

Return of Organization Exempt From Income Tax

2005

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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 2005 calendar year, or tax year beginning 07/01, 2005, and ending 06/30/2006

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization: AMERICAN ASSOCIATION OF STATE COLLEGES AND UNIVERSITIES. D Employer identification number: 52-0747578. E Telephone number: (202) 293-7070. F Accounting method: Cash [X] Accrual [] Other (specify) []

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: WWW.AASCU.ORG

J Organization type (check only one) [X] 501(c)(3) [] 4947(a)(1) or [] 527

K Check here [] if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? [] Yes [X] No. H(b) If "Yes," enter number of affiliates []. H(c) Are all affiliates included? [] Yes [] No. H(d) Is this a separate return filed by an organization covered by a group ruling? [] Yes [X] No.

I Group Exemption Number []. M Check [] if the organization is not required to attach Sch B (Form 990, 990-EZ, or 990-PF).

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 11,022,347.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions)

Table with 3 main sections: Revenue (lines 1-12), Expenses (lines 13-17), and Net Assets (lines 18-21). Includes sub-rows for public support, government contributions, program service revenue, membership dues, interest, dividends, rents, sales of assets, special events, and inventory. Total revenue is 11,022,347.

SCANNED NOV 15 2006

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2005) 12

Part II Statement of Functional Expenses

All organizations must complete column (A) Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others (See the instructions)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>21,758.</u> noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	21,758.	21,758.	STMT 4	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc	1,221,277.	604,300.	616,977.	
26	Other salaries and wages	3,176,479.	2,128,365.	1,048,114.	
27	Pension plan contributions	582,802.	362,550.	220,252.	
28	Other employee benefits	1,355,223.	808,639.	546,584.	
29	Payroll taxes	357,776.	222,566.	135,210.	
30	Professional fundraising fees				
31	Accounting fees	23,500.	6,500.	17,000.	
32	Legal fees	32,195.		32,195.	
33	Supplies	85,781.	28,174.	57,607.	
34	Telephone	66,817.	39,154.	27,663.	
35	Postage and shipping	78,604.	61,641.	16,963.	
36	Occupancy	125,999.	184,050.	-58,051.	
37	Equipment rental and maintenance	79,178.	1,857.	77,321.	
38	Printing and publications	385,296.	361,228.	24,068.	
39	Travel	488,186.	386,420.	101,766.	
40	Conferences, conventions, and meetings	551,783.	437,948.	113,835.	
41	Interest	185,585.	128,533.	57,052.	
42	Depreciation, depletion, etc (attach schedule)	273,973.		273,973.	
43	Other expenses not covered above (itemize)				
a	STMT 6	1,383,971.	2,709,118.	-1,325,147.	
b					
c					
d					
e					
f					
g					
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	10,476,183.	8,492,801.	1,983,382.	

Joint Costs. Check if you are following SOP 98-2

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ▶SEE STATEMENT 7 All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts, but optional for others.)
a <u>CONTRACTS - SEE ATTACHED SCHEDULE</u> ----- ----- ----- ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	4,903,741.
b <u>GOVERNMENTAL RELATIONS & POLICY ANALYSES - SEE ATTACHED SCHEDULE</u> ----- ----- ----- ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	922,020.
c <u>GRANT RESOURCES CENTER - SEE ATTACHED SCHEDULE</u> ----- ----- ----- ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	685,225.
d <u>ACADEMIC PROGRAMS - SEE ATTACHED SCHEDULE</u> ----- ----- ----- ----- ----- ----- (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	1,011,838.
e Other program services (attach schedule) <u>SEE STATEMENT 8</u> (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	969,977.
f Total of Program Service Expenses (should equal line 44, column (B), Program services). ▶	8,492,801.

Part IV Balance Sheets (See the instructions)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only

		(A) Beginning of year		(B) End of year	
Assets	45	Cash - non-interest-bearing	608,639.	45	819,914.
	46	Savings and temporary cash investments	2,813,906.	46	2,941,741.
	47a	Accounts receivable	1,287,203.		
	b	Less allowance for doubtful accounts		47c	1,287,203.
	48a	Pledges receivable			
	b	Less allowance for doubtful accounts		48c	
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
	51a	Other notes and loans receivable (attach schedule)			
	b	Less allowance for doubtful accounts		51c	
	52	Inventories for sale or use		52	
	53	Prepaid expenses and deferred charges	133,637.	53	133,217.
	54	Investments - securities (attach schedule) STMT .9. <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	4,218,029.	54	4,506,514.
	55a	Investments - land, buildings, and equipment basis			
	b	Less accumulated depreciation (attach schedule)		55c	
	56	Investments - other (attach schedule)		56	
	57a	Land, buildings, and equipment basis	9,428,141.		
	b	Less accumulated depreciation (attach schedule)	2,184,851.	57c	7,243,290.
	58	Other assets (describe <input type="checkbox"/> STMT 10)	249,012.	58	254,462.
59	Total assets (must equal line 74) Add lines 45 through 58	16,279,213.	59	17,186,341.	
Liabilities	60	Accounts payable and accrued expenses	2,139,989.	60	2,193,237.
	61	Grants payable		61	
	62	Deferred revenue STMT. 11	1,922,066.	62	2,071,105.
	63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
	64a	Tax-exempt bond liabilities (attach schedule) STMT. 12	5,946,883.	64a	5,946,883.
	b	Mortgages and other notes payable (attach schedule)		64b	
	65	Other liabilities (describe <input type="checkbox"/> STMT 13)	58,910.	65	51,366.
66	Total liabilities. Add lines 60 through 65	10,067,848.	66	10,262,591.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
	67	Unrestricted	4,800,007.	67	5,589,368.
	68	Temporarily restricted	411,358.	68	334,382.
	69	Permanently restricted	1,000,000.	69	1,000,000.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70	Capital stock, trust principal, or current funds		70	
	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
	72	Retained earnings, endowment, accumulated income, or other funds		72	
	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19; column (B) must equal line 21)	6,211,365.	73	6,923,750.
	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	16,279,213.	74	17,186,341.

Part IV-A Reconciliation of Revenue per Audited Financial Statements With Revenue per Return (See the instructions)

a	Total revenue, gains, and other support per audited financial statements		a	11,188,568.
b	Amounts included on line a but not on Part I, line 12			
1	Net unrealized gains on investments	b1	166,221.	
2	Donated services and use of facilities	b2		
3	Recoveries of prior year grants	b3		
4	Other (specify) -----	b4		
	Add lines b1 through b4		b	166,221.
c	Subtract line b from line a		c	11,022,347.
d	Amounts included on Part I, line 12, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) -----	d2		
	Add lines d1 and d2		d	
e	Total revenue (Part I, line 12) Add lines c and d.		e	11,022,347.

Part IV-B Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

a	Total expenses and losses per audited financial statements		a	10,476,183.
b	Amounts included on line a but not on Part I, line 17			
1	Donated services and use of facilities	b1		
2	Prior year adjustments reported on Part I, line 20	b2		
3	Losses reported on Part I, line 20	b3		
4	Other (specify) -----	b4		
	Add lines b1 through b4		b	
c	Subtract line b from line a		c	10,476,183.
d	Amounts included on Part I, line 17, but not on line a:			
1	Investment expenses not included on Part I, line 6b	d1		
2	Other (specify) -----	d2		
	Add lines d1 and d2		d	
e	Total expenses (Part I, line 17) Add lines c and d.		e	10,476,183.

Part V Current Officers, Directors, Trustees, and Key Employees (List each person who was an officer, director, trustee, or key employee at any time during the year even if they were not compensated) (See the instructions)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-.)	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 14		1,221,277.	446,930.	NONE

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)		Yes	No
75a	Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 15		
b	Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)	75b	X
c	Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization	75c	X
d	Does the organization have a written conflict of interest policy?	75d	X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits
(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans & deferred compensation plans	(E) Expense account and other allowances
SEE STATEMENT 17	-0-	NONE	13,069.	NONE

Part VI Other Information (See the instructions.)		Yes	No
76	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77	Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	78b	N/A
79	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80a	Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b	If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt or <input type="checkbox"/> nonexempt		
81a	Enter direct and indirect political expenditures (See line 81 instructions) 81a NONE		
b	Did the organization file Form 1120-POL for this year?	81b	X

Part VI Other Information (continued)

82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 82a Yes No X
b If "Yes," you may indicate the value of these items here Do not include this amount as revenue in Part I or as an expense in Part II (See instructions in Part III) 82b N/A
83 a Did the organization comply with the public inspection requirements for returns and exemption applications? 83a X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 83b N/A
84 a Did the organization solicit any contributions or gifts that were not tax deductible? 84a X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 84b N/A
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members? 85a N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 85b N/A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year
c Dues, assessments, and similar amounts from members 85c N/A
d Section 162(e) lobbying and political expenditures 85d N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 85g N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 85h N/A
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12 86a N/A
b Gross receipts, included on line 12, for public use of club facilities 86b N/A
87 501(c)(12) orgs Enter a Gross income from members or shareholders 87a N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 87b N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX 88 X
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 NONE, section 4912 NONE, section 4955 NONE
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction 89b X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 NONE
d Enter Amount of tax on line 89c, above, reimbursed by the organization NONE
90 a List the states with which a copy of this return is filed WASHINGTON D.C.
b Number of employees employed in the pay period that includes March 12, 2005 (See instructions) 90b 78
91 a The books are in care of GARY FUTAMASE Telephone no 202-293-7070
Located at WASHINGTON, DC ZIP + 4 20036
b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 91b Yes No X
If "Yes," enter the name of the foreign country
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts
c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X
If "Yes," enter the name of the foreign country
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a <u>CONTRACTS/GRANTS</u>					4,902,993.
b <u>MEETINGS/WORKSHOPS</u>					1,048,637.
c <u>BLK SCHOOL ADVANCE</u>					37,312.
d <u>PUBLICATIONS</u>					13,619.
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					4,630,025.
95 Interest on savings and temporary cash investments			14	127,702.	
96 Dividends and interest from securities			14	107,013.	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue a _____					
b <u>OTHER</u>					55,844.
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))				234,715.	10,688,430.
105 Total (add line 104, columns (B), (D), and (E))					10,923,145.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	STMT 18

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Sign Here

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

Signature of officer: Constantine W. Curvis Date: 10/25/2006

Type or print name and title: Constantine W. Curvis, President

Paid Preparer's Use Only

Preparer's signature: B. Garnice Anderson, CPA Date: 10/19/06 Check if self-employed: Preparer's SSN or PTIN (See Gen Inst W): P00042998

Firm's name (or yours if self-employed), address, and ZIP + 4: PEACOCK, CONDRON, ANDERSON & CO. EIN: 52-2062383

6851 OAK HALL LANE, SUITE 300 Phone no: 410-720-5220

COLUMBIA, MD 21045

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No 1545-0047

2005

Name of the organization **AMERICAN ASSOCIATION OF STATE COLLEGES AND UNIVERSITIES** Employer identification number **52-0747578**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 19				
Total number of other employees paid over \$50,000 . . . ▶	29			

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
PATRICIA SMITH WASHINGTON, DC 20024	CONSULTANT	65,627.
Total number of others receiving over \$50,000 for professional services ▶	NONE	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶	NONE	

Part III Statements About Activities (See page 2 of the instructions.)

Table with 3 columns: Question, Yes, No. Rows include: 1. Lobbying activities (\$76,401), 2. Acts with substantial contributors (a-e), 3a-3c. Grants and annuity plans, 4a-4b. Separate accounts and credit counseling.

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only ONE applicable box)

- 5. A church, convention of churches, or association of churches
6. A school
7. A hospital or a cooperative hospital service organization
8. A Federal, state, or local government or governmental unit
9. A medical research organization operated in conjunction with a hospital
10. An organization operated for the benefit of a college or university
11a. An organization that normally receives a substantial part of its support from a governmental unit or from the general public
11b. A community trust
12. 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 charitable, etc., 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
13. An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2)

Provide the following information about the supported organizations (See page 6 of the instructions)

Table with 2 columns: (a) Name(s) of supported organization(s), (b) Line number from above.

- 14. An organization organized and operated to test for public safety

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12) *Use cash method of accounting.*

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Calendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants See line 28)	4,334,655.	4,065,314.	3,983,096.	3,685,118.	16,068,183.
16 Membership fees received	4,188,486.	4,380,725.	4,270,250.	4,260,057.	17,099,518.
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	1,150,817.	888,441.	757,190.	658,530.	3,454,978.
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	147,493.	133,252.	156,113.	136,815.	573,673.
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge Do not include the value of services or facilities generally furnished to the public without charge					
22 Other income Attach a schedule Do not include gain or (loss) from sale of capital assets					
23 Total of lines 15 through 22	9,821,451.	9,467,732.	9,166,649.	8,740,520.	37,196,352.
24 Line 23 minus line 17.	8,670,634.	8,579,291.	8,409,459.	8,081,990.	33,741,374.
25 Enter 1% of line 23.	98,215.	94,677.	91,666.	87,405.	
26 Organizations described on lines 10 or 11: a Enter 2% of amount in column (e), line 24 NOT APPLICABLE . . . ▶					26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 2001 through 2004 exceeded the amount shown in line 26a Do not file this list with your return. Enter the total of all these excess amounts ▶					26b
c Total support for section 509(a)(1) test Enter line 24, column (e) ▶					26c
d Add Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____ ▶					26d
e Public support (line 26c minus line 26d total) ▶					26e
f Public support percentage (line 26e (numerator) divided by line 26c (denominator)) ▶					26f %
27 Organizations described on line 12: a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person" Do not file this list with your return. Enter the sum of such amounts for each year (2004) _____ (2003) _____ (2002) _____ (2001) _____					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year (2004) _____ (2003) _____ (2002) _____ (2001) _____					
c Add Amounts from column (e) for lines 15 <u>16,068,183.</u> 16 <u>17,099,518.</u> 17 <u>3,454,978.</u> 20 _____ 21 _____ ▶					27c 36,622,679.
d Add Line 27a total and line 27b total ▶					27d
e Public support (line 27c total minus line 27d total). ▶					27e 36,622,679.
f Total support for section 509(a)(2) test Enter amount from line 23, column (e) ▶					27f 37,196,352.
g Public support percentage (line 27e (numerator) divided by line 27f (denominator)) ▶					27g 98.4577 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator)) ▶					27h 1.5423 %
28 Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2001 through 2004, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant Do not file this list with your return. Do not include these grants in line 15					

Part V Private School Questionnaire (See page 7 of the instructions) NOT APPLICABLE
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement) ----- ----- -----	31	
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement) ----- -----		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement) ----- ----- -----		
34 a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50, 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)

(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check <input type="checkbox"/> a	if the organization belongs to an affiliated group	Check <input type="checkbox"/> b	if you checked "a" and "limited control" provisions apply	
Limits on Lobbying Expenditures			(a) Affiliated group totals	(b) To be completed for ALL electing organizations
(The term "expenditures" means amounts paid or incurred)				
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36		36,279.
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37		40,122.
38	Total lobbying expenditures (add lines 36 and 37)	38		76,401.
39	Other exempt purpose expenditures	39		10,399,782.
40	Total exempt purpose expenditures (add lines 38 and 39)	40		10,476,183.
41	Lobbying nontaxable amount Enter the amount from the following table -			
	If the amount on line 40 is -			
	The lobbying nontaxable amount is -			
	Not over \$500,000		20% of the amount on line 40	
	Over \$500,000 but not over \$1,000,000		\$100,000 plus 15% of the excess over \$500,000	
	Over \$1,000,000 but not over \$1,500,000		\$175,000 plus 10% of the excess over \$1,000,000	
	Over \$1,500,000 but not over \$17,000,000		\$225,000 plus 5% of the excess over \$1,500,000	
	Over \$17,000,000		\$1,000,000	
42	Grassroots nontaxable amount (enter 25% of line 41)	42		168,452.
43	Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44	Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44		
Caution: If there is an amount on either line 43 or line 44, you must file Form 4720				

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below
See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period					
	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total	
45	Lobbying nontaxable amount	673,809.	660,456.	598,810.	611,338.	2,544,413.
46	Lobbying ceiling amount (150% of line 45(e))					3,816,620.
47	Total lobbying expenditures	76,401.	37,635.	64,294.	72,376.	250,706.
48	Grassroots nontaxable amount	168,452.	165,114.	149,703.	152,835.	636,104.
49	Grassroots ceiling amount (150% of line 48(e))					954,156.
50	Grassroots lobbying expenditures	36,279.	17,120.	22,647.	29,776.	105,822.

Part VI-B Lobbying Activity by Nonelecting Public Charities

NOT APPLICABLE

(For reporting only by organizations that did not complete Part VI-A) (See page 11 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	Yes	No	Amount
a Volunteers			
b Paid staff or management (Include compensation in expenses reported on lines c through h)			
c Media advertisements			
d Mailings to members, legislators, or the public			
e Publications, or published or broadcast statements			
f Grants to other organizations for lobbying purposes			
g Direct contact with legislators, their staffs, government officials, or a legislative body			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (Add lines c through h.)			

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions.)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

Table with 3 columns: Question, Yes, No. Rows include: a Transfers from the reporting organization to a noncharitable exempt organization of (i) Cash, (ii) Other assets; b Other transactions (i) Sales or exchanges of assets, (ii) Purchases of assets, (iii) Rental of facilities, (iv) Reimbursement arrangements, (v) Loans or loan guarantees, (vi) Performance of services; c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 4 columns: (a) Line no, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Row 1 contains 'N/A'.

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? [] Yes [X] No

b If "Yes," complete the following schedule:

Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Row 1 contains 'N/A'.

FORM 990, PART I - MEMBERSHIP DUES AND ASSESSMENTS

=====

DESCRIPTION

AMOUNT

MEMBERSHIP DUES

4,630,025.

TOTAL

4,630,025.
=====

FORM 990, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

=====

DESCRIPTION

AMOUNT

DIVIDENDS AND INTEREST INCOME

107,013.

TOTAL

107,013.
=====

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

=====

DESCRIPTION

AMOUNT

UNREALIZED GAIN

166,221.

TOTAL

166,221.
=====

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

AND

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

GRANTS PAID

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
AMERICAN COUNCIL ON EDUCATION DEPARTMENT 36 WASHINGTON, DC 20055	NONE 503C(3)	EDUCATIONAL	16,000.
UNIVERSITY OF LOUISIANA SYSTEM STATE IFFUCE BLDG 3RD FLOOR 1201 NORTH THIRD STREET BATON ROUGE, LA 70802	NONE 501(C)(3)	KATRINA STUDENT RELIEF FUND	2,758.
MISSISSIPPI INSTITUTE OF HIGHER EDUCATION C/O COMMISSIONERS OFFICE 3825 RIDGEWOOD ROAD JACKSON, MS 39211	NONE 501(C)(3)	KATRINA STUDENT RELIEF FUND	900.
FOUNDATION FOR EDUCATION INVESTMENT 122C STREET NW SUITE 280 WASHINGTON, DC 20001	NONE	CHARITY	500.
US STUDENT ASSOCIATION 815 16TH STREET NW 4TH FLOOR WASHINGTON, DC 20006	NONE 503(C)(3)	EDUCATIONAL	1,000.
MINNESOTA STATE UNIVERSITY STUDENT ASSOCIATION 108 COMO AVENUE SAINT PAUL, MN 55103	NONE 503(C)(3)	EDUCATIONAL	500.

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR
AND

RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
KYLE SEAN MCDONALD MEMORIAL LAMAR UNIVERSITY FOUNDATION P O BOX 11500 BEAUMONT, TX 77710	NONE	CHARITY	100.
		TOTAL CONTRIBUTIONS PAID	21,758.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL
RECRUITING	57,267.	53,624.	3,643.
PROPERTY TAXES	27,954.		27,954.
MEMBERSHIP DUES	21,156.	9,874.	11,282.
BOARD OF DIRECTORS	24,404.		24,404.
CONSULTANT	290,559.	263,749.	26,810.
TEMP HELP FROM AGENCIES	3,828.	500.	3,328.
SUBSCRIPTIONS/PUBLICATIONS	65,095.	37,430.	27,665.
STIPENDS	16,000.	16,000.	
SERVICES	597,533.	542,045.	55,488.
COMMERCIAL INSURANCE	23,080.		23,080.
INTERASSOCIATION ACTIVITIES	1,000.	1,000.	
NASULGC BLK SCHOOLS PART.	37,312.		37,312.
UNALLOWABLE	112,122.	62,313.	49,809.
HONORARIA	52,075.	47,075.	5,000.
BANK CHARGES	150.	150.	
MEDICAL INSURANCE	54,436.		54,436.
INDIRECT COST RECOVERY		1,675,358.	-1,675,358.
TOTALS	1,383,971.	2,709,118.	-1,325,147.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

TO IMPROVE HIGHER EDUCATION THROUGH PLANNING, STUDIES AND RESEARCH ON
COMMON EDUCATIONAL PROBLEMS AND TO PROVIDE EDUCATIONAL SERVICES TO
COLLEGES AND UNIVERSITIES, AND RESEARCH AND EXCHANGE OF IDEAS IN THE
STUDY OF EDUCATIONAL PROBLEMS.

FORM 990, PART III - OTHER PROGRAM SERVICES (LINE E)

DESCRIPTION	GRANTS AND ALLOCATIONS	EXPENSES
COMMUNICATIONS		507,448.
MEMBERSHIP PROGRAMS		331,517.
INTERNATIONAL PROGRAMS		131,012.
TOTALS		969,977.

FORM 990, PART IV - INVESTMENTS - SECURITIES
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
STOCK PORTFOLIO - AT MARKET	3,741,605.
BOND PORTFOLIO - AT MARKET	764,909.
TOTALS	----- 4,506,514. =====

FORM 990, PART IV - OTHER ASSETS

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
CASH SURR. VALUE OF LIFE INS.	106,834.
UNAMORT. BOND ISSUE COSTS	134,317.
SWAP AGREEMENT	13,311.
TOTALS	----- 254,462. =====

FORM 990, PART IV - DEFERRED REVENUE

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
DEFERRED MEMBERSHIP DUES/FEES	2,034,947.
REFUNDABLE ADVANCE	36,158.
TOTALS	----- 2,071,105. =====

FORM 990, PART IV - TAX-EXEMPT BOND LIABILITIES

=====

DESCRIPTION

ENDING
BOOK VALUE

BOND PAYABLE

5,946,883.

TOTALS

5,946,883.
=====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
DEFERRED COMPENSATION PLAN	51,366.
TOTALS	----- 51,366. =====

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
PRESIDENT PATRICIA P. CORMIER 201 HIGH ST FARMVILLE, VA 23909	PAST CHAIR 2	NONE	NONE	NONE
PRESIDENT JOHN D. WELTY 5241 N MAPLE AVE M/S TA48 FRESNO, CA 93740	CHAIR 2	NONE	NONE	NONE
PRESIDENT JAMES VOTRUBA 800 LUCAS ADMINISTRATIVE CENTER NUNN DRIVE HIGHLAND HEIGHTS, KY 41099	SECRETARY/TREASURER 2	NONE	NONE	NONE
PRESIDENT MURIEL HOWARD 1300 ELWOOD AVE GC517 BUFFALO, NY 14222	CHAIR ELECT 2	NONE	NONE	NONE
PRESIDENT DANIEL O. BERNSTINE 341 CRAMER HALL P O BOX 751 PORTLAND, OR 97207	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT MICKEY BURNIM 1704 WEEKSVILLE ROAD CAMPUS BOX 790 ELIZABETH CITY, NC 27909	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT ROBERT L. CARET 8000 YORK ROAD TOWSON, MD 21252	BOARD MEMBER 2	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
PRESIDENT JOHN C HITT 4000 CENTRAL FLORIDA BLVD ADM 308 ORLANDO, FL 32816	BOARD MEMBER 2	NONE	NONE	NONE
CHANCELLOR RUTH JENSEN PERSON 2300 SOUTH WASHINGTON P O BOX 9003 KOKOMO, IN 46904	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT CARLOS HERNANDEZ 2039 KENNEDY BLVD JERSEY CITY, NJ 07305	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT GLEN D. JOHNSON P O BOX 4236 DURANT, OK 74701	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT JOLENE KOESTER 18111 NORDHOFF ST NORTHRIDGE, CA 91330	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT JESSICA S. KOZLOFF 400 EAST SECOND STREET BLOOMSBURG, PA 17815	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT MICHAEL RAO WARRINER HALL # 106 MT PLEASANT, MI 48859	BOARD MEMBER 2	NONE	NONE	NONE
PRESIDENT KAY SCHALLENKAMP 1200 UNIVERSITY STREET	BOARD MEMBER 2	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

=====

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
SPEARFISH, SD 57799				
CHRISTINA BITTING 7234 GREENTREE ROAD BETHESDA, MD 20817	VP MEMBERSHIP SERVIC 40	140,900.	34,548.	NONE
CONSTANTINE W. CURRIS 5610 WISCONSIN AVE # 307 CHEVY CHASE, MD 20815	AASCU PRESIDENT 40	333,677.	251,856.	NONE
WAYNE SFORZA 225 NEWHALL PLACE LEESBURG, VA 20175	VP OF FINANCE & OPER 40	142,400.	31,060.	NONE
EDWARD ELMENDORF 7171 GAME LORD DR SPRINGFIELD, VA	SR.VP-GOVT.RELATIONS 37.5	197,900.	41,900.	NONE
GEORGE MEHAFFY 4701 WILLARD AVE # 314 CHEVY CHASE, MD 20815	VP-ACAD. LEADERSHIP 37.5	171,200.	33,145.	NONE
KATHRYN SNEAD 9144 LEGHORN PLACE FAIRFAX, VA 22031	PRESIDEN-SOC 37.5	120,500.	24,999.	NONE
SUSAN CHILCOTT 6426 KINGS LANDING ROAD ALEXANDRIA, VA 22310	VP-COMMUNICATIONS 37.5	114,700.	29,422.	NONE
	GRAND TOTALS	----- 1,221,277. =====	----- 446,930. =====	----- NONE =====

FORM 990, PART V-B - FORMER OFFICERS, DIRECTORS, AND TRUSTEES
 =====

NAME AND ADDRESS -----	LOANS AND ADVANCES -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCT AND OTHER ALLOWANCES -----
JAMES APPLEBERRY 504 JARVIS LANE LOUISVILLE, KY 40207		NONE	3,236.	NONE
PATRICIA APPLEBERRY 504 JARVIS LANE LOUISVILLE, KY 40207		NONE	3,167.	NONE
ALLEN OSTER 5500 FRIENDSHIP BLVD APT 1504 N CHEVY CHASE, MD 20815		NONE	6,666.	NONE
GRAND TOTALS		NONE	13,069.	NONE

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO.	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93A	CONTRACTS AND GRANTS ALLOW AASCU TO PROVIDE PLANNING AND IMPLEMENTATION FOR HIGHER EDUCATION PROGRAMS.
93B	AASCU IS ABLE TO PROVIDE RESEARCH, AN EXCHANGE OF IDEAS, AND THE STUDY OF EDUCATIONAL PROBLEMS THROUGH WORKSHOP AND MEETING REVENUE.
93C	THE OFFICE FOR ADVANCEMENT OF PUBLIC BLACK COLLEGES ADDRESSES ISSUES SPECIFICALLY RELATED TO PUBLIC BLACK COLLEGES.
93D	PUBLICATIONS ARE USED TO INFORM MEMBERS ABOUT THE NEED FOR INTERNATIONAL EDUCATION. ENDOWMENT AND OTHER REVENUES ALLOWS AASCU TO PROVIDE PLANNING AND TRAINING FOR INTERNATIONAL EDUCATION TO ITS MEMBERS ABOUT THE ASSOCIATION.
94	MEMBERSHIP DUES AND ASSESSMENTS ALLOW AASCU TO PROVIDE PLANNING, STUDIES/RESEARCH ON COMMON EDUCATIONAL PROBLEMS AND DEVELOPMENT OF A UNIFIED EDUCATION PROGRAM AMONG ITS MEMBERS.
103B	OTHER INCOME INCLUDING PAST DUE AMOUNTS AND DUES FROM AFFILIATES APPLIED TO HIGHER EDUCATION PROGRAMS.

SCHEDULE A, PART I - COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

=====

NAME AND ADDRESS -----	TITLE AND TIME DEVOTED TO POSITION -----	COMPENSATION -----	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS -----	EXPENSE ACCOUNT -----
ROSEMARY LAUTH 4018 WATER STREET WATERFORD, VA 20197	DIRECTOR-MEETING OFF 37.5	102,485.	27,542.	NONE
ANDREA BARIDON 1587 HUGO CIRCLE WHEATON, MD 20906	ASSOCIATE DIRECTOR 37.5	95,206.	24,473.	NONE
KHURRAN BASHIR 9132 EDGEWOOD DR GAITHERSBURG, MD 20877	DIRECTOR-INFOR SERVI 37.5	89,170.	21,487.	NONE
ARLENE JACKSON 2500 EAST CARY ST # 322 RICHMOND, VA 23223	DIRECTOR-INT'L EDUCA 37.5	85,200.	25,394.	NONE
JOHN HAMMANG WASHINGTON, DC 20005	DIR - SPEC 40	116,287.	29,945.	
	TOTAL COMPENSATION	----- 488,348. =====	----- 128,841. =====	----- NONE =====

SCHEDULE A, PART III - EXPLANATION FOR LINE 2D
=====

SEE FORM 990, PART V