Form **990**

Department of the Treasury

Internal Revenue Service

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

OMB No. 1545-0047
2012

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

Open to Public Inspection

Α	For the	2012 calendar year, or tax year beginning JU	IL 1, 2012 and	ending J	JN 30, 2013	•			
<u>—</u>	Check if	C Name of organization			D Employer identifi	cation number			
	applicable	AMERICAN HEART ASSOCIATION, INC.							
	Addres: change	DBA GREATER SOUTHEAST AFFILIATE							
	Name change	Name Lichange Doing Business As 13-5613797							
	Initial return	Number and street (or P.O. box if mail is not del	ivered to street address)	Room/suite	E Telephone numbe	er			
	Termin-	11207 BLUE HERON BOULEVARD NORTH	,			563-8000			
	Amende	City, town, or post office, state, and ZIP code	e		G Gross receipts \$	95,898,292.			
	Applica tion	ST. PETERSBURG, FL 33716			H(a) Is this a group re	eturn			
	pending	F Name and address of principal officer:DAVII	MARKIEWICZ		for affiliates?	Yes X No			
		SAME AS C ABOVE			H(b) Are all affiliates inc	cluded? Yes No			
T	Tax-exe	mpt status: X 501(c)(3) 501(c) (◄ (insert no.) 4947(a)(1)	or 527		list. (see instructions)			
		WWW.HEART.ORG	, , , ,		H(c) Group exemptio	,			
			sociation Other >	L Year		✓ State of legal domicile; NY			
P	art I	Summary			•	-			
_	1 E	Briefly describe the organization's mission or most	significant activities: BUILDI	NG HEALTH	IER LIVES, FREE				
ŭ		F CARDIOVASCULAR DISEASES AND STROKE.							
rna	2	Check this box if the organization discor	ntinued its operations or dispo	sed of more	than 25% of its net as	ssets.			
ove	3 1	lumber of voting members of the governing body	(Part VI, line 1a)		3	23			
Ğ	4 1	lumber of independent voting members of the go				23			
es	5 7	otal number of individuals employed in calendar y				0			
Ϋ́Ε̈́	6 7	otal number of volunteers (estimate if necessary)				0			
Activities & Governance	7a 7	otal unrelated business revenue from Part VIII, co				21,406.			
٩		let unrelated business taxable income from Form				0.			
					Prior Year	Current Year			
Revenue	8 (Contributions and grants (Part VIII, line 1h)			71,164,441.	70,606,076.			
		·			7,959,173.	8,075,027.			
eve	10 I	nvestment income (Part VIII, column (A), lines 3, 4	, and 7d)		1,417,219.	2,505,250.			
<u> </u>	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c		<3,026,941.	<76,674.				
	12 7	otal revenue - add lines 8 through 11 (must equal		77,513,892.	81,109,679.				
	13 (Grants and similar amounts paid (Part IX, column (9,010,746.	9,291,027.				
	14 E	Benefits paid to or for members (Part IX, column (A	N), line 4)		0.	0.			
Se	15 8	Salaries, other compensation, employee benefits (l	Part IX, column (A), lines 5-10)		24,339,400.	24,779,817.			
Expenses	16a F	Professional fundraising fees (Part IX, column (A), I	ine 11e)		548,192.	258,182.			
xbe	. b⊺	otal fundraising expenses (Part IX, column (D), line							
Ш	17 (Other expenses (Part IX, column (A), lines 11a-11d			42,826,705.	41,635,453.			
	18 7	otal expenses. Add lines 13-17 (must equal Part I	X, column (A), line 25)		76,725,043.	75,964,479.			
		Revenue less expenses. Subtract line 18 from line	12		788,849.	5,145,200.			
S OF	3			Ве	ginning of Current Year	End of Year			
Set	g 20 1	otal assets (Part X, line 16)			102,130,841.	108,838,155.			
Net Assets or	21 7	otal liabilities (Part X, line 26)			45,643,762.	44,547,637.			
		let assets or fund balances. Subtract line 21 from	line 20		56,487,079.	64,290,518.			
_	art II	Signature Block							
		ties of perjury, I declare that I have examined this return,			•	y knowledge and belief, it is			
true	e, correct	, and complete. Declaration of preparer (other than office	r) is based on all information of w	hich preparer	has any knowledge.				
		Signature of officer			Doto				
Sig	gn	Signature of officer			Date				
He	re	CAROL FUDGE, SENIOR VICE PRESIDEN	T-FINANCE						
		Type or print name and title		1.	Ooto I I	II DTIN			
_		Print/Type preparer's name	Preparer's signature	l	Date Check L	PTIN			
Pai	- +				self-employ	red			
	H	Firm's name			Firm's EIN				
US	e Only	Firm's address			[
_					Phone no.				
Ma	iv the IR	S discuss this return with the preparer shown abo	vez (see instructions)			Yes III No			

SEE 990 FOR AMERICAN HEART ASSOCIATION, INC.

Form	1990 (2012) DBA GREATER SOUTHEAST AFFILIATE	13-5613797	Page 2
Pa	rt 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:		
-	BUILDING HEALTHIER LIVES, FREE OF CARDIOVASCULAR DISEASES AND STROKE		
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 X No
			. 100 110
	If "Yes," describe these new services on Schedule O.	. —] []
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services	? ∟	Yes X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, a	s measured by exp	enses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		
		ioro, trio total exper	ioco, aria
	revenue, if any, for each program service reported.		
4a		nue \$)
	SEE FEDERAL 990 FOR FULL DESCRIPTION		
4b	(Code:) (Expenses \$ including grants of \$) (Reve	nue \$	1
710	(code.) (Expenses # including grants of #) (Never		,
	-		
4c	(Code:) (Expenses \$	nue \$)
4d	Other program services (Describe in Schedule O.)		
-t u		•	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses ▶		

SEE 990 FOR AMERICAN HEART ASSOCIATION, INC.

DBA GREATER SOUTHEAST AFFILIATE 13-5613797 Page 3 Form 990 (2012)

Part IV | Checklist of Required Schedules

			Yes No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		
	If "Yes," complete Schedule A	1	-
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		
_	public office? If "Yes," complete Schedule C, Part I	3	-
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	_	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	-
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for		
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent		
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		
	Part VI	11a	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in		
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	_
е	, , , , , , , , , , , , , , , , , , , ,	11e	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		
	Schedule D, Parts XI and XII	12a	-
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D. Parts XI and XII is optional	40,	
40	, , , , , , , , , , , , , , , , , , , ,	12b	-
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	-
		148	-
b	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization		-
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals		-
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		
	1c and 8a? If "Yes," complete Schedule G, Part II	18	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

FOR AMERICAN HEART ASSOCIATION, INC.

AMERICAN HEART ASSOCIATION INC.

DBA GREATER SOUTHEAST AFFILIATE 13-5613797 Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J 23 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25 24a **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 25b Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified 26 person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial 27 contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? 31 If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete 32 Schedule N, Part II 32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 34 **35a** Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a

b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Note. All Form 990 filers are required to complete Schedule O

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

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

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

Form 990 (2012)

35b

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SEE 990 FOR AMERICAN HEART ASSOCIATION, INC.

Form 990 (2012)

DBA GREATER SOUTHEAST AFFILIATE

Part V | Statements Regarding Other IRS Filings and Tax Compliance DBA GREATER SOUTHEAST AFFILIATE

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	Check if Schedule O contains a response to any question in this Part V					
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	l o		163	140
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and r		able gaming			
Ū	(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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	rns?	•	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions					
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	autho	rity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	accou	ınt)?	4a		
b	If "Yes," enter the name of the foreign country: ►					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial	Accol	ınts.			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	-	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	action'	?	5b	_	
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c	_	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did to	he org	anization solicit	_		
	any contributions that were not tax deductible as charitable contributions?			6a	-	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions and the state of the state					
_	were not tax deductible?			6b	-	
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvione	arovidad to the payor?	7-		
a				7a 7b	-	
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w			76	-	
·	to file Form 8282?		•	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	I .			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		•	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit cont			7f	-	
g	If the organization received a contribution of qualified intellectual property, did the organization file F			7g	-	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiz			7h		
8	Sponsoring organizations maintaining donor advised funds and section $509(a)(3)$ supporting organizations. D	id the s	supporting			
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at	any tir	ne during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the organization make any taxable distributions under section 4966?			9a	_	
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		I			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	١	ı			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against	446				
100	amounts due or received from them.)	11b	<u> </u>	100		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1	ĺ	12a	-	
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	<u> </u>			
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.			iJa		
h	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				
С	Enter the amount of reserves on hand	13c				
			I	14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedul			14b		

990 FOR AMERICAN HEART ASSOCIATION,

AMERICAN HEART ASSOCIATION INC. DBA GREATER SOUTHEAST AFFILIATE Form 990 (2012) Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response Part VI to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 23 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. 23 b Enter the number of voting members included in line 1a, above, who are independent 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 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 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 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 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? 8a Each committee with authority to act on behalf of the governing body? 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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 **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b 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 Did the organization have a written whistleblower policy? 13 13 14 Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b 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 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 16b exempt status with respect to such arrangements? 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)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.
	X Own website X Another's website X Upon request X Other (explain in Schedule O)
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial
	statements available to the public during the tax year.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

Form **990** (2012) 12-10-12

AMERICAN HEART ASSOCIATION, INC.

Form 990 (2012) DBA GREATER SOUTHEAST AFFILIATE 13-5613797 Page **7**

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and Title	(B) Average hours per	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	week (list any hours for related organizations below line)	Individual trustee or director	the organization (W-2/1099-MISC)		organizations (W-2/1099-MISC)	compensation from the organization and related organizations				
(1) CRYSTAL SPENCER, ESQ	3.00									
CHAIR		Х						0.	0.	0.
(2) GLEN GOLEMI	3.00									
CHAIR-ELECT		Х						0.	0.	0.
(3) DAVID A. BUSH	3.00									
IMMEDIATE PAST CHAIRMAN		Х						0.	0.	0.
(4) CHRIS MILLER, PHD JD	3.00									
SECRETARY/TREASURER		Х						0.	0.	0.
(5) JOEY BARNETT	3.00									
PRESIDENT		Х						0.	0.	0.
(6) KEITH CHURCHWELL, MD	3.00									
PRESIDENT-ELECT		Х						0.	0.	0.
(7) HARPER STONE, MD	3.00									
VICE-PRESIDENT	2 00	Х						0.	0.	0.
(8) DONNA ARNETT PHD, BSN, FAHA, MS	3.00								0	0
IMMEDIATE PAST PRESIDENT	2.00	Х						0.	0.	0 .
(9) VICKI ROMERO BRIGGS, FACHE BOARD MEMBER	3.00	x							0.	0
(10) DENISE COOPER, PHD	3.00	Λ						0.	0.	0.
BOARD MEMBER	3.00	X						0.	0.	0.
(11) MARIA FERNANDEZ, RN, MSHA	3.00	^						0.	0.	0
BOARD MEMBER	3.00	х						0.	0.	0 .
(12) KEVIN MAHER, MD	3.00						-		٠,	
BOARD MEMBER		x						0.	0.	0.
(13) PEGUI MARIDUENA	3,00								- •	-
BOARD MEMBER		х						0.	0.	0.
(14) CELESTE PHILIP, MD	3.00							-	-	
BOARD MEMBER		х						0.	0.	0.
(15) DENISE PIPPEN	3.00									
BOARD MEMBER		х						0.	0.	0.
(16) DEBY PITTS, MHA	3.00									
BOARD MEMBER		х						0.	0.	0 .
(17) MANUEL QUILES, MD	3.00									
BOARD MEMBER		х			l			0.	0.	0.

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Part VII Section A. Officers, Directors, Trus	tees. Kev Em	plov	ees	. an	d Hi	iahe	st C	Compensated Employe	es (continued)				age v
(A) Name and title	(B) Average hours per week	(do box	not c	Pos heck ss pe	ition more rson		one h an	(D) (E) Reportable Reportable compensation compensation from from related					
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISO	C)	fi org an	pensa rom the anizat d relat anizati	e ion ed
(18) FERNANDO SANTIAGO, MD BOARD MEMBER	3.00	х						0.		0.			0
(19) TERRI STERLING	3.00							· ·		••			
BOARD MEMBER		х						0.		0.			0
(20) HERMAN TAYLOR, MD, MPH, FACC, F	3.00												
BOARD MEMBER		Х						0.		0.			0
(21) MICHAEL O. UGWUEKE, DHA, FACHE	3.00									_			_
BOARD MEMBER	2.00	Х				-		0.		0.			0
(22) JAMES WEYHENMEYER, PHD BOARD MEMBER	3.00	x						0.		0.			0
(23) NEWT WILLIAMS	3.00							•		٠.			<u>_</u>
BOARD MEMBER		x						0.		0.			0
dh. Cub tetal						Ļ		0.		0.			0
1b Sub-total c Total from continuation sheets to Part VI								0.		0.			0
d Total (add lines 1b and 1c)								0.		0.			0
2 Total number of individuals (including but n							no re	eceived more than \$100	0,000 of reportable)			
compensation from the organization												Yes	No
3 Did the organization list any former officer, line 1a? If "Yes." complete Schedule J for s	,		,	,	•	,	,	highest compensated e	. ,		3	103	Х
4 For any individual listed on line 1a, is the su	ım of reportab	le co	omp	ensa	atior	n and	d otl	her compensation from					
and related organizations greater than \$150Did any person listed on line 1a receive or a									idual for consisso		4		Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-			-			5		Х
Section B. Independent Contractors	prote correaur	.	0. 00		00.0								
Complete this table for your five highest co the organization. Report compensation for	-	-								oens	ation	from	
(A) Name and business		NO		ng v	VICII	<u> </u>		(B) Description of s			(Compe	C) nsatio	n
		110						2000					
Total number of independent contractors (i \$100,000 of compensation from the organi		ot li	mite	d to	tho	se li: 0	stec	d above) who received n	nore than				

Form 990 (2012)

DBA GREATER

Part VIII | Statement of Revenue

DBA GREATER SOUTHEAST AFFILIATE

13-5613797

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		Check if Schedule O cont	ains a response	to any question i	n this Part VIII			
		Oncok ii Goricadic G cont	anis a response	to any question	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a	948,215.				
3ra Ioui	b	Membership dues	1b					
ts, (Am	С	Fundraising events	1c	45,987,260.				
a la	d	Related organizations	1d					
ns, jimi		Government grants (contribut						
itio	f	All other contributions, gifts, gran	ts, and					
ibu H		similar amounts not included abo	ve 1f	23,670,601.				
ontr od C	g	Noncash contributions included in lines	1a-1f: \$	4,824,935.				
<u>a</u> C	h	Total. Add lines 1a-1f		>	70,606,076.			
				Business Code				
ice	2 a	FEES AND GRANTS		900099	8,059,917.	8,059,917.		
erv	b	CONFERENCES & SEMINARS		900099	15,110.	15,110.		
n S en	С							
Jran Rev	d							
Program Service Revenue	е							
ъ.		All other program service reve						
		Total. Add lines 2a-2f			8,075,027.			
	3	Investment income (including	•	· .	1 504 510		15 000	1 550 616
		other similar amounts)			1,794,518.		15,902.	1,778,616.
	4	Income from investment of ta						
	5	Royalties						
	•		(i) Real 154,204.	(ii) Personal				
		Gross rents	154,204.					
		Less: rental expenses	154,204.					
		Rental income or (loss)			154,204.			154,204.
		Net rental income or (loss)	(i) Coo. wition	1	134,204.			134,204.
	<i>i</i> a	Gross amount from sales of	(i) Securities 10,224,979.	(ii) Other 498,932.				
	h	assets other than inventory Less: cost or other basis	10,224,373.	450,552.				
	b		9,810,766.	202,413.				
	•	and sales expenses Gain or (loss)						
		Net gain or (loss)			710,732.			710,732.
		Gross income from fundraising			,			111,111
nue	o a	including \$	of					
e e		contributions reported on line						
Other Revenu		Part IV, line 18	•	3,098,874.				
the	b	Less: direct expenses		4,771,111.				
Ó		Net income or (loss) from fund			<1,672,237.	>		<1,672,237.
		Gross income from gaming ac	ŭ					
		Part IV, line 19		56,032.				
	b	Less: direct expenses		4 202				
		Net income or (loss) from gam			51,709.		5,144.	46,565.
		Gross sales of inventory, less	-					
		and allowances	а					
	b	Less: cost of goods sold						
	С	Net income or (loss) from sale	s of inventory					
		Miscellaneous Revenu	e	Business Code				
	11 a	CHANGE IN VALUE OF SPL		900099	2,173,779.	2,173,779.		
	b	OTHER REVENUE		900099	<784,129.	> <784,129.	·	
	С							
		All other revenue						
	е	Total. Add lines 11a-11d		>	1,389,650.			
	12	Total revenue. See instructions.		.	81 109 679.	9 464 677.	21.046.	1 017 880.

AMERICAN HEART ASSOCIATION, INC.

Form 990 (2012) DBA GREATER SOUTHEAST AFFILIATE

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Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Х Check if Schedule O contains a response to any question in this Part IX (R) (D) Do not include amounts reported on lines 6b. Management and general expenses Total expenses Program service Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 8,588,336 8,588,336 Grants and other assistance to individuals in 628,783 628.783 the United States. See Part IV, line 22 Grants and other assistance to governments. organizations, and individuals outside the 73,908 73,908 United States, See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 19.304.571 13,073,855 2.383.338 3,847,378. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 1,271,097 810,259 160.856 299,982. Other employee benefits 1,908,042 335,239 501,500. 2,744,781 9 1,459,368 993,157 178,713 287.498. Payroll taxes 10 Fees for services (non-employees): Management 10,155 10.155 Legal b 38,604 38,604 Accounting С 179,103. 179,103 Lobbying 258,182 Professional fundraising services. See Part IV. line 17 258 182. 83,293 83,293 Investment management fees _____ Other. (If line 11g amount exceeds 10% of line 25, 11,060,934 7,827,986 1,092,130 column (A) amount, list line 11g expenses on Sch O.) 2,140,818. Advertising and promotion 12 275,705. 9,886,308 8,133,504, 1,477,099. 13 Office expenses 78,419. 400,643 287,534, 34,690. Information technology 14 15 Royalties 868,048 627,675 69,189 171,184. 16 Occupancy 250.984 1,899,734 1,211,530, 437,220. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 770,109 538,390 66,331 165,388. Conferences, conventions, and meetings 19 44,823 44,823 20 14.753.260 11,950,141 1,770,391 1,032,728. 21 Payments to affiliates 626,597 435,471. 73,437 117,689. 22 Depreciation, depletion, and amortization 6,034. 135,429 22,126. 107,269 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) OTHER EXPENSES 878,413. 337,945. 257,265. 283,203. а b C d е All other expenses Total functional expenses. Add lines 1 through 24e 11,104,322. 75,964,479 57,627,745, 7,232,412. 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

20,833,408

13,351,056.

5,100,882.

2,381,470

Check here X if following SOP 98-2 (ASC 958-720)

AMERICAN HEART ASSOCIATION, INC.

Form 990 (2012) DBA GREATER SOUTHEAST AFFILIATE 13-5613797 Page **11**

Part X | Balance Sheet Check if Schedule O contains a response to any question in this Part X (A) (B) Beginning of year End of year 11,132,104. 14,978,669. 1 Cash - non-interest-bearing 1 <10.674.692.> Savings and temporary cash investments <6,336,912. 2 2 15,421,430. 16,356,312. 3 Pledges and grants receivable, net 3 3,957,278. 2,536,784. 4 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L 6 7 7 Notes and loans receivable, net Inventories for sale or use 8 8 95,901, 98,169. Prepaid expenses and deferred charges 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D _____ 10a 22,377,611. b Less: accumulated depreciation 10b 11,907,305. 10,951,232. 10,470,306. 10c Investments - publicly traded securities 34,663,052. 40,442,455. 11 11 899,000. 899,000. 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 31,347,756 33,731,152. Other assets. See Part IV, line 11 15 15 108,838,155. 102,130,841. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 24,343,536. 24,063,051. Accounts payable and accrued expenses 17 17 16,151,493. 15,864,711. 18 Grants payable 18 19 19 Deferred revenue Tax-exempt bond liabilities 1,380,000. 1,205,000. 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 iabilities Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties _____ 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 3,768,733. 3 414 875. 25 45,643,762. 26 44,547,637. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 12,563,642, 17,702,893. 27 Unrestricted net assets 27 24,929,304. 26,699,058. Temporarily restricted net assets 28 Permanently restricted net assets 18,994,133. 19,888,567. 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 32 56,487,079. 64,290,518. 33 Total net assets or fund balances 33 102,130,841, 108,838,155. 34 34 Total liabilities and net assets/fund balances

Form 990 (2012)

Form	1990 (2012) DBA GREATER SOUTHEAST AFFILIATE	13-5613/97		Pag	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	81	,109	679.
2	Total expenses (must equal Part IX, column (A), line 25)	2			479.
3	Revenue less expenses. Subtract line 2 from line 1	3	5	,145	200.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			079.
5	Net unrealized gains (losses) on investments	5	2	,512	582.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		145	657.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	64	,290	518.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat				
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir				
	Act and OMB Circular A-133?	-	За		Х

b If "Yes," 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

Form **990** (2012)

3b

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2012
Open to Public Inspection

Name of the organization

AMERICAN HEART ASSOCIATION, INC.

Employer identification number

DBA GREATER SOUTHEAST AFFILIATE 13-5613797

Pai	organizations Maintaining Donor Advised organization answered "Yes" to Form 990, Part IV, line		s or Accounts. Complete if the
	organization answered Tes to Form 550, Fartiv, inte	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advi	ised 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 ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pai			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of an hi	istorically important land area
	Protection of natural habitat	Preservation of a cer	rtified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	n of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struc	ture
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	ne organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located	
5	Does the organization have a written policy regarding the peri	iodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and e		
8	Does each conservation easement reported on line 2(d) above	•	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	·	
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes	s the organization's accounting for
Do	conservation easements.	f Art Historical Transuras or (Other Similar Assets
Pai	Till Organizations Maintaining Collections of Complete if the organization answered "Yes" to Form 9		Julei Sillilai Assets.
па	If the organization elected, as permitted under SFAS 116 (AS		·
	historical treasures, or other similar assets held for public exh		ance of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, ed	ducation, or research in furtherance of pi	ublic service, provide the following amounts
	relating to these items:		. σ
	(i) Revenues included in Form 990, Part VIII, line 1		
_			
2	If the organization received or held works of art, historical trea		aı gaırı, provide
_	the following amounts required to be reported under SFAS 11		•
a	Revenues included in Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		🏲 🠧

	Schedule D (Form 990) 2012 DBA GREATER SOUTHEAST AFFILIATE 13-5613797							Page 2
Pai	t III Organizations Maintaining C	collections of A	rt, Historical T	reasures, o	r Other S	Similar Asse	ts(contin	ued)
3	Using the organization's acquisition, accessi	on, and other record	ds, check any of the	e following that	are a signi	ficant use of its	collection	ı items
	(check all that apply):							
а	Public exhibition	c	l Loan or ex	change prograi	ms			
b	Scholarly research	e	Other					
С	Preservation for future generations							
4	Provide a description of the organization's co						t XIII.	
5	During the year, did the organization solicit o		•	•			7	
	to be sold to raise funds rather than to be ma						⊻ Yes	No_
Pai	t IV Escrow and Custodial Arran		ete if the organizati	on answered "`	Yes" to For	m 990, Part IV,	line 9, or	
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi						٦	
	on Form 990, Part X?						⊻ Yes	└── No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing table:		ı			
							Amount	
	Beginning balance					1c		
	Additions during the year					1d		
e	Distributions during the year					1e		
1	Ending balance	000 Dart V line				1f	Yes	
	Did the organization include an amount on Fo							No
	If "Yes," explain the arrangement in Part XIII. t V Endowment Funds. Complete in							
	2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1	(a) Current year	(b) Prior year			Three years back	(a) Four	vears hack
12	Beginning of year balance	(a) Ourient year	(b) i noi yeai	(C) Two yours	y buok (u)	THI GO YOUTO DUOK	(e) rour	youro buok
	Contributions							
	Net investment earnings, gains, and losses							
	Grants or scholarships							
	Other expenditures for facilities							
·	and programs							
f	Administrative expenses							
a	End of year balance							
2	Provide the estimated percentage of the curr	rent vear end baland	ce (line 1a. column	(a)) held as:				
	Board designated or quasi-endowment	•	%	(,,				
	Permanent endowment	%	_					
	Temporarily restricted endowment	 -%						
	The percentages in lines 2a, 2b, and 2c shou	ıld equal 100%.						
За	Are there endowment funds not in the posse		ation that are held	and administer	ed for the	organization		
	by:	-				-		Yes No
	(i) unrelated organizations						3a(i)	Х
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(ii), are the related organizations						3b	
4	Describe in Part XIII the intended uses of the	organization's endo	owment funds.				,	
Pai	t VI Land, Buildings, and Equipm	ent. See Form 990), Part X, line 10.					
	Description of property	(a) Cost or o	other (b) Cos	st or other	(c) Accu		(d) Book	value
		basis (investr	ment) basis	s (other)	depred	ciation		
1a	Land			3,995,490.			3,	995,490.
	Buildings		1	0,233,316.	4	,235,189.	5,	998,127.
	Leasehold improvements			138,206.		106,767.		31,439.
d	Equipment			8,010,599.	7	,565,349.		445,250.
e	Other							
Total	I. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line	10(c).)			10,	470,306.

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 DBA GREATER SOUTH			13-5613797	Page 3
Part VII Investments - Other Securities. Se	e Form 990, Part X, lin	e 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va	lluation: Cost or end-of-year mark	et value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
(I)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related. Se	ee Form 990, Part X, li	ne 13.		
(a) Description of investment type	(b) Book value		lluation: Cost or end-of-year mark	et value
(1)			-	
(2)				
(3)				
<u>(4)</u>				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				
Part IX Other Assets. See Form 990, Part X, line	15.			
(a)	Description		(b) Boo	k value
(1) BENEFICIAL INTEREST IN PERPETUAL TRUST	rs		18	8,163,426.
(2) SPLIT INTEREST AGREEMENTS			1!	5,567,726.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line			>	3,731,152.
Part X Other Liabilities. See Form 990, Part X,	line 25.			
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) CHARITABLE GIFT ANNUITIES		2,456,790.		
(3) CAPITAL LEASE OBLIGATIONS		155,029.		
(4) POST-RETIREMENT BENEFITS		795,386.		
(5) RENT DEFERRALS/AMORTIZATION		7,670.		
(5)		-,		
<u>(6)</u>				
(7)				
(8)				
(9)				
(10)				
(11)				
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.) ▶	3,414,875.		

2. FIN 48 (ASC 740) Footnote. In Part XIII, 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). Check here if the text of the footnote has been provided in Part XIII .

ASSOCIATION'S EXEMPT PURPOSE IS SUBJECT TO TAX UNDER IRC SECTION 511. THE

Sche	dule D (Form 990) 2012 DBA GREATER SOUTHEAST AFFILIATE			13-5613797	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statem	ents With	Revenue per R	eturn	
1	Total revenue, gains, and other support per audited financial statements			1	79,438,654.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	. 2a	2,512,582.		
b	Donated services and use of facilities	. 2b	673,674.		
С	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)	. 2d			
е	Add lines 2a through 2d			2e	3,186,256.
3	Subtract line 2e from line 1			3	76,252,398.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	83,293.		
b	Other (Describe in Part XIII.)	4b	4,773,988.		
С	Add lines 4a and 4b			4c	4,857,281.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	81,109,679.
Par	t XII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per	Return	
1	Total expenses and losses per audited financial statements			1	71,635,215.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	. 2a	673,674.		
b	Prior year adjustments	. 2b			
С	Other losses	. 2c			
d	Other (Describe in Part XIII.)	. 2d	<145,657.	>	
е	Add lines 2a through 2d			2e	528,017.
3	Subtract line 2e from line 1			3	71,107,198.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	83,293.		
b	Other (Describe in Part XIII.)	4b	4,773,988.		
С	Add lines 4a and 4b			4c	4,857,281.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	75,964,479.
Par	t XIII Supplemental Information				
Comp	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	III, lines 1a ar	nd 4; Part IV, lines 1	b and 2b; Part	V, line 4; Part
X, line	e 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part t	o provide any	additional informat	ion.	
PART	X, LINE 2: THE ASSOCIATION IS EXEMPT FROM FEDERAL INCOME TAX	ES ON			
RELA	TED INCOME UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE	(IRC) OF			
1986	, AS AMENDED, AS AN ORGANIZATION DESCRIBED IN IRC SECTION 501	(C)(3).			
FURT	HER, THE ASSOCIATION HAS BEEN CLASSIFIED AS AN ORGANIZATION T	HAT IS			
NOT	A PRIVATE FOUNDATION UNDER IRC SECTION 509(A) AND, AS SUCH,				
CONT	RIBUTIONS TO THE ASSOCIATION QUALIFY FOR DEDUCTION AS CHARITA	BLE			
CONT	RIBUTTONS HOWEVER INCOME GENERATED FROM ACTIVITIES UNRELATED	שאים חים כ			

Schedule D (Form 990) 2012

DBA GREATER SOUTHEAST AFFILIATE Schedule D (Form 990) 2012 13-5613797 Page 5 Part XIII | Supplemental Information (continued) ASSOCIATION DID NOT HAVE ANY MATERIAL UNRELATED BUSINESS INCOME TAX LIABILITY FOR THE YEARS ENDED JUNE 30, 2013 AND 2012. THE ASSOCIATION BELIEVES THAT IT HAS TAKEN NO SIGNIFICANT UNCERTAIN TAX POSITIONS. PART XI, LINE 4B - OTHER ADJUSTMENTS: SALES OF EDUCATIONAL MATERIALS MANAGED AT NATIONAL CORPORATE LEVEL 4,769,848. AUTO DONATION EXPENSE 4,140. TOTAL TO SCHEDULE D, PART XI, LINE 4B 4,773,988. PART XII, LINE 2D - OTHER ADJUSTMENTS: POST-RETIREMENT BENEFIT (ASC 715) ADJUSTMENT -145,657. PART XII, LINE 4B - OTHER ADJUSTMENTS: AUTO DONATION EXPENSE 4,140. SALES OF EDUCATIONAL MATERIALS MANAGED AT NATIONAL CORPORATE LEVEL 4,769,848. TOTAL TO SCHEDULE D, PART XII, LINE 4B 4,773,988. SCHEDULE D, PART XIII, LINE 2D AND PART XI, LINE 8 EFFECT OF ADOPTION OF FASB STATEMENT NO 158 (ASC 715) FASB STATEMENT 158 (ASC 715) REQUIRES EMPLOYERS TO FULLY RECOGNIZE THE OVERFUNDED OR UNDERFUNDED POSITIONS (THE DIFFERENCE BETWEEN THE FAIR VALUE OF PLAN ASSETS AND THE BENEFIT OBLIGATION) OF DEFINED BENEFIT PENSION. RETIREE HEALTHCARE AND OTHER POSTRETIREMENT PLANS IN THEIR BALANCE SHEETS. THE EFFECT OF THIS CHANGE ON THE GREATER SOUTHEAST AFFILIATE IS \$145,657 FOR FISCAL YEAR ENDED JUNE 30, 2013.