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Form 990

## Return of Organization Exempt From Income Tax

2010

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

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

## A For the 2010 calendar year, or tax year beginning 10-01-2010 and ending 09-30-2011

B Check if applicable

C Name of organization  
ARMED FORCES COMMUNICATIONS AND ELECTRONICS ASSOCIATION INTERNATIONALD Employer identification number  
53-0180161

E Address change

F Doing Business As

G Initial return

H Room/suite

I Number and street (or P O box if mail is not delivered to street address)  
4400 FAIR LAKES COURTJ City or town, state or country, and ZIP + 4  
FAIRFAX, VA 220333899

K Gross receipts \$ 25,443,732

L Application pending

F Name and address of principal officer

KENT SCHNEIDER  
4400 FAIR LAKES COURT  
FAIRFAX, VA 220333899H(a) Is this a group return for affiliates?  Yes  NoH(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) ( 6 ) (insert no)  4947(a)(1) or  527

J Website: ► WWW AFCEA.ORG

K Form of organization  Corporation  Trust  Association  Other ►

L Year of formation 1946

M State of legal domicile DC

## Part I Summary

1 Briefly describe the organization's mission or most significant activities  
SEE PART III, LINE 1

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) . . . . .

3 142

4 Number of independent voting members of the governing body (Part VI, line 1b) . . . . .

4 139

5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . . . . .

5 69

6 Total number of volunteers (estimate if necessary) . . . . .

6 1,500

7a Total unrelated business revenue from Part VIII, column (C), line 12 . . . . .

7a 2,478,006

b Net unrelated business taxable income from Form 990-T, line 34 . . . . .

7b 0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h) . . . . .	13,000	1,047
9 Program service revenue (Part VIII, line 2g) . . . . .	19,557,072	22,077,137
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . .	255,854	351,469
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . . .	37,672	172,350
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) . . . . .	19,863,598	22,602,003

	Prior Year	Current Year
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . .		317,612
14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . .		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) . . . . .	6,443,080	6,794,887
16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . .		0
b Total fundraising expenses (Part IX, column (D), line 25) ►0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) . . . . .	13,380,599	15,895,684
18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) . . . . .	19,823,679	23,008,183
19 Revenue less expenses Subtract line 18 from line 12 . . . . .	39,919	-406,180

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16) . . . . .	20,257,736	20,065,098
21 Total liabilities (Part X, line 26) . . . . .	7,828,345	8,680,153
22 Net assets or fund balances Subtract line 21 from line 20 . . . . .	12,429,391	11,384,945

## 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 PATRICK J MIORIN CFO AND TREASURER Type or print name and title	2012-07-23 Date
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Paid Preparer Use Only	Print/Type preparer's name DANIEL D O'SHEA	Preparer's signature DANIEL D O'SHEA	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Firm's name ► WATKINS MEEGAN LLC				Firm's EIN ►
	Firm's address ► 7700 WISCONSIN AVENUE SUITE 500 BETHESDA, MD 20814				Phone no ► (301) 654-7555

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**

THE ARMED FORCES COMMUNICATIONS AND ELECTRONICS ASSOCIATION (AFCEA) IS A MEMBERSHIP ASSOCIATION WITH THE MISSION OF LINKING MILITARY, GOVERNMENT, INDUSTRY AND ACADEMIA AND PROVIDING FOR AN ETHICAL EXCHANGE OF INFORMATION IN THE FIELDS OF COMMUNICATIONS, ELECTRONICS, COMPUTER SCIENCES, GLOBAL SECURITY AND INTELLIGENCE

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**2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?** Yes  No

If "Yes," describe these new services on Schedule O

**3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?** Yes  No

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 \$ including grants of \$ ) (Revenue \$ )  
 PUBLICATIONS - AFCEA PUBLISHES SIGNAL, A MONTHLY INTERNATIONAL NEWS MAGAZINE SERVING THE CRITICAL INFORMATION NEEDS OF GOVERNMENT, MILITARY, AND INDUSTRY PROFESSIONALS OTHER PERIODICALS INCLUDE SIGNAL CONNECTIONS (ONLINE PUBLICATION), THE SOURCE BOOK AND THE VARIOUS SOURCE DIRECTORIES

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**4b** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
 MEMBERSHIP - THE AFCEA MEMBERSHIP DEPARTMENT SERVES AFCEA MEMBERS BY PROVIDING AN ETHICAL FORUM FOR THE EXCHANGE OF INFORMATION IT DEVELOPS AND IMPLEMENTS POLICIES THAT ENHANCE THE RECRUITMENT AND RETENTION OF NEW AND EXISTING INDIVIDUAL AND CORPORATE MEMBERS IT OPERATES CHAPTER RECRUITING AND RETENTION AWARDS PROGRAMS DESIGNED TO RECOGNIZE AND INCENT CHAPTERS TO MEET ASSOCIATION WIDE GOALS IN RECRUITING AND RETENTION OF MEMBERS MEMBER SERVICES PROVIDE NETWORKING OPPORTUNITIES AND CAREER DEVELOPMENT ASSISTANCE AND PROGRAMS

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**4c** (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )  
 CONVENTIONS AND SYMPOSIA - AFCEA PRODUCES APPROXIMATELY 20 EVENTS ANNUALLY TO PROVIDE AND FACILITATE FOR ETHICAL FORUMS FOR THE DISCUSSION OF NEEDS AND FUTURE REQUIREMENTS OF THE ARMED FORCES AS THEY RELATE TO TECHNOLOGY, ATTENDEES AT THESE EVENTS INCLUDE INDIVIDUALS FROM GOVERNMENT, INDUSTRY, AND ACADEMIA

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**4d Other program services (Describe in Schedule O )**

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e Total program service expenses \$**

**Part IV Checklist of Required Schedules**

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .

2 Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X . . . . .

f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part XI . . . . .

12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII . . . . .

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 . . . . .

13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . . .

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 . . . . .

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 . . . . .

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 . . . . .

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) . . . . .

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 . . . . .

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 . . . . .

20a Did the organization operate one or more hospitals? If "Yes," complete Schedule H . . . . .

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) . . . . .

	Yes	No
1		No
2		No
3		No
4		
5	Yes	
6		No
7		No
8		No
9		No
10		No
11a	Yes	
11b		No
11c		No
11d	Yes	
11e	Yes	
11f	Yes	
12a		No
12b	Yes	
13		No
14a	Yes	
14b	Yes	
15		No
16		No
17		No
18		No
19		No
20a		No
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? If "Yes," complete Schedule I, Parts I and II	<input checked="" type="checkbox"/>	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? If "Yes," complete Schedule I, Parts I and III	<input checked="" type="checkbox"/>	22	No	
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? If "Yes," complete Schedule J	<input checked="" type="checkbox"/>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25		24a	No	
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		24b		
24c	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		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		24d		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a		
25b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		25b		
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? If "Yes," complete Schedule L, Part II		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? If "Yes," complete Schedule L, Part III		27	No	
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		28a	No	
28b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		28b	No	
28c	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		28c	No	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		29	No	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		30	No	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		31	No	
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		32	No	
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	<input checked="" type="checkbox"/>	33	No	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	<input checked="" type="checkbox"/>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?		35	No	
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)? If "Yes," complete Schedule R, Part V, line 2	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	<input checked="" type="checkbox"/>	37	No	
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> 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
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	59
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
<b>2a</b>	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	69
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes
<p><b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)</p>			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
<b>b</b>	If "Yes," enter the name of the foreign country <b>BE</b> See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
<b>6a</b>	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>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>	7a	
<b>a</b>	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?	7b	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7d	
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	7e	
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7h	
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	8	
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	9a	
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>	9b	
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter	10a	
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	10b	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter	11a	
<b>a</b>	Gross income from members or shareholders	11b	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>	13a	
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state?		
<p><b>Note.</b> See the instructions for additional information the organization must report on Schedule O</p>			
<b>b</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	
<b>c</b>	Enter the amount of reserves on hand	13c	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
<b>b</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

1a Enter the number of voting members of the governing body at the end of the tax year . . . . .

1a	142
1b	139

b Enter the number of voting members included in line 1a, above, who are independent . . . . .

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? . . . . .

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? . . . . .

4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .

5 Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .

6 Does the organization have members or stockholders? . . . . .

7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? . . . . .

b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? . . . . .

8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following

a The governing body? . . . . .

b Each committee with authority to act on behalf of the governing body? . . . . .

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 . . . . .

	Yes	No
1a		
1b		
2		No
3		No
4		No
5		No
6		No
7a		No
7b		No
8a	Yes	
8b	Yes	
9		No

### Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

10a Does the organization have local chapters, branches, or affiliates? . . . . .

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? . . . . .

11a Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? . . . . .

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 . . . . .

b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . . . .

c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done . . . . .

13 Does the organization have a written whistleblower policy? . . . . .

14 Does the organization have a written document retention and destruction policy? . . . . .

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 . . . . .

b Other officers or key employees of the organization . . . . .

If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions )

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? . . . . .

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? . . . . .

	Yes	No
10a	Yes	
10b	Yes	
11a		No
12a	Yes	
12b	Yes	
12c	Yes	
13	Yes	
14	Yes	
15a	Yes	
15b	Yes	
16a		No
16b		

### Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ►

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 ►

PATRICK J MIORIN  
4400 FAIR LAKES COURT  
FAIRFAX, VA 220333899  
(703) 631-6166

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

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

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

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

list persons in the following order: individual trustees or directors, institutional trustees, officers, key employees, highest

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

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

(2) Name and Title (3) Average (4) Position (check all) (5) Reportable (6) Reportable

hours that apply) compensation compensation

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

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 **14**

	Yes	No
3 Did the organization list any <b>former</b> 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
J SPARGO ASSOCIATES	11208 WAPLES MILL ROAD 112				EXHIBIT SALES
FAIRFAX, VA 22030					2,563,865
ARAMARK CORPORATION	333 SOUTH FRANKLIN STREET				EVENT CATERING
TAMPA, FL 33602					1,188,344
CADMUS JOURNAL SERVICES	PO BOX 822934				PRINTING
PHILADELPHIA, PA 191822934					477,129
ALLIANT STUDIOS INC	10641 LEE HIGHWAY 2ND FLOOR				PUBLISHING
FAIRFAX, VA 22030					423,974
METROPOLITAN ENTERTAINMENT CONV C	455 NORTH 10TH STREET				FACILITY & CATERING
OMAHA, NE 68102					380,804
2	Total number of independent contractors (including but not limited to those listed above) who received more than				

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 ►24

## Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, grants and other similar amounts	1a Federated campaigns . . . . .	1a				
	b Membership dues . . . . .	1b				
	c Fundraising events . . . . .	1c				
	d Related organizations . . . . .	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,047			
	g Noncash contributions included in lines 1a-1f \$					
<b>h Total. Add lines 1a-1f . . . . .</b>		<b>1,047</b>				
Program Service Revenue	2a EVENTS		Business Code			
			900099	17,543,966	17,543,966	
	b ADVERTISING		541800	2,471,220	2,471,220	
	c MEMBER DUES		900099	2,037,882	2,037,882	
	d PUBLICATIONS		900099	24,069	24,069	
	e					
	f All other program service revenue					
<b>g Total. Add lines 2a-2f . . . . .</b>		<b>22,077,137</b>				
3 Investment income (including dividends, interest and other similar amounts) . . . . .				368,616	368,616	
4 Income from investment of tax-exempt bond proceeds . . . . .				0		
5 Royalties . . . . .				0		
6a Gross Rents	(I) Real	(II) Personal				
b Less rental expenses						
c Rental income or (loss)						
d Net rental income or (loss) . . . . .						
7a Gross amount from sales of assets other than inventory	(I) Securities	(II) Other				
	2,824,582					
b Less cost or other basis and sales expenses						
c Gain or (loss)	2,841,729					
d Net gain or (loss) . . . . .	-17,147					
				-17,147	-17,147	
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .						
a						
b Less direct expenses . . . . .	b			0		
c Net income or (loss) from fundraising events . . . . .						
9a Gross income from gaming activities See Part IV, line 19 . . . . .	a					
b Less direct expenses . . . . .	b			0		
c Net income or (loss) from gaming activities . . . . .						
10a Gross sales of inventory, less returns and allowances . . . . .						
a						
b Less cost of goods sold . . . . .	b			0		
c Net income or (loss) from sales of inventory . . . . .						
Miscellaneous Revenue		Business Code				
11a MISCELLANEOUS		900099	165,564	165,564		
b INSIGNIA		541800	6,786	6,786		
c						
d All other revenue . . . . .						
<b>e Total. Add lines 11a-11d . . . . .</b>		<b>172,350</b>				
<b>12 Total revenue. See Instructions . . . . .</b>		<b>22,602,003</b>	<b>19,771,481</b>	<b>2,478,006</b>	<b>351,469</b>	

**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	317,612			
2 Grants and other assistance to individuals in the U S See Part IV, line 22	0			
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 . . . . .	1,295,532			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages	4,681,933			
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) . . . . .	276,896			
9 Other employee benefits . . . . .	204,360			
10 Payroll taxes . . . . .	336,166			
a Fees for services (non-employees) Management . . . . .	161,591			
b Legal . . . . .	99,851			
c Accounting . . . . .	38,723			
d Lobbying . . . . .	0			
e Professional fundraising services See Part IV, line 17 . . . . .	0			
f Investment management fees . . . . .	0			
g Other . . . . .	406,107			
12 Advertising and promotion . . . . .	1,462,608			
13 Office expenses . . . . .	1,035,153			
14 Information technology . . . . .	0			
15 Royalties . . . . .	0			
16 Occupancy . . . . .	510,957			
17 Travel . . . . .	626,472			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19 Conferences, conventions, and meetings . . . . .	10,764,749			
20 Interest . . . . .	234			
21 Payments to affiliates . . . . .	0			
22 Depreciation, depletion, and amortization . . . . .	54,827			
23 Insurance . . . . .	95,835			
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 PUBLICATIONS EXPENSE	539,935			
b TAXES	45,882			
c BAD DEBT EXPENSE	27,760			
d OTHER	25,000			
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	23,008,183			
26 Joint costs. Check here <input checked="" type="checkbox"/> 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**

		<b>(A)</b> Beginning of year	<b>(B)</b> End of year
Assets	1 Cash—non-interest-bearing . . . . .	1,000	<b>1</b> 1,000
	2 Savings and temporary cash investments . . . . .	1,741,864	<b>2</b> 966,774
	3 Pledges and grants receivable, net . . . . .	3	
	4 Accounts receivable, net . . . . .	1,422,489	<b>4</b> 1,982,058
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . . .		
	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 . . . . .		
	7 Notes and loans receivable, net . . . . .	6	<b>7</b>
	8 Inventories for sale or use . . . . .	8	
	9 Prepaid expenses and deferred charges . . . . .	662,748	<b>9</b> 535,284
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	1,818,959	
	b Less accumulated depreciation . . . . .	10b 1,650,576	10c 186,522 168,383
	11 Investments—publicly traded securities . . . . .	11 11,067,139	<b>11</b> 11,520,099
	12 Investments—other securities See Part IV, line 11 . . . . .		
	13 Investments—program-related See Part IV, line 11 . . . . .		
	14 Intangible assets . . . . .		
	15 Other assets See Part IV, line 11 . . . . .	15 5,175,974	4,891,500
	<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) . . . . .	16 20,257,736	20,065,098
Liabilities	17 Accounts payable and accrued expenses . . . . .	17 972,510	2,438,931
	18 Grants payable . . . . .	18	
	19 Deferred revenue . . . . .	19 6,172,688	5,637,651
	20 Tax-exempt bond liabilities . . . . .	20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D . . . . .		
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . .		
	23 Secured mortgages and notes payable to unrelated third parties . . . . .		
	24 Unsecured notes and loans payable to unrelated third parties . . . . .		
	25 Other liabilities Complete Part X of Schedule D . . . . .	25 683,147	603,571
	<b>26 Total liabilities.</b> Add lines 17 through 25 . . . . .	26 7,828,345	8,680,153
Net Assets or Fund Balances	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
	27 Unrestricted net assets . . . . .	27 12,429,391	11,384,945
	28 Temporarily restricted net assets . . . . .	28	
	29 Permanently restricted net assets . . . . .	29	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>		
	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 . . . . .	33 12,429,391	11,384,945
	<b>34 Total liabilities and net assets/fund balances . . . . .</b>	34 20,257,736	20,065,098

**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	22,602,003
2	Total expenses (must equal Part IX, column (A), line 25)	2	23,008,183
3	Revenue less expenses Subtract line 2 from line 1	3	-406,180
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	12,429,391
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-638,266
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	11,384,945

**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 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . . .	2a	No
2b	Were the organization's financial statements audited by an independent accountant? . . .	2b	Yes
2c	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 . . .	2c	Yes
2d	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 <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> 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? . . .	3a	No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .	3b	



**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.)

**1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)**b** Total lobbying expenditures to influence a legislative body (direct lobbying)**c** Total lobbying expenditures (add lines 1a and 1b)**d** Other exempt purpose expenditures**e** Total exempt purpose expenditures (add lines 1c and 1d)**f** Lobbying nontaxable amount Enter the amount from the following table in both columns

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)**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
<b>2a</b> Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots non-taxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**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	
<b>1</b> 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				
<b>a</b> Volunteers?				
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
<b>c</b> Media advertisements?				
<b>d</b> Mailings to members, legislators, or the public?				
<b>e</b> Publications, or published or broadcast statements?				
<b>f</b> Grants to other organizations for lobbying purposes?				
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?				
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
<b>i</b> Other activities? If "Yes," describe in Part IV				
<b>j</b> Total lines 1c through 1i				
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
<b>d</b> 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
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members?	1	No
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	Yes
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	No

**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".**

<b>1</b> Dues, assessments and similar amounts from members	1	
<b>2</b> Section 162(e) non-deductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> )	2a	
<b>a</b> Current year	2b	
<b>b</b> Carryover from last year	2c	
<b>c</b> Total	3	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	4	
<b>4</b> 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?	5	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions)		

**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 11. Also, complete this part for any additional information

Identifier	Return Reference	Explanation

2010

Open to Public  
Inspection**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.

Department of the Treasury  
Internal Revenue Service**Name of the organization**ARMED FORCES COMMUNICATIONS AND  
ELECTRONICS ASSOCIATION INTERNATIONAL**Employer identification number**

53-0180161

**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
2a	
2b	
2c	
2d	

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 ► \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ► \$ \_\_\_\_\_

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 ► \$ \_\_\_\_\_

**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  
 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

	Yes	No
3a(i) unrelated organizations . . . . .		
3a(ii) related organizations . . . . .		

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

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 . . . . .				
b Buildings . . . . .				
c Leasehold improvements . . . . .		216,317	216,317	0
d Equipment . . . . .		1,602,642	1,434,259	168,383
e Other . . . . .				
<b>Total.</b> Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) . . . . .				168,383

**Part VII Investments—Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
Other		

**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	22,602,003
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	23,008,183
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-406,180
4	Net unrealized gains (losses) on investments	4	-635,561
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-2,705
9	Total adjustments (net) Add lines 4 - 8	9	-638,266
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-1,044,446

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements . . . . .	1	21,963,737
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments . . . . .	2a	-635,561
b	Donated services and use of facilities . . . . .	2b	
c	Recoveries of prior year grants . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	-2,705
e	Add lines 2a through 2d . . . . .	2e	-638,266
3	Subtract line 2e from line 1 . . . . .	3	22,602,003
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	
c	Add lines 4a and 4b . . . . .		
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12 ) . . . . .	5	22,602,003

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements . . . . .	1	23,008,183
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities . . . . .	2a	
b	Prior year adjustments . . . . .	2b	
c	Other losses . . . . .	2c	
d	Other (Describe in Part XIV) . . . . .	2d	
e	Add lines 2a through 2d . . . . .	2e	
3	Subtract line 2e from line 1 . . . . .	3	23,008,183
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	
c	Add lines 4a and 4b . . . . .		
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18 ) . . . . .	5	23,008,183

**Part XIV Supplemental 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
REVENUE INCLUDED ON FORM 990 AND NOT ON THE BOOKS	PART XI, LINE 8, PART XII, LINE 2D	CURRENCY LOSS \$ 2,705
FIN 48 DISCLOSURE	PART X, LINE 2	The Organization is not aware of any activities that would jeopardize its tax-exempt status. The Organization recognizes interest and penalties related to unrecognized tax benefits and penalties in general and administrative expenses on the statement of activities and changes in net assets. There is no provision in these financial statements for penalties and interest related to unrecognized tax benefits for the years ended September 30, 2011 and 2010. For tax years prior to 2008, the Organization is no longer subject to examination by the IRS and the tax jurisdiction of Virginia.

**SCHEDULE F**  
**(Form 990)**

## **Statement of Activities Outside the United States**

OMB No 1545-0047

2010

## Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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**Name of the organization**

# ARMED FORCES COMMUNICATIONS AND ELECTRONICS ASSOCIATION INTERNATIONAL

**Employer identification number**

53-0180161

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

**1 For grantmakers.** 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 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

**3 Activities per Region (Use Part V if additional space is needed )**

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000 . . . . .  Use Part V if additional space is needed.

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ► \_\_\_\_\_

3 Enter total number of other organizations or entities . . . . . ► \_\_\_\_\_

**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

**Part IV Foreign Forms**

1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*  Yes  No

2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*  Yes  No

3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*  Yes  No

4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*  Yes  No

5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*  Yes  No

6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*  Yes  No

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 53-0180161

**Name:** ARMED FORCES COMMUNICATIONS AND  
ELECTRONICS ASSOCIATION INTERNATIONAL

**Part V**

**Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

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**Schedule I  
(Form 990)**

## **Grants and Other Assistance to Organizations, Governments and Individuals in the United States**

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

► Attach to Form 990

2010

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

Name of the organization  
**ARMED FORCES COMMUNICATIONS AND  
ELECTRONICS ASSOCIATION INTERNATIONAL**

**Employer identification number**

53-0180161

## **Part I General Information on Grants and Assistance**

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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.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
(1) AFCEA EDUCATIONAL FOUNDATION 4400 FAIR LAKES COURT FAIRFAX, VA 22033	54-1115312	501(C)(3)	200,000	0			STEM SCHOLARSHIPS
(2) US ARMY - WARRIOR TRANSITION COMMAND 200 STOULL ST 7S69 Alexandria, VA 22332		N/A	25,000	0			
(3) FISHER HOUSE FOUNDATION 111 ROCKVILLE PK 420 ROCKVILLE, MD 20850	11-3158401	501(c)(3)	50,000	0			

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

**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
PROCEDURES FOR MONITORING THE USE OF GRANT FUNDS	PART I, LINE 2	RECORDS OF ASSISTANCE RECIPIENTS IS MAINTAINED WITHIN THE ORGANIZATION AND MONITORED

**Schedule J**  
(Form 990)**Compensation Information**

OMB No 1545-0047

**2010****Open to Public  
Inspection**Department of the Treasury  
Internal Revenue Service

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**

ARMED FORCES COMMUNICATIONS AND ELECTRONICS ASSOCIATION INTERNATIONAL

**Employer identification number**

53-0180161

**Part I Questions Regarding Compensation**

**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

<input checked="" type="checkbox"/> First-class or charter travel	<input type="checkbox"/> Housing allowance or residence for personal use
<input checked="" type="checkbox"/> Travel for companions	<input type="checkbox"/> Payments for business use of personal residence
<input type="checkbox"/> Tax indemnification and gross-up payments	<input checked="" type="checkbox"/> Health or social club dues or initiation fees
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> 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

**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?

**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

<input checked="" type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input type="checkbox"/> Form 990 of other organizations	<input checked="" type="checkbox"/> 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?

**b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?

**c** Participate in, or receive payment from, an equity-based compensation arrangement?

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?

**b** Any related organization?

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?

**b** Any related organization?

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

**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

**9** If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
<b>1b</b>	Yes	
<b>2</b>	Yes	
<b>4a</b>		No
<b>4b</b>		No
<b>4c</b>		No
<b>5a</b>		
<b>5b</b>		
<b>6a</b>		
<b>6b</b>		
<b>7</b>		
<b>8</b>		
<b>9</b>		

**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) PATRICK MIORIN	(i) 165,589 (ii) 0	40,159 0	318 0	13,248 0	12,109 0	231,423 0	0 0
(2) BECKY NOLAN	(i) 252,664 (ii) 0	73,975 0	9,778 0	19,600 0	13,162 0	369,179 0	0 0
(3) KENT SCHNEIDER	(i) 471,998 (ii) 0	200,000 0	12,854 0	19,600 0	6,676 0	711,128 0	0 0
(4) JOHN DUBIA	(i) 244,190 (ii) 0	72,353 0	6,651 0	19,555 0	2,011 0	344,760 0	0 0
(5) JIM GRIGGS	(i) 148,450 (ii) 0	36,520 0	118 0	11,877 0	1,536 0	198,501 0	0 0
(6) FRED RAINBOW	(i) 145,544 (ii) 0	35,937 0	755 0	11,646 0	1,079 0	194,961 0	0 0
(7) KIN LEE	(i) 149,576 (ii) 0	28,950 0	179 0	11,967 0	10,436 0	201,108 0	0 0
(8) STEVE RITCHHEY	(i) 142,624 (ii) 0	35,215 0	1,228 0	11,414 0	3,267 0	193,748 0	0 0
( 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
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**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.

**2010****Open to Public  
Inspection****Name of the organization**ARMED FORCES COMMUNICATIONS AND  
ELECTRONICS ASSOCIATION INTERNATIONAL**Employer identification number**

53-0180161

Identifier	Return Reference	Explanation
REVIEW OF FORM 990	PART VI, LINE 11	THE FORM 990 WAS PREPARED BY THE INDEPENDENT AUDITORS AND REVIEWED BY SENIOR MANAGEMENT THE BOARD OF DIRECTORS DELEGATED THE REVIEW AND APPROVAL OF THE FORM 990 TO THE AFCEA AUDIT COMMITTEE, AN INDEPENDENT COMMITTEE THAT REPORTS TO THE BOARD OF DIRECTORS. THE DELEGATION WAS DONE FOR EFFICIENCIES IN OPERATIONS AND TO ENSURE TIMELY FILING OF THE FORM 990

Identifier	Return Reference	Explanation
MONITORING OF CONFLICT OF INTEREST POLICY	PART VI, LINE 12C	ANNUALLY THE BOARD REVIEWS AND DISCUSSES THE CONFLICT OF INTEREST POLICY AND MEMBERS SIGN A CONFLICT OF INTEREST STATEMENT IF THERE IS A CONFLICT THE BOARD MEMBER WOULD BE ASKED TO RESIGN AND/OR RECUSE THEMSELVES FROM ANY VOTE WHERE THE CONFLICT WOULD COME INTO PLAY

Identifier	Return Reference	Explanation
PROCESS FOR DETERMINING COMPENSATION	PART VI, LINE 15	A SEPARATE AND INDEPENDENT COMPENSATION COMMITTEE REVIEWS PERFORMANCE BASED ON PRE-DETERMINED PERFORMANCE STANDARDS. COMPENSATION IS DETERMINED BY THE COMPENSATION COMMITTEE AND PRESENTED TO THE INDEPENDENT EXECUTIVE COMMITTEE FOR APPROVAL. THE OVERALL COMPENSATION PACKAGE IS APPROVED BY THE BOARD ANNUALLY WITH THE OPERATING BUDGET. THIS PROCEDURE IS DOCUMENTED IN THE MEETING MINUTES

Identifier	Return Reference	Explanation
HOW ORGANIZATION MAKES IT GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC	PART VI, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	PART XI, LINE 5	UNREALIZED LOSS ON INVESTMENTS 635,561 CURRENCY LOSS 2,705 ----- 638,266

Identifier	Return Reference	Explanation
AUDIT COMMITTEE	PART XII, LINE 2C	THE AUDIT COMMITTEE SCHEDULES A PLANNING MEETING, TYPICALLY IN LATE OCTOBER OR EARLY NOVEMBER, TO REVIEW PRELIMINARY YEAR END RESULTS FOR THE ENTITY, DISCUSS AUDIT PLANNING, IDENTIFY ANY POTENTIAL RISK AREAS OR ANY PARTICULAR AREAS OF AUDIT/RISK INTEREST THEY ARE KEPT APPRISED OF ANY ISSUES DURING THE AUDIT AND TYPICALLY IN JANUARY THE COMMITTEE MEETS WITH THE AUDIT FIRM TO REVIEW DRAFTS OF THE STATEMENTS FOR THE ENTITY, DISCUSS INTERNAL CONTROLS, RISK AREAS, ADJUSTMENTS, ANY IDENTIFIED MATERIAL WEAKNESSES, AND ANY CONTROL DEFICIENCIES

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME PATRICK MIORIN TITLE CFO AND TREASURER HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME BECKY NOLAN TITLE EXECUTIVE V P AND SECRETARY HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME KENT SCHNEIDER TITLE PRESIDENT AND CEO HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME JOHN DUBIA TITLE EXECUTIVE VP HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME JIM GRIGGS TITLE VP - CHIEF INFORMATION OFFICER HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME FRED RAINBOW TITLE VP - EDUCATION HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME KIN LEE TITLE CHIEF SYSTEMS ENGINEER HOURS 3

Identifier	Return Reference	Explanation
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME STEVE RITCHIE TITLE VP- INTELLIGENCE HOURS 3

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**SCHEDULE R**  
**(Form 990)**

## Related Organizations and Unrelated Partnerships

OMB No 1545-0047

2010

## Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

**Name of the organization**

## ARMED FORCES COMMUNICATIONS AND ELECTRONICS ASSOCIATION INTERNATIONAL

**Employer identification number**

53-0180161

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

**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) AFCEA EDUCATIONAL FOUNDATION 4400 FAIR LAKES COURT FAIRFAX, VA 22033 54-1115312	FOUNDATION	DC	501(C)(3)	7	AFCEA		
(2) AFCEA BUILDING SERVICE CORPORATION 4400 FAIR LAKES COURT FAIRFAX, VA 22033 52-1257813	TITLE HD'G CO	DC	501(C)(2)		AFCEA		

**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.)

**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.)

**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		No
1b	Yes	
1c		No
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j	Yes	
1k		No
1l		No
1m		No
1n	Yes	
1o		No
1p		No
1q		No
1r		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)				
(2)				
(3)				
(4)				
(5)				
(6)				

**Part VI Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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.

**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:** 53-0180161  
**Name:** ARMED FORCES COMMUNICATIONS AND ELECTRONICS ASSOCIATION INTERNATIONAL

**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			
NATALIE GIVANS CHAIRMAN OF THE BOARD	1 0	X		X			0	0	0
AL GRASSO VICE CHAIRMAN OF THE BOARD	1 0	X		X			0	0	0
LOU ADDEO DIRECTOR	1 0	X					0	0	0
DEBORAH ALDERSON DIRECTOR	1 0	X					0	0	0
DUANE ANDREWS DIRECTOR	1 0	X					0	0	0
BRAD BARKER DIRECTOR	1 0	X					0	0	0
RON BOUNDS DIRECTOR	1 0	X					0	0	0
NANCY BROWN DIRECTOR	1 0	X					0	0	0
ROBERT CHILDS DIRECTOR	1 0	X					0	0	0
PAUL COFONI DIRECTOR	1 0	X					0	0	0
JERRY DEMURO DIRECTOR	1 0	X					0	0	0
JAMIE DOSSANTOS DIRECTOR	1 0	X					0	0	0
AL EDMONDS DIRECTOR	1 0	X					0	0	0
JAMES FLYZIK DIRECTOR	1 0	X					0	0	0
BOB FORTNA DIRECTOR	1 0	X					0	0	0
DR HENRIK FRIMAN DIRECTOR	1 0	X					0	0	0
LINDA GOODEN DIRECTOR	1 0	X					0	0	0
DIANA GOWEN DIRECTOR	1 0	X					0	0	0
ALLEN GREENE DIRECTOR	1 0	X					0	0	0
JOHN GRIMES DIRECTOR	1 0	X					0	0	0
DAVE GRUNDIES DIRECTOR	1 0	X					0	0	0
TOM HORTON DIRECTOR	1 0	X					0	0	0
RON IVERSON DIRECTOR	1 0	X					0	0	0
BRUCE KLEIN DIRECTOR	1 0	X					0	0	0
ARTHUR LANGSTON DIRECTOR	1 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
		Or director	Individual trustee	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	
DAVID LEHMAN DIRECTOR	1 0	X						0	0
DR JACK LONDON DIRECTOR	1 0	X						0	0
JOHN MEINCKE DIRECTOR	1 0	X						0	0
DENNIS MORAN DIRECTOR	1 0	X						0	0
WOOD PARKER DIRECTOR	1 0	X						0	0
HARRY RADUEGE DIRECTOR	1 0	X						0	0
TODD RAMSEY DIRECTOR	1 0	X						0	0
BARRY RHINE DIRECTOR	1 0	X						0	0
WILLIAM RUSS DIRECTOR	1 0	X						0	0
REIMAR SCHERZ DIRECTOR	1 0	X						0	0
SCOTT SUHY DIRECTOR	1 0	X						0	0
JERRY TUTTLE DIRECTOR	1 0	X						0	0
PATRICK TYRRELL DIRECTOR	1 0	X						0	0
AUSTIN YERKS DIRECTOR	1 0	X						0	0
SUSAN ZELENIAK DIRECTOR	1 0	X						0	0
SADHNA AGRAWAL DIRECTOR	1 0	X						0	0
HARRY ATHANASOPOULOS DIRECTOR	1 0	X						0	0
ALAN BALUTIS DIRECTOR	1 0	X						0	0
LINDA BERDINE DIRECTOR	1 0	X						0	0
BEN BOURBON DIRECTOR	1 0	X						0	0
HERB BROWNE DIRECTOR	1 0	X						0	0
MIRIAM BROWNING DIRECTOR	1 0	X						0	0
JOEL BRUNSON DIRECTOR	1 0	X						0	0
DAVE BRYAN DIRECTOR	1 0	X						0	0
JAMES BUSEY IV DIRECTOR	1 0	X						0	0

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		Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee			
BORA BUYUKONER DIRECTOR	10	X					0	0	0
STEVE CAMBONE DIRECTOR	10	X					0	0	0
DESIREE CAMPBELL DIRECTOR	10	X					0	0	0
TOM CATUDAL DIRECTOR	10	X					0	0	0
WITOLD CIESLEWSKI DIRECTOR	10	X					0	0	0
MILTON COOPER DIRECTOR	10	X					0	0	0
CHUCK CORJAY DIRECTOR	10	X					0	0	0
CHRIS CORTEZ DIRECTOR	10	X					0	0	0
KATHY COWLES DIRECTOR	10	X					0	0	0
SALLY CUNNINGHAM DIRECTOR	10	X					0	0	0
PETE CUVIELLO DIRECTOR	10	X					0	0	0
DENNIS DEMOLET DIRECTOR	10	X					0	0	0
TERRY DIVITTORIO DIRECTOR	10	X					0	0	0
ANDREW DWYER DIRECTOR	10	X					0	0	0
GERALD EBKER DIRECTOR	10	X					0	0	0
FRED EISELE DIRECTOR	10	X					0	0	0
DR RAFFAELE ESPOSITO DIRECTOR	10	X					0	0	0
AMY FADIDA DIRECTOR	10	X					0	0	0
DEBBIE FILIPPI DIRECTOR	10	X					0	0	0
MIKE FINN DIRECTOR	10	X					0	0	0
PIETRO FINOCCHIO DIRECTOR	10	X					0	0	0
MIKE GAFFNEY DIRECTOR	10	X					0	0	0
HARRY GATANAS DIRECTOR	10	X					0	0	0
DENNIS GIBSON DIRECTOR	10	X					0	0	0
FRANCIS GICCA DIRECTOR	10	X					0	0	0

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		Or director	Individual trustee	Institutional Trustee	Office	Key employee	Highest compensated employee	Former	
JOHN GILLIGAN DIRECTOR	1 0	X						0	0
CHARLIE GIVANS DIRECTOR	1 0	X						0	0
ROBERT GRADLE DIRECTOR	1 0	X						0	0
CHRIS HAAKON DIRECTOR	1 0	X						0	0
DAVID HART DIRECTOR	1 0	X						0	0
TIM HARTSFIELD DIRECTOR	1 0	X						0	0
ANDREW HEO DIRECTOR	1 0	X						0	0
PETR JIRASEK DIRECTOR	1 0	X						0	0
TINA JORDAN DIRECTOR	1 0	X						0	0
DR NORRIS KEELER DIRECTOR	1 0	X						0	0
STEVE KRAUSS DIRECTOR	1 0	X						0	0
JACK LAUTENSCHLAGER DIRECTOR	1 0	X						0	0
BELKIS LEONG-HONG DIRECTOR	1 0	X						0	0
THOMAS LUSI DIRECTOR	1 0	X						0	0
EMIL LYUTSKANOV DIRECTOR	1 0	X						0	0
CHRIS MARZILLI DIRECTOR	1 0	X						0	0
DICK MAYO DIRECTOR	1 0	X						0	0
MARY JANE MCKEEVER DIRECTOR	1 0	X						0	0
JIM MEARS DIRECTOR	1 0	X						0	0
SHIRLEY MENISH DIRECTOR	1 0	X						0	0
ALLAN MINK DIRECTOR	1 0	X						0	0
RICHARD MUIRAGUI DIRECTOR	1 0	X						0	0
EUGENE MURPHY DIRECTOR	1 0	X						0	0
DR ALVIN NASHMAN DIRECTOR	1 0	X						0	0
JAMES OBENDORFER DIRECTOR	1 0	X						0	0

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		Individual trustee or director	Institutional Trustee	Office	Key employee	Highest compensated employee			
RICHARD O'LEAR DIRECTOR	1 0	X					0	0	0
ERIC OLTMAN DIRECTOR	1 0	X					0	0	0
JAMES OREFICE DIRECTOR	1 0	X					0	0	0
GARY O'SHAUGHNESSY DIRECTOR	1 0	X					0	0	0
CYNTHIA PACHECO DIRECTOR	1 0	X					0	0	0
JAMES PAYNE DIRECTOR	1 0	X					0	0	0
JEFF PERRY DIRECTOR	1 0	X					0	0	0
HARRY PICCARIELLO DIRECTOR	1 0	X					0	0	0
JAMES RALPH JR DIRECTOR	1 0	X					0	0	0
LOU RAMOS DIRECTOR	1 0	X					0	0	0
JEFF RICHARDSON DIRECTOR	1 0	X					0	0	0
MICHAEL RIHA DIRECTOR	1 0	X					0	0	0
HERBERTO ROBINSON DIRECTOR	1 0	X					0	0	0
CARLOS RODOLFO DIRECTOR	1 0	X					0	0	0
RICK ROSENBURG DIRECTOR	1 0	X					0	0	0
RON ROSS DIRECTOR	1 0	X					0	0	0
GARY SALISBURY DIRECTOR	1 0	X					0	0	0
PAT SCHAMBACH DIRECTOR	1 0	X					0	0	0
DONALD SCOTT DIRECTOR	1 0	X					0	0	0
DR RALPH SHRADER DIRECTOR	1 0	X					0	0	0
DOTTIE SIMEONA DIRECTOR	1 0	X					0	0	0
MARK SINCLAIR DIRECTOR	1 0	X					0	0	0
LUCINDA SPANEY DIRECTOR	1 0	X					0	0	0
DEBRA TYRRELL DIRECTOR	1 0	X					0	0	0
NARUHIKO UEDA DIRECTOR	1 0	X					0	0	0

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee			
JAMES WANGLER DIRECTOR	1 0	X					0	0	0
JOHN WEST DIRECTOR	1 0	X					0	0	0
BERNARD WHITE DIRECTOR	1 0	X					0	0	0
JOHN WICKHAM JR DIRECTOR	1 0	X					0	0	0
EARLE WILLIAMS DIRECTOR	1 0	X					0	0	0
KAREN WILLIAMS DIRECTOR	1 0	X					0	0	0
NORMAN WOOD DIRECTOR	1 0	X					0	0	0
ROBERT WOODS DIRECTOR	1 0	X					0	0	0
SUZAN YEAGER DIRECTOR	1 0	X					0	0	0
DENDY YOUNG DIRECTOR	1 0	X					0	0	0
SUZAN ZIMMERMAN DIRECTOR	1 0	X					0	0	0
KONSTANTIN ZOGRAFOV DIRECTOR	1 0	X					0	0	0
STEVE KELLEY DIRECTOR	1 0	X					0	0	0
PATRICK MIORIN CFO AND TREASURER	37 5		X				206,066	0	25,357
BECKY NOLAN EXECUTIVE V P AND SECRETARY	37 5		X				336,417	0	32,762
KENT SCHNEIDER PRESIDENT AND CEO	37 5		X				684,852	0	26,276
JOHN DUBIA EXECUTIVE VP	37 5			X			323,194	0	21,566
JIM GRIGGS VP - CHIEF INFORMATION OFFICER	37 5			X			185,088	0	13,413
FRED RAINBOW VP - EDUCATION	37 5			X			182,236	0	12,725
KIN LEE CHIEF SYSTEMS ENGINEER	37 5			X			178,705	0	22,403
STEVE RITCHIE VP - INTELLIGENCE	37 5			X			179,067	0	14,681