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Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements	OMB No 1545-0047
		2010
		Open to Public Inspection

A For the 2010 calendar year, or tax year beginning 03-01-2010 and ending 02-28-2011				
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending	C Name of organization Experimental Aircraft Association Inc		D Employer identification number 39-0917537	
	Doing Business As		E Telephone number (920) 426-4800	
	Number and street (or P O box if mail is not delivered to street address) PO BOX 3086		Room/suite	
	City or town, state or country, and ZIP + 4 Oshkosh, WI 549033086		G Gross receipts \$ 37,827,379	
	F Name and address of principal officer Rodney Hightower PRESIDENT 3000 POBEREZN Y ROAD OSHKOSH, WI 54902		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☐ No If "No," attach a list (see instructions) H(c) Group exemption number ▶	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀ (Insert no) ☐ 4947(a)(1) or ☐ 527				
J Website: ▶ WWW EAA ORG				
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶			L Year of formation 1955	M State of legal domicile WI

Part I		Summary	
Activities & Governance	1 Briefly describe the organization’s mission or most significant activities EAA is dedicated to growing aviation through participation EAA ignites and nurtures interest by embracing the "Spirit of Aviation" in all that we do		
	2 Check this box ☒ if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	35
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	32
	5 Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	878
	6 Total number of volunteers (estimate if necessary)	6	6,000
	7a	1,930,819	
	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	16,782,108	10,089,256
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	17,122,002	22,251,163
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-192,355	42,017
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,245,543	2,305,954
		35,957,298	34,688,390
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	66,900	315,622
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	12,688,090	12,732,818
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) ☒ 869,390		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	22,675,517	22,098,456
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	35,430,507	35,146,896
	19 Revenue less expenses Subtract line 18 from line 12	526,791	-458,506
Net Assets or Fund Balances		Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)	33,420,901	37,022,419
	21 Total liabilities (Part X, line 26)	16,600,168	20,497,519
	22 Net assets or fund balances Subtract line 21 from line 20	16,820,733	16,524,900

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

Sign Here	***** Signature of officer		2012-01-16 Date		
	Brian Wierzbinski Chief Financial Officer Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ☐	PTIN
	Firm's name ▶ Grant Thornton LLP				Firm's EIN ▶
	Firm's address ▶ 100 E Wisconsin Ave Milwaukee, WI 53202				Phone no ▶ (414) 289-8200

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

Part III

Statement of Program Service Accomplishments

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

1

Briefly describe the organization’s mission

EXPERIMENTAL AIRCRAFT ASSOCIATION, INC IS dedicated to growing aviation through participation We strive to deliver offerings and activities which guide new participants, reduce barriers to participation, and make participation easier and more fun EAA ignites and nurtures interest by embracing the "Spirit of Aviation" in all that we do EAA is organized and operated exclusively for educational, scientific and charitable purposes EAA cooperates with and assists governmental agencies in the development of programs relating to aviation activities, promotes and encourages aviation safety, promotes and encourages grass roots efforts relating to aviation research and development and promotes and encourages aviation among youth through education

2

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

If “Yes,” describe these new services on Schedule O

3

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

If “Yes,” describe these changes on Schedule O

4

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

4a

(Code) (Expenses \$ 8,589,123 including grants of \$ 0) (Revenue \$ 12,766,757)

AIRVENTURE - THE WORLD'S LARGEST AVIATION EVENT IS HELD EACH YEAR IN LATE JULY AIRVENTURE EDUCATES THOSE ATTENDING ON AVIATION AND AIRCRAFT THROUGH EXHIBITS, DEMONSTRATION AIRSHOWS, EDUCATIONAL SESSIONS, AND INTERACTIVE DISPLAYS

4b

(Code) (Expenses \$ 3,550,182 including grants of \$ 0) (Revenue \$ 2,133,547)

PUBLICATIONS - "SPORT AVIATION" is a MONTHLY PUBLICATION ISSUED TO MEMBERS WITH A VARIETY OF INFORMATION ON AVIATION "AIRVENTURE TODAY" IS A Daily newspaper PRINTED EVERY DAY DURING AIRVENTURE

4c

(Code) (Expenses \$ 3,159,115 including grants of \$ 0) (Revenue \$ 2,220,511)

MUSEUM - THE AIRVENTURE MUSEUM HOUSES A COLLECTION OF OVER 250 HISTORIC AIRPLANES AND THOUSANDS OF AVIATION ARTIFACTS THE MUSEUM PRESERVES AVIATION HISTORY AND OFFERS A PLACE FOR YOUTH TO ALLOW THEIR IMAGINATION TO TAKE FLIGHT

4d

Other program services (Describe in Schedule O) See also Additional Data for Description

(Expenses \$ 12,664,193 including grants of \$ 315,622) (Revenue \$ 7,295,824)

4e

Total program service expenses \$ 27,962,613

Part IV

Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II 	4 Yes	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	
6 Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8 Yes	
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII. 	11b	No
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII. 	11c	No
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX. 	11d Yes	
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X. 	11e Yes	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. 	11f Yes	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b	No
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV	16	No
17 Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19 Yes	
20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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? <i>If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	Yes	
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? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
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	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> ☒ Yes ☐ No			
36	Section 501(c)(3) organizations. 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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance			
Check if Schedule O contains a response to any question in this Part V ☐			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	165
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b	7
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return.	2a	878
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	Yes
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	No
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	Yes
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

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 to any question in this Part VI ☒

Section A. Governing Body and Management			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a35		
b	Enter the number of voting members included in line 1a, above, who are independent	1b32		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 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	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	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 reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	15b	Yes	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure	
17	List the States with which a copy of this Form 990 is required to be filed▶WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. ☐ Own website ☐ Another's website ☒ Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ BRIAN WIERZBINSKI 3000 POBEREZNY RD OSHKOSH, WI 54901 (920) 426-4812

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

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

Form **990** (2010)

Part VII

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,144,732	0	408,358

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶12

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
PITNEY BOWES INTERNATIONAL 1 ELMCROFT ROAD STAMFORD, CT 06929	POSTAGE SERVICE	269,739
MPB BUILDERS INC 654 E OSHKOSH ST RIPON, WI 54971	CONSTRUCTION	212,988
GRANT THORNTON LLP 100 E WISCONSIN AVE SUITE 2100 MILWAUKEE, WI 53202	ACCOUNTING	209,165
PSA 485 EAST HALF DAY ROAD BUFFALO GROVE, IL 60089	MEMBERSHIP ACQUISTN	195,888
PITNEY BOWES PRESORT SERVICES 1 ELMCROFT ROAD STAMFORD, CT 06926	POSTAGE SERVICE	195,621
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ▶15		

Part VIII

Statement of Revenue

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514		
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	2,305,398				
	d	Related organizations	1d	1,037,404				
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	6,746,454				
	g	Noncash contributions included in lines 1a-1f \$		929,891				
	h	Total. Add lines 1a-1f		10,089,256				
	Program Service Revenue			Business Code				
2a		FLY-IN REGISTRATION	900099	6,018,238	6,018,238			
b		MEMBERSHIP DUES	900099	5,544,762	5,544,762			
c		FLY-IN RENTALS	532000	3,998,894			3,998,894	
d		PUBLICATION/ADVERTISING	541800	1,990,771	112,005	1,878,766		
e		AIRCRAFT ADMISSIONS	900099	1,662,882	1,662,882			
f		All other program service revenue					577,224	
			3,035,616					
g		Total. Add lines 2a-2f		22,251,163				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)						
				60,117			60,117	
	4	Income from investment of tax-exempt bond proceeds						
				0				
	5	Royalties					123,456	
				123,456				
	6a	Gross Rents	(i) Real	(ii) Personal				
			94,434	211,376				
	b	Less rental expenses						
	c	Rental income or (loss)	94,434	211,376				
	d	Net rental income or (loss)			305,810	211,376		94,434
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			62,646	22,633				
	b	Less cost or other basis and sales expenses	63,781	39,598				
	c	Gain or (loss)	-1,135	-16,965				
	d	Net gain or (loss)			-18,100			-18,100
	8a	Gross income from fundraising events (not including \$ 2,305,398 of contributions reported on line 1c) See Part IV, line 18						
			a	84,963				
	b	Less direct expenses	b	741,768				
	c	Net income or (loss) from fundraising events			-656,805			-656,805
	9a	Gross income from gaming activities See Part IV, line 19	a	538,987				
	b	Less direct expenses	b	428,246				
	c	Net income or (loss) from gaming activities			110,741			110,741
10a	Gross sales of inventory, less returns and allowances							
		a	2,259,237					
b	Less cost of goods sold	b	1,865,596					
c	Net income or (loss) from sales of inventory			393,641	341,588	52,053		
Miscellaneous Revenue		Business Code						
11a	ADMINISTRATIVE FEES	561000	1,391,134	1,391,134				
b	INSURANCE COMMISSIONS	900099	406,452				406,452	
c	DISPLAY CONSTRUCTION INCOME	900099	128,772	128,772				
d	All other revenue		102,753	92,606			10,147	
e	Total. Add lines 11a-11d		2,029,111					
12	Total revenue. See Instructions		34,688,390	17,961,755	1,930,819		4,706,560	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	174,427	174,427		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	141,195	141,195		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	2,628,432	640,358	1,614,180	373,894
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	14,280	14,280		
7	Other salaries and wages	7,611,335	3,771,935	3,790,977	48,423
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	626,253		626,253	
9	Other employee benefits	1,231,394	693	1,230,426	275
10	Payroll taxes	621,124	254,858	357,484	8,782
a	Fees for services (non-employees) Management	0			
b	Legal	48,873		48,873	
c	Accounting	197,729		197,729	
d	Lobbying	240,005	240,005		
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	2,062,439	2,028,469	257,105	-223,135
12	Advertising and promotion	782,248	718,945	20,859	42,444
13	Office expenses	4,192,879	3,500,056	613,246	79,577
14	Information technology	268,683		268,683	
15	Royalties	0			
16	Occupancy	2,175,501	114,360	2,061,141	
17	Travel	987,742	851,631	92,266	43,845
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	181,639	118,606	55,150	7,883
20	Interest	161,524	184	161,340	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,854,006	72,546	1,781,460	
23	Insurance	1,385,140	54,662	1,329,499	979
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	RESTRICTED FUNDS EXPENDITURE	3,666,606	3,666,606		
b	REPAIRS AND MAINTENANCE	647,118	340,867	303,988	2,263
c	CREDIT CARD DISCOUNTS	578,929		578,929	
d	FUEL	557,976	497,248	60,728	
e	PUBLIC RELATIONS	448,339	330,540	84,072	33,727
f	All other expenses	1,661,080	10,430,142	-9,219,495	450,433
25	Total functional expenses. Add lines 1 through 24f	35,146,896	27,962,613	6,314,893	869,390
26	Joint costs. Check here ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

						(A)		(B)
						Beginning of year		End of year
Assets	1	Cash—non-interest-bearing				642,280	1	2,132,839
	2	Savings and temporary cash investments				1,651,633	2	815,680
	3	Pledges and grants receivable, net				448,837	3	300,893
	4	Accounts receivable, net				1,350,627	4	1,737,945
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L					5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Schedule L					6	
	7	Notes and loans receivable, net				0	7	84,101
	8	Inventories for sale or use				318,714	8	317,283
	9	Prepaid expenses and deferred charges				775,631	9	747,492
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	47,191,913	21,622,486	10c	24,858,355	
	b	Less: accumulated depreciation	10b	22,333,558				
	11	Investments—publicly traded securities				1,935,783	11	2,180,940
	12	Investments—other securities. See Part IV, line 11					12	
	13	Investments—program-related. See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets. See Part IV, line 11				4,674,910	15	3,846,891
16	Total assets. Add lines 1 through 15 (must equal line 34)				33,420,901	16	37,022,419	
Liabilities	17	Accounts payable and accrued expenses				2,773,422	17	2,329,848
	18	Grants payable					18	
	19	Deferred revenue				6,048,017	19	7,461,636
	20	Tax-exempt bond liabilities				4,552,996	20	7,430,831
	21	Escrow or custodial account liability. Complete Part IV of Schedule D					21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L					22	
	23	Secured mortgages and notes payable to unrelated third parties				148,290	23	102,327
	24	Unsecured notes and loans payable to unrelated third parties				1,680,000	24	1,599,216
	25	Other liabilities. Complete Part X of Schedule D				1,397,443	25	1,573,661
	26	Total liabilities. Add lines 17 through 25				16,600,168	26	20,497,519
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29, and lines 33 and 34.							
	27	Unrestricted net assets				15,101,654	27	15,561,914
	28	Temporarily restricted net assets				1,719,079	28	962,986
	29	Permanently restricted net assets					29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.							
	30	Capital stock or trust principal, or current funds					30	
	31	Paid-in or capital surplus, or land, building or equipment fund					31	
	32	Retained earnings, endowment, accumulated income, or other funds					32	
	33	Total net assets or fund balances				16,820,733	33	16,524,900
	34	Total liabilities and net assets/fund balances				33,420,901	34	37,022,419

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	34,688,390
2	Total expenses (must equal Part IX, column (A), line 25)	2	35,146,896
3	Revenue less expenses Subtract line 2 from line 1	3	-458,506
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	16,820,733
5	Other changes in net assets or fund balances (explain in Schedule O)	5	162,673
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	16,524,900

Part XII Financial Statements and Reporting

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

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

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization Expenmental Aircraft Association Inc	Employer identification number 39-0917537
--	--

Part I

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 11, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4

☐

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
- 5

☐

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)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7

☐

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)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**
- 11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other
- e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
- f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box
- g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?
- h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II

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

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
14 Public Support Percentage for 2010 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2009 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support test—2009. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
17a 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
b 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶		

Part IIIPart III

Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	10,702,845	9,913,027	17,881,024	16,782,108	10,089,256	65,368,260
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	18,024,660	19,451,453	17,906,371	19,585,237	24,389,461	99,357,182
3 Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	623,950	623,950
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	28,727,505	29,364,480	35,787,395	36,367,345	35,102,667	165,349,392
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	204,082	270,775	195,330	149,122	137,665	956,974
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	690,993	732,508	679,805	635,619	575,170	3,314,095
c Add lines 7a and 7b	895,075	1,003,283	875,135	784,741	712,835	4,271,069
8 Public Support (Subtract line 7c from line 6)						161,078,323

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9 Amounts from line 6	28,727,505	29,364,480	35,787,395	36,367,345	35,102,667	165,349,392
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	533,429	613,486	618,762	524,433	684,459	2,974,569
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	533,429	613,486	618,762	524,433	684,459	2,974,569
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	60,177	60,177
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	118,736	142,825	453,199	405,321	10,147	1,130,228
13 Total support (Add lines 9, 10c, 11 and 12)	29,379,670	30,120,791	36,859,356	37,297,099	35,857,450	169,514,366
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage			
15 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	95 0 2 3 %	
16 Public support percentage from 2009 Schedule A, Part III, line 15	16	94 6 3 9 %	

Section D. Computation of Investment Income Percentage			
17 Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	1 7 5 5 %	
18 Investment income percentage from 2009 Schedule A, Part III, line 17	18	1 7 0 8 %	
19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
b 33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶			
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions ▶			

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

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

OMB No 1545-0047

2010

Open to Public Inspection

If the organization answered “Yes,” to 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

If the organization answered “Yes,” to 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,” to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization Experimental Aircraft Association Inc	Employer identification number 39-0917537
---	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization’s direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

Part I-B 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 ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

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	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 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 filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A

Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A

Check

☐

if the filing organization belongs to an affiliated group

B

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) Affiliated Group Totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying)		0													
b Total lobbying expenditures to influence a legislative body (direct lobbying)		240,005													
c Total lobbying expenditures (add lines 1a and 1b)		240,005													
d Other exempt purpose expenditures		34,906,891													
e Total exempt purpose expenditures (add lines 1c and 1d)		35,146,896													
f Lobbying nontaxable amount Enter the amount from the following table in both columns		1,000,000													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		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		
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														
g Grassroots nontaxable amount (enter 25% of line 1f)		250,000													
h Subtract line 1g from line 1a If zero or less, enter -0-															
i Subtract line 1f from line 1c If zero or less, enter -0-															
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ 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 instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	240,000	240,000	240,000	240,005	960,005
d Grassroots non-taxable amount	250,000	0	0	0	250,000
e Grassroots ceiling amount (150% of line 2d, column (e))					375,000
f Grassroots lobbying expenditures	0	0	0	0	0

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

		(a)		(b)
		Yes	No	Amount
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			
a	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?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities? If "Yes," describe in Part IV			
j	Total 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?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			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 carryover lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a	Current year	2a	
b	Carryover from last year	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

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Identifier	Return Reference	Explanation
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SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
Experimental Aircraft Association Inc

Employer identification number
39-0917537

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No	

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

1

Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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

	Held at the End of the Year
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____

4

Number of states where property subject to conservation easement is located ▶ _____

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6

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

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

☐ Yes ☐ No

9

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

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

1a

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

b

If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1

▶ \$ _____ 0

(ii) Assets included in Form 990, Part X

▶ \$ _____ 2,831,420

2

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a

Revenues included in Form 990, Part VIII, line 1

▶ \$ _____

b

Assets included in Form 990, Part X

▶ \$ _____

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

Cat No 52283D

Schedule D (Form 990) 2010

Part III

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

3

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

a

☒ Public exhibition

d

☐ Loan or exchange programs

b

☐ Scholarly research

e

☒ Other school age educational programs

c

☒ Preservation for future generations

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes☒ No

Part IV

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

1a

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

☐ Yes☐ No

b

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

	Amount
1c	
1d	
1e	
1f	

2a

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

☐ Yes☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

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

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance				
b	Contributions				
c	Investment earnings or losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶

b

Permanent endowment ▶

c

Term endowment ▶

3a

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

(i)

unrelated organizations

3a(i)

☐ Yes☐ No

(ii)

related organizations

3a(ii)

☐ Yes☐ No

b

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

3b

☐ Yes☐ No

4

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

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		2,960,055		2,960,055
b Buildings		5,831,390	2,155,203	3,676,187
c Leasehold improvements		17,422,035	4,415,122	13,006,913
d Equipment		12,342,134	10,487,807	1,854,327
e Other		8,636,299	5,275,426	3,360,873
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				24,858,355

Part XIReconciliation of Change in Net Assets from Form 990 to Financial Statements			
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	34,688,390
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	35,146,896
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-458,506
4	Net unrealized gains (losses) on investments	4	192,561
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-29,888
9	Total adjustments (net) Add lines 4 - 8	9	162,673
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-295,833

Part XIIReconciliation of Revenue per Audited Financial Statements With Revenue per Return			
1	Total revenue, gains, and other support per audited financial statements	1	38,094,350
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	192,561
b	Donated services and use of facilities	2b	250,000
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	3,059,465
e	Add lines 2a through 2d	2e	3,502,026
3	Subtract line 2e from line 1	3	34,592,324
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	96,066
c	Add lines 4a and 4b	4c	96,066
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	34,688,390

Part XIIIReconciliation of Expenses per Audited Financial Statements With Expenses per Return			
1	Total expenses and losses per audited financial statements	1	38,390,183
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	250,000
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	3,035,610
e	Add lines 2a through 2d	2e	3,285,610
3	Subtract line 2e from line 1	3	35,104,573
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	42,323
c	Add lines 4a and 4b	4c	42,323
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	35,146,896

Part XIVSupplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
collections of art and historical treasures exempt purpose	schedule d, part iii, line 4	EAA, TOGETHER WITH EAA FOUNDATION MAINTAINS A COLLECTION OF HISTORIC ARTIFACTS AND ARCHIVAL MATERIALS RELATED TO THE HISTORY OF RECREATIONAL AVIATION - NUMBERING APPROXIMATELY 200 AIRPLANES, 400 ENGINES, 20,000 OTHER ARTIFACTS, 20,000 BOOKS AND PERIODICALS, 1 2 MILLION PHOTOGRAPHS AND 6,000 HOURS OF FILM AND VIDEO. THESE COLLECTIONS ARE USED FOR EDUCATIONAL PURPOSES, THROUGH THE EXHIBITS AND PROGRAMS OF THE WORLD-RENOWNED AIRVENTURE MUSEUM. The Museum is OPEN TO THE GENERAL PUBLIC, offers a public research library, and is accessible through a series of websites that attract over 10 million visits per year.
ORGANIZATION'S LIABILITY FOR UNCERTAIN TAX POSITIONS UNDER ASC 740-10	SCHEDULE D, PART X	AS REQUIRED BY THE UNCERTAIN TAX POSITION GUIDANCE IN FINANCIAL ACCOUNTING STANDARDS BOARD ("FASB") ACCOUNTING STANDARDS CODIFICATION ("ASC") 740, INCOME TAXES, THE ASSOCIATION AND THE FOUNDATION RECOGNIZE THE FINANCIAL STATEMENT BENEFIT OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVANT TAX AUTHORITY WOULD MORE-LIKELY-THAN- NOT SUSTAIN THE POSITION FOLLOWING AN AUDIT. FOR TAX POSITIONS MEETING THE MORE-LIKELY-THAN-NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE LARGEST BENEFIT THAT HAS A GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH THE RELEVANT TAX AUTHORITY. THE ASSOCIATION AND THE FOUNDATION APPLIED THE UNCERTAIN TAX POSITION GUIDANCE IN ASC 740 TO ALL TAX POSITIONS FOR WHICH THE STATUTE OF LIMITATIONS REMAINED OPEN AND DETERMINED THERE WERE NO LONGER OPEN FOR YEARS BEFORE 2008 FOR FEDERAL INCOME TAX PURPOSES. FOR STATE INCOME TAX PURPOSES, THE STATE OF LIMITATIONS IS NO LONGER OPEN FOR YEARS BEFORE 2007. THERE WERE NO INTEREST OR PENALTIES RELATED TO INCOME TAX THAT HAVE BEEN ACCRUED OR RECOGNIZED AS OF AND FOR THE YEARS ENDED FEBRUARY 28, 2011 AND 2010.
OTHER ADJUSTMENTS TO NET ASSETS FROM FORM 990 TO FINANCIAL STATEMENTS	SCHEDULE D, PART XI, LINE 8	Change in Cash surrender value 26,706 Unrealized loss on interest rate swap (2,851) Marketing Chargeback (53,400) Other (346) Rounding 3 Total \$(29,888)
REVENUES ON LINE 1 NOT FORM 990, PART VIII, LINE 12	SCHEDULE D, PART XII, LINE 2D	SPECIAL EVENTS EXPENSE REPORTED ON LINES 8B AND 9B 1,170,014 COST OF GOOD SOLD REPORTED ON LINE 10B 1,865,596 Change in cash surrender value 26,706 UNREALIZED LOSS ON INTEREST RATE SWAP AGREEMENT (2,851) TOTAL \$ 3,059,465
REVENUES IN FORM 990, PART VIII, LINE 12, NOT LINE 1	SCHEDULE D, PART XII, LINE 4B	MARKETING SERVICE CHARGEBACK 53,400 Book/Tax Difference 42,666 TOTAL \$ 96,066
EXPENSES ON LINE 1 NOT FORM 990, PART IX, LINE 25	SCHEDULE D, PART XIII, LINE 2D	SPECIAL EVENTS EXPENSE REPORTED ON LINES 8B AND 9B 1,170,014 COST OF GOOD SOLD REPORTED ON LINE 10B 1,865,596 TOTAL \$ 3,035,610
EXPENSES IN FORM 990, PART IX, LINE 25, NOT LINE 1	SCHEDULE D, PART XIII, LINE 4B	BOOK/TAX DIFFERENCE 42,666 OTHER (346) ROUNDING 3 TOTAL \$ 42,323

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding
Fundraising or Gaming Activities

OMB No 1545-0047

2010

Open to Public
Inspection

Department of the Treasury
Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19,
or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization Experimental Aircraft Association Inc	Employer identification number 39-0917537
---	--

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

- 1

Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a

☐

Mail solicitations

e

☐

Solicitation of non-government grants

b

☐

Internet and e-mail solicitations

f

☐

Solicitation of government grants

c

☐

Phone solicitations

g

☐

Special fundraising events

d

☐

In-person solicitations
- 2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☐ Yes

☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Total ▶						

- 3

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.

Part II

Review

Direct Expenses

Part III

Review

Direct Expenses

9

a

b

10a

b

11

Does the organization operate gaming activities with nonmembers?

☒ Yes ☐ No

12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

☐ Yes ☒ No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a	95 000 %
b	An outside facility	13b	5 000 %

14

Provide the name and address of the person who prepares the organization's gaming/special events books and records

Name Tony Wihlm

Address 3000 Poberezny Road
Oshkosh, WI 54903

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

☐ Yes ☒ No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16 Gaming manager information

Name Tony Wihlm

Gaming manager compensation \$ 0

Description of services provided Contributions Controller and Volunteer Coordinator

☐ Director/officer ☒ Employee ☐ Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

☐ Yes ☒ No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
GAMING ACTIVITIES	SCHEDULE G, PART III	GAMING INCLUDES THE ANNUAL SWEEPSTAKES AND YOUNG EAGLES RAFFLE PROCEEDS FROM ALL GAMING ACTIVITIES SUPPORT EAA'S MISSION TO GROW THE NEXT GENERATION OF AVIATORS

OMB No 1545-0047

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

Open to Public Inspection

39-0917537

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II **Grants and Other Assistance to Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.

2	Enter total number of section 501(c)(3) and government organizations	2
3	Enter total number of other organizations	0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Educational Scholarship	111	141,195			

Part IV

Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
ORGANIZATION'S PROCEDURES FOR MONITORING USE OF GRANT FUNDS	SCHEDULE I, PART I, LINE 2	EAA ASKS ORGANIZATIONS TO SUBMIT A LETTER DETAILING THE USE OR PURPOSE FOR THE REQUESTED ASSISTANCE (SERVICE, IN-KIND, CASH) LETTER SHOULD INCLUDE - DATE, TIME AND OTHER PERTINENT INFORMATION - VERIFICATION OF CHARITABLE STATUS - CLEAR STATEMENT OF REQUEST - IF SEEKING FACILITY USE, THE APPLICATION MUST LIST THE EVENT/ACTIVITY FORMAT, ANTICIPATED OUTCOMES, DATES, TIME, ANTICIPATED ATTENDANCE AND OTHER SPECIFICS - PARTICULAR SPECIAL NEEDS - ORGANIZATION MISSION AND BACKGROUND EAA HAS A COMMUNITY OUTREACH COMMITTEE THAT REVIEWS ALL REQUESTS AND MAKES RECOMMENDATIONS TO THE SENIOR LEADERSHIP TEAM THE SENIOR LEADERSHIP TEAM DETERMINES WHAT ASSISTANCE WILL BE PROVIDED TO OUTSIDE ORGANIZATIONS STUDENT SCHOLARSHIPS ARE AWARDED BASED ON DONOR DESIGNED CRITERIA THESE PARAMETERS COULD INCLUDE GEOGRAPHIC LOCATION, GENDER, FINANCIAL NEED OR A DIVERSITY REQUEST THE DONOR IS NOT INVOLVED IN THE SELECTION PROCESS, AS THE SCHOLARSHIPS ARE AWARDED THROUGH AN INDEPENDENT SELECTION COMMITTEE

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2010

Open to Public Inspection

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization Experimental Aircraft Association Inc	Employer identification number 39-0917537
---	--

Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
☒ First-class or charter travel		
☒ Travel for companions		
☒ Tax idemnification and gross-up payments		
☐ Discretionary spending account		
☒ Housing allowance or residence for personal use		
☐ Payments for business use of personal residence		
☐ Health or social club dues or initiation fees		
☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes	
3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
☒ Compensation committee		
☐ Independent compensation consultant		
☐ Form 990 of other organizations		
☐ Written employment contract		
☒ Compensation survey or study		
☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a Receive a severance payment or change-of-control payment from the organization or a related organization?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes	
c 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) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a The organization?	5a Yes	
b Any related organization?	5b	No
If "Yes," to line 5a or 5b, describe in Part III		
6 For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a The organization?	6a Yes	
b Any related organization?	6b	No
If "Yes," to line 6a or 6b, describe in Part III		
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8	No
9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

Part II **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 in 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) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) Thomas P Poberezny	(i)	355,895	132,301	0	51,029	30,657	569,882	0
	(ii)	0	0	0	0	0	0	0
(2) ADAM SMITH	(i)	163,482	32,370	0	19,238	18,171	233,261	0
	(ii)	0	0	0	0	0	0	0
(3) Brian Wierzbinski	(i)	205,078	48,607	0	25,370	23,397	302,452	0
	(ii)	0	0	0	0	0	0	0
(4) Rick Larsen	(i)	168,052	32,027	0	19,609	23,787	243,475	0
	(ii)	0	0	0	0	0	0	0
(5) Elissa Lines	(i)	158,362	34,132	0	18,822	22,017	233,333	0
	(ii)	0	0	0	0	0	0	0
(6) Earl Lawrence	(i)	130,823	25,785	0	14,442	19,552	190,602	0
	(ii)	0	0	0	0	0	0	0
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
INFORMATION CONCERNING CERTAIN FRINGE BENEFITS	SCHEDULE J, PART I, LINE 1A	The organization provides first class air travel for the president/ceo based on the quantity of traveling required and work requirements. The organization provides reimbursement for travel for companions of persons listed in Form 990, Part VII, Section A, Line 1A. All such reimbursement is pursuant to a written policy and requires substantiation of expenditures and their business purpose prior to reimbursement. During the 2010 tax year, these reimbursements were for the spouse of the EAA president and the spouse of the eaa founder. temporary housing WAS PROVIDED BY EAA for the NEW President/CEO while relocating. The NEW president/ceo's wages were grossed-up for the value of this temporary housing.
PARTICIPATION IN PAYMENT FROM SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	SCHEDULE J, PART I, LINE 4B	PERSONS LISTED IN FORM 990, PART VII, SECTION A, LINE 1A THAT PARTICIPATED IN, OR RECEIVED PAYMENT FROM, A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN INCLUDE: NAME: AMOUNT: PAUL POBEREZY \$ 78,468 THOMAS P. POBEREZY \$ 25,658
COMPENSATION CONTINGENT ON REVENUES OF THE ORGANIZATION	SCHEDULE J, PART I, LINE 5A	CONSIDERATION IS GIVEN IN DETERMINING INCENTIVE COMPENSATION BASED ON GROSS OPERATING REVENUE FOR THE PRESIDENT AND KEY EMPLOYEES. HOWEVER, THIS INCENTIVE COMPENSATION IS NOT AUTOMATIC UPON OBTAINING MILESTONES.
COMPENSATION CONTINGENT ON NET EARNINGS OF THE ORGANIZATION	SCHEDULE J, PART I, LINE 6A	CONSIDERATION IS GIVEN IN DETERMINING INCENTIVE COMPENSATION BASED ON NET OPERATING INCOME FOR THE PRESIDENT AND KEY EMPLOYEES. HOWEVER, THIS INCENTIVE COMPENSATION IS NOT AUTOMATIC UPON OBTAINING MILESTONES.

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization
Experimental Aircraft Association Inc

Employer identification number
39-0917537

Part I

Bond Issues

(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A Town of Nekimi	39-6083771		07-01-2009	10,000,000	AIRVENTURE GROUNDS CAPITAL IMP		X		X		X

Part II

Proceeds

		A		B		C		D	
1	Amount of bonds retired	0							
2	Amount of bonds legally defeased	0							
3	Total proceeds of issue	10,000,000							
4	Gross proceeds in reserve funds	0							
5	Capitalized interest from proceeds	0							
6	Proceeds in refunding escrow	0							
7	Issuance costs from proceeds	0							
8	Credit enhancement from proceeds	0							
9	Working capital expenditures from proceeds	0							
10	Capital expenditures from proceeds	7,430,831							
11	Other spent proceeds	0							
12	Other unspent proceeds	2,569,169							
13	Year of substantial completion	2028							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?		X						
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?		X						
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III

Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part IIIPrivate Business Use (Continued)

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business use?		X						
b	Are there any research agreements that may result in private business use of bond-financed property?		X						
c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?	X							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government	0 %							
6	Total of lines 4 and 5	0 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X							

Part IVArbitrage

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X						
2	Is the bond issue a variable rate issue?	X							
3a	Has the organization or the governmental issuer entered into a hedge with respect to the bond issue?	X							
b	Name of provider	Associated Bank Corp							
c	Term of hedge	5							
d	Was the hedge superintegrated?		X						
e	Was a hedge terminated?		X						
4a	Were gross proceeds invested in a GIC?		X						
b	Name of provider	Na							
c	Term of GIC	0							
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
5	Were any gross proceeds invested beyond an available temporary period?		X						
6	Did the bond issue qualify for an exception to rebate?		X						

Part VSupplemental Information

Complete this part to provide additional information for responses to questions on Schedule K (see instructions)

Identifier	Return Reference	Explanation

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons
▶ Complete if the organization answered
"Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V lines 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047
2010
Open to Public Inspection

Name of the organization
Experimental Aircraft Association Inc

Employer identification number
39-0917537

Part I Excess Benefit Transactions (section 501(c)(3) and section 501 (c)(4) organizations only).

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c)Original principal amount	(d)Balance due	(e) In default?		(f) Approved by board or committee?		(g)Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total ▶ \$										

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b)Relationship between interested person and the organization	(c)Amount of grant or type of assistance

Part IV

Business Transactions Involving Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) IESLIE Poberezny	Presidents daugther	14,280	Compensation		No

Part V

Supplemental Information
Complete this part to provide additional information for responses to questions on Schedule L (see instructions)

Identifier	Return Reference	Explanation
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SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Experimental Aircraft Association Inc

Employer identification number
39-0917537

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles .	X	2	31,042	FAIR VALUE
7 Boats and planes	X	2	7,192	EXPERT OPINION
8 Intellectual property . .				
9 Securities—Publicly traded	X	7	63,780	Fair Market Value
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests .				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . .				
15 Real estate—Residential .				
16 Real estate—Commercial				
17 Real estate—Other . .				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts . .				
23 Scientific specimens . .				
24 Archeological artifacts .				
25 Other ► ()		See Add'l Data		
26 Other ► ()				
27 Other ► ()				
28 Other ► ()				
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement			29	0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

b If "Yes," describe the arrangement in Part II

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?

b If "Yes," describe in Part II

33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

Yes

No

30a

No

31

Yes

32a

Yes

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

Cat No 51227J

Schedule M (Form 990) 2010

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
USE OF THIRD PARTIES TO SOLICIT, PROCESS OR SELL NON-CASH CONTRIBUTIONS	SCHEDULE M, QUESTION 32B	EXPERIMENTAL AIRCRAFT ASSOCIATION USES B C ZIEGLER AS A BROKER FOR SECURITIES B C ZIEGLER PROCESSES AND SELLS SECURITIES CONTRIBUTIONS UNDER THE DIRECTION OF EXPERIMENTAL AIRCRAFT ASSOCIATION EXPERIMENTAL AIRCRAFT ASSOCIATION USES A THIRD PARTY LIQUIDATOR, CHUCK PARNALL, TO SELL AND DISPOSE OF AIRCRAFT PARTS AND NON-COMMISSIONED COLLECTION ITEMS

Additional Data

Software ID:

Software Version:

EIN: 39-0917537

Name: Experimental Aircraft Association Inc

Form 990 Schedule M, Part I - Types of Property

Property Type	(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining oncash contribution amounts
DONATIONS Other ▶ (-AUCTION)	X	144	199,680	FAIR VALUE
DONATIONS - Other ▶ (SWEEPSTAKES)	X	5	181,500	FAIR VALUE
Radio Broadcast Other ▶ (Mast Towr)	X	1	5,700	Fair Value
Plumbing Other ▶ (Fixtures)	X	1	50,000	fair value
SPONSOR Other ▶ (DONATIONS)	X	12	390,997	FAIR VALUE

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2010

Open to Public
Inspection

Name of the organization Expermental Aircraft Association Inc	Employer identification number 39-0917537
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Identifier	Return Reference	Explanation
Organization name	form 990, line c	The organization's legal name is "expermental aircraft association, inc " but is also referred to simply as "eaa"

Identifier	Return Reference	Explanation
FAMILY OR BUSINESS RELATIONSHIPS	FORM 990, PART VI, LINE 2	FAMILY RELATIONSHIP PAUL H POBEREZNY , FOUNDER AND DIRECTOR, AND THOMAS P POBEREZNY , PRESIDENT OF THE ORGANIZATION FAMILY RELATIONSHIP RICK SIGFRIED AND RAND SIGFRIED, BOTH ON THE ORGANIZATION'S BOARD OF DIRECTORS

Identifier	Return Reference	Explanation
CLASSES OF MEMBERS AND THEIR RIGHTS	FORM 990, PART VI, LINE 6	EXPERIMENTAL AIRCRAFT ASSOCIATION, INC HAS APPROXIMATELY 170,000 MEMBERS ALL MEMBERS 18 YEARS OF AGE AND OLDER ARE ALLOWED TO VOTE ON LIMITED BUSINESS DECISIONS OF THE ORGANIZATION

Identifier	Return Reference	Explanation
Classes of Persons with Certain Board-Election Rights	FORM 990, PART VI, LINE 7A	MEMBERS OF EXPERIMENTAL AIRCRAFT ASSOCIATION, INC CAN VOTE DIRECTLY FOR BOARD OF DIRECTORS CANDIDATES THE MAJORITY OF THE MEMBERSHIP CHOOSES TO GIVE A PROXY FOR THEIR VOTE TO OTHER PERSONS

Identifier	Return Reference	Explanation
Classes of Persons with Certain Approval Rights	FORM 990, PART VI, LINE 7B	DECISIONS TO MERGE OR CONSOLIDATE WITH OTHER CORPORATIONS OR BUSINESSES AND DECISIONS TO SELL, LEASE, EXCHANGE OR OTHERWISE DISPOSE OF ALL, OR SUBSTANTIALLY ALL, OF THE PROPERTY AND ASSETS OF THE ORGANIZATION WOULD REQUIRE A VOTE OF THE MEMBERSHIP

Identifier	Return Reference	Explanation
STATEMENT CONCERNING Local Chapter, Affiliate, or Branch Activities	FORM 990, PART VI, LINE 10B	EXPERIMENTAL AIRCRAFT ASSOCIATION, INC HAS DESIGNATED "CHAPTERS" BUT SUCH CHAPTERS DO NOT MEET THE DEFINITION OF "CHAPTERS" WITHIN THE MEANING PROVIDED BY FORM 990 INSTRUCTIONS EXPERIMENTAL AIRCRAFT ASSOCIATION, INC DOES NOT HAVE LEGAL AUTHORITY TO EXERCISE SUPERVISION AND CONTROL OVER THE AFFAIRS OF THE AFFILIATED CHAPTERS ACCORDINGLY , THE ORGANIZATION HAS ANSWERED FORM 990, PART VI, LINE 10A "NO"

Identifier	Return Reference	Explanation
Process the Organization Uses to Review Form 990	FORM 990, PART VI, LINE 11	THE AUDIT COMMITTEE OF THE BOARD HELD A TELECONFERENCE ON JANUARY 4, 2012 TO REVIEW A DRAFT COPY OF THE RETURN WITH MANAGEMENT AND THE INDEPENDENT TAX RETURN PREPARERS AFTER APPROVAL BY THE AUDIT COMMITTEE, THE FORM 990 WAS UPDATED TO INCORPORATE ANY NECESSARY CHANGES AND A COPY OF THE RETURN WAS PROVIDED ELECTRONICALLY TO THE CONTROLLER TO DISTRIBUTE TO THE ENTIRE BOARD OF DIRECTORS WITH A REQUEST FOR FEEDBACK SUBSEQUENT TO RECEIPT OF FEEDBACK, NECESSARY CHANGES WERE MADE TO THE DRAFT FORM 990 THE FINALIZED VERSION OF FORM 990 WAS PROVIDED TO ALL MEMBERS OF THE BOARD OF DIRECTORS E-FILING OF THE RETURN WILL OCCUR ON MARCH 1, 2012 WHEN THE IRS E-FILING SYSTEM IS AGAIN OPERATIONAL

Identifier	Return Reference	Explanation
Organization's Practices for Monitoring Conflicts of Interest	FORM 990, PART VI, LINE 12C	ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO SIGN THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IN-HOUSE LEGAL COUNSEL FOLLOWS UP WITH ANYONE WHO DOES NOT SIGN IN-HOUSE LEGAL COUNSEL REVIEWS ALL FORMS ANY DISCLOSURES NOTED ARE BROUGHT TO THE ATTENTION OF THE AUDIT COMMITTEE TO DETERMINE IF THE SUBJECT MATTER OF DISCLOSURE IS DEEMED TO BE A CONFLICT OF INTEREST

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION OF TOP MANAGEMENT	FORM 990, PART VI, LINE 15A	COMPARABILITY DATA IS PRESENTED TO THE HUMAN RESOURCES COMMITTEE OF THE BOARD FOR THE PRESIDENT/CEO POSITION THE COMMITTEE MAKES DECISIONS ABOUT THE PRESIDENT/CEO'S COMPENSATION IN CLOSED SESSION WITHOUT THE PRESENCE OF THE PRESIDENT/CEO THIS PROCEDURE WAS LAST PERFORMED APRIL, 2010

Identifier	Return Reference	Explanation
Process for determining comepensation of officers and key employees	form 990, part vi, line 15b	Comparability data is presented to the human Resources committee of the board for the senior team the committee, together w ith the president/ceo, determines the compensation for the senior team this procedure was last performed December, 2009

Identifier	Return Reference	Explanation
Organization's Policy Regarding Making Certain Documents Public	FORM 990, PART VI, LINE 19	THE ANNUAL AUDITED FINANCIAL STATEMENT IS AVAILABLE ON THE ORGANIZATION'S WEBSITE, WWW.EAA.ORG. THE ORGANIZATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE ALSO AVAILABLE UPON REQUEST, EITHER IN HARD COPY OR ELECTRONIC FORM, WHICHEVER IS REQUESTED.

Identifier	Return Reference	Explanation
Other changes in net assets or fund balances	Part XI, Line 5	Unrealized Gain \$192,561 Change in CSV 26,706 Unrealized loss on interest rate sw ap (2,851) Marketing Chargeback (53,400) Other adjustment (346) Rounding 3 Total \$ 162,673

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME Rodney Hightow er TITLE President HOURS 10

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME Thomas P Poberezny TITLE EXITING PRESIDENT, chairman HOURS 10

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization
Experimental Aircraft Association Inc

Employer identification number
39-0917537

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization	
						Yes	No
(1) EAA AVIATION FOUNDATION INC PO BOX 3086 OSHKOSH, WI 549033086 39-1033301	SUPPORT EAA	WI	501(C)(3)	7	EAA		

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproporionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

Yes

No

No

No

No

No

No

Yes

Yes

No

No

No

No

Yes

No

No

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

(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) EAA AVIATION FOUNDATION INC	c	1,037,404	
(2) EAA AVIATION FOUNDATION INC	j	1,006,704	
(3) EAA AVIATION FOUNDATION INC	k	933,744	
(4) EAA AVIATION FOUNDATION INC	p	363,381	
(5)			
(6)			

Schedule R (Form 990) 2010

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

[illegible]

Part VII **Supplemental Information**

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 39-0917537

Name: Experimental Aircraft Association Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
VICTOR G ABBEY DIRECTOR	10 0	X						0	0	0
Doug Bartlett DIRECTOR	10 0	X						0	0	0
Richard Beattie DIRECTOR	10 0	X						0	0	0
Richard W Beebe II DIRECTOR	10 0	X						0	0	0
Barry Davis DIRECTOR	10 0	X						0	0	0
Norm Dewitt DIRECTOR	10 0	X						0	0	0
Eileen Drake DIRECTOR	10 0	X						0	0	0
Jack Dueck DIRECTOR	10 0	X						0	0	0
Susan Dusenbury DIRECTOR	10 0	X						0	0	0
Richard W Hansen DIRECTOR	10 0	X						0	0	0
Jack Harrington DIRECTOR	10 0	X						0	0	0
Carla Larsh DIRECTOR	10 0	X						0	0	0
David Lau DIRECTOR	10 0	X						0	0	0
Jimmy Leeward DIRECTOR	10 0	X						0	0	0
Daniel A Majka DIRECTOR	10 0	X						0	0	0
Phil Martineau DIRECTOR	10 0	X						0	0	0
Jim Phillips DIRECTOR	10 0	X						0	0	0
Phil Poyner DIRECTOR	10 0	X						0	0	0
Charles Precourt DIRECTOR	10 0	X						0	0	0
Alan Ritchie DIRECTOR	10 0	X						0	0	0
Geoff Robison DIRECTOR	10 0	X						0	0	0
Ray scholler DIRECTOR	10 0	X						0	0	0
Dan Schwinn DIRECTOR	10 0	X						0	0	0
Rand Siegfried DIRECTOR	10 0	X						0	0	0
Rick Siegfried DIRECTOR	10 0	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Don Taylor Director	10 0	X						0	0	0
Fred Telling Director	10 0	X						0	0	0
Kermit Weeks Director	10 0	X						0	0	0
Rick Weiss Director	10 0	X						0	0	0
Louis J Andrew Jr board Vice President	10 0	X		X				0	0	0
Eric Gurley board Treasurer	10 0	X		X				0	0	0
Rodney Hightower President	40 0	X		X				110,983	0	5,873
Paul H Poberezny founder, director	10 0	X						111,745	0	25,923
Thomas P Poberezny EXITING PRESIDENT, chairman	40 0	X		X				488,196	0	81,686
Alan Shackleton board Secretary	10 0	X		X				0	0	0
Brian Wierzbinski Exec VP, Top Fin Official	40 0			X				253,685	0	48,767
ADAM SMITH VICE PRESIDENT, MEMBERSHIP	40 0				X			195,852	0	37,409
Rick Larsen VP, Marketing & Communications	40 0				X			200,079	0	43,396
Elissa Lines Vice president, development	40 0				X			192,494	0	40,839
JOHN CARRIER DIRECTOR, IT	40 0					X		115,593	0	24,014
Karen Gardinier VP of Human Resources	40 0					X		118,714	0	26,452
JEFFrey KAUFMAN DIRECTOR, BUS DEVELOPMENT	40 0					X		100,168	0	23,317
Earl Lawrence Vp, Advocacy & Gov't Relations	40 0					X		156,608	0	33,994
Julie Watson Controller (TERMED 2/2011)	40 0					X		100,615	0	16,688

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services					
(Code	)	(Expenses \$	12,664,193	including grants of \$	315,622) (Revenue \$
VARIOUS PROGRAM SERVICE ACTIVITIES					7,295,824)