

Form **990**

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

OMB No. 1545-0047

2013

Department of the Treasury
Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.

Open to Public Inspection

Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2013 calendar year, or tax year beginning **AUG 1, 2013** and ending **JUL 31, 2014**

| | | | |
|--|--|---|---|
| B Check if applicable: <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization SUZUKI ASSOCIATION OF THE AMERICAS | | D Employer identification number 22-2192686 |
| | Doing Business As | | E Telephone number 303-444-0948 |
| | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | G Gross receipts \$ 1,191,746. |
| | 2465 CENTRAL AVE. | 204 | H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | City or town, state or province, country, and ZIP or foreign postal code BOULDER, CO 80301 | | H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) |
| F Name and address of principal officer: PAMELA BRASCH SAME AS C ABOVE | | H(c) Group exemption number ▶ | |
| I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 | | | |
| J Website: ▶ WWW.SUZUKIASSOCIATION.ORG | | | |
| K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ | | L Year of formation: 1972 M State of legal domicile: DE | |

Part I Summary

| | | | |
|---|--|---------------------------|----------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: PROMOTION OF MUSIC EDUCATION THROUGH THE SUZUKI METHOD OF INSTRUCTION. | | |
| | 2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. | | |
| | 3 Number of voting members of the governing body (Part VI, line 1a) | 3 | 10 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 10 |
| | 5 Total number of individuals employed in calendar year 2013 (Part V, line 2a) | 5 | 19 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 90 |
| | 7 a Total unrelated business revenue from Part VIII, column (C), line 12 | 7a | 66,182. |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | <15,453.> | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | Current Year |
| | 9 Program service revenue (Part VIII, line 2g) | 40,596. | 59,718. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 910,406. | 1,072,982. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 28,167. | 32,561. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 11,425. | 14,494. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 990,594. | 1,179,755. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 28,391. | 72,070. |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 0. | 0. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 430,342. | 454,604. |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ 50,819. | 0. | 0. |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 522,880. | 646,589. |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 981,613. | 1,173,263. |
| 19 Revenue less expenses. Subtract line 18 from line 12 | 8,981. | 6,492. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Current Year | End of Year |
| | 21 Total liabilities (Part X, line 26) | 1,291,842. | 1,331,574. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 23,996. | 29,432. |
| | | 1,267,846. | 1,302,142. |

Part II Signature Block

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III []

1 Briefly describe the organization's mission:

THE SUZUKI ASSOCIATION OF THE AMERICAS ASPIRES TO IMPROVE THE QUALITY OF LIFE IN THE AMERICAS THROUGH SUZUKI EDUCATION. WE SEEK TO CREATE A LEARNING COMMUNITY, WHICH EMBRACES EXCELLENCE AND NURTURES THE HUMAN SPIRIT.

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
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, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 864,554. including grants of \$ 72,070.) (Revenue \$ 1,013,319.)
SUZUKI ASSOCIATION OF THE AMERICAS, INC. (THE ASSOCIATION) IS A NOT-FOR-PROFIT COALITION OF TEACHERS, PARENTS, EDUCATORS, AND OTHERS WHO ARE INTERESTED IN MAKING MUSIC EDUCATION AVAILABLE TO ALL CHILDREN. THE ASSOCIATION PROVIDES PROGRAMS WITH SERVICES TO MEMBERS THROUGHOUT NORTH AND SOUTH AMERICA. WITH OTHER REGIONAL ASSOCIATIONS, THE ASSOCIATION PROMOTES AND SUPPORTS THE SPREAD OF DR. SUZUKI'S TALENT EDUCATION. IN ADDITION TO PUBLISHING THE AMERICAN SUZUKI JOURNAL, A QUARTERLY MAGAZINE FOR MEMBERS, THE ASSOCIATION OFFERS TEACHER DEVELOPMENT PROGRAMS, SCHOLARSHIPS, CONFERENCES, WORKSHOPS, AND RETREATS.

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

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

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)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors?</i> | | X |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | X |
| 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? <i>If "Yes," complete Schedule C, Part II</i> | | X |
| 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? <i>If "Yes," complete Schedule C, Part III</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part I</i> | | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part IV</i> | | X |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | | X |
| 11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable. | | |
| a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Part VII</i> | | X |
| c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part IX</i> | | X |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | | X |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> | X | |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | | X |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> | X | |
| 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, line 10? <i>If "Yes," complete Schedule F, Part V</i> | | |

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|--|-----|----|
| 21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | | X |
| 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | X | |
| 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 | | X |
| 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 25a | | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | | X |
| 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II | | X |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III | | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | | X |
| b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | | X |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | | X |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | X | |
| 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | | X |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V

| | | Yes | No |
|--|--|-----|----|
| 1a | Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable | | |
| | 1a | 27 | |
| 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 reportable gaming (gambling) winnings to prize winners? | X | |
| | 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 | 19 | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | X | |
| | 2b | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | X | |
| | 3a | | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O | X | |
| | 3b | | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | | X |
| | 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 Accounts. | | |
| | 4b | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | X |
| | 5a | | |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | X |
| | 5b | | |
| c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | |
| | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | | X |
| | 6a | | |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | | |
| | 6b | | |
| 7 Organizations that may receive deductible contributions under section 170(c). | | | |
| a | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | | X |
| | 7a | | |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | | |
| | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | | X |
| | 7c | | |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | | |
| | 7d | | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | X |
| | 7e | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | X |
| | 7f | | |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | | |
| | 7g | | |
| h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | | |
| | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | |
| | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | |
| | 9a | | |
| a | 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: | | |
| | 10a | | |
| a | 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: | | |
| | 11a | | |
| a | Gross income from members or shareholders | | |
| | 11a | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | |
| | 11b | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | | |
| | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | |
| | 12b | | |

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response 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 or note to any line 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 1a 10 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. | | |
| b | Enter the number of voting members included in line 1a, above, who are independent 1b 10 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | | X |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | X |
| 6 | Did the organization have members or stockholders? | X | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | X | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a | The governing body? | X | |
| b | Each committee with authority to act on behalf of the governing body? | | X |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | X |

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? | X | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | X | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | X | |
| 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 | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | X | |
| 13 | Did the organization have a written whistleblower policy? | X | |
| 14 | Did the organization have a written document retention and destruction policy? | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a | The organization's CEO, Executive Director, or top management official | X | |
| b | Other officers or key employees of the organization | | X |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | | |

Section C. Disclosure

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

Check if Schedule O contains a response or note to any line 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.

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

| (A) Name and Title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|---|---|---|-----------------------|---------|--------------|------------------------------|--------|--|---|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| (1) MARILYN KESLER CHAIR | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (2) SARAH BYLANDER MONTZKA CHAIR ELECT | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (3) FRANK VIOLA SECRETARY | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (4) PATRICIA PURCELL TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (5) MARGOT JEWELL TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (6) JOAN KRZYWICKI TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (7) SUSAN BAER TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (8) ROLANDO FREITAG TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (9) LUCY SHAW TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (10) FRANCIS GREEN TRUSTEE | 2.00 | X | | | | | | 0. | 0. | 0. |
| (11) PAMELA BRASCH EXECUTIVE DIRECTOR | 40.00 3.00 | | | X | | | | 95,519. | 0. | 11,863. |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (do not check more than one box, unless person is both an officer and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W-2/1099-MISC) | (E) Reportable compensation from related organizations (W-2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|--|--|-----------------------|---------|--------------|------------------------------|---------|---|--|---|
| | | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
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| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 1b Sub-total | | | | | | | 95,519. | 0. | 11,863. | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | 0. | 0. | 0. | |
| d Total (add lines 1b and 1c) | | | | | | | 95,519. | 0. | 11,863. | |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | | X |
| 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | | X |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person | | X |

Section B. Independent Contractors

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

| (A) Name and business address | (B) Description of services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| NONE | | |
| | | |
| | | |
| | | |

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512 - 514 | |
|---|---|---|---|---|---|--|---------|
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a | Federated campaigns | | | | | |
| | b | Membership dues | | | | | |
| | c | Fundraising events | | | | | |
| | d | Related organizations | | | | | |
| | e | Government grants (contributions) | | | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f 59,718. | | | | |
| | g | Noncash contributions included in lines 1a-1f: \$ | | | | | |
| | h | Total. Add lines 1a-1f | | 59,718. | | | |
| Program Service Revenue | 2 a | MEMBERSHIP DUES | Business Code 611600 | 542,527. | 542,527. | | |
| | b | BIENNIAL CONFERENCE | 611600 | 290,618. | 284,818. | 5,800. | |
| | c | COURSE REGISTRATION | 611600 | 111,090. | 111,090. | | |
| | d | PUBLICATION ADVERTISIN | 611600 | 60,382. | | 60,382. | |
| | e | INSTITUTES | 611600 | 59,788. | 59,788. | | |
| | f | All other program service revenue | 611600 | 8,577. | 8,577. | | |
| | g | Total. Add lines 2a-2f | | 1,072,982. | | | |
| | Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | | 32,561. | | 32,561. |
| 4 | | Income from investment of tax-exempt bond proceeds | | | | | |
| 5 | | Royalties | | 7,975. | | 7,975. | |
| 6 a | | Gross rents | (i) Real (ii) Personal | | | | |
| | | Less: rental expenses | | | | | |
| | | Rental income or (loss) | | | | | |
| | | Net rental income or (loss) | | | | | |
| 7 a | | Gross amount from sales of assets other than inventory | (i) Securities (ii) Other | | | | |
| | | Less: cost or other basis and sales expenses | | | | | |
| | | Gain or (loss) | | | | | |
| | | Net gain or (loss) | | | | | |
| 8 a | | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | a | | | | |
| | | Less: direct expenses | b | | | | |
| | | Net income or (loss) from fundraising events | | | | | |
| 9 a | | Gross income from gaming activities. See Part IV, line 19 | a | | | | |
| | Less: direct expenses | b | | | | | |
| | Net income or (loss) from gaming activities | | | | | | |
| 10 a | Gross sales of inventory, less returns | | 18,510. | | | | |

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).

Check if Schedule O contains a response or note to any line in this Part IX

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | | | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 | 9,157. | 9,157. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | 62,913. | 62,913. | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 110,895. | 60,993. | 38,813. | 11,089. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 289,478. | 178,599. | 81,931. | 28,948. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 2,599. | 1,706. | 633. | 260. |
| 9 Other employee benefits | 22,109. | 13,774. | 6,130. | 2,205. |
| 10 Payroll taxes | 29,523. | 17,714. | 8,857. | 2,952. |
| 11 Fees for services (non-employees): | | | | |
| a Management | 1,280. | | 1,280. | |
| b Legal | 31,460. | | 31,460. | |
| c Accounting | | | | |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | | | | |
| f Investment management fees | | | | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 65,628. | 61,628. | 4,000. | |
| 12 Advertising and promotion | 1,065. | 1,065. | | |
| 13 Office expenses | 69,087. | 56,771. | 10,155. | 2,161. |
| 14 Information technology | 4,332. | | 4,332. | |
| 15 Royalties | 2,549. | 2,549. | | |
| 16 Occupancy | 62,974. | 52,965. | 6,900. | 3,109. |
| 17 Travel | 179,589. | 150,159. | 29,430. | |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | 48,719. | 47,898. | 821. | |
| 20 Interest | | | | |
| 21 Payments to affiliates | 41,118. | 40,118. | 1,000. | |
| 22 Depreciation, depletion, and amortization | 1,230. | | 1,230. | |
| 23 Insurance | 3,314. | 1,411. | 1,808. | 95. |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | 82,983. | 82,983. | | |

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

| | | (A) Beginning of year | | (B) End of year |
|--|-------------------------|---|------------|--------------------|
| Assets | 1 | 260,536. | 1 | 250,046. |
| | 2 | 46,055. | 2 | 37,145. |
| | 3 | | 3 | |
| | 4 | 15,323. | 4 | 10,989. |
| | 5 | | 5 | |
| | 6 | | 6 | |
| | 7 | | 7 | |
| | 8 | 35,302. | 8 | 28,697. |
| | 9 | 6,410. | 9 | 6,420. |
| | 10a | 41,530. | | |
| | 10b | 39,738. | | |
| | 10c | 3,022. | 10c | 1,792. |
| | 11 | 925,194. | 11 | 996,485. |
| | 12 | | 12 | |
| | 13 | | 13 | |
| | 14 | | 14 | |
| 15 | | 15 | | |
| 16 | 1,291,842. | 16 | 1,331,574. | |
| Liabilities | 17 | 13,700. | 17 | 21,621. |
| | 18 | | 18 | |
| | 19 | 10,296. | 19 | 7,811. |
| | 20 | | 20 | |
| | 21 | | 21 | |
| | 22 | | 22 | |
| | 23 | | 23 | |
| | 24 | | 24 | |
| | 25 | | 25 | |
| | 26 | 23,996. | 26 | 29,432. |
| | Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | |
| 27 | | 1,256,536. | 27 | 1,290,832. |
| 28 | | 11,310. | 28 | 11,310. |
| 29 | | | 29 | |
| Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | | |
| | | 30 | | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI

| | | | |
|----|--|----|------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 1,179,755. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 1,173,263. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 6,492. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 1,267,846. |
| 5 | Net unrealized gains (losses) on investments | 5 | 27,804. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | 0. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 1,302,142. |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

| | | Yes | No |
|----|---|-----|----|
| 1 | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | X |
| 2b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| 2c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | X | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | | X |
| 3b | 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 | | |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | | | | | | |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | | | | | | |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | |
| 6 Public support. Subtract line 5 from line 4. | | | | | | |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|--|----------|----------|----------|----------|----------|--------------------------|
| 7 Amounts from line 4 | | | | | | |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | | | | | | |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | | | | | | |
| 11 Total support. Add lines 7 through 10 | | | | | | |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | |
| 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|---|----|--------------------------|
| 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) | 14 | % |
| 15 Public support percentage from 2012 Schedule A, Part II, line 14 | 15 | % |
| 16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, explain in Part IV how the organization | | |

Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 42,501. | 48,099. | 55,086. | 40,596. | 59,718. | 246,000. |
| 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 934,119. | 847,481. | 1085999. | 864,430. | 1025310. | 4757339. |
| 3 Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 6 Total. Add lines 1 through 5 | 976,620. | 895,580. | 1141085. | 905,026. | 1085028. | 5003339. |
| 7a Amounts included on lines 1, 2, and 3 received from disqualified persons | 7,852. | 14,373. | 10,796. | 34,832. | 21,230. | 89,083. |
| b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | 11,017. | 11,017. |
| c Add lines 7a and 7b | 7,852. | 14,373. | 10,796. | 34,832. | 32,247. | 100,100. |
| 8 Public support (Subtract line 7c from line 6.) | | | | | | 4903239. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) 2013 | (f) Total |
|---|----------|----------|----------|----------|----------|-----------|
| 9 Amounts from line 6 | 976,620. | 895,580. | 1141085. | 905,026. | 1085028. | 5003339. |
| 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 26,331. | 24,154. | 26,024. | 28,167. | 40,536. | 145,212. |
| b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | | | | | | |
| c Add lines 10a and 10b | 26,331. | 24,154. | 26,024. | 28,167. | 40,536. | 145,212. |
| 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on | | | | | | |
| 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 9,812. | 7,935. | 9,079. | | | 26,826. |
| 13 Total support. (Add lines 9, 10c, 11, and 12.) | 1012763. | 927,669. | 1176188. | 933,193. | 1125564. | 5175377. |

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

Section C. Computation of Public Support Percentage

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.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

SUZUKI ASSOCIATION OF THE AMERICAS

Employer identification number

22-2192686

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

| | (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 writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

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

- 1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space
- 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |

- 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4 Number of states where property subject to conservation easement is located ▶ _____
- 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____
- 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____
- 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a Public exhibition, b Scholarly research, c Preservation for future generations, d Loan or exchange programs, e Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

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

- c Beginning balance, d Additions during the year, e Distributions during the year, f Ending balance

Table with 2 columns: Description, Amount. Rows 1c, 1d, 1e, 1f.

2a Did the organization include an amount on Form 990, Part X, line 21?

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows 1a-1g.

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

- a Board designated or quasi-endowment %, b Permanent endowment %, c Temporarily restricted endowment %

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

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

- (i) unrelated organizations, (ii) related organizations

Table with 2 columns: Yes, No. Rows 3a(i), 3a(ii), 3b.

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: Description of property, (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows 1a Land, 1b Buildings.

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|--|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |

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

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|-------------------------------|----------------|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |

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

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|-----------------|----------------|
| (1) | |
| (2) | |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |

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

Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---------------------------------|----------------|
| (1) Federal income taxes | |
| (2) | |
| (3) | |
| (4) | |

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

| | | | | |
|---|---|----|------------|------------|
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 1,207,559. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| a | Net unrealized gains on investments | 2a | 27,804. | |
| b | Donated services and use of facilities | 2b | | |
| c | Recoveries of prior year grants | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | 2e | 27,804. | |
| 3 | Subtract line 2e from line 1 | 3 | 1,179,755. | |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | 4c | 0. | |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 1,179,755. | |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

| | | | | |
|---|--|----|------------|------------|
| 1 | Total expenses and losses per audited financial statements | | 1 | 1,173,263. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | | |
| a | Donated services and use of facilities | 2a | | |
| b | Prior year adjustments | 2b | | |
| c | Other losses | 2c | | |
| d | Other (Describe in Part XIII.) | 2d | | |
| e | Add lines 2a through 2d | 2e | 0. | |
| 3 | Subtract line 2e from line 1 | 3 | 1,173,263. | |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | |
| c | Add lines 4a and 4b | 4c | 0. | |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 1,173,263. | |

Part XIII Supplemental Information.

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

PART X, LINE 2:

THE ASSOCIATION IS ORGANIZED AS A NONPROFIT CORPORATION AND
 HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE (IRS) AS EXEMPT FROM
 FEDERAL INCOME TAXES UNDER SECTION 501(A) OF THE INTERNAL REVENUE CODE AS
 AN ORGANIZATION DESCRIBED IN SECTION 501(C)(3), QUALIFIES FOR THE
 CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION 170(B)(1)(A)(VIII), AND
 HAS BEEN DETERMINED NOT TO BE A PRIVATE FOUNDATION UNDER SECTION

Part XIII Supplemental Information *(continued)*

THE ASSOCIATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN AFFECTING ITS ANNUAL FILING REQUIREMENTS, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE ASSOCIATION WOULD RECOGNIZE FUTURE ACCRUED INTEREST AND PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AND LIABILITIES IN INCOME TAX EXPENSE IF SUCH INTEREST AND PENALTIES ARE INCURRED.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

Employer identification number

SUZUKI ASSOCIATION OF THE AMERICAS

22-2192686

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

| (a) Region | (b) Number of offices in the region | (c) Number of employees, agents, and independent contractors in region | (d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region) | (e) If activity listed in (d) is a program service, describe specific type of service(s) in region | (f) Total expenditures for and investments in region |
|-----------------------------------|-------------------------------------|--|---|--|--|
| CENTRAL AMERICA AND THE CARIBBEAN | 0 | 0 | PROGRAM SERVICE | SCHOLARSHIPS AND ASSISTANCE FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND | 3,827. |
| NORTH AMERICA | 0 | 0 | PROGRAM SERVICE | SCHOLARSHIPS AND ASSISTANCE FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND | 4,117. |
| SOUTH AMERICA | 0 | 0 | PROGRAM SERVICE | SCHOLARSHIPS AND ASSISTANCE FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND | 51,969. |
| EAST ASIA AND THE PACIFIC | 0 | 0 | PROGRAM SERVICE | SCHOLARSHIPS AND ASSISTANCE FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND | 3,000. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

ance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

if additional space is needed.

| (b) Region | (c) Number of recipients | (d) Amount of cash grant | (e) Manner of cash disbursement | (f) Amount of non-cash assistance | (g) Description of non-cash assistance | (h) Method of valuation (book, FMV, appraisal, other) |
|--|--------------------------|--------------------------|---------------------------------|-----------------------------------|--|---|
| N, CENTRAL AMERICA AND THE CARIBBEAN | 10 | 3,827. | | 0. | | |
| N, NORTH AMERICA | 7 | 4,117. | | 0. | | |
| N, SOUTH AMERICA | 52 | 51,969. | | 0. | | |
| N, EAST ASIA AND THE PACIFIC | 1 | 3,000. | | 0. | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

SUZUKI ASSOCIATION OF THE AMERICAS (SAA) PROVIDES FINANCIAL SUPPORT FOR TEACHERS WISHING TO BEGIN OR FURTHER THEIR TRAINING AS SUZUKI MUSIC TEACHERS. ALL APPLICANTS APPLY THROUGH AN ONLINE PROCESS, PRESENTING A PERFORMANCE VIDEO, STATEMENT OF INTENTION, AND NEED TWO LETTERS OF RECOMMENDATION FROM PROFESSIONAL CONTACTS. THE MATERIALS ARE ANONYMOUSLY REVIEWED BY A PANEL OF PROFESSIONAL TEACHERS/MUSICIANS. ALL SCHOLARSHIPS ARE SENT TO THE ORGANIZATION OR COUNTRY ASSOCIATION HOSTING THE TEACHER TRAINING EVENT AND ARE SPECIFICALLY DESIGNATED TO BE USED BY THE SCHOLARSHIP RECIPIENTS FOR A SPECIFIC UPCOMING EVENT. THE FUNDS ARE APPLIED AGAINST THE COST OF THE RECIPIENT'S PARTICIPATION. SAA TRACKS THE USE OF FUNDS BY MONITORING THE COMPLETIONS OF TRAININGS THROUGH ITS REGISTRATION SYSTEM, WHICH ALL PARTICIPANTS IN SUZUKI TRAINING COURSES ARE RECORDED ON. THE LIST OF ALL SCHOLARSHIPS AWARDED IS PUBLISHED IN THE AMERICAN SUZUKI JOURNAL ANNUALLY, WHICH KEEPS THE PROCESS OPEN AND PROVIDES ACCOUNTABILITY. SAA ALSO RECEIVES FINANCIAL REPORTS FROM THE SUZUKI ASSOCIATION OF PERU PROVIDING ACCOUNTING FOR DISTRIBUTIONS OF FUNDS THROUGHOUT THE YEAR.

PART I, LINE 3, COLUMN (E):

REGION: CENTRAL AMERICA AND THE CARIBBEAN

(E) SPECIFIC TYPES OF SERVICES IN REGION: SCHOLARSHIPS AND ASSISTANCE

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND PROGRAM
CONFERENCES.

REGION: SOUTH AMERICA

(E) SPECIFIC TYPES OF SERVICES IN REGION: SCHOLARSHIPS AND ASSISTANCE
FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND PROGRAM
CONFERENCES.

REGION: EAST ASIA AND THE PACIFIC

(E) SPECIFIC TYPES OF SERVICES IN REGION: SCHOLARSHIPS AND ASSISTANCE
FOR SUZUKI TEACHER EDUCATION, DEVELOPMENT, TRAVEL, AND PROGRAM
CONFERENCES.

assistance to individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
 If additional space is needed.

| Type of assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| FOR SUZUKI TEACHER LEVEL, AND PROGRAM | 25 | 9,157. | 0. | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

tion. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

OF THE AMERICAS (SAA) PROVIDES FINANCIAL

TERS WISHING TO BEGIN OR FURTHER THEIR TRAINING AS SUZUKI

ALL APPLICANTS APPLY THROUGH AN ONLINE PROCESS, PRESENTING

GO, STATEMENT OF INTENTION, AND NEED TWO LETTERS OF

DM PROFESSIONAL CONTACTS. THE MATERIALS ARE ANONYMOUSLY

EL OF PROFESSIONAL TEACHERS/MUSICIANS. ALL SCHOLARSHIPS

ORGANIZATION OR COUNTRY ASSOCIATION HOSTING THE TEACHER

D ARE SPECIFICALLY DESIGNATED TO BE USED BY THE

Part IV Supplemental Information

SCHOLARSHIP RECIPIENTS FOR A SPECIFIC UPCOMING EVENT. THE FUNDS ARE APPLIED AGAINST THE COST OF THE RECIPIENT'S PARTICIPATION. SAA TRACKS THE USE OF FUNDS BY MONITORING THE COMPLETIONS OF TRAININGS THROUGH ITS REGISTRATION SYSTEM, WHICH ALL PARTICIPANTS IN SUZUKI TRAINING COURSES ARE RECORDED ON. THE LIST OF ALL SCHOLARSHIPS AWARDED IS PUBLISHED IN THE AMERICAN SUZUKI JOURNAL ANNUALLY, WHICH KEEPS THE PROCESS OPEN AND PROVIDES ACCOUNTABILITY. SAA ALSO RECEIVES FINANCIAL REPORTS FROM THE SUZUKI ASSOCIATION OF PERU PROVIDING ACCOUNTING FOR DISTRIBUTIONS OF FUNDS THROUGHOUT THE YEAR.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Open to Public
Inspection

Employer identification number
22-2192686

SUZUKI ASSOCIATION OF THE AMERICAS

FORM 990, PART VI, SECTION A, LINE 6:

INDIVIDUAL MEMBERS - VOTING MEMBER: THESE MEMBERS SHALL PAY
IN FULL THE DUES AND SATISFY SUCH STANDARDS AS ESTABLISHED BY THE BOARD OF
DIRECTORS. VOTING MEMBERS ARE ENTITLED TO ALL THE RIGHTS AND PRIVILEGES OF
MEMBERSHIP, INCLUDING THE RIGHT TO VOTE AND HOLD OFFICE.

INDIVIDUAL MEMBERS NON-VOTING: THESE MEMBERS SHALL PAY IN FULL THE DUES
AND SATISFY SUCH STANDARDS AS ESTABLISHED BY THE BOARD OF DIRECTORS.
NON-VOTING MEMBERS SHALL NOT HAVE THE RIGHT TO VOTE OR HOLD OFFICE.

GROUP MEMBERS: THESE MEMBERS SHALL INCLUDE REGIONAL, PROVINCIAL, STATE,
LATIN AMERICAN, AND LOCAL SUZUKI ORGANIZATIONS. THEY SHALL PAY IN FULL THE
DUES AND SATISFY SUCH STANDARDS AS ESTABLISHED BY THE BOARD OF DIRECTORS.
THEY SHALL NOT HAVE THE RIGHT TO VOTE OR TO HOLD OFFICE.

FORM 990, PART VI, SECTION A, LINE 7A:

BOARD MEMBERS ARE APPROVED BY INDIVIDUAL VOTING MEMBERS OF THE
ASSOCIATION OR THROUGH OCCASIONAL DIRECT APPOINTMENT BY THE BOARD ONCE PER
YEAR.

FORM 990, PART VI, SECTION A, LINE 8B:

... COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF

Name of the organization

SUZUKI ASSOCIATION OF THE AMERICAS

Employer identification number

22-2192686

GOVERNING BODY FOR REVIEW PRIOR TO BEING FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

THE CONFLICT OF INTEREST POLICY COVERS THE BOARD OF DIRECTORS AND ALL STAFF. THE EXISTENCE OF ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST IS REVIEWED BY THE BOARD CHAIR OR THE FULL BOARD OF DIRECTORS IF THE CONFLICT INVOLVES A MEMBER OF THE BOARD OF DIRECTORS OR ANY KEY STAFF SO THAT SAFEGUARDS CAN BE ESTABLISHED TO PROTECT ALL PARTIES. IF CONFLICTS ARE DETERMINED, THE PERSON WITH THE CONFLICT IS EXCLUDED FROM THE MEETING/DECISION AND WILL REFRAIN FROM VOTING ON THE MATTER. DECISIONS ON CONFLICT OF INTEREST MATTERS REST IN THE SOLE DISCRETION OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE DIRECTOR'S COMPENSATION IS DETERMINED BY THE BOARD OF DIRECTORS THROUGH DELIBERATIONS AND REASONABLENESS CONSIDERATIONS. COMPARATIVE DATA IS USED DURING THE DELIBERATIONS INCLUDING GUIDESTAR FIGURES, CANPO AND ASAE PUBLICATIONS. BOARD MEMBERS ALSO COMPARE INFORMATION WITH SIMILAR NATIONAL AND INTERNATIONAL MUSIC EDUCATION ORGANIZATIONS TO DETERMINE COMPENSATION LEVELS.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF

Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

is listed in Parts II, III, or IV of this schedule.

Organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

ties (iii) royalties or (iv) rent from a controlled entity

ion to related organization(s)

ion from related organization(s)

r for related organization(s)

related organization(s)

ization(s)

ization(s)

ed organization(s)

ed organization(s)

or other assets to related organization(s)

or other assets from related organization(s)

embership or fundraising solicitations for related organization(s)

embership or fundraising solicitations by related organization(s)

nt, mailing lists, or other assets with related organization(s)

th related organization(s)

d organization(s) for expenses

d organization(s) for expenses

erty to related organization(s)

erty from related organization(s)

ove is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization

(b) Transaction type (a-s)

(c) Amount involved

(d) Method of determining amount involved

| | Yes | No |
|----|-----|----|
| 1a | | X |
| 1b | | X |
| 1c | | X |
| 1d | | X |
| 1e | | X |
| 1f | | X |
| 1g | | X |
| 1h | | X |
| 1i | | X |
| 1j | | X |
| 1k | | X |
| 1l | | X |
| 1m | | X |
| 1n | | X |
| 1o | | X |
| 1p | | X |
| 1q | | X |
| 1r | X | |
| 1s | | X |

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions).

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

INTERNATIONAL SUZUKI ASSOCIATION

PRIMARY ACTIVITY: PROMOTES SUZUKI EDUCATION WORLD-WIDE THROUGH ITS

REGIONAL ASSOCIATION MEMBER

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No. 1545-0087

2013

For calendar year 2013 or other tax year beginning AUG 1, 2013, and ending JUL 31, 2014.

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

| | | | | |
|--|---------------------|--|--|--|
| <p>A <input checked="" type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p> <p>C Book value of all assets at end of year <u>1,331,574.</u></p> | Print or Type | Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) SUZUKI ASSOCIATION OF THE AMERICAS Number, street, and room or suite no. If a P.O. box, see instructions. 2465 CENTRAL AVE., NO. 204 City or town, state or province, country, and ZIP or foreign postal code BOULDER, CO 80301 | <p>D Employer identification number (Employees' trust, see instructions.) 22-2192686</p> <p>E Unrelated business activity codes (See instructions.) 541800</p> | <p>F Group exemption number (See instructions.)</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p> |
|--|---------------------|--|--|--|

H Describe the organization's primary unrelated business activity. ▶ **ADVERTISING AND PROMOTION**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
 If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **PAMELA BRASCH** Telephone number ▶ **303-444-0948**

| Part I Unrelated Trade or Business Income | (A) Income | (B) Expenses | (C) Net |
|---|------------|--------------|-----------|
| 1a Gross receipts or sales | | | |
| b Less returns and allowances c Balance ▶ | 1c | | |
| 2 Cost of goods sold (Schedule A, line 7) | 2 | | |
| 3 Gross profit. Subtract line 2 from line 1c | 3 | | |
| 4a Capital gain net income (attach Form 8949 and Schedule D) | 4a | | |
| b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797) | 4b | | |
| c Capital loss deduction for trusts | 4c | | |
| 5 Income (loss) from partnerships and S corporations (attach statement) | 5 | | |
| 6 Rent income (Schedule C) | 6 | | |
| 7 Unrelated debt-financed income (Schedule E) | 7 | | |
| 8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F) | 8 | | |
| 9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G) | 9 | | |
| 10 Exploited exempt activity income (Schedule I) | 10 | | |
| 11 Advertising income (Schedule J) | 66,182. | 81,635. | <15,453.> |
| 12 Other income (See instructions; attach schedule.) | 12 | | |
| 13 Total. Combine lines 3 through 12 | 66,182. | 81,635. | <15,453.> |

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)
 (Except for contributions, deductions must be directly connected with the unrelated business income.)

| | | |
|---|------------|------------|
| 14 Compensation of officers, directors, and trustees (Schedule K) | | 14 |
| 15 Salaries and wages | | 15 |
| 16 Repairs and maintenance | | 16 |
| 17 Bad debts | | 17 |
| 18 Interest (attach schedule) | | 18 |
| 19 Taxes and licenses | | 19 |
| 20 Charitable contributions (See instructions for limitation rules.) | | 20 |
| 21 Depreciation (attach Form 4562) | 21 | |
| 22 Less depreciation claimed on Schedule A and elsewhere on return | 22a | 22b |
| 23 Depletion | | 23 |
| 24 Contributions to deferred compensation plans | | 24 |
| 25 Employee benefit programs | | 25 |
| 26 | | 26 |

Part III Tax Computation

| | | | |
|---|-----|--|----|
| 35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See instructions and: | | | |
| a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): | | | |
| (1) \$ _____ (2) \$ _____ (3) \$ _____ | | | |
| b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____ | | | |
| (2) Additional 3% tax (not more than \$100,000) \$ _____ | | | |
| c Income tax on the amount on line 34 | 35c | | 0. |
| 36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: | | | |
| <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041) | 36 | | |
| 37 Proxy tax. See instructions | 37 | | |
| 38 Alternative minimum tax | 38 | | |
| 39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies | 39 | | 0. |

Part IV Tax and Payments

| | | | |
|--|-----|--|----|
| 40a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) | 40a | | |
| b Other credits (see instructions) | 40b | | |
| c General business credit. Attach Form 3800 | 40c | | |
| d Credit for prior year minimum tax (attach Form 8801 or 8827) | 40d | | |
| e Total credits. Add lines 40a through 40d | 40e | | |
| 41 Subtract line 40e from line 39 | 41 | | 0. |
| 42 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule) | 42 | | |
| 43 Total tax. Add lines 41 and 42 | 43 | | 0. |
| 44a Payments: A 2012 overpayment credited to 2013 | 44a | | |
| b 2013 estimated tax payments | 44b | | |
| c Tax deposited with Form 8868 | 44c | | |
| d Foreign organizations: Tax paid or withheld at source (see instructions) | 44d | | |
| e Backup withholding (see instructions) | 44e | | |
| f Credit for small employer health insurance premiums (Attach Form 8941) | 44f | | |
| g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other Total | 44g | | |
| 45 Total payments. Add lines 44a through 44g | 45 | | |
| 46 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/> | 46 | | |
| 47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed | 47 | | 0. |
| 48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid | 48 | | 0. |
| 49 Enter the amount of line 48 you want: Credited to 2014 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/> | 49 | | |

Part V Statements Regarding Certain Activities and Other Information (see instructions)

| | | |
|---|-----|----|
| 1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here | Yes | No |
| 2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file. | | X |
| 3 Enter the amount of tax-exempt interest received or accrued during the tax year \$ | | |

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

| | | | | | |
|---|----|--|---|-----|----|
| 1 Inventory at beginning of year | 1 | | 6 Inventory at end of year | 6 | |
| 2 Purchases | 2 | | 7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2 | 7 | |
| 3 Cost of labor | 3 | | | | |
| 4a Additional section 263A costs (att. schedule) | 4a | | 8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization? | Yes | No |
| b Other costs (attach schedule) | 4b | | | | |
| 5 Total. Add lines 1 through 4b | 5 | | | | |

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

| |
|-----|
| (1) |
| (2) |
| (3) |
| (4) |

| 2. Rent received or accrued | | 3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule) |
|---|---|---|
| (a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%) | (b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income) | |
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| Total | 0. | Total 0. |

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **0.** (b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **0.**

Schedule E - Unrelated Debt-Financed Income (see instructions)

| 1. Description of debt-financed property | 2. Gross income from or allocable to debt-financed property | 3. Deductions directly connected with or allocable to debt-financed property | | 7. Gross income reportable (column 2 x column 6) | 8. Allocable deductions (column 6 x total of columns 3(a) and 3(b)) |
|---|---|--|---|--|---|
| | | (a) Straight line depreciation (attach schedule) | (b) Other deductions (attach schedule) | | |
| (1) | | | | | |
| (2) | | | | | |
| (3) | | | | | |
| (4) | | | | | |
| 4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) | 5. Average adjusted basis of or allocable to debt-financed property (attach schedule) | 6. Column 4 divided by column 5 | | | |
| (1) | | % | | | |
| (2) | | % | | | |
| (3) | | % | | | |
| (4) | | % | | | |
| Totals | | | Enter here and on page 1, Part I, line 7, column (A). | 0. | Enter here and on page 1, Part I, line 7, column (B). 0. |
| Total dividends-received deductions included in column 8 | | | | | 0. |

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

| 1. Name of controlled organization | 2. Employer identification number | Exempt Controlled Organizations | | | | 6. Deductions directly connected with income in column 5 |
|------------------------------------|-----------------------------------|---|-------------------------------------|---|--|--|
| | | 3. Net unrelated income (loss) (see instructions) | 4. Total of specified payments made | 5. Part of column 4 that is included in the controlling organization's gross income | | |
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |

| Nonexempt Controlled Organizations | | | | | |
|------------------------------------|---|-------------------------------------|--|--|--|
| 7. Taxable income | 8. Net unrelated income (loss) (see instructions) | 9. Total of specified payments made | 10. Part of column 9 that is included in the controlling organization's gross income | 11. Deductions directly connected with income in column 10 | |
| | | | | | |

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions)

| 1. Description of income | 2. Amount of income | 3. Deductions directly connected (attach schedule) | 4. Set-asides (attach schedule) | 5. Total deductions and set-asides (col. 3 plus col. 4) |
|--------------------------|---------------------|--|---------------------------------|---|
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | | | |
| Totals | | 0. | | 0. |

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions)

| 1. Description of exploited activity | 2. Gross unrelated business income from trade or business | 3. Expenses directly connected with production of unrelated business income | 4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7. | 5. Gross income from activity that is not unrelated business income | 6. Expenses attributable to column 5 | 7. Excess exempt expenses (column 6 minus column 5, but not more than column 4). |
|--------------------------------------|---|---|--|---|--------------------------------------|--|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals | | 0. | 0. | | | 0. |

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
|-------------------------------------|-----------------------------|-----------------------------|--|-----------------------|---------------------|---|
| (1) ADVERTISING | 66,182. | 81,635. | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals (carry to Part II, line (5)) | | 66,182. | 81,635. | <15,453.> | | 0. |

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

| 1. Name of periodical | 2. Gross advertising income | 3. Direct advertising costs | 4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7. | 5. Circulation income | 6. Readership costs | 7. Excess readership costs (column 6 minus column 5, but not more than column 4). |
|-----------------------|-----------------------------|--|--|-----------------------|---------------------|---|
| (1) | | | | | | |
| (2) | | | | | | |
| (3) | | | | | | |
| (4) | | | | | | |
| Totals from Part I | | 66,182. | 81,635. | | | 0. |
| | | Enter here and on page 1, Part I, line 11, col. (A). | Enter here and on page 1, Part I, line 11, col. (B). | | | Enter here and on page 1, Part II, line 27. |
| | | 66,182. | 81,635. | | | 0. |

FORM 990-T

NET OPERATING LOSS DEDUCTION

STATEMENT 1

| TAX YEAR | LOSS SUSTAINED | LOSS PREVIOUSLY APPLIED | LOSS REMAINING | AVAILABLE THIS YEAR |
|-----------------------------------|----------------|-------------------------|----------------|---------------------|
| 07/31/03 | 1,373. | 0. | 1,373. | 1,373. |
| 07/31/04 | 36,354. | 0. | 36,354. | 36,354. |
| 07/31/05 | 20,800. | 0. | 20,800. | 20,800. |
| 07/31/06 | 31,526. | 0. | 31,526. | 31,526. |
| 07/31/07 | 8,376. | 0. | 8,376. | 8,376. |
| 07/31/08 | 52,823. | 0. | 52,823. | 52,823. |
| 07/31/09 | 41,718. | 0. | 41,718. | 41,718. |
| 07/31/10 | 26,966. | 0. | 26,966. | 26,966. |
| 07/31/11 | 22,639. | 0. | 22,639. | 22,639. |
| 07/31/12 | 27,428. | 0. | 27,428. | 27,428. |
| 07/31/13 | 22,884. | 0. | 22,884. | 22,884. |
| NOL CARRYOVER AVAILABLE THIS YEAR | | | 292,887. | 292,887. |

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.*

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | Enter filer's identifying number |
|--|--|--|
| Type or print | Name of exempt organization or other filer, see instructions. SUZUKI ASSOCIATION OF THE AMERICAS | Employer identification number (EIN) or 22-2192686 |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions. 2465 CENTRAL AVE., NO. 204 | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. BOULDER, CO 80301 | |

Enter the Return code for the return that this application is for (file a separate application for each return)

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|-----------------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

PAMELA BRASCH

- The books are in the care of ▶ **2465 CENTRAL AVE. SUITE 204 - BOULDER, CO 80301**
Telephone No. ▶ **303-444-0948** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **MARCH 15, 2015**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **AUG 1, 2013**, and ending **JUL 31, 2014**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Information about Form 8868 and its instructions is at www.irs.gov/form8868.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | Enter filer's identifying number | |
|--|--|---|
| Type or print | Name of exempt organization or other filer, see instructions. | Employer identification number (EIN) or |
| | SUZUKI ASSOCIATION OF THE AMERICAS | 22-2192686 |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions. | Social security number (SSN) |
| | 2465 CENTRAL AVE., NO. 204 | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. | |
| | BOULDER, CO 80301 | |

Enter the Return code for the return that this application is for (file a separate application for each return) 07

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|-----------------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 (other than individual) | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

PAMELA BRASCH

- The books are in the care of ▶ **2465 CENTRAL AVE. SUITE 204 - BOULDER, CO 80301**
Telephone No. ▶ **303-444-0948** Fax No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **JUNE 15, 2015**, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **AUG 1, 2013**, and ending **JUL 31, 2014**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return