efile GRAPHIC print Submission Date - 2020-05-07 DLN: 93493128003340 OMB No. 1545-0047 **Return of Organization Exempt From Income Tax** 201 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. Department of the Open to Public ► Go to www.irs.gov/Form990 for instructions and the latest information. . Treasury Inspection Internaĺ Revenue A Fig. the 2019 calendar year, or tax year beginning 07-01-2018 , and ending 06-30-2019 D Employer identification number C Name of organization AMERICAN ASSOCIATION OF SCHOOL B Check if applicable: ☐ Address change ADMINISTRATORS 54-1999773 O Name change ☐ Initial return O Final return/terminated umber and street (or P.O. box if mail is not delivered to street address) E Telephone number O Amended return 1615 DUKE STREET Application (703) 528-0700 Pending City or town, state or province, country, and ZIP or foreign postal code ALEXANDRIA, VA 22314 **G** Gross receipts \$ 12,750,605 Name and address of principal officer: H(a) Is this a group return for DANIEL A DOMENECH ☐ Yes ✓ No subordinates? 1615 DUKE STREET Are all subordinates H(b) ALEXANDRIA, VA 22314 ☐ Yes ☐No included? Tax-exempt status: **501(c)(3)** 4947(a)(1) or 501(c) ( ) **◄** (insert no.) If "No," attach a list. (see instructions) **H(c)** Group exemption number ▶ Website: ▶ WWW.AASA.ORG L Year of formation: 2001 M State of legal domicile: VA **K** Form of organization: lacksquare Corporation lacksquare Trust lacksquare Association lacksquare Other lacksquareSummary 1 Briefly describe the organization's mission or most significant activities: AASA, THE SCHOOL SUPERINTENDENTS ASSOCIATION ADVOCATES FOR EQUITABLE ACCESS FOR ALL STUDENTS TO THE HIGHEST QUALITY PUBLIC EDUCATION, AND DEVELOPS AND SUPPORTS SCHOOL SYSTEM LEADERS Activities & Governance Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . 142 Number of independent voting members of the governing body (Part VI, line 1b) 4 142 Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 41 Total number of volunteers (estimate if necessary) . . . 6 142 Total unrelated business revenue from Part VIII, column (C), line 12 7a 491,726 7h Net unrelated business taxable income from Form 990-T, line 34 Current Year 8 Contributions and grants (Part VIII, line 1h) . 3,443,398 2.593.370 Program service revenue (Part VIII, line 2g) . 7,662,835 7,907,238 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 204,126 220,495 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 1.822.466 1,901,478 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13.132.825 12.622.581 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,914,030 5,043,371 16a Professional fundraising fees (Part IX, column (A), line 11e) . Total fundraising expenses (Part IX, column (D), line 25) ▶270,377 7,204,337 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 7.352.845 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 12,266,875 12,247,708 865,950 374,873 Revenue less expenses. Subtract line 18 from line 12 t Assets or d Balances Beginning of Current Year End of Year 18,178,498 18,665,370 Total assets (Part X, line 16) . 21 10,388,580 10,171,145 Total liabilities (Part X. line 26) . 7,789,918 8,494,225 Net assets or fund balances. Subtract line 21 from line 20 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 2020-04-26 Signature of officer Sign Here DANIEL A DOMENECH EXECUTIVE DIRECTOR Type or print name and title Print/Type preparer's name Preparer's signature Check  $\Box$  if P00369217 Paid self-employed RSM US LLP Firm's EIN > 42-0714325 Preparer Firm's address > 9801 WASHINGTONIAN BLVD STE 500 Use Only Phone no. (301) 296-3600 GAITHERSBURG, MD 20878 🛂 Yes 🗌 No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat. No. 11282Y Form 990 (2018)

	990 (2018)					Page <b>2</b>
Pa	rt III Statement of Pi	_	-			_
				ny line in this $\operatorname{\sf Part}$ $\operatorname{\sf III}$ .		🛂
1	Briefly describe the organiz					
AASA	A ADVOCATES FOR THE HIGH	EST QUALITY P	PUBLIC EDUCATION	FOR ALL STUDENTS, AN	ND DEVELOPS AND SUPPORTS	SCHOOL SYSTEM LEADERS.
2	Did the organization under	ake any signif	icant program servi	ices during the year wh	nich were not listed on	
	the prior Form 990 or 990-E If "Yes," describe these new					🗆 Yes 🗹 No
3	Did the organization cease			hanges in how it condu	icts, any program	
	services?					. 🗆 Yes 🛂 No
	If "Yes," describe these cha	naes on Scher				
4		•				
•		c)(4) organizat	tions are required to		largest program services, as r grants and allocations to othe	
4a	(Code:	) (Expenses \$	2,944,260	including grants of \$	) (Revenue \$	2,225,496 )
	PROGRAMS PROVIDE SCHOOL	. SYSTEM LEADER SUES FACING THE	RS WITH 21ST CENTUR	Y LEARNING THROUGH TH	OF CERTIFICATION AND CONSORTIA E USE OF RESEARCH DRIVEN BEST IP SKILLS, DISPOSITIONS AND EXPE	PRACTICES TO PROVIDE
4 h	(Code:	) (Expenses \$	1,393,713	including grants of \$	) (Revenue \$	1,973,651 )
4b	NATIONAL CONFERENCE ON E	DUCATION:THE	ASSOCIATION HOSTS T	HE NATIONAL CONFERENC	E ON EDUCATION ANNUALLY. THIS	CONFERENCE FEATURES NATIONALLY SMALL-GROUP MEETINGS AND PRE-
10	(Code:	) (Expenses \$	974,020	including grants of \$	) (Revenue \$	3,218,614 )
4c	MEMBER/AFFILIATE SERVICES AFFILIATES ASSOCIATIONS. TH	: THE PURPOSE OHIS PROGRAM FORVICES, AS WELL	OF THIS PROGRAM IS TO CUSES ON MAINTAININ AS PROVIDING PROFE	O COORDINATE THE ASSOCIED THE ONGOING RELATION	CIATION'S WORK WITH THE WORK ( NSHIPS WITH OUR STATE/CHARTER	
	(Code:	) (Expenses \$	895,420	including grants of \$	) (Revenue \$	)
	COMMUNICATIONS	/ (Expenses ¢	033,420	merading grants or \$	/ (Nevende \$	<u> </u>
	(Code: CHILDREN'S INITIATIVES AND	) (Expenses \$ PROGRAM DEVE	495,159 LOPMENT DEPARTMEN	including grants of \$ T	) (Revenue \$	)
	(Code: LEADERSHIP DEVELOPMENT	) (Expenses \$	353,911	including grants of \$	) (Revenue \$	90,999 )
	(Code: GOVERNANCE	) (Expenses \$	719,597	including grants of \$	) (Revenue \$	)
	(Code: PUBLIC POLICY	) (Expenses \$	517,915	including grants of \$	) (Revenue \$	)
	(Code: AWARDS	) (Expenses \$	229,834	including grants of \$	) (Revenue \$	)
	(Code: EDUCATIONAL MEETINGS	) (Expenses \$	248,854	including grants of \$	) (Revenue \$	42,747 )
	(Code: OTHER PROGRAM SERVICES	) (Expenses \$	130,553	including grants of \$	) (Revenue \$	)
4d	Other program services (	Describe in Sc	hedule O.)			
	(Expenses \$	3,591,243	including grants of	\$	) (Revenue \$	133,746)
4e	Total program service	expenses 🕨	8,903,2	236		

**Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete 1 2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? . Yes Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates 3 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? 4 Yes 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? No If "Yes," complete Schedule C, Part III . 5 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? No If "Yes," complete Schedule D, Part I . 6 Did the organization receive or hold a conservation easement, including easements to preserve open space, Nο the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II . . . 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? Nο 8 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? Nο 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, 10 Yes permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V . . . . . . . If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI. VII. IX. or X as applicable. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 11a Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total Yes assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII . . . . . . . . . . . . 11b Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total Nο assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII . . . . . . 11c 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 No 11d e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Yes Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses 11f Yes the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? 12a Yes **b** Was the organization included in consolidated, independent audited financial statements for the tax year? 12b Nο If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 No 14a **14a** Did the organization maintain an office, employees, or agents outside of the United States? . No **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 14b No at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV . . . . . . . . . . . . . . . . . Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any Nο foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . . 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to Nο or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . 16 17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, No 17 column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions) . . . Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, 18 No Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," 19 Nο **20a** Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . 20a Nο b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Nο 21 government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, 22 No column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . . . . . . . . . . . .

Par	t IV Checklist of Required Schedules (continued)		1						
			Yes	No					
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes						
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
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?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?  If "Yes," complete Schedule L, Part I	25b		No					
26	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 "Yes," complete Schedule L, Part II								
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No					
b	<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV								
_	An artiful of which a surrough or formers officer discounts to the same to consider the same to the sa	28b		No					
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No					
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M </i>	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No					
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$ ? If "Yes," complete Schedule R, Part V, line 2	35b							
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No					
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes						
Par	tV Statements Regarding Other IRS Filings and Tax Compliance	•							
	Check if Schedule O contains a response or note to any line in this Part V								
_	Establish annulus mandadis Box 2 of Famil 1000 Faton 0 15 at 11 at 12 at		Yes	No					
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 144  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes						

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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				
Se	ection A. Governing Body and Management		1	1	
1a	Enter the number of voting members of the governing body at the end of the tax year	142		Yes	No
	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	142			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation officer, director, trustee, or key employee?	onship with any other	2		No
3	Did the organization delegate control over management duties customarily performed by or undo of officers, directors or trustees, or key employees to a management company or other person?		3		No
4	Did the organization make any significant changes to its governing documents since the prior For	rm 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization'	s assets? .	5		No
6	Did the organization have members or stockholders?		6	Yes	-
7a	Did the organization have members, stockholders, or other persons who had the power to elect of members of the governing body?	or appoint one or more	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) membe persons other than the governing body?	rs, stockholders, or	7b		No
8	Did the organization contemporaneously document the meetings held or written actions underta the following:	ken during the year by			
а	The governing body?		8a	Yes	
b	Each committee with authority to act on behalf of the governing body?		8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	e reached at the	9		No
Se	ection B. Policies (This Section B requests information about policies not required by	the Internal Revenue	Code.	)	
		-		Yes	No
	Did the organization have local chapters, branches, or affiliates?		<b>10</b> a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of sucl and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
		-	105		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing form?	-	11a	Yes	
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing	body before filing the		Yes	
b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?	body before filing the		Yes Yes	
b 12a	Has the organization provided a complete copy of this Form 990 to all members of its governing form?	body before filing the	11a		
b 12a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the	body before filing the	11a 12a	Yes	
b 12a b c	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy?	body before filing the	11a 12a 12b	Yes	No
b 12a b c	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.	body before filing the	11a 12a 12b	Yes	No
b 12a b c	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?	body before filing the	11a 12a 12b 12c 13	Yes Yes Yes	No
b 12a b c 13 14	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and approach.	body before filing the	11a 12a 12b 12c 13	Yes Yes Yes	No
b 12a b c 13 14	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and apprepersons, comparability data, and contemporaneous substantiation of the deliberation and decision.	body before filing the	11a 12a 12b 12c 13 14	Yes Yes Yes	No No
b 12a b c 13 14 15	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and apprepersons, comparability data, and contemporaneous substantiation of the deliberation and decision.	body before filing the	11a 12a 12b 12c 13 14	Yes Yes Yes	
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and apprepersons, comparability data, and contemporaneous substantiation of the deliberation and decision.  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrataxable entity during the year?	body before filing the	11a 12a 12b 12c 13 14	Yes Yes Yes	
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and appreprsons, comparability data, and contemporaneous substantiation of the deliberation and decision.  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arratexable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to ever in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to return a rangements under applicable federal tax law, and take steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to ever in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization to ever the process in the federal tax law, and take steps to safeguard the organization to ever the process in th	body before filing the	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and appressons, comparability data, and contemporaneous substantiation of the deliberation and decision.  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arratexable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to ever in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization with respect to such arrangements?	body before filing the	11a 12a 12b 12c 13 14	Yes Yes Yes	No
b 12a b c 13 14 15 a b 16a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?	body before filing the	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No
b 12a b c 13 14 15 a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13.  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done.  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and appressons, comparability data, and contemporaneous substantiation of the deliberation and decision.  The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arratexable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to ever in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization with respect to such arrangements?	body before filing the	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No
b 12a b c 13 14 15 a b 16a b	Has the organization provided a complete copy of this Form 990 to all members of its governing form?  Describe in Schedule O the process, if any, used by the organization to review this Form 990.  Did the organization have a written conflict of interest policy? If "No," go to line 13  Were officers, directors, or trustees, and key employees required to disclose annually interests the conflicts?  Did the organization regularly and consistently monitor and enforce compliance with the policy? Schedule O how this was done  Did the organization have a written whistleblower policy?  Did the organization have a written document retention and destruction policy?  Did the process for determining compensation of the following persons include a review and app persons, comparability data, and contemporaneous substantiation of the deliberation and decision. The organization's CEO, Executive Director, or top management official  Other officers or key employees of the organization  If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrataxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evain joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization with respect to such arrangements?	body before filing the	11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes	No

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records: EVELYN GILLIAM 1615 DUKE STREET ALEXANDRIA, VA 22314 (703) 528-0700

organization and any related organizations.

Part VII

EXECUTIVE COMMITTEE

## 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

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations. • List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. compensated employees; and former such persons. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (B) (D) (E) (F) (A) (C) Reportable Name and Title Average Position (do not check more Reportable **Estimated** amount of other compensation compensation hours per than one box, unless week (list person is both an officer from the from related compensation any hours for organization (Worganizations from the and a director/trustee) 2/1099-MISC) (W- 2/1099organization and related Individual t or director Highest compensated organizations MISC) related ey emplo Institutional below dotted organizations line) trustee yee Trustee 2.00 (1) CHRISTOPHER O GAINES Х Х PRESIDENT 2.00 (2) DEBORAH KERR Χ PRESIDENT-ELECT 2.00 (3) GAIL PLETNICK Х IMMEDIATE PAST PRESIDENT 2.00 (4) ION R BALES Х EXECUTIVE COMMITTEE 2.00 (5) JOSEPH C BARROW JR Х EXECUTIVE COMMITTEE 2.00 (6) MARK R BEZEK Х EXECUTIVE COMMITTEE 2.00 (7) NICHOLAS CEGLAREK EXECUTIVE COMMITTEE 2.00 (8) DAVID A COX EXECUTIVE COMMITTEE 2.00 (9) JAY CURTIS EXECUTIVE COMMITTEE 2.00 (10) TRACI DAVIS Х EXECUTIVE COMMITTEE 2.00 (11) BRIAN HARRIS EXECUTIVE COMMITTEE 2 00 (12) LUPITA L HIGHTOWER EXECUTIVE COMMITTEE 2 00 (13) SHANE HOTCHKISS EXECUTIVE COMMITTEE 2.00 (14) PAUL IMHOFF Х **EXECUTIVE COMMITTEE** 2.00 (15) RALPH MARINO JR Χ EXECUTIVE COMMITTEE 2.00 (16) IANET MASON EXECUTIVE COMMITTEE 2.00 (17) KRISTI A SANDVIK

Part VII Section A. Officers, Directors	s, Trustees, K	ey Em	ploy	ees	, an	nd Hi	ghe	est Compensate	d Employees (cor	Page <b>8</b>
(A) Name and Title	(B) Average hours per week (list any hours for related	perso and	n (do in one on is	e bo both ecto	x, ui n an or/tru	nless office ustee)	er )	(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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	compens	Former			related organizations
(18) CANDACE SINGH			99			ated				
EXECUTIVE COMMITTEE		X						0	0	0
EXECUTIVE COMMITTEE	2.00	X						0	0	0
EXECUTIVE COMMITTEE	2.00	X						0	0	0
(21) RONALD C WHITMOYER  EXECUTIVE COMMITTEE	2.00	X						0	0	0
GOVERNING BOARD	2.00	x						0	0	0
(23) MARK L ADLER GOVERNING BOARD	2.00	X						0	0	0
(24) JOHN AITKEN GOVERNING BOARD	2.00	x						0	0	0
(25) THERESA ALBAN GOVERNING BOARD	2.00	x						0	0	0
(26) KIM ALEXANDER GOVERNING BOARD	2.00	x						0	0	0
(27) PAUL S ANDERSON GOVERNING BOARD	2.00	x						0	0	0
(28) GEORGE P ARLOTTO	2.00	x						0	0	0
(29) PHILLIP AUGER	3.00							0	0	0
(30) KRESTIN BAHR	2.00							0	0	0
GOVERNING BOARD (31) DAVE BARKER	3.00							0	0	0
GOVERNING BOARD (32) DANIEL T BITTMAN								n	n	n
GOVERNING BOARD (33) RUSSELL W BOOKER									0	0
(34) MICHAEL BORGFJORD	2.00							-		
GOVERNING BOARD (35) NICHOLAS BRAKE		<sup>X</sup>						0	0	0
GOVERNING BOARD (36) JASON BRANCH	::							0	0	0
GOVERNING BOARD	•••••							0	0	0
GOVERNING BOARD								0	0	0
GOVERNING BOARD								0	0	0
GOVERNING BOARD	2.00	X						0	0	0
(40) PETER BURROWS GOVERNING BOARD	2.00	X						0	0	0
(41) SHARI CAMHI GOVERNING BOARD	2.00	x						0	0	0
(42) CRIT D CATON GOVERNING BOARD	2.00	x						0	0	0
(43) GILLIAN CHAPMAN GOVERNING BOARD	2.00	X						0	0	0
(44) DANIEL D COX	2.00	x						0	0	0
GOVERNING BOARD  (45) MARK R CROSS	2.00	Х						0	0	0
(46) JOHN CSELOVSZKI								0	0	0
(47) ALEXA CUNNINGHAM								0	0	0
GOVERNING BOARD  (48) TERRY E DAVIDSON  GOVERNING BOARD								0	0	0
GOVERNING BOARD  GOVERNING BOARD								0	0	0
GOVERNING BOARD (50) BRANDT DICK	2.00							0	0	0
GOVERNING BOARD (51) PHILIP DOWNS	2.00	X						0		
GOVERNING BOARD (52) DARIN DRILL	2.00	X							0	0
GOVERNING BOARD (53) ELLIOTT DUCHON	2.00	X						0	0	0
GOVERNING BOARD (54) SEAN DUSEK	2.00	<sup>x</sup>						0	0	0
GOVERNING BOARD (55) CEDERICK ELLIS	2.00	<sup>x</sup>						0	0	0
GOVERNING BOARD (56) LAURA FEIJOO		<sup>x</sup>		<u> </u>				0	0	0
GOVERNING BOARD		×		_				0	0	0
GOVERNING BOARD		<sup>x</sup>						0	0	0
(58) ART FESSLER  GOVERNING BOARD	2.00	<sup>X</sup>						0	0	0
(59) CINDY FINN  GOVERNING BOARD	2.00	x						0	0	0
(60) PAUL FREEMAN GOVERNING BOARD	2.00	x						0	0	0
(61) MARC GEE GOVERNING BOARD	2.00	x						0	0	0
(62) RUTH C GILBERT-WHITNER GOVERNING BOARD	2.00	x						0	0	0
(63) KRISTINE GILMORE GOVERNING BOARD	2.00	x						0	0	0
(64) CLARK J GODSHALL GOVERNING BOARD	2.00	x						0	0	0
(65) LATONYA M GOFFNEY	2.00	X						0	0	0
GOVERNING BOARD  (66) MARTHA GROUP	2.00							0	0	0
GOVERNING BOARD (67) NICHOLAS GUARENTE	2.00							0	0	0
GOVERNING BOARD (68) JUDITH HACKETT	2.00							0	0	0
GOVERNING BOARD (A) (69) MARY J HAINSTN系統e and Title	(B) Average <sub>2.00</sub>	Positio	n (da	not	che	ck mo	ore	( <b>D</b> ) Reportable	(E) Reportable	(F) Estimated amount of other 0
GOVERNING BOARD (70) SCOTT D HANBACK	week (list any hours <b>₹0</b> 10	<del>pers</del> <sub>x</sub> and	on is	both	- an r/tru	<del>office</del> istee)		from the organization (W-0	compensation of the from related organizations (W <sub>0</sub>	- compensation -
GOVERNING BOARD (71) JOHN HEARD III		< Indis			Key	High	For	2/1099-MISC)	2/1099-MISC)	organization and related organizations 0
GOVERNING BOARD (72) JUSTIN B HENRY	related organizations below dotted line)  2.00	idual rector	Institutional Tru	Officer	empk	Highest compen employee	ner			
GOVERNING BOARD (73) BLAINE HESS	2.00	truste	nal Tru		ууөө	ompe		0	0	0

GOVERNING BOARD (75) DAVID JENSEN	2.00								0	0
GOVERNING BOARD (76) JOHN JUNGMANN	2.00							0	0	
GOVERNING BOARD (77) JENNIFER KELSALL GOVERNING BOARD	2.00							0		0
GOVERNING BOARD  (78) SCOTT R KIZNER								0	0	0
(79) DOUGLAS S LAMBERT	2.00							0	0	0
GOVERNING BOARD  (80) DARWAN LAZARD								0	0	0
(81) ROBERT LECH	2.00							0	0	0
GOVERNING BOARD  (82) DANIEL M LEIKVOLD	2.00							0	0	0
GOVERNING BOARD  (83) GARY LILLY  COVERNING BOARD	2.00	X						0	0	0
GOVERNING BOARD  (84) MARK T MACLEAN  GOVERNING BOARD	2.00	x						0	0	0
(85) JOSEPH MARUSZCZAK GOVERNING BOARD	2.00	x						0	0	0
(86) DAVID M MATHIS GOVERNING BOARD	2.00	x						0	0	0
(87) STEVE M MATTHEWS GOVERNING BOARD	2.00	x						0	0	0
(88) PATRICK V MAYER GOVERNING BOARD	2.00	x						0	0	0
(89) MARK B MILLER GOVERNING BOARD	2.00	x						0	0	0
(90) PATRICK C MILLER GOVERNING BOARD	2.00	x						0	0	0
(91) SCOTT MONSON  GOVERNING BOARD  (92) WENDY I MOORE								0	0	0
(92) WENDY J MOORE GOVERNING BOARD (93) RAYMOND C MORGIGNO								0	0	0
(93) RAYMOND C MORGIGNO GOVERNING BOARD (94) KELLI A MOULTON		×						0	0	0
GOVERNING BOARD  (95) MATTHEW MURPHY	2.00	×						0	0	0
GOVERNING BOARD (96) THOMAS MUZZEY	2.00							0	0	0
GOVERNING BOARD (97) REID P NEWEY	2.00							0	0	0
GOVERNING BOARD (98) TOBIN NOVASIO								0	0	0
GOVERNING BOARD (99) NICHOLAS OUELLETTE								0	0	0
GOVERNING BOARD (100) KEITH E OWEN								0	0	0
GOVERNING BOARD (101) DEBRA P PACE								0	0	0
GOVERNING BOARD (102) RUTH PEREZ								0	0	
GOVERNING BOARD (103) SUSAN A PRATT	2.00							0	0	0
GOVERNING BOARD (104) MICHELLE R PRICE	2.00							0	0	0
GOVERNING BOARD (105) JEROME M PUYAU								0	0	0
(106) FRANK REEVES								0	0	0
(107) JEFFREY N REHLANDER								0	0	0
GOVERNING BOARD (108) SEAN RICKERT GOVERNING BOARD	2.00							0	0	0
(109) ANA RILEY GOVERNING BOARD	2.00	x						0	0	0
(110) JANET M ROBINSON GOVERNING BOARD	2.00	x						0	0	0
(111) JIM D ROLLINS GOVERNING BOARD	2.00	x						0	0	0
(112) ERIC RUNEZ GOVERNING BOARD	2.00	x						0	0	0
(113) RANDY L RUSSELL GOVERNING BOARD								0	0	0
(114) AARON SADOFF  GOVERNING BOARD (115) MICHAEL SALVATORE	2.00	X						0	0	0
(115) MICHAEL SALVATORE  GOVERNING BOARD (116) THERON J SCHUTTE	2.00	X						0	0	0
GOVERNING BOARD (117) MIKE SHEPPARD	2.00	X						0	0	0
GOVERNING BOARD (118) RODNEY SHOTWELL	2.00							0		0
GOVERNING BOARD (119) HEIDI SIPE		X						0		0
GOVERNING BOARD (120) ROBERT SITTIG	2.00	X						0	0	0
GOVERNING BOARD (121) GREG D SJUTS		X						0	0	0
GOVERNING BOARD (122) ANTHONY L SMITH	2.00							0	0	0
GOVERNING BOARD (123) DAVID T SOVINE	2.00	X						0	0	0
GOVERNING BOARD (124) KATHY STEWART	2.00	^ x						0	n	0
GOVERNING BOARD (125) GLEN J SUPPES	2.00							0	0	0
GOVERNING BOARD (126) COSIMO TANGORRA JR	2.00	x						0		0
GOVERNING BOARD (127) MAX R TANNER GOVERNING BOARD	2.00							0	0	0
GOVERNING BOARD (128) MICHELE TAYLOR GOVERNING BOARD	2.00							0	0	0
GOVERNING BOARD (129) DAVID TEBO GOVERNING BOARD	2.00							0	0	0
(130) SCOTT THIELMAN GOVERNING BOARD	2.00							0	0	0
(131) LILLIAN M TORREZ GOVERNING BOARD	2.00	x						0	0	0
(132) G BRIAN TOTH  GOVERNING BOARD (A)	2.00 ( <b>B</b> )	x		(C)				( <b>D)</b>	( <b>E)</b>	( <b>F)</b>
(133) BRIAN TROOPName and Title GOVERNING BOARD	Average <sub>2.00</sub>	<sup>x</sup> tha	n (do n one	not e bo	x, u	nless office	ore r	Reportable compensation 0	Reportable	Estimated amount of other <sup>0</sup>
(134) ANDREW UNDERWOOD GOVERNING BOARD	any hours ≇o⁄0 ••related•••••	xand	a dir	ecto	r/trı	ıstee)	Ţ	HOIH LIIC	organizations (W <sub>-0</sub> 2/1099-MISC)	from the organization and
(135) WAYNE VICKERS GOVERNING BOARD	organizations below dotted line)	Indixidual ≴ruste or director	Institutional Tru	Officer	Key employee	Highest compen employee	Former	0	0	related organizations <sub>0</sub>
(136) JULE J WALKER  GOVERNING BOARD	2.00	al trus	onal Ti		oloyee	comp		0	0	0
(137) HENRY L WEBB JR	2.00	stey	rus		*	ĕn				

GOVE	RNING BOARD												
	LEE ANN WENTZEL	2.00							_		_		
	RNING BOARD		×						0		0		0
	MARIE WILES	2.00											
GOVE	RNING BOARD		X						0		0		0
	CHRIS WILSON	2.00											
· · · · · · ·		2.00	Х						0		0		0
GOVE	RNING BOARD												
(142)	DAVID S YOUNCE	2.00	Х						0		0		0
GOVE	RNING BUARD		••••										
(143)	DANIEL DOMENECH	40.00			х				451,664		0		17,767
EXEC	JTIVE DIRECTOR				^				431,004		J		17,707
(144)	CHUCK WOODRUFF	40.00			.,								
COO	Chock Woodhorn	•••••			Х				222,801		0		12,104
(145)	EVELYN GILLIAM	40.00											
													13,113
(146)	TOR OF FINANCE MORT SHERMAN												
		40.00				Х			173,729		0		13,376
A330	EXEC DIK												
(147)	SHARON ADAMS-TAYLOR	40.00				Х			168,218		0		12,741
ASSO	C EXEC DIR					^			100,210		Ĭ		12,771
(148)	CHRIS DAW	40.00							150 201		^		16.016
ASSO	EXEC DIR	•••••				Х			150,381		0		16,916
(149)	CL REID	40.00											
1000	EXEC DIR	40.00					Х		140,743		0		27,940
	NOELLE ELLERSON												
		40.00					Х		140,648		0		24,017
ASSU	EXEC DIR												
	JAY GOLDMAN	40.00					Х		116,505		0		24,166
EDITO							``		110,505		Ĭ		2 1,200
(152)	HEIDI SCHMIDT	40.00					V		102.604		^		12.001
DIR. C	ORPORATE & STRATEGIC	•••••					Х		192,604		0		13,001
(153)	MADVANN IORE	40.00											
DIR I	40.00 X 128,862 0 DIR, LEADERSHIP DEVELOPMENT												6,644
	ub-Total					-							
	otal from continuation sheets to Part \						[]—						
									2,044,173	0			181,785
	otal (add lines 1b and 1c)		<u> </u>	<u> </u>	1		_		2,044,173	<u> </u>			101,703
2	Total number of individuals (including but		hose lis	ted a	bove	e) w	ho red	eive	ed more than \$100,	,000 of			
	reportable compensation from the organiz	zation 🕨 12											
												Yes	No
_	Did the consolination list on Commence				1 .		1-					.05	
3	Did the organization list any <b>former</b> office line 1a? <i>If "Yes," complete Schedule J for s</i>												
	ille 1a: Il Tes, complete schedule fior s	sucri iriuiviuuai		•	•	•		•		• •   :	3		No
4	For any individual listed on line 1a, is the	sum of reportal	ole com	pensa	ation	n an	d othe	er co	mpensation from t	he			
	organization and related organizations gre	eater than \$150	),000? <i>I</i>	f "Yes	," cc	тр	lete S	che	dule J for such				
	individual										4	Yes	
				•	•	•	•	•			_		
5	Did any person listed on line 1a receive or									dual for			
	services rendered to the organization? If "	Yes," complete	Schedu	Ie J fo	r su	ch p	erson	•		· · [ ]	5		No
-50	ction B. Independent Contractors											I	
_									:	100 000 of same		.: <b>.</b>	
1	Complete this table for your five highest of the organization. Report compensation for										ensat	tion from	n
	the organization. Report compensation for	(A)	rear ene	anng v	vicii .	O1 VV	TCTTTTT	circ .	I I	(B)		(0	<u>,                                     </u>
	Name and b	ousiness address							Descri	ption of services		Compe	
NATIO	NAL TRADE PRODUCTIONS INCCREATIVE									AND NATIONAL			327,259
PO BO	X 744812								CONFERENCE	MARKE			
	ITA, GA 303744534												
VALEF	IIA SILVA									SERVICES FOR			146,635
AGREEMENT WITH D 2740 CHISHOLM AVENUE													
NORTH ST PAUL, MN 55109													
	State of the state	alcalla I i i	11: 12:		_	12 -					_		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 2													
	ompensation from the organization 🕨 2											Form 00	(2010)
												rorm <b>9</b> 9	<b>0</b> (2018)

Check if Schedule O contains a response or note to any l	ine 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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		3.1p.3.1333	general	
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	1,480,497	797,823	607,431	75,243
<b>6</b> 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	2,101,660	1,132,562	862,287	106,81
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	118,924	64,087	48,793	6,044
9 Other employee benefits	1,084,155	584,239	444,816	55,100
<b>10</b> Payroll taxes	258,135	139,106	105,910	13,119
11 Fees for services (non-employees):				
<b>a</b> Management				
<b>b</b> Legal	21,837	10,621	11,216	
c Accounting	50,100		50,100	
<b>d</b> Lobbying				
e Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees	37,237		37,237	
<b>g</b> Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,142,655	2,045,517	97,138	
12 Advertising and promotion	61,701	60,621	630	45
13 Office expenses	630,792	616,036	14,670	8
14 Information technology	323,835	13,215	310,620	
<b>15</b> Royalties				
<b>16</b> Occupancy	251,084	251,084		
<b>17</b> Travel	1,052,603	988,409	51,743	12,45
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials •				
<b>19</b> Conferences, conventions, and meetings	1,548,675	1,527,416	20,186	1,07
<b>20</b> Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	161,154	161,154		
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a OTHER COSTS	337,796	174,926	162,870	
<b>b</b> SUBCONTRACTS	336,420	336,420		
c BAD DEBT	166,526		166,526	
d CREDIT CARD DISCOUNTS	81,922		81,922	
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	12,247,708	8,903,236	3,074,095	270,37
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ▶ ☐ if following SOP 98-2 (ASC 958-720).				

01111		(2010)
Pa	rt X	Balance Sheet
		Check if Schedule O contains a response or
	-	Cook was interest baseins
	1 2	Cash-non-interest-bearing
	3	, ,
	4	Pledges and grants receivable, net
	_	Accounts receivable, net
44	6	Loans and other receivables from current and trustees, key employees, and highest compe Part II of Schedule L
ş	7	Part II of Schedule L
SSE	8	Inventories for sale or use
Ä	9	Prepaid expenses and deferred charges .
	10a	Land, buildings, and equipment: cost or othe basis. Complete Part VI of Schedule D
	b	Less: accumulated depreciation
	11	Investments—publicly traded securities .
	12	Investments—other securities. See Part IV, li
	13	Investments—program-related. See Part IV, I
	14	Intangible assets
	15	Other assets. See Part IV, line 11
	16	<b>Total assets.</b> Add lines 1 through 15 (must e
	17	Accounts payable and accrued expenses .
	18	Grants payable
	19	Deferred revenue
	20	Tax-exempt bond liabilities
S	21	Escrow or custodial account liability. Complet
ilitie	22	Loans and other payables to current and forn employees, highest compensated employees
ia		persons. Complete Part II of Schedule L .
_	23	Secured mortgages and notes payable to unr
	24	Unsecured notes and loans payable to unrela
	25	Other liabilities (including federal income tax and other liabilities not included on lines 17 - Complete Part X of Schedule D
	26	<b>Total liabilities.</b> Add lines 17 through 25 .
Net Assets or Fund Balances	27	Organizations that follow SFAS 117 (ASC complete lines 27 through 29, and lines Unrestricted net assets
Bal	28	Temporarily restricted net assets
Þ	29	Permanently restricted net assets
'n.		Organizations that do not follow SFAS 1
s or I	30	check here ▶ ☐ and complete lines 30 Capital stock or trust principal, or current fun
set	31	Paid-in or capital surplus, or land, building or
Ass	32	Retained earnings, endowment, accumulated
et	33	Total net assets or fund balances
Z	34	Total liabilities and net assets/fund balances
	1	

cash-non-interest-bearing		•	100								
Savings and temporary cash investments			5,630,501								
Pledges and grants receivable, net			524,694								
Accounts receivable, net			156,672								
trustees, key employees, and highest compensa Part II of Schedule L											
oans and other receivables from other disqualified persons (as defined under ection 4958(f)(1)), persons described in section 4958(c)(3)(B), and ontributing employers and sponsoring organizations of section 501(c)(9) oluntary employees' beneficiary organizations (see instructions) Complete											
Part II of Schedule L											
Inventories for sale or use											
Prepaid expenses and deferred charges			200,129								
Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	5,753,436									
Less: accumulated depreciation	10b	2,444,869	3,459,388								
Investments—publicly traded securities .		, , , , , , , , ,	5,197,595								
Investments—other securities. See Part IV, line	11 .		2,472,929								
Investments—program-related. See Part IV, line			, ,-								
Intangible assets											
Other assets. See Part IV, line 11			536,190								
Total assets.Add lines 1 through 15 (must equa	al line 3	34)	18,178,498								
Accounts payable and accrued expenses			1,216,979								
Grants payable											
Deferred revenue			3,176,001								
Tax-exempt bond liabilities											
Escrow or custodial account liability. Complete P	art IV d	of Schedule D									
Loans and other payables to current and former employees, highest compensated employees, ar											
persons. Complete Part II of Schedule L											
Secured mortgages and notes payable to unrela	ted thir	d parties	2,156,226								
Insecured notes and loans payable to unrelated	third p	parties									
Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		to related third parties,	3,839,374								
<b>Fotal liabilities.</b> Add lines 17 through 25			10,388,580								
Organizations that follow SFAS 117 (ASC 9	58). ch	eck here 🕨 🗸 and									
complete lines 27 through 29, and lines 33 Unrestricted net assets			7,639,667								
Temporarily restricted net assets			251								
Permanently restricted net assets			150,000								
Organizations that do not follow SFAS 117	(ASC 9	58),									
check here  and complete lines 30 th Capital stock or trust principal, or current funds	rough 	34.									
Paid-in or capital surplus, or land, building or equ	uipmen	t fund									
Retained earnings, endowment, accumulated inc	come, c	or other funds									
Total net assets or fund balances			7,789,918								

1,203,443 3,197,606

1,953,728

3,816,368

10,171,145

8,334,850

9,375

150,000

8,494,225

18,665,370

Form **990** (2018)

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18,178,498

Form	990 (2018)			Page <b>12</b>
Par	t XI Reconcilliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			<b>✓</b>
1	Total revenue (must equal Part VIII, column (A), line 12)		1	2,622,581
2	Total expenses (must equal Part IX, column (A), line 25)		1	2,247,708
3	Revenue less expenses. Subtract line 2 from line 1			374,873
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4			7,789,918
5	Net unrealized gains (losses) on investments			264,185
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain in Schedule O) 9			65,249
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10			8,494,225
Par	t 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: Cash Z Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	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:			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
	✓ Separate basis			
c	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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3а	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?	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		
		-	Form 9	<b>90</b> (2018)

Complete if the organization is a section \$10(E)3 organization or a section \$40(1)(1) nonexempt charitable trust.   Department of the Treasury   Namesdiffetheorganization   Namesdiffetheorganizati	efil	e GR	APHIC prin	nt	Submission	Date	DLN:	DLN: 93493128003340			
Department of the Treasury Namead/Revergen/Ization (and the Company) and the Company (and the Company) and t	(Fo	rm 9	_				rganization is a se 4947(a)(1) nonex	ction 501(c)(3) empt charitable	organization of trust.		OMB No. 1545-0047 <b>2018</b>
Names of the conganization   September			t of the		•	Go to				•	
Serial   Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (for lines 1 through 12, check only one box.)    A church, convention of churches, or association of churches described in section 170(b)(1)(A)(ii).   A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii).   A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii).   A church, convention of churches, or association of churches described in section 170(b)(1)(A)(iii).   A church, convention of churches are considered in section 170(b)(1)(A)(iii).   A church, convention or cooperative hospital service organization described in section 170(b)(1)(A)(iii).   A magnization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iii).   A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(iv).   A reganization than tornally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(iv). (Complete Part II.)   An agricultural research organization described in 170(b)(1)(A)(b) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a consultation organization and part functions—subject to certain exceptions, and (2) no more than 3333% of its support from gross investing income and unrelated business taxabile income (less section 51) tax) from businesses acquired by the organization and grant college or university or a civilities related to its exempt functions—subject to certain exceptions, and (2) no more than 3333% of its support from gran	Maen	eadfRth	ne organizati	on SCHOO						Employer identifica	ntion number
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)  1	ADMI	NISTRAT	ORS								
A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  To norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v)). (Complete Part III.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part III.)  An organization that normally receives: (1) more than 33 <sub>10</sub> % of its support from contributions, membership fees, and gross receipts for activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 <sub>10</sub> % of its support from gooss investing section 501(a)(2). (Complete Part III.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively to the benefit of, to perform the functions of, or to carry out the purposes of one one publicly supported organizations described in section 509(a)(1) or section 509(a)(1). See section 509(a)(3). Check the box lines 12a through 12d that describes the level of supporting organization and complete lines 12e, 12f, and 12g.  Type III functionally integrated. A supporting organization operated in the same persons that control or mana										See instructions.	
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.)  An agricultural research organization described in 170(b)(1)(A)(vi). (Complete Part II.)  An agricultural research organization described in 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33x/% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33x/% of its support from gross investme income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization and organized and operated exclusively to test for public safety. See section 509(a)(1). (Complete Part IV.)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one organization of proganization and complete inter 12c. Jan 12g.  Type I. A supporting organization seerched in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box lines 12a through 12d that describes the type of supporting organization on the functions of the directors, and b.  Type II. A supporting organization s				•				•	•	Δ)(i).	
A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v).  A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi).  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  An agricultural research organization described in 170(b)(1)(A)(xi) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a nor-land grant college of agriculture. See instructions exhibit to certain exceptions, and (2) no more than 33;% of its support from gross investme income and unrelated business taxable income (less section 511 (ax) from businesses acquired by the support from gross investme income and unrelated business taxable income (less section 512 (ax) from businesses acquired by the support from granized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box bilines 12e 170; and 12g.  Pype I. A supporting organization described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box bilines 12e 170; and 12g.  Pype I. A supporting organization operated supervised, or controlled			•							,(-,-	
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:  A maname, city, and state:  A norganization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)  A norganization of local government or governmental unit described in section 170(b)(1)(A)(v).  A norganization that normally receives a substantial part of its support from a governmental unit or from the general public described in a gricultural research organization described in 170(b)(1)(A)(vi). (Complete Part II.)  A nagricultural research organization described in 170(b)(1)(A)(vi). (Complete Part II.)  An agricultural research organization described in 170(b)(1)(A)(vi). (Complete Part III.)  An agricultural research organization described in 170(b)(1)(A)(vi). (Complete Part III.)  An agricultural research organization described in 170(b)(1)(A)(vi). (Complete Part III.)  An organization that normally receives: (1) more than 331/% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/% of its support from gross investme income and unrelated business taxable income (less section 511 Last) from businesses acquired but organization after June 30, 1975. See section 509(a)(12). (Complete Part III.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organizated and operated exclusively to test for public safety. See section 509(a)(4).  An organization organization described in section 509(a)(1)(1) or section 509(a)(2). See section 509(a)(3), or section 509(a)(4).  An organization organization organization described in section 509(a)(1)(1) or section 509(a)(2). See section 509(a)(3), or section 509(a)(2). See section 509(a)(3), or section 509(a)(4).  By Public Authority organizatio	3									ii).	
170(b)(1)(A)(iv), (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  An agricultural research organization described in 170(b)(1)(A)(vi) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.  An agricultural research organization described in 170(b)(1)(A)(xi) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.  An organization that normally receives: (1) more than 33.1% of its support from contributions, membership fees, and gross receipts for activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33.1% of its support from gross investme income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(12). Complete Part II.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organization deporated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one organization organization operated, supervised, or controlled by its supported organization(3). Check the box lines 12a through 12d that describes the type of supporting organization of complete Part IV. Sections A and B.  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), by having tone unit or peritary or supporting organization operated in connection with its supported organization. You must complete Part IV. Sections A and C.  Type III functionally integrated. A	4	_	A medical r	eseard	h organization		-				ter the hospital's
An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)  An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions, Enter the name, city, and state of the college or university or a non-land grant college of agriculture. See instructions, enter the name, city, and state of the college or university or a non-land grant college or university.  An organization that normally receives: (1) more than 33;2% of its support from grass investme income and unrelated business taxable income (less section 509(a)(1) or section 509(a)(1).  An organization organization organizated exclusively to test for public safety. See section 509(a)(4).  10	_		170(b)(1)	(A)(iv	. (Complete Pa	rt II.)	-	•			bed in <b>section</b>
section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in 170(b)(1)(A)(vi). (Complete Part III.)  An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university: or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university: or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university: or a non-land grant college of agriculture. See instructions, enter the name, city, and state of the college or university: or a non-land grant college or university: or and grant gran			•	•	J		3				
An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:  10	7							its support from a	a governmental u	nit or from the genera	al public described in
non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university.  An organization that normally receives: (1) more than 3313% of its support from contributions, membership fees, and gross receipts fro activities related to its exempt functions—subject to certain exceptions, and (2) no more than 3313% of its support from gross investme income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one organization supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.  Type II. A supporting organization supervised or controlled in connection with its supported organizations. You must complete Part IV, Sections A and C.  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its support organization of the supporting organization operated in connection with, and functionally integrated with, its support organization operated in connection with, and functionally integrated with, its support organization operated in connection with, and functionally integrated with, its support organization operated in connection with, and functionally integrated with its supported organization op	8		A communi	ty trus	t described in s	section	170(b)(1)(A)(vi).	(Complete Part II.	.)		
activities related to its exempt functions—subject to certain exceptions, and (2) no more than 3319% of its support from gross investme income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)  11	9										ge or university or a
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one of more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.  Type I. A supporting organization operated, supervised, or controlled by its supported organization (s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.  Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  Check this box if the organizations  Provide the following information about the supported organization(s).  (ii) SIN (iii) Type of organization organization listed in your governing document? (see instructions)  Total  Total  Total  For Paperwork Reduction Act Notice, see the Instructions for  Cat. No. 11285F  Schedule A (Form 990 or 990-EZ) 26		<b>✓</b>	activities re income and See <b>sectio</b>	elated d unrel n <b>509</b>	to its exempt for ated business t (a)(2). (Compl	unction taxable ete Par	s—subject to certain income (less section t III.)	exceptions, and ( 511 tax) from bu	(2) no more than usinesses acquire	331/3% of its support f d by the organization	from gross investment
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.  Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.  Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  Check this box if the organizations  For Provide the following information about the supported organization(s).  (ii) SIN (iii) Type of organization (described on lines)  1 10 above (see instructions)  Yes No  Yes No  Total  Total  For Paperwork Reduction Act Notice, see the Instructions for  Cat. No. 11285F  Schedule A (Form 990 or 990-EZ) 26			-		•		•				_
organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.  b   Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its support organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  d   Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization operated in connection with its supported organization(s) that is not functionally integrated. The organization operated in connection with its supported organization(s) that is not functionally integrated with, its support distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  e   Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated supporting organization.  f Enter the number of supported organizations  g   Provide the following information about the supported organization ((ii) III) Type of organization (described on lines 1-10 above (see instructions))  Yes   No   (v) Amount of other support (see instructions)  Total  For Paperwork Reduction Act Notice, see the Instructions for   Cat. No. 11285F   Schedule A (Form 990 or 990-EZ) 20	12		more public	cly sup	ported organiz	ations (	described in section	509(a)(1) or se	ction 509(a)(2)	See section 509(a)	
management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its support organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated or Type III non-functionally integrated supporting organization.  f Enter the number of supported organizations  g Provide the following information about the supported organization (described on lines 1-10 above (see instructions))  (ii) Name of supported organization (described on lines 1-10 above (see instructions))  Yes No  Total  For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F Schedule A (Form 990 or 990-EZ) 20	а		organizatio	n(s) th	e power to reg	ularly a	ppoint or elect a maj				
organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.  Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  Check this box if the organization received a written determination from the IRS that it is a Type I, Type III functionally integrated or Type III non-functionally integrated supporting organization.  Enter the number of supported organizations  Provide the following information about the supported organization(s).  (ii) Name of supported organization (described on lines 1- 10 above (see instructions))  Yes No  Total  For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F Schedule A (Form 990 or 990-EZ) 20	b		manageme	nt of t	he supporting o	organiz	ation vested in the sa				
Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated or Type III non-functionally integrated supporting organization.  Enter the number of supported organizations  Provide the following information about the supported organization(s).  (ii) Name of supported organization (described on lines 1- 10 above (see instructions))  Yes No  Total  For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F Schedule A (Form 990 or 990-EZ) 20	С									d functionally integrat	ted with, its supported
Check this box if the organization received a written determination from the IRS that it is a Type I, Type III functionally integrated or Type III non-functionally integrated supporting organization.  f Enter the number of supported organizations  g Provide the following information about the supported organization(s).  (ii) Name of supported organization  (iii) EIN  (iii) Type of organization listed in your governing document?  (described on lines 1- 10 above (see instructions))  Yes No  Total  For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F  Schedule A (Form 990 or 990-EZ) 20	d		Type III no	n-fun integ	ctionally inte rated. The orga	<b>grated</b> anizatio	I. A supporting organ n generally must sat	ization operated isfy a distribution	in connection wit requirement and		
f Enter the number of supported organizations  g Provide the following information about the supported organization(s).  (i) Name of supported organization (ii) EIN (iii) Type of organization (described on lines 1- 10 above (see instructions))  Yes No  Total  For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F  Schedule A (Form 990 or 990-EZ) 20	e		Check this	box if	the organizatio	n recei	ved a written determ	ination from the I		oe I, Type II, Type III fui	nctionally integrated,
(ii) Name of supported organization  (iii) EIN  (iii) Type of organization lines 1-10 above (see instructions))  Yes  No  (v) Amount of monetary support (see instructions)  (vi) Amount of monetary support (see instructions)	f	Enter	- J1		, 5					<u> </u>	
organization (described on lines 1- 10 above (see instructions))  Yes No  Total  For Paperwork Reduction Act Notice, see the Instructions organization (described on lines in your governing document? (see instructions) other support (see instructions)  Total  Cat. No. 11285F  Schedule A (Form 990 or 990-EZ) 20	g	/:\ N							ranization listed	(v) Amount of	(vi) Amount of
Total For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F Schedule A (Form 990 or 990-EZ) 20		(1)			(11)	EIIN	organization (described on lines 1- 10 above (see	in your govern		monetary support	other support (see
For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F Schedule A (Form 990 or 990-EZ) 20								Yes	No		
For Paperwork Reduction Act Notice, see the Instructions for Cat. No. 11285F Schedule A (Form 990 or 990-EZ) 20											
	Tota	ı									
FORM MAIL OF MAILE?				tion A	ct Notice, see	e the I	nstructions for	Cat. No. 1128	85F	Schedule A (Form	990 or 990-EZ) 2018

Sch	edule A (Form 990 or 990-EZ) 2018						Page <b>2</b>
	art II Support Schedule for	Organizations	Described in	Sections 170	(b)(1)(A)(iv), 1	.70(b)(1)(A)(v	i), and 170(b)
	(1)(A)(ix)	_					
	(Complete only if you ch	ecked the box o	n line 5, 7, 8, o	r 9 of Part I or i	f the organization	n failed to qual	ify under Part III.
	If the organization fails to						
5	ection A. Public Support						
	lendar year	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	r fiscal year beginning in) 🕨	(a) 2014	(b) 2013	(C) 2010	(d) 2017	(e) 2016	(1) local
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grant.")						
2	Tax revenues levied for the						
2	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	<b>Total.</b> 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	<b>Public support.</b> Subtract line 5 from						
	line 4. Section B. Total Support						
	lendar year		1	1	1		
	r fiscal year beginning in)	(a)2014	<b>(b)</b> 2015	(c)2016	( <b>d)</b> 2017	<b>(e)</b> 2018	( <b>f)</b> 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							
	loss from the sale of capital assets						
	(Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through						
12	10 Gross receipts from related activities, e	etc. (see instruction	ns)			12	
13	First five years. If the Form 990 is fo	r the organization'	s first, second, th	ird, fourth, or fift	h tax year as a sec	tion 501(c)(3) org	anization, check
	this box and <b>stop here</b>					▶□	
S	ection C. Computation of Publi	c Support Per	centage				<u> </u>
14	Public support percentage for 2018 (lir	ne 6, column (f) di	vided by line 11,	column (f))		14	
15	Public support percentage for 2017 Sci	hedule A, Part II. li	ne 14			15	
	33 1/3% support test—2018. If the o					_	OX
100	and <b>stop here.</b> The organization quali						
	33 1/3% support test—2017. If the						
•	box and <b>stop here.</b> The organization	•					
17.	10%-facts-and-circumstances test						🕶 🔾
1/6	is 10% or more, and if the organization	meets the "facts	-and-circumstanc	es" test, check th	is box and <b>stop h</b>	ere. Explain	
	in Part VI how the organization meets t						
	organization						▶ □
L	10%-facts-and-circumstances tes						
	15 is 10% or more, and if the organiza	ation meets the "f	acts-and-circums	tances" test, ched	ck this box and <b>sto</b>	p here.	
	Explain in Part VI how the organization	n meets the "facts	and-circumstan	es" test. The org	anization qualifies	as a publicly	
	supported organization						🕨 🗆
18	Private foundation. If the organization	on did not check a	box on line 13, 1	.6a, 16b, 17a, or	17b, check this bo	x and see	
	instructions						▶□
							0 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (Complete only if you checked the box on line 10 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 (a) 2014 **(b)** 2015 (d) 2017 (c) 2016 (e) 2018 (f) Total (or fiscal year beginning in) Gifts, grants, contributions, and 184,263 4,739,729 5,858,333 6,549,183 5,811,984 membership fees received. (Do not 23,143,492 include any "unusual grants.") . Gross receipts from admissions, merchandise sold or services 19,985,896 3.389.760 4.268.913 3.764.745 4.229.585 4.332.893 performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or 280,971 144,279 116,014 156,078 205,829 903,171 business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 3.854.994 9.739.092 10,350,706 9,152,921 10,934,846 44,032,559 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons **h** 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. c Add lines 7a and 7b. . Public support. (Subtract line 7c 44,032,559 from line 6.) Section B. Total Support Calendar year (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total (or fiscal year beginning in) 3,854,994 9,152,923 9,739,092 10,934,846 10,350,706 44,032,559 Amounts from line 6. . . Gross income from interest. 10a dividends, payments received on 1,463,436 1,716,156 1,750,907 1,922,339 8,077,630 1.224.792 securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.

1,463,436

10,616,357

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,

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . . . 🕨 🗆

1,716,156

12,324

11,467,572

1.750.907

12,685,753

1,922,339

12,273,045

Schedule A (Form 990 or 990-EZ) 2018

15

16

17

18

8,077,630

12,324

52.122.513

84.480 %

86.860 %

15.500 %

13.120 %

Add lines 10a and 10b.

11, and 12.).

Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on. Other income. Do not include gain

or loss from the sale of capital assets (Explain in Part VI.). Total support. (Add lines 9, 10c,

check this box and stop here. . . .

Section C. Computation of Public Support Percentage

Section D. Computation of Investment Income Percentage

c

16

17

18

1,224,792

5,079,786

Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f)) . . . . . . . . .

Investment income percentage for **2018** (line 10c, column (f) divided by line 13, column (f)) . . . . . .

Public support percentage from 2017 Schedule A, Part III, line 15 . . . . . . . . . . . . . . . . .

Sche	dule A (Form 990 or 990-EZ) 2018			Page 4
	(Complete only if you checked a box on line 12 of Part I. If you checked 12a of Part I, complete Sections A and B. If you Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Pase Sections A and D, and complete Part V.)	ı check art I, co	ked 12l omplet	b of e
Se	ection A. All Supporting Organizations			
		l	Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	_		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b c	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.  Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to	4b		
	the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).			
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its			

supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI.** 6 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial

7 contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).

7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). 8

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

8 9a provide detail in Part VI. 9a Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI. 9b Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.

10a Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings). 10b

Sch	edule A	Form 990 or 990-EZ) 2018			Page <b>5</b>
Pa	art IV	Supporting Organizations (continued)			
				Yes	No
11	Has t	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the ning body of a supported organization?			
		<u> </u>	11a		
b			11b		
		,	11c		
	ection	B. Type I Supporting Organizations		· ·	
1	elect <b>VI</b> ho orgar truste	e directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part</b> we the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the ization had more than one supported organization, describe how the powers to appoint and/or remove directors or es were allocated among the supported organizations and what conditions or restrictions, if any, applied to such a surface of the support of the supp	1	Yes	No
2	opera <i>carrie</i>	e organization operate for the benefit of any supported organization other than the supported organization(s) that ted, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit d out the purposes of the supported organization(s) that operated, supervised or controlled the supporting ization.	2		
S	ection	C. Type II Supporting Organizations	•		
				Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each	of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
	ection	D. All Type III Supporting Organizations		Yes	No
1	tax ye Form	e organization provide to each of its supported organizations, by the last day of the fifth month of the organization's ear, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the good that was most recently filed as of the date of notification, and (iii) copies of the organization's governing nents in effect on the date of notification, to the extent not previously provided?		163	No
			1		
2	or (ii)	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization ained a close and continuous working relationship with the supported organization(s).			
_	_		2		
3	organ	ison of the relationship described in (2), did the organization's supported organizations have a significant voice in the ization's investment policies and in directing the use of the organization's income or assets at all times during the tax If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection	E. Type III Functionally-Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction	ns):		
	а	The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
	<b>b</b> $\cap$	The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
	c 🗆	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see in	struct	ions)	
2	Activi	ties Test. <b>Answer (a) and (b) below.</b>	ſ	Yes	No
	organ <b>orga</b> respo	ibstantially all of the organization's activities during the tax year directly further the exempt purposes of the supported ization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported nizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was usive to those supported organizations, and how the organization determined that these activities constituted antially all of its activities.	2a		
	organ <i>organ</i>	e activities described in (a) constitute activities that, but for the organization's involvement, one or more of the ization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the ization's position that its supported organization(s) would have engaged in these activities but for the organization's rement.	2b		
3	Paren	t of Supported Organizations. <b>Answer (a) and (b) below.</b>	20		
-	a Did th	e organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of apported organizations? <i>Provide details in <b>Part VI</b></i> .	3a		
		e organization exercise a substantial degree of direction over the policies, programs and activities of each of its rted organizations? If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard.	3b		

4 instructions). Net value of non-exempt-use assets (subtract line 4 from line 3) 5

6 6 Multiply line 5 by .035

Recoveries of prior-year distributions 7 7

8 Minimum Asset Amount (add line 7 to line 6)

Current Year Section C - Distributable Amount

Adjusted net income for prior year (from Section A, line 8, Column A) 1 1 2 2 Enter 85% of line 1

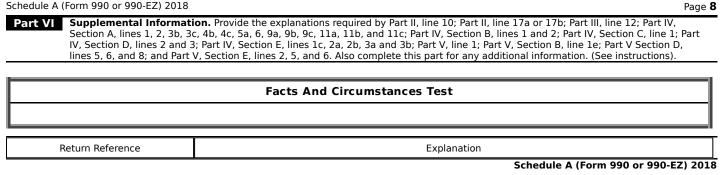
3 Minimum asset amount for prior year (from Section B, line 8, Column A) 3

Enter greater of line 2 or line 3 4 4

5 5 Income tax imposed in prior year

**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency 6 temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Schedule A (Form 990 or 990-EZ) 2018



efile GRAPHIC print

SCHEDULE C (Form 990 or

Submission Date - 2020-05-07

DLN: 93493128003340

Schedule C (Form 990 or 990-EZ) 2018

Cat. No. 50084S

OMB No. 1545-0047

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Open to Public Inspection

Department of the Treasury Internal Revenue

990-EZ)

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

▶Go to www.irs.gov/Form990 for instructions and the latest information.

矮軌 organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

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

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

 Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATORS 54-1999773 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 2 Political campaign activity expenditures (see instructions) Volunteer hours for political campaign activities (see instructions) ...... Complete if the organization is exempt under section 501(c)(3). 1 Enter the amount of any excise tax incurred by the organization under section 4955 ...... 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes Was a correction made? If "Yes," describe in Part IV. b Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt 2 function activities ...... 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b.......... Did the filing organization file Form 1120-POL for this year? 4 ☐ Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-.

Total lobbying expenditures

Grassroots ceiling amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots nontaxable amount

Page 2

		section 501(h)).		
١.	Check	if the filing organization belongs to an affiliated group (and list in Part IV each affiliated grexpenses, and share of excess lobbying expenditures).	oup member's name,	address, EIN,
3	Check	▶ ☐ if the filing organization checked box A and "limited control" provisions apply.		
		Limite on Labbrian Francoditions	(a) Filing	(b) Affiliated group

R	expenses, and share of excess lobbying expenditures).  Check  if the filing organization checked box A and "limited control" provisions apply.		
	Limits on Lobbying Expenditures  (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	<b>(b)</b> Affiliated groutotals
<b>1</b> a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	76,806	
c	Total lobbying expenditures (add lines 1a and 1b)	76,806	
	and the second s	12 275 722	

1a	Total lobbying expenditures to influence public opinion				
b	Total lobbying expenditures to influence a legislative	76,806			
c	Total lobbying expenditures (add lines 1a and 1b)	76,806			
d	Other exempt purpose expenditures	12,375,732			
е	Total exempt purpose expenditures (add lines 1c and	12,452,538			
f	Lobbying nontaxable amount. Enter the amount from columns.	n the following table in both		772,627	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	]		
	Not over \$500,000	20% of the amount on line 1e.	ĺ		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.			
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	i		

Other exempt purpose expenditures		12,375,732	
Total exempt purpose expenditures (add lines 1c	and 1d)	12,452,538	
Lobbying nontaxable amount. Enter the amount columns.	from the following table in both	772,627	
If the amount on line 1e, column (a) or (b)	is: The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1.000.000.		

Over \$17,000,000       \$1,000,000.         g Grassroots nontaxable amount (enter 25% of line 1f)       193,157         h Subtract line 1g from line 1a. If zero or less, enter -0       0         i Subtract line 1f from line 1c. If zero or less, enter -0       0	j	If there is an amount other than zero on either line 11 section 4911 tax for this year?		rting	☐ Yes ☐ No
g Grassroots nontaxable amount (enter 25% of line 1f)	i	Subtract line 1f from line 1c. If zero or less, enter -0		0	
	h	Subtract line 1g from line 1a. If zero or less, enter -0-		0	
Over \$17,000,000 \$1,000,000.	g	Grassroots nontaxable amount (enter 25% of line 1f)		193,157	
Over \$17,000,000 \$1,000,000.					
		Over \$17,000,000	\$1,000,000.		

i j	Subtract line 1f from line 1c. If zero or less, enter -0	orting	☐ Yes ☐ No				
	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)						

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)							
Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year	(-) 201F	(h) 2016	(a) 2017	(4) 2010	(a) Tatal		

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total		

	Lobbying Expenditures During 4-real Averaging Feriod						
	Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	( <b>d)</b> 2018	(e) Total	
2a	Lobbying nontaxable amount	684,059	700,953	769,949	772,627	2,927,588	

	Calendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
2a	Lobbying nontaxable amount	684,059	700,953	769,949	772,627	2,927,588
b	Lobbying ceiling amount (150% of line 2a, column(e))					4,391,382

411,046

171,015

333,064

175,238

46,378

192,487

76,806

193,157

Schedule C (Form 990 or 990-EZ) 2018

867,294

731,897

1,097,846

che	dule C (Form 990 or 990-EZ) 2018			P	Page <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NOT fi Form 5768 (election under section 501(h)).	led			
oro	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a	)	(b)	
OI E	activity.	Yes	No	Amou	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	rt III-A Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)(6)$ .	(5), or	section		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Pa	rt III-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part I "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	2-			
a b	Current year Carryover from last year	2a 2b			
c	Total	2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

### Part IV **Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

efile GRAPHIC print

**SCHEDULE D** 

Department of the Treasury Internal Revenue

(Form 990)

Service

Submission Date - 2020-05-07

DLN: 93493128003340

OMB No. 1545-0047

Open to Public

# **Supplemental Financial Statements**

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to <u>www.irs.gov/Form990</u> for the latest information.

Inspection

	me of the organization RICAN ASSOCIATION OF SCHOOL	-		Employe	er identification n	umber
	RICAN ASSOCIATION OF SCHOOL IINISTRATORS			54-1999	9773	
Pā	organizations Maintaining Donor Adv			or Accou	ınts.	
	Complete if the organization answered "Ye		rt IV, line 6. dvised funds	14	)Funds and other	accounts
1	Total number at end of year	(a) Donor a	lavisea failas	(D	runus and other	accounts
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor adviso	rs in writing that the	assets held in donor adv	vised fund:	s are the	
	organization's property, subject to the organization's ex					Yes 🗆 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or	or any other purpose co			Yes 🗆 No
Pa	rt II Conservation Easements. Complete if t	he organization ans	swered "Yes" on Form	า 990, Pa	rt IV, line 7.	
1	Purpose(s) of conservation easements held by the orga	nization (check all tha	t apply).			
	Preservation of land for public use (e.g., recreation	or education)	Preservation of an	historically	y important land a	rea
	Protection of natural habitat	(	Preservation of a c	ertified his	storic structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation	n contribution in the for		nservation Held at the End o	of the Year
а	Total number of conservation easements			2a		
b	Total acreage restricted by conservation easements . $% \left( {{\mathbf{r}}_{1}}\right) =\left( {{\mathbf{r}}_{2}}\right) =\left( {{\mathbf{r}}_{1}}\right) =\left( {{\mathbf{r}}_{2}}\right) =\left( {{\mathbf{r}}_{1}}\right) =\left( {{\mathbf{r}}_{2}}\right) =\left( {{\mathbf{r}}_{1}}\right) =\left( {{\mathbf{r}}_{2}}\right) =\left( {{\mathbf{r}_{2}}\right) =\left( {{\mathbf{r}}_{2}}\right) =\left( {{\mathbf{r}}_{2}$			2b		
c	Number of conservation easements on a certified histor	ic structure included i	n (a)	2c		
d	Number of conservation easements included in (c) acquistructure listed in the National Register	ired after 7/25/06, and	d not on a historic	2d		
3	Number of conservation easements modified, transferred tax year	ed, released, extinguis	hed, or terminated by t	the organiz	zation during the	
4	Number of states where property subject to conservation	on easement is located	d <b>&gt;</b>			
5	Does the organization have a written policy regarding the enforcement of the conservation easements it holds? .			of violation	ns, and	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	cting, handling of viola	ations, and enforcing co	nservatior		
7	Amount of expenses incurred in monitoring, inspecting,	handling of violations	, and enforcing conserv	ation ease	ements during the	year
•	<b>▶</b> \$		-		-	
8	Does each conservation easement reported on line 2(d)			70(h)(4)(B)	)(i)	
	and section 170(h)(4)(B)(ii)?				☐ Yes	□ No
9	In Part XIII, describe how the organization reports conse balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organ	its revenue and expens nization's financial state	se stateme ements tha	ent, and at describes	
Pa	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historica		ner Simil	lar Assets.	
1a	If the organization elected, as permitted under SFAS 11 art, historical treasures, or other similar assets held for in Part XIII, the text of the footnote to its financial states	public exhibition, edu	cation, or research in fu			
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for pub following amounts relating to these items:	6 (ASC 958), to report	in its revenue stateme	nt and bal erance of p	ance sheet works oublic service, prov	of art, vide the
(	i) Revenue included on Form 990, Part VIII, line 1			. ▶\$		
	i) Assets included in Form 990, Part X			· <del>-</del>		
2	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1	cal treasures, or other	similar assets for finan	-	provide the	
а	Revenue included on Form 990, Part VIII, line $1 \ldots \ldots$			►\$		
b	Assets included in Form 990, Part X			<b>&gt;</b> \$		<u></u>
	Paperwork Reduction Act Notice, see the Instructio				Schedule D (F	orm 990) 2018

Par	t III	Organizations M	laintaining Collec	tions of Art, His	storical	Treas	sures, or	Other	r Similar As	ssets (	continue	d)
3		g the organization's acq s (check all that apply):		nd other records, che	eck any of	the fo	ollowing that	are a	significant us	e of its o	collection	1
а		Public exhibition			d _	Loan	or exchang	e prog	rams			
b		Scholarly research			e 🗆	Othe	er					
c		Preservation for future	generations									
4	Provid	de a description of the	organization's collecti	ons and explain how	v they furt	her th	e organizati	on's ex	empt purpos	e in		
5	Durin	ng the year, did the orga is to be sold to raise fur								☐ Yes		No
Pai	t IV		odial Arrangeme ganization answere		990, Part	IV, lir	ne 9, or rep	orted	an amount			
1a		e organization an agent ded on Form 990, Part )								☐ Yes		No
b	If "Ye	s," explain the arrange	ment in Part XIII and c	omplete the following	ng table:				An	nount		<u> </u>
c		nning balance		•	•		1	.c		- Iouiic		
d	_	ions during the year .					. 1	d				
e		ibutions during the year					_	.e				
f		ng balance						.f				
22		he organization include					<u> </u>	unt link	silitu2			
2a		•							_	U Yes		No
b		s," explain the arranger	<b>ds.</b> Complete if the									
Pa	rt V	Endowment run	<u> </u>	(a)Current year	(b)Prior ye		(c)Two year		(d)Three year	re back	(a)Four v	nare hack
1a	Reginn	ning of year balance .	, <del></del>	1,178,698		5,869		.68,651		42,545	(e)Four ye	1,121,142
	-	butions		28,605		26,754	<u> </u>	27,143		26,031		27,016
		vestment earnings, gair	os and lossos	9,124		75		75		75		78
		or scholarships	-									
		·										
	and pro	expenditures for facilition ograms		1,915	4	4,000						5,691
		istrative expenses .										
g	End of	year balance		1,214,512	1,17	8,698	1,1	.95,869	1,1	68,651		1,142,545
2	Provid	de the estimated perce	ntage of the current y	ear end balance (lin	ne 1g, colu	ımn (a	)) held as:					
а	Board	d designated or quasi-e	ndowment 🕨 86.8	380 %								
b	Perma	anent endowment 🕨	12.350 %									
c	Temp	orarily restricted endov	vment ▶ 0.770 %	, 5								
	The p	percentages on lines 2a	, 2b, and 2c should ed	ıual 100%.								
3a		here endowment funds	not in the possession	of the organization	that are h	eld an	id administe	red for	the			
	_	nization by: nrelated organizations								3a	Yes	No No
		•					• •			3a		No
b		elated organizations . s" on 3a(ii), are the rela			hedule R	· ·				3		110
4		ribe in Part XIII the inte	3	•		-		-				
Pai	t VI	Land, Buildings,	and Equipment.									
			ganization answere	d "Yes" on Form 9	990, Part	IV, lir	ne 11a. See	Form	n 990, Part X	(, line 1	.0.	
	Descri	iption of property	(a) Cost or other ba (investment)	sis <b>(b)</b> Cost or o	other basis	(other)	(c) Accum	ulated d	lepreciation	(c	I) Book va	lue
1a	Land				1,1	120,555	5					1,120,555
		ngs							754,200			2,072,167
	Rillidin	9				326.367			,			
b		and improvements			2,0	326,367 18.102			18 102			
b c	Leaseh	nold improvements				18,102	?		18,102 1 672 567			0
b c d	Leaseh Equipn	nold improvements					?		18,102 1,672,567			

Part VII Investments Other Securities. Complete if the See Form 990, Part X, line 12.	organization answ	ered "Yes" on Form 990, Pa	art IV, line 11b.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-ye	
(1) Financial derivatives			
(2) Closely-held equity interests	000 561	-	
(A) 93092.97-VG FIXED INC SECS F STRM INGRA AD FD #539 (VFSUX)	999,561	F _	
(B) 4927.02-VANGAURD 500 INDEX FUND (VFIAX) (B)	1,337,193	F	
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	2,336,754		
Part VIII Investments Program Related.  Complete if the organization answered 'Yes' on For		11c Soo Form 000 Part	Y line 13
(a) Description of investment	(b) Book value	(c) Method o	of valuation:
(1)		Cost or end-of-ye	ear market value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)			
Part IX Other Assets. Complete if the organization answered '	Yes' on Form 990, Par	 t IV, line 11d. See Form 990, I	
(1) (a) Description			(b) Book value
(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 an	swered 'Yes' on Fo	rm 990, Part IV, line 11e o	r 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	<b>(b)</b> Bo	ook value	
(1) Federal income taxes			
ACCRUED POSTRETIREMENT MEDICAL BENEFITS  DEFERRED COMPENSATION		3,303,679 506,389	
DEFERRED RENT DEPOSIT		6,300	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	<b>b</b>	3,816,368	
2. Liability for uncertain tax positions. In Part XIII, provide the text of the		anization's financial statement ext of the footnote has been p	_

Jene	idle D (101111 990) 2010					raye •			
Pai		evenue per Audited Financial Statem nization answered 'Yes' on Form 990, Part			eturr	1			
1	·	support per audited financial statements .			1	12,977,553			
2	Amounts included on line 1 but	not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on	investments	2a	264,185					
b	Donated services and use of fac	ilities	2b						
c	Recoveries of prior year grants		2c						
d	Other (Describe in Part XIII.) .		2d						
e			٠		2e	264,185			
3	Subtract line <b>2e</b> from line <b>1</b> .				3	12,713,368			
4	Amounts included on Form 990,	Part VIII, line 12, but not on line 1:							
a	Investment expenses not include	ed on Form 990, Part VIII, line 7b .	4a	37,237					
b	Other (Describe in Part XIII.) .		4b	-128,024					
c	Add lines 4a and 4b		·		4c	-90,787			
5	Total revenue. Add lines 3 and 4	<b>Ic.</b> (This must equal Form 990, Part I, line 12.)			5	12,622,581			
Par		xpenses per Audited Financial State			Retu	rn.			
	,	nization answered 'Yes' on Form 990, Part			1	<del>,</del>			
1	·	udited financial statements			1	12,273,246			
2		not on Form 990, Part IX, line 25:		•					
а		ilities	2a						
b	•		2b						
С			2c						
d	,		2d	62,775					
е	•				2e	62,775			
3					3	12,210,471			
4		Part IX, line 25, but not on line 1:	ı	•					
а	•	ed on Form 990, Part VIII, line 7b	4a	37,237					
b	,		4b						
С					4c	37,237			
5		<b>4c.</b> (This must equal Form 990, Part I, line 18.)			5	12,247,708			
	rt XIII Supplemental Inf								
		Part II, lines 3, 5, and 9; Part III, lines 1a and 4; 4b. Also complete this part to provide any addit			ne 4; F	Part X, line 2; Part XI, lines			
	Return Reference		Exp	olanation					
PART	V, LINE 4:	THE INTENDED USE OF THE ENDOWMENT FU ARE USED TO SUPPORT A GENERAL SESSION							
PART	X, LINE 2:	THE ASSOCIATION IS GENERALLY EXEMPT FRO							
		501(C)(3) OF THE INTERNAL REVENUE CODE CHARITABLE CONTRIBUTION DEDUCTIONS AN							
		PRIVATE FOUNDATION. UNDER CURRENT INTE	ERNAL F	REVENUE SERVICE (IRS) RE	EGULA	TIONS, RENTAL INCOME,			
		ADVERTISING EARNED IN THE PUBLICATION C TRANSPORTATION FRINGE BENEFITS ARE SUB							
		ARISE DUE TO THE TIMING DIFFERENCE IN RE							
		ON ACCOUNTING FOR UNCERTAINTY IN INCOMBENEFITS CLAIMED OR EXPECTED TO BE CLA							
		FINANCIAL STATEMENTS. UNDER THIS GUIDAL AN UNCERTAIN TAX POSITION ONLY IF IT IS MO							
		SUSTAINED ON EXAMINATION BY TAXING AUT							
		THE TAX BENEFITS RECOGNIZED IN THE FINA BASED ON THE LARGEST BENEFIT THAT HAS A							
		ULTIMATE SETTLEMENT. THE GUIDANCE ON A	CCOUN	TING FOR UNCERTAINTY I	N INCO	ME TAXES ALSO			
		ADDRESSES DE-RECOGNITION, CLASSIFICATION  ACCOUNTING IN INTERIM PERIODS MANAGEM							
		ACCOUNTING IN INTERIM PERIODS. MANAGEMENT EVALUATED THE ASSOCIATION'S TAX POSITION AND IS NOT AWARE OF ANY UNCERTAIN TAX POSITIONS; THEREFORE, NO TAX LIABILITIES HAVE BEEN RECORDED AS OF							
		JUNE 30, 2019, OR ANY RELATED INTEREST A STATEMENT OF ACTIVITIES.	ND PEN	ALTIES INCLUDED IN THE	BALAN	ICE SHEET OR			
	XI, LINE 4B - OTHER STMENTS:	COST OF GOODS SOLD REPORTED ON LINE 1	0B -12,!	587. RENTAL EXPENSES R	EPORT	ED ON LINE 6B -115,437.			
PART	XII, LINE 2D - OTHER STMENTS:	COST OF GOODS SOLD REPORTED ON LINE 1-65,249. RENTAL EXPENSES REPORTED ON LII			EMENT	LIABILITY ADJUSTMENT			
, , ,	-								

efile GRAPHIC print Submission Date - 2020-05-07 DLN: 93493128003340 **Compensation Information** OMB No. 1545-0047 Schedule I (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service **Employer identification number** Name of the organization ADMINISTRATORS 54-1999773 Part I **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use **~** Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all Yes 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: 4a No 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? . . . . No Participate in, or receive payment from, an equity-based compensation arrangement? . . . 4c No If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: The organization? . . . . . . 5a Yes Any related organization? . . . . . 5b No If "Yes," on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization?. 6a No 6b Any related organization? . . . . . No If "Yes," on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III . . . . . 7 No Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III. 8 No If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 9 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule J (Form 990) 2018

Cat. No. 50053T

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title			lown of W-2 and/or		(C) Retirement	(D) Nontaxable	(E) Total of	(F)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	and other deferred compensation	benefits	columns (B)(i)-(D)	Compensation in column (B) reported as deferred on prior Form 990
1DANIEL DOMENECH EXECUTIVE DIRECTOR	(i)	420,311	0	31,353	13,750	5,315	470,729	0
	(ii)	0	0	0	0	0	0	0
	(i)	219,601	0	3,200	11,526	2,014	236,341	0
	(ii)	0	0	0	0	0	0	0
3EVELYN GILLIAM DIRECTOR OF FINANCE	(i)	140,434	0	17,584	8,440	6,199	172,657	0
	(ii)	0	0	0	0	0	0	0
4MORT SHERMAN ASSOC EXEC DIR	(i)	170,865	0	2,864	9,148	5,544	188,421	0
	(ii)	0	0	0	0	0	0	0
	(i)	165,433	0	2,785	8,943	5,084	182,245	0
	(ii)	0	0	0	0	0	0	0
	(i)	149,894	0	487	8,014	10,366	168,761	0
	(ii)	0	0	0	0	0	0	0
	(i)	138,207	0	2,536	7,622	21,293	169,658	0
	(ii)	0	0	0	0	0	0	0
8NOELLE ELLERSON ASSOC EXEC DIR	(i)	140,374	0	274	7,608	17,783	166,039	0
	(ii)	0	0	0	0	0	0	0
	(i)	123,776	68,623	205	6,594	7,599	206,797	0
	(ii)	0	0	0	0	0	0	0
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## Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	DANIEL A. DOMENECH RECEIVED TRAVEL FOR COMPANION BENEFITS IN THE AMOUNT OF \$9,145.15 WHICH WERE REPORTED AS TAXABLE COMPENSATION.
PART I, LINE 5	A BONUS PLAN WAS AVAILABLE TO EMPLOYEES WHO WERE DIRECTLY RESPONSIBLE FOR GENERATING REVENUE THROUGH CORPORATE AND STRATEGIC PARTNERSHIPS. THE BONUS WAS AWARDED WHEN REVENUE EXCEEDED THE APPROVED BUDGET CATEGORY FOR THE FISCAL YEAR BY THIRTY PERCENT. ONCE THE
	REVENUE GOAL WAS ACHIEVED, A BONUS WAS PAID REPRESENTING FIFTY PERCENT OF THE EMPLOYEE'S BASE SALARY.

Schedule J (Form 990) 2018

Software ID:

**Software Version:** 

efile GRAPHIC print

Submission Date - 2020-05-07

DLN: 93493128003340

OMB No. 1545-0047

2018
Open to Public Inspection

## SCHEDULE O (Form 990 or 990-EZ)

Department of the

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.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

Employer identification number

ମିନିଲିଆର୍ଧ୍ୱ the organization MARTICAN PENERUMATION OF SCHOOL SEMMINISTRATORS

54-1999773

SALE IMMÍNICE TRATORS		54-1999773
Return Reference	Explanation	
FORM 990, PART VI, SECTION A, LINE 6	SINCE 1865, SCHOOL SYSTEM LEADERS HAVE JOINED THE AMERICAN ASSOC ADMINISTRATORS (AASA) FOR PROFESSIONAL SUPPORT AND DEVELOPMENT, NETWORKING, AND REPRESENTATION AT THE FEDERAL LEVEL AND TO SUPPADVANCE PUBLIC EDUCATION FOR ALL CHILDREN. AASA REPRESENTS SCHO AT BOTH THE BUILDING AND CENTRAL OFFICE LEVEL. AASA'S PRIMARY MEMI DISTRICT SUPERINTENDENTS AND THOSE WHO ASPIRE TO THAT POSITION. A PROFESSORS WHO ARE PREPARING SCHOOL ADMINISTRATORS.	, INFORMATION AND NEWS, ORT THE AASA MISSION TO OL DISTRICT ADMINISTRATORS BERS ARE PUBLIC SCHOOL
FORM 990, PART VI, SECTION A, LINE 7A	ANY MEMBER IN THE ACTIVE MEMBERSHIP CATEGORY WHO IS SERVING ON, LAST 3 YEARS, EITHER THE GOVERNING BOARD OR THE EXECUTIVE COMMITHEIR STATE ASSOCIATION IS ELIGIBLE TO RUN FOR PRESIDENT-ELECT OF AN SERVES A ONE YEAR TERM BEFORE BECOMING PRESIDENT FOR ONE YEAR. PRESIDENTIAL TERM HE/SHE BECOMES THE IMMEDIATE PAST PRESIDENT FOR CANDIDATES FILE APPROPRIATE MATERIALS AND A \$500 FILING WITH AASA IN DECEMBER. THE ELECTION COMMITTEE MEETS VIA CONFERENCE CALL TO TO DECLARE THE CANDIDATE(S) ELIGIBLE. THE GOVERNING BOARD AT ITS WITH CANDIDATE(S) FOR PRESIDENT-ELECT. IF MORE THAN 3 CANDIDATES AR THE GOVERNING BOARD MUST REDUCE THAT NUMBER TO NO MORE THAN 3 CANNOT ADD CANDIDATES. ELIGIBLE VOTING MEMBERS RECEIVE VOTING MATELECTRONICALLY OR VIA US MAIL. THE CANDIDATE RECEIVING A PLURALITY ELECTED.	TTEE AND IS A MEMBER OF ASA. THE PRESIDENT-ELECT FOLLOWING HIS/HER ONE YEAR. INTERESTED NO LATER THAN THE 1ST FRIDAY OREVIEW THE MATERIALS AND WINTER MEETING NOMINATES E VYING FOR THE NOMINATION, THE GOVERNING BOARD ATERIALS EITHER
FORM 990, PART VI, SECTION B, LINE 11B	THE 990 WILL BE REVIEWED BY THE AUDIT COMMITTEE. THE AUDIT COMMIT 990 WITH THE FULL EXECUTIVE COMMITTEE AT ITS NEXT MEETING FOLLOWII WILL HAVE THE OPPORTUNITY TO REVIEW THE RETURN.	
FORM 990, PART VI, SECTION B, LINE 12C	ANNUALLY AT THE FIRST BOARD MEETING OF THE YEAR, THE POLICY MANUAL MEETING. THE POLICY MANUAL, WHICH INCLUDES THE CONFLICT OF INTEREST THE EXECUTIVE COMMITTEE. A CONFLICT OF INTEREST STATEMENT IS SIGNE AT THIS MEETING. COMMITTEE MEMBERS ABSENT FROM THIS MEETING ARE A STATEMENT TO SIGN AND RETURN, OR THIS INFORMATION IS REVIEWED A MEETING OF THE YEAR.	ST POLICY, IS REVIEWED WITH ED BY EACH COMMITTEE MEMBER SENT THE POLICY MANUAL AND
FORM 990, PART VI, SECTION B, LINE 15A	THE AMERICAN ASSOCIATION OF SCHOOL ADMINISTRATORS (AASA) USES OF CONSULTANTS TO REVIEW ITS SALARIES ON REGULAR BASIS. THIS REVIEW ITHE ASSOCIATION'S COMPETITIVE POSITION RELATIVE TO PUBLISHED SURVE PAY OF EXECUTIVES AND OTHER EMPLOYEES IS REASONABLE. THE SALARY OF EXECUTIVE DIRECTOR IS DETERMINED BY THE EXECUTIVE COMMITTEE BY MASTAFF COMPENSATION ARE APPROVED BY EXECUTIVE DIRECTOR OR CHIEF OF ANNUAL REVIEW OF SALARIES WAS CONDUCTED IN 2018 WITH EMPLOYEES IS SALARY INCREASE OF 3%.	PROVIDES INFORMATION ABOUT EY DATA AND ASSURES THAT THE OF THE ASSOCIATION'S ARKET COMPARISONS. OTHER OPERATING OFFICER. THE
FORM 990, PART VI, SECTION C, LINE 19	THE POLICIES AND PROCEDURES (WHICH INCLUDES CONFLICT OF INTEREST THE ORGANIZATION'S WEBSITE. ALL MEMBERS WILL HAVE ACCESS TO THES INFORMATION IS RECORDED IN THE ANNUAL REPORT AND APPROVED BUDGIDISTRIBUTED IN JULY OF EACH YEAR.	E DOCUMENTS. FINANCIAL
FORM 990, PART IX, LINE 11G	CONSULTANT: PROGRAM SERVICE EXPENSES 429,960. MANAGEMENT AND G FUNDRAISING EXPENSES 0. TOTAL EXPENSES 523,852. TEMPORARY HELP: Pl 49,048. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES HONORARIUM: PROGRAM SERVICE EXPENSES 80,125. MANAGEMENT AND G FUNDRAISING EXPENSES 0. TOTAL EXPENSES 83,125. BROKERAGE & COMMI EXPENSES 53,028. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING 53,028. ROYALTY: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENIFUNDRAISING EXPENSES 0. TOTAL EXPENSES 21. LIST RENTAL: PROGRAM SI MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL PUBLICATION SERVICES: PROGRAM SERVICE EXPENSES 9,250. MANAGEMENT FUNDRAISING EXPENSES 0. TOTAL EXPENSES 9,250. PRESIDENT'S SUBSIDY: 50,000. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES LEAD TEACHERS: PROGRAM SERVICE EXPENSES 310,567. MANAGEMENT AN FUNDRAISING EXPENSES 0. TOTAL EXPENSES 310,567. MENTORS: PROGRAM MANAGEMENT AND GENERAL EXPENSES 310,567. MENTORS: PROGRAM MANAGEMENT AND GENERAL EXPENSES 4,850. MANAGEMENT AND FUNDRAISING EXPENSES 0. TOTAL EXPENSES 4,850. MANAGEMENT AND FUNDRAISING EXPENSES 0. TOTAL EXPENSES 4,850. OTHER PROFESSIONAL EXPENSES 803,095. MANAGEMENT AND GENERAL EXPENSES 225. FUNDRAIS EXPENSES 803,320.	ROGRAM SERVICE EXPENSES  6 0. TOTAL EXPENSES 49,048. ENERAL EXPENSES 3,000. ISSION: PROGRAM SERVICE EXPENSES 0. TOTAL EXPENSES ERAL EXPENSES 21. ERVICE EXPENSES 23,869. AL EXPENSES 23,869. T AND GENERAL EXPENSES 0. PROGRAM SERVICE EXPENSES 6 0. TOTAL EXPENSES 50,000. D GENERAL EXPENSES 0. M SERVICE EXPENSES 231,725. AL EXPENSES 231,725. CRISIS D GENERAL EXPENSES 0. SERVICES: PROGRAM SERVICE
FORM 990, PART XI, LINE 9:	MINIMUM POSTRETIREMENT LIABILITY ADJUSTMENT 65,249.	
For Panerwork	Reduction Act Notice, see the Instructions for Form 990 or Cat. No. 51056K	Schedule O (Form 990 or 990-EZ)