ON ASEE'S FINANCIAL STATEMENTS.

AND STATE TAX EXAMINATIONS,
**Compensation Information**
For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
- Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
- Attach Form 990. See separate instructions.

**Name of the organization**: ASEE CONVENTION & SEMINAR CORPORATION
**Employer identification number**: 52-1755430

**Part I Questions Regarding Compensation**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. 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.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ First-class or charter travel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Travel for companions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Tax indemnification and gross-up payments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Discretionary spending account</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Housing allowance or residence for personal use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Payments for business use of personal residence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Health or social club dues or initiation fees</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Personal services (e.g., maid, chauffeur, chef)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

3. Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.
   - Compensation committee
   - Written employment contract
   - Independent compensation consultant
   - Compensation survey or study
   - Approval by the board or compensation committee
   - Form 990 of other organizations

4. During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:
   a. Receive a severance payment or change-of-control payment? (X)
   b. Participate in, or receive payment from, a supplemental nonqualified retirement plan? (X)
   c. Participate in, or receive payment from, an equity-based compensation arrangement? (X)

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

5. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:
   a. The organization? (X)
   b. Any related organization? (X)

6. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:
   a. The organization? (X)
   b. Any related organization? (X)

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

8. Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(9)? If "Yes," describe in Part III.

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990.
<table>
<thead>
<tr>
<th>(A) Name</th>
<th>(B) Breakdown of W-2 and/or 1099-MISC compensation</th>
<th>(C) Retirement and other deferred compensation</th>
<th>(D) Nontaxable benefits</th>
<th>(E) Total of columns (B)(i)-(D)</th>
<th>(F) Compensation reported as deferred in prior Form 990</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(i) Base compensation</td>
<td>(ii) Bonus &amp; incentive compensation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 Norman Fortenberry</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
<td>0.</td>
</tr>
<tr>
<td></td>
<td>163,707.</td>
<td>0.</td>
<td>200.</td>
<td>12,279.</td>
<td>7,949.</td>
</tr>
<tr>
<td></td>
<td>28,066.</td>
<td>400.</td>
<td>268.</td>
<td>2,121.</td>
<td>136.</td>
</tr>
<tr>
<td></td>
<td>112,262.</td>
<td>1,600.</td>
<td>1,073.</td>
<td>8,483.</td>
<td>543.</td>
</tr>
<tr>
<td></td>
<td>64,609.</td>
<td>77,758.</td>
<td>61.</td>
<td>3,350.</td>
<td>9,639.</td>
</tr>
<tr>
<td></td>
<td>6,914.</td>
<td>0.</td>
<td>21.</td>
<td>528.</td>
<td>491.</td>
</tr>
<tr>
<td>4 Keith Mounts</td>
<td>131,364.</td>
<td>0.</td>
<td>393.</td>
<td>10,039.</td>
<td>9,325.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>151,121.</td>
</tr>
</tbody>
</table>
Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

Name of the organization

ASEE CONVENTION & SEMINAR CORPORATION

Employer identification number

52-1755430

FORM 990, PART VI, SECTION A, LINE 1: THE ORGANIZATION HAS AN EXECUTIVE COMMITTEE GRANTED THE POWERS OF THE BOARD WHEN THE BOARD IS NOT IN SESSION. THE EXECUTIVE COMMITTEE CONSISTS OF THREE DIRECTORS FROM GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7A: THE MEMBERS OF AMERICAN SOCIETY FOR ENGINEERING EDUCATION HAVE VOTING RIGHTS.

FORM 990, PART VI, SECTION B, LINE 11: THE FORM 990 IS MADE AVAILABLE ON A SECURE WEBSITE FOR THE REVIEW OF MANAGEMENT PRIOR TO BEING AVAILABLE FOR REVIEW BY THE BOARD OF DIRECTORS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: BOARD MEMBERS AND STAFF ARE REQUIRED TO REVIEW AND SIGN THE CONFLICT OF INTEREST FORM EVERY YEAR.

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

FORM 990, PART VII LINE 1A:

THE FOLLOWING DIRECTORS SPEND TIME ON RELATED ENTITIES AS FOLLOWS:

<table>
<thead>
<tr>
<th>PERSON</th>
<th>NAME OF ENTITY</th>
<th>HOURS</th>
</tr>
</thead>
<tbody>
<tr>
<td>HANS J. HOYER</td>
<td>ASEE</td>
<td>12</td>
</tr>
<tr>
<td>HANS J. HOYER</td>
<td>IFEES</td>
<td>20</td>
</tr>
<tr>
<td>KEITH MOUNTS</td>
<td>ASEE</td>
<td>38</td>
</tr>
</tbody>
</table>

PATRIC

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

Schedule O (Form 990 or 990-EZ) (2011)
### Related Organizations and Unrelated Partnerships

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

#### Part I
Identification of Disregarded Entities

<table>
<thead>
<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name, address, and EIN of disregarded entity</td>
<td>Primary activity</td>
<td>Legal domicile (state or foreign country)</td>
<td>Total income</td>
<td>End-of-year assets</td>
<td>Direct controlling entity</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
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#### Part II
Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

<table>
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<tr>
<th>(a)</th>
<th>(b)</th>
<th>(c)</th>
<th>(d)</th>
<th>(e)</th>
<th>(f)</th>
<th>(g)</th>
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<tbody>
<tr>
<td>Name, address, and EIN of related organization</td>
<td>Primary activity</td>
<td>Legal domicile (state or foreign country)</td>
<td>Exempt Code section</td>
<td>Public charity status (if section 501(c)(3))</td>
<td>Direct controlling entity</td>
<td>Section 512(b)(13) controlled entity?</td>
</tr>
<tr>
<td>AMERICAN SOCIETY OF ENGINEERING EDUCATION - 37-0730118, 1818 N STREET NW, SUITE 600, WASHINGTON, DC 20036</td>
<td>PROMOTE ENGINEERING</td>
<td>WASHINGTON, DC 20036</td>
<td>PENNSYLVANIA</td>
<td>501(C)(3)</td>
<td>YES</td>
<td>No</td>
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<tr>
<td>TAU ALPHA PI OF ASEE, INC - 52-2121038, 1818 N STREET NW SUITE 600, WASHINGTON, DC 20036</td>
<td>HONOR SOCIETY FOR ENGINEERING TECH</td>
<td>PROFESSION</td>
<td>DELAWARE</td>
<td>501(C)(3)</td>
<td>YES</td>
<td>No</td>
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For Paperwork Reduction Act Notice, see the Instructions for Form 990.
### Part III
Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Disproportionate allocations?</th>
<th>(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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### Part IV
Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of related organization</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Direct controlling entity</th>
<th>(e) Type of entity (C corp, S corp, or trust)</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Percentage ownership</th>
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37
Part V Transactions With Related Organizations [Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.]

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?
   a. Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity
   b. Gift, grant, or capital contribution to related organization(s)
   c. Gift, grant, or capital contribution from related organization(s)
   d. Loans or loan guarantees to or for related organization(s)
   e. Loans or loan guarantees by related organization(s)
   f. Sale of assets to related organization(s)
   g. Purchase of assets from related organization(s)
   h. Exchange of assets with related organization(s)
   i. Lease of facilities, equipment, or other assets to related organization(s)
   j. Lease of facilities, equipment, or other assets from related organization(s)
   k. Performance of services or membership or fundraising solicitations for related organization(s)
   l. Performance of services or membership or fundraising solicitations by related organization(s)
   m. Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)
   n. Sharing of paid employees with related organization(s)
   o. Reimbursement paid to related organization(s) for expenses
   p. Reimbursement paid by related organization(s) for expenses
   q. Other transfer of cash or property to related organization(s)
   r. Other transfer of cash or property from related organization(s)

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

<table>
<thead>
<tr>
<th>(a) Name of other organization</th>
<th>(b) Transaction type (a-r)</th>
<th>(c) Amount involved</th>
<th>(d) Method of determining amount involved</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1) AMERICAN SOCIETY FOR ENGINEERING EDUCATION</td>
<td>N</td>
<td>1,482,392</td>
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</table>
### Part VI  Unrelated Organizations Taxable as a Partnership

(Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

<table>
<thead>
<tr>
<th>(a) Name, address, and EIN of entity</th>
<th>(b) Primary activity</th>
<th>(c) Legal domicile (state or foreign country)</th>
<th>(d) Predominant income (related, unrelated, excluded from tax under section 312-314)</th>
<th>(e) Are all related to 501(c)(3) entities?</th>
<th>(f) Share of total income</th>
<th>(g) Share of end-of-year assets</th>
<th>(h) Corporation status?</th>
<th>(i) Code V-UBI amount in box 24 of Schedule K-1 (Form 1065)</th>
<th>(j) General or managing partner?</th>
<th>(k) Percentage ownership</th>
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Schedule R (Form 990) 2011
Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2011, or fiscal year beginning OCT 1, 2011, and ending SEP 30, 2012

Do not send to the IRS. Keep for your records.
See instructions.

ASBE CONVENTION & SEMINAR CORPORATION

Name and title of officer

EDGAR LUGO

CHIEF FINANCIAL OFFICER

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than 1 line in Part I.

1a Form 990 check here □ X b Total revenue, if any (Form 990, Part VIII, column (A), line 12) .......................... 1b 2904205

2a Form 990-EZ check here □ □ b Total revenue, if any (Form 990-EZ, line 9) ........................................... 2b

3a Form 1120-POL check here □ □ b Total tax (Form 1120-POL, line 22) ...................................................... 3b

4a Form 990-PF check here □ □ b Tax based on investment income (Form 990-PF, Part VI, line 5) ........... 4b

5a Form 8868 check here □ □ b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c) ........................... 5b

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization’s 2011 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization’s electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization’s return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization’s federal taxes owed on this return, and the financial institution to debit the entry to the account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-359-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization’s electronic return and, if applicable, the organization’s consent to electronic funds withdrawal.

Officer’s PIN: check one box only

X I authorize CLIFTONLARSONALLEN LLP to enter my PIN 20036

ERO firm name

Enter five numbers, but do not enter all zeros

as my signature on the organization’s tax year 2011 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency/ies regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

□ As an officer of the organization, I will enter my PIN as my signature on the organization’s tax year 2011 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency/ies regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return’s disclosure consent screen.

Date

Part III Certification and Authentication

ERO’s EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

54263942639

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2011 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4168, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO’s signature □

Date 8/1/2013

EROMust Retain This Form - See Instructions
Do Not Submit This Form To The IRS Unless Requested To Do So