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DLN: 93493089004202

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

2010

OMB No 1545-0047

Open to Public
Inspection

| A Fo | r the | 2010 ca | lendar year, or tax year begin | ning 10-01-2010 and ending 09-30-20 | 11 | | la::- | dortie | m maranda | |
|--------------------------------|-----------|---|---|--|----------------------|----------------------|--|-----------------------|-----------------|--|
| B Ch | eck ıf a | applicable | C Name of organization NATIONAL DEFENSE INDUSTRIAL | ASSOCIATION | | D Emp | ıoyer i | identificatio | n number | |
| — Ad | dress cl | hange | | | | 53-0 | 0196 | 547 | | |
| Na | me cha | ange | Doing Business As | | | E Telep | hone | number | | |
| Inı | tıal retu | ırn | Number and street (or P O box | If mail is not delivered to street address) | Room/suite | e (70° | 3)523 | 2-1820 | | |
| — _{Te} | mınate | ed | 2111 WILSON BOULEVARD NO 40 | | | | ., | | | |
| — Am | nended | return | City or town, state or country, ar | nd ZIP + 4 | | G Gross | receip | ots \$ 43,561,3 | 95 | |
| — AD | plication | n pending | ARLINGTON, VA 222013061 | | | | | | | |
| | | , 2 | F Name and address of p | orincipal officer | ш/-\ | his a group returi | | | <u></u> | |
| | | | LAWRENCE P FARRELL J | | H(a) Ist | his a group returi | n for affil | iates? Yes | No No | |
| | | | 2111 WILSON BOULEVA ARLINGTON, VA 22201 | | H(b) Are | all affiliates ir | ıcluded | γ Г | Yes No | |
| | | | ARLINGTON, VA 22201 | 3001 | If | 'No," attach | n a lis | t (see insti | ructions) | |
| T Ta | x-exen | npt status | ▼ 501(c)(3) | ◀ (insert no) | H(c) G | roup exemp | tion n | umber 🟲 | | |
| - | | >4/\4/ | | | | | | | | |
| | | | W NDIA ORG | | | | | | | |
| | | rganızatıon | Corporation Trust Associa | ation Other 🕨 | L Year of | formation 19 | 919 | M State of leg | gal domicile DC | |
| Pa | rt I | Sum | mary | | | | | | | |
| | | | _ | sion or most significant activities | | | | | | |
| φ | | TO PRO | MOTE THE INTEREST OF DE | EFENSE PREPAREDNESS | | | | | | |
| Governance | | | | | | | | | | |
| Ĕ | | | | | | | | | | |
| Š | 2 | Check th | iis box 🔭 if the organization | discontinued its operations or disposed | of more tha | n 25% of its | neta | assets | | |
| υ × | 3 | Number | of voting members of the gove | erning body (Part VI, line 1a) | | | 3 | | 29 | |
| e e | 4 | Number | of independent voting member | rs of the governing body (Part VI, line 1 | b) | | 4 | | 29 | |
| Ě | 5 | Total nur | 5 | | 82 | | | | | |
| Activities & | 6 | Total nur | mber of volunteers (estimate i | fnecessary) | | | 6 | | 90,000 | |
| ۹, | 7a | Total unr | elated business revenue from | Part VIII, column (C), line 12 | | | 7a | | 1,405,147 | |
| | ь | Net unre | lated business taxable incom | e from Form 990-T, line 34 | | | 7b | | -2,000 | |
| | | | | | Р | rior Year | | Curre | nt Year | |
| g, | 8 | | butions and grants (Part VIII) | , | | 119, | | | 343,814 | |
| al Lie | 9 | Progra | m service revenue (Part VIII | 34,424, | 920 | | 36,373,380 | | | |
| Revenu | 10 | | ment income (Part VIII, colu | 989, | - | | 514,699 | | | |
| _ | 11 | | revenue (Part VIII, column (A | 898, | 653 | | 882,785 | | | |
| | 12 | | evenue—add lines 8 through : | 36,432, | 307 | | 38,114,678 | | | |
| | 13 | | | art IX, column (A), lines 1-3) | | 70, | 000 | | 76,925 | |
| | 14 | | ts paid to or for members (Par | | 0 | | | | | |
| | 15 | Salarıe | es, other compensation, emplo | | | | | | | |
| \$ | | 10) | | | | 9,999, | 779 | | 10,708,253 | |
| Expenses | 16a | Profes | sional fundraising fees (Part I | X, column (A), line 11e) | | | 0 | | 0 | |
| <u>a</u> | Ь | Total fui | ndraising expenses (Part IX, column | (D), line 25) ► 0 | | | | | | |
| | 17 | Other | expenses (Part IX, column (A |), lines 11a-11d, 11f-24f) | | 22,680, | 458 | | 23,688,285 | |
| | 18 | | | nust equal Part IX, column (A), line 25) | | 32,750, | | | 34,473,463 | |
| | 19 | Reveni | ue less expenses Subtract lır | ne 18 from line 12 | | 3,682, | | | 3,641,215 | |
| € & £ & | | | | | Beginn | ing of Curre Year | ent | End o | f Year | |
| ege Sege | 20 | Totals | ssets (Part X. line 16) | | | 50,634, | 789 | | 54,653,970 | |
| Not Assets or Fund Balances | 21 | | | | | 18,905, | - | | 20,534,402 | |
| <u> </u> | 22 | | | ct line 21 from line 20 | | 31,728, | | | 34,119,568 | |
| | 1111 | | ature Block | | | 31,720, | 302 | | 31,113,300 | |
| Unde know | r pena | alties of pe and belief | erjury, I declare that I have exan | nined this return, including accompanying te. Declaration of preparer (other than offic | | | | | | |
| | | **** | ** | | | 2012-03-18 | | | | |
| Sigr | 1 | | ture of officer | | | Date | | | | |
| Her | | BRON | IISLAW PROKUSKI JR SECRETARY/T | REASURER | | | | | | |
| | | | or print name and title | NE SONEN | | | | | | |
| | | Print/Type | | Preparer's signature | Date | Check if se | | PTIN | | |
| Paid | | preparer's name Firm's name CLIFTONLARSONALLEN LLP | | | | | <u>• </u> | | | |
| raiu Prep | | | | | | | Firm's EIN | | | |
| | Only | Fırm's add | ress 🕨 2900 South Quincy St Sui | | Phone no (703) 998- | | | | | |
| | y | | ARLINGTON VA 22206 | | | | | 5100 | | |

May the IRS discuss this return with the preparer shown above? (see instructions) $\ \ .$

| 1 0111 | 0 (2010) | raye 2 |
|---------------------------|--|-----------------------|
| Par | Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III | |
| 1 | riefly describe the organization's mission | |
| ASS PREG SUP VIG | SSION OF THE NATIONAL DEFENSE INDUSTRIAL ORGANIZATION (NDIA) AND ITS SUBSIDIARY AFFILIATES THE IATION FOR ENTERPRISE INFORMATION (AFEI), THE NATIONAL TRAINING AND SIMULATION ASSOCIATION (NT ION STRIKE ASSOCIATION (PSA), AND WOMEN IN DEFENSE (WID), IS TO ADVOCATE CUTTING EDGE TECHNOLO OR WEAPONS, EQUIPMENT, TRAINING, AND SUPPORT FOR THE WAR-FIGHTER AND FIRST RESPONDER, TO PROMODUS, RESPONSIVE GOVERNMENT - INDUSTRY NATIONAL SECURITY TEAM, AND TO PROVIDE LEGAL AND ETHICAS FOR THE EXCHANGE OF INFORMATION BETWEEN INDUSTRY AND GOVERNMENT ON NATIONAL SECURITY ISSU | GY AND OTE A .L |
| 2 | d the organization undertake any significant program services during the year which were not listed on e prior Form 990 or 990-EZ? | |
| | "Yes," describe these new services on Schedule O | |
| 3 | d the organization cease conducting, or make significant changes in how it conducts, any program ervices? | |
| | "Yes," describe these changes on Schedule O | |
| 4 | escribe the exempt purpose achievements for each of the organization's three largest program services by expenses ection 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and locations to others, the total expenses, and revenue, if any, for each program service reported | |
| 4a | Code) (Expenses \$ 20,893,437 including grants of \$ 76,925) (Revenue \$ 31,793,073) |) |
| | THE NDIA PROMOTES ACTIVITIES AND FORUMS FOR THE INTERCHANGE BETWEEN INDUSTRY AND GOVERNMENT ON TECHNOLOGY AND ACQUISITION DEVELOPMENTS IN ADDITION IT PROVIDES STATE OF THE ART DEFENSE TECHNOLOGY UPDATES AND PROMOTES BETTER MANAGEMENT TECHNIQUES TO SYMPOSIA NDIA'S OVER 30 DIVISIONS COVER A WIDE SPECTRUM OF INTEREST AREAS THAT ARE IMPORTANT TO THE NATIONAL DEFENSE PREPAREDNE THE DIVISIONS ARE ORGANIZED TO PROMOTE THE EXCHANGE OF TECHNICAL INFORMATION RELATED TO THE RESEARCH, DEVELOPMENT, PRODUCTION OGISTICS, AND MANAGEMENT OF WEAPON SYSTEMS, POLICY, ASSOCIATED SUPPORT, AND TRAINING AMONG THE DEPARTMENT OF DEFENSE, OTHER FOOVERNMENT AND STATE AGENCIES, INDUSTRY, ACADEMIA AND SCIENTIFIC AGENCIES | ESS EFFORT N, |
| | | |
| 4b | Code) (Expenses \$ 3,357,765 including grants of \$ 0) (Revenue \$ 2,964,140) CHAPTERS THE NDIA AND WID CHAPTERS ARE PART OF THE NDIA ENTITY AND ARE ORGANIZED GEOGRAPHICALLY FOR THE PURPOSE OF ENCOURAGING CTIVITIES THAT SUPPORT THE ASSOCIATION'S VISION, MISSION, AND GOALS MANY ARE LOCATED NEAR MAJOR MILITARY COMMANDS, RESEARCH CENDEFENSE AGENCIES AND CONDUCT PROGRAMS TO INFORM THEIR MEMBERS AND COMMUNITIES ABOUT NATIONAL SECURITY AND THE INDUSTRIAL BASE. | , NG NTERS, AND |
| | | |
| 4c | Code) (Expenses \$ 2,502,118 including grants of \$ 0) (Revenue \$ 1,616,167) EDUCATIONAL SERVICES THE NATIONAL DEFENSE MAGAZINE IS A MONTHLY MAGAZINE THAT IS PUBLISHED TO HELP EDUCATE GOVERNMENT, INDUSTR UBLIC REGARDING DEFENSE ISSUES AND RELATED TECHNOLOGY DEVELOPMENTS | |
| | Other program services (Describe in Schedule O) | |
| 74 | Expenses \$ including grants of \$) (Revenue \$) | |
| 4e | Total program service expenses▶\$ 26.753.320 | |

| | | | 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 | | No |
| 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 | | No |
| 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 | | | |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line10? 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 | Yes | |
| 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 | | No |
| 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 | Yes | |
| 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 | | No |
| 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? <i>If</i> "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? <i>If</i> "Yes," complete Schedule G, Part II | 18 | | No |
| 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 | | No |
| 20a | Did the organization operate one or more hospitals? If "Yes," complete Schedule H | 20a | | No |
| Ь | 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 | | |

| Par | 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 | 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 | 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? If "Yes," complete Schedule J | 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 |
| Ь | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | No |
| 26 | 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) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part | | | |
| | IV | 28a | | Νo |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | No |
| С | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | No |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M | 29 | | Νo |
| 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 | | Νο |
| 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? <i>If</i> "Yes," complete Schedule R, Part I | 33 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 | 34 | | No |
| 35 | Is any related organization a controlled entity within the meaning of section 512(b)(13)? | 35 | | Νo |
| а | 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 Yes V No | | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 | 36 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? | 38 | Yes | |

Form 990 (2010)

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 | | | |
| | Tal 38 | | | |
| D | Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0 | | | |
| c | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable | | | |
| 2- | gaming (gambling) winnings to prize winners? | 1c | | |
| 2a | Statements filed for the calendar year ending with or within the year covered by this | | | |
| | return | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Yes | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | | | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the | _ | | |
| | year? | 3a | Yes | |
| - Б 4а | If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O | 3b | Yes | |
| | over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | Νο |
| 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 | | N o |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | No |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5b | | |
| · | The storme sator sb, and the organization mention oboot-1 | 5с | | |
| 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 | | Νo |
| 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). | | | |
| а | 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 | | Νo |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| c | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to | 7c | | Νο |
| d | file Form 8282? | , C | | |
| _ | | | | |
| е | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | Νο |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | No |
| | 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 | 7h | | |
| 8 | Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. DId | | | |
| | the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? | | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | 8 | | |
| | Did the organization make any taxable distributions under section 4966? | 9a | | |
| | Did the organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| Ь | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| 11 | Section 501(c)(12) organizations. Enter | | | |
| а | Gross income from members or shareholders | | | |
| Ь | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) | | | |
| 17= | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the | | | |
| 13 | year Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| | 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 Enter the amount of reserves on hand | | | |
| | 13c | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Νο |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O | 14b | | |

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.

| Charle of Cabadula O | contains a response to an | augetien in this Dart I/I | | | | | 1.4 |
|----------------------|----------------------------|---------------------------|--|--|--|--|-----|
| Check if Schedule O | contains a response to any | question in this Part VI | | | | | |

| Se | ction A. Governing Body and Management | | | |
|-----|---|--------|-----|----------|
| | | | Yes | No |
| | | | | |
| | | | | |
| 1a | Enter the number of voting members of the governing body at the end of the tax vear | | | |
| b | Enter the number of voting members included in line 1a, above, who are | | | |
| ь | 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? | 2 | | No |
| 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 | | | |
| 5 | filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . | 4 5 | | No No |
| 6 | Does the organization have members or stockholders? | 6 | Yes | 140 |
| | • | | res | |
| 7a | Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body? | 7a | Yes | |
| Ь | Are any decisions of the governing body subject to approval by members, stockholders, or other persons? | 7b | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| а | The governing body? | 8a | Yes | |
| ь | 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 | 9 | | No |
| | organization's mailing address? If "Yes," provide the names and addresses in Schedule O ection B. Policies (This Section B requests information about policies not required by the Internal | 9 | | NO |
| | evenue Code.) | | | |
| | | | Yes | No |
| 10a | Does the organization have local chapters, branches, or affiliates? | 10a | Yes | |
| 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 | Yes | |
| 11a | Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form? | | | |
| | | 11a | Yes | |
| Ь | 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 | |
| Ь | Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| С | 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? | 15- | V | |
| | The organization's CEO, Executive Director, or top management official | 15a | Yes | |
| D | Other officers or key employees of the organization | 15b | Yes | |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No |
| ь | 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 | | |
| Se | ection C. Disclosure | | | |
| 17 | List the States with which a copy of this Form 990 is required to be filed ►VA | | | |
| 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 | | | |

- 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization BRO NISLAW PRO KUSKI JR
 2111 WILSON BOULEVARD NO 400

ARLINGTON, VA 222013061 (703) 522-1820

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

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 compensated employees, and former such persons

| Check this box if neither the organ | | elated o | rgan | ızatı | on c | omper | sate | d any current office | er, director, or trust | ee |
|-------------------------------------|---|-------------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
| (A) Name and Title | (B) A verage hours | (C) Position (check all that apply) | | | | | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
| | per week (describe hours for related organizations in Schedule O) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the organization (W- 2/1099-MISC) | from related organizations (W- 2/1099- MISC) | compensation from the organization and related organizations |
| See Additional Data Table | | | | | | | | | | |
| - | | | | | | | | | | |
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Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

| | (A) Name and Title | (B) Average hours per | | tion that a | (che | | | | (D) Reportable compensation from the | (E) Reportable compensation from related | | (F) Estima mount o | ated fother |
|--------|---|--|----------|-------------|------|------|--|----------|--|---|----------|--------------------------|----------------|
| | | week (describe hours for related organizations in Schedule O) Week (describe hours for related organizations In Schedule O) | | | | | | or | from the organization and related organizations | | | | |
| See A | ddıtıonal Data Table | - / | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| 1b | Sub-Total | | | | | • | ٠ | ► | | | | | |
| С | Total from continuation sheet | | | | | | Þ | | | | | | |
| d 2 | Total (add lines 1b and 1c) . | | | | | | | ▶ | 4,389,655 | 0 | | 880,357 | |
| 2 | Total number of individuals (in \$100,000 in reportable compe | | | | | tea | above |) wnc | received more tha | n | | | |
| | | | | | | | | | | | | Yes | No |
| 3 | Did the organization list any fc | ormer officer, direc | tor or t | ruste | e, k | ey e | mploy | ee, o | or highest compens | ated employee | | 163 | 110 |
| | on line 1a? If "Yes," complete S | | | | | • | • | • | | [| 3 | | No |
| 4 | For any individual listed on line organization and related organi | | | | | | | | | | | | |
| _ | individual | | | • | • | • | | • | | | 4 | Yes | |
| 5 | Did any person listed on line 1 services rendered to the organ | | | | | | | | | r individual for | 5 | | N o |
| | | | | | | | | | | L | | | 110 |
| | ection B. Independent Co | | | | | | | | | | | | |
| 1 | Complete this table for your fiv \$100,000 of compensation fro | | | ndep | ende | ento | contrac | tors | that received more | than | | | |
| | N; | (A) ame and business add | dress | | | | | | Descr | (B) iption of services | | (C Comper | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | \dashv | | |
| | | | | | | | | | | | | | |

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 ▶0

| Form 9 | | · _ · | | | | | Pa | ge 9 |
|--|---------------------------|--|---|--|------------------------|---|---|---|
| Part \ | /!!! | Statement of Reven | ue | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | excluded from tax under sections 512, 513, or |
| Contributions, gifts, grants and other similar amounts | b c d e f | Federated campaigns Membership dues | . 1c . 1d . 1e . and 1f . nes 1a-1f \$ | 343,814 | 343,814 | | | 514 |
| Program Service Revenue | c d e | MEMBERSHIP DUES PUBLICATIONS SPONSORSHIPS | | 900099 900099 900099 541800 900099 | 3,394,793 1,616,167 | 9,994,335 3,394,793 | | |
| Progr | g 3 4 | Total. Add lines 2a-2f Investment income (including and other similar amounts) Income from investment of tax-ext | g dividends, interest | | 36,373,380 772,949 | | | 772,94 |
| | b c | Gross Rents Less rental expenses Rental income or (loss) Net rental income or (loss) | (ı) Real | (II) Personal | | | | |
| | b c | Gross amount from sales of assets other than inventory Less cost or other basis and sales expenses Gain or (loss) Net gain or (loss) | (I) Securities 5,188,467 5,446,717 -258,250 | (II) O ther | -258,250 | | | -258,25 |
| Other Revenue | 8a b c 9a b c 10a b c d | Gross income from fundraisi (not including \$ of contributions reported on See Part IV, line 18 Less direct expenses Net income or (loss) from fundraisi gross income from gaming at Less direct expenses Net income or (loss) from gaming at Less direct expenses Net income or (loss) from gaming at Less direct expenses Net income or (loss) from gaming at Less cost of goods sold Net income or (loss) from saming at Less cost of goods sold Net income or (loss) from saming at Less cost of goods sold Miscellaneous Revenue | Business Code 900099 | 497,487 385,298 | | | 497,48 | |
| | 12 | Total revenue. See Instructi | ons | | 38,114,678 | 34,968,233 | 1,405,147 rm 990 (20 | |

| | 990 (2010) | | | | Page 10 |
|--------|---|----------------|--------------------------|--|-------------------------|
| Par | IX Statement of Functional Expenses | | | | |
| | Section $501(c)(3)$ and $501(c)(4)$ organizations mus ll other organizations must complete column (A) but are not required to c | | | (D) | |
| | ot include amounts reported on lines 6b, | (A) | (B) | (C) | (D) |
| | b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to governments and organizations in the U S See Part IV, line 21 | 20,300 | 20,300 | | • |
| 2 | Grants and other assistance to individuals in the U.S. See Part IV, line 22 | 56,625 | 56,625 | | |
| 3 | Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | 30,023 | 30,023 | - | |
| 4 | Benefits paid to or for members | | | 1 | |
| 5 | Compensation of current officers, directors, trustees, and key employees | 2,154,797 | 1,648,012 | 506,785 | |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | | | | |
| 7 | Other salaries and wages | 7,343,417 | 4,148,133 | 3,195,284 | |
| 8 | Pension plan contributions (include section 401(k) and section 403(b) employer contributions) | 419,298 | 255,197 | 164,101 | |
| 9 | Other employee benefits | 427,769 | 308,252 | 119,517 | |
| 10 | Payroll taxes | 362,972 | 220,915 | † · · · · · · · · · · · · · · · · · · · | |
| а | Fees for services (non-employees) Management | · | | | |
| ь | Legal | 37,891 | 3,726 | 34,165 | |
| с | Accounting | 56,947 | 5,599 | 51,348 | |
| d | Lobbying | 127,268 | 8,268 | 119,000 | |
| e | Professional fundraising services See Part IV, line 17 | , | , | , | |
| f | Investment management fees | 145,968 | | 145,968 | |
| g g | Other | 1,515,477 | 1,325,504 | | |
| 12 | Advertising and promotion | 556,633 | 556,633 | | |
| 13 | Office expenses | 1,938,328 | 1,170,156 | | |
| 14 | Information technology | 1,500,020 | 2,2.0,200 | | |
| 15 | Royalties | | | | |
| 16 | Occupancy | 835,796 | 404,741 | 431,055 | |
| 17 | Travel | 874,042 | 710,058 | | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | 57 1,6 12 | ,15,655 | 199,75 | |
| 19 | Conferences, conventions, and meetings | 11,454,445 | 11,407,632 | 46,813 | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | 72,590 | 26,672 | 45,918 | |
| 23 | Insurance | · | | | |
| 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) | | | | |
| а | EXHIBIT EXPENSES | 2,173,775 | 2,173,775 | | |
| b | CHAPTER EXPENSES | 1,197,543 | 1,197,543 | | |
| c | PUBLICATIONS | 988,154 | 988,154 | | |
| d | SPONSORSHIP | 253,435 | 253,435 | | |
| e | MEMBERSHIP SERVICES | 192,996 | 192,996 | | |
| f | All other expenses | 1,266,997 | -329,006 | 1,596,003 | |
| 25 | Total functional expenses. Add lines 1 through 24f | 34,473,463 | 26,753,320 | 7,720,143 | 0 |
| 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 750 750 1 15.204.298 2 17,710,037 2 3 3 564,130 4 514,493 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 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) Assets 6 7 8 8 1,726,157 1,924,043 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete 2.800.468 10a Part VI of Schedule D 2,644,973 ь Less accumulated depreciation 10b 173,981 10c 155,495 29.894,956 29.264.209 11 11 3,176,682 3,877,260 12 Investments—other securities See Part IV, line 11 12 13 13 Investments—program-related See Part IV, line 11 . . 14 14 524,582 15 576,936 15 16 50,634,789 16 54,653,970 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 4,375,347 17 5.490.401 17 Accounts payable and accrued expenses . 18 18 19 11,235,126 19 11.166.741 20 20 Liabilities 21 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 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 3.295.354 25 3,877,260 Other liabilities Complete Part X of Schedule D 26 18,905,827 26 20.534.402 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 30.446.983 27 32,803,610 Unrestricted net assets Temporarily restricted net assets 28 661,479 28 692,458 Fund 620,500 623,500 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 31,728,962 33 34,119,568 33 Total net assets or fund balances 50.634,789 34 Total liabilities and net assets/fund balances 54,653,970

| Ра | 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) | | | 38.1 | 114,678 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | | 173,463 |
| 3 | Revenue less expenses Subtract line 2 from line 1 | 3 | | | 541,215 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 31,7 | 728,962 |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | | -1,2 | 250,609 |
| 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 | | 34,1 | 119,568 |
| Pai | rt XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response to any question in this Part XII | | | <u> </u> | |
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990 | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | No |
| b | Were the organization's financial statements audited by an independent accountant? | | 2b | 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 | • | 2c | Yes | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were iss on a separate basis, consolidated basis, or both | ued | | | |
| | 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? | | 3a | | 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 | uıred | 3b | | |

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

Inspection

| | | e organization FENSE INDUSTRIAL AS: | SOCIATION | | <u> </u> | Employer identifi | cation numbe | er |
|------|-----------|---|--|--|--|-----------------------------------|-----------------|-----------------|
| MAIL | JINAL DEI | I ENSE INDOSTRIAL AS. | BOCIATION | | | 53-0196547 | | |
| Pa | rt I | Reason for P | ublic Charity Stat | t us (All organizatio | ns must complete this pa | | ions | |
| The | organiz | | | | ough 11, check only one box | | | |
| 1 | \sqcap | A church, conven | tion of churches, or as | sociation of churches | described in section 170(b) | (1)(A)(i). | | |
| 2 | \sqcap | A school describe | ed in section 170(b)(1 |)(A)(ii). (Attach Sche | dule E) | | | |
| 3 | \vdash | A hospital or a co | operative hospital sei | vice organization des | ribed in section 170(b)(1)(| A)(iii). | | |
| 4 | Γ | A medical researd hospital's name, o | | ed in conjunction with | a hospital described in sect | ion 170(b)(1)(A)(| iii). Enter the | |
| 5 | Г | An organization o | perated for the benefit | of a college or univer | sity owned or operated by a | governmental unit | described in | |
| | | section 170(b)(1) | (A)(iv). (Complete P | art II) | | | | |
| 6 | \vdash | A federal, state, o | or local government or | governmental unit des | scribed in section 170(b)(1) | (A)(v). | | |
| 7 | Γ | described in | hat normally receives (A)(vi) (Complete P | · | s support from a governmen | tal unit or from the | general publ | ıc |
| 8 | Г | | | 170(b)(1)(A)(vi) (C | omplete Part II) | | | |
| 9 | <u>.</u> | • | | | of its support from contrib | utions membershi | n fees, and or | 055 |
| - | • | • | • | • • | ect to certain exceptions, ar | • | . , . | |
| | | · | | · · · | ness taxable income (less s | | | s |
| | | • • • • | | | 1 509(a)(2). (Complete Part | • | | - |
| 10 | Г | | = | • | r public safety See section 5 | • | | |
| 11 | Ė. | - | • | • | nefit of, to perform the funct | | out the nurn | nses of |
| | , | one or more publi | cly supported organiza | ations described in sec orting organization and | tion 509(a)(1) or section 5 d complete lines 11e throug II - Functionally integrated | 09(a)(2) See sect h 11h | |). Check |
| e | Γ | • | tion managers and oth | | ntrolled directly or indirectly ublicly supported organizati | • | | |
| f | | | • | etermination from the 1 | RS that it is a Type I, Type | II or Type III sup | porting organ | ızatıon, |
| | | check this box | 2005 1 11 | | | | | Г |
| g | | following persons | | zation accepted any g | ift or contribution from any o | rtne | | |
| | | | | ontrols, either alone o | together with persons desc | ribed in (ii) | Yes | No |
| | | | · | e the supported organ | - | . , | 11g(i) | + |
| | | | ber of a person describ | | | | 11g(ii) | +- |
| | | | • | n described in (i) or (ii | above? | | 11g(iii) | +- |
| h | | • • | · | the supported organiz | | | - 1 | |
| | | | (iii) | (in) | | | | |
| | (i) | | Type of organization | (iv) Is the organization in | (v) Did you notify the | (vi) Is the | | (vii) |

| (i) Name of supported organization | (ii) EIN | Type of organization (described on lines 1- 9 above or IRC section (see | (iv) Is the organizat col (i) list your gove docume | e ion in ted in rning | (v) Did you not organizati col (i) of suppor | on in your | (vi) Is the organizat col (i) organicol in the U | e Ion In anized | (vii) A mount of support |
|---|-------------|---|---|--------------------------------|--|---------------|--|-----------------------|--------------------------------|
| | | instructions)) | 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.)

| | dider rate III. If the | organización i | ans to quanty t | maci die tests | iisted below, pie | case complet | c raic III. |
|----------|---|---------------------|--------------------|---------------------|----------------------|-------------------|----------------|
| S | ection A. Public Support | | _ | | | | |
| Cale | endar 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 | | | | | | |
| | ınclude 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 | | | | | | |
| | 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 | | | | | | |
| Ü | line 4 | | | | | | |
| S | ection B. Total Support | 1 | | | | I | |
| | endar year (or fiscal year beginning | | | | | | |
| Cur | in) ► | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
| 7 | A mounts from line 4 | | | | | | |
| 8 | Gross income from interest, | | | | | | |
| 0 | 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 | es, etc (See inst | ructions) | | | 12 | |
| 13 | First Five Years If the Form 990 is f | or the organization | on's first, second | , third, fourth, or | fifth tax year as a | 501(c)(3) orga | nızatıon, |
| | check this box and stop here | _ | r | | • | . , . , - | ▶ ┌॔ |
| | | | | | | | |
| S | ection C. Computation of Pub | lic Support P | ercentage | | | | |
| 14 | Public Support Percentage for 2010 | (lıne 6 column (| f) divided by line | 11 column (f)) | | 14 | |
| 15 | Public Support Percentage for 2009 | Schedule A Par | rt II line 14 | | | 15 | |
| | | | | | | | |
| 16a | 33 1/3% support test—2010. If the | | | | line 14 is 33 1/3% | or more, chec | |
| | and stop here. The organization qua | • | | | | 2.2.4.204 | ▶ [|
| b | 33 1/3% support test—2009. If the | | | | oa, and line 15 is : | 1/3% or mor کد | . - |
| 17- | box and stop here. The organization | | | | 12 16 1C | handler - 4.4 | ▶ |
| r/a | 10%-facts-and-circumstances test- | | | | | | ın. |
| | is 10% or more, and if the organization made | | | • | | | |
| | in Part IV how the organization mee | is the facts and | circumstances" | test ine organiz | acion quanifies as | a publicly supp | orted F |
| L | organization 10%-facts-and-circumstances test- | _2000 Ifthe era | anization did not | chack a hay an lu | no 13 165 166 5 | or 17a and line | F1 |
| ט | 15 is 10% or more, and if the organ | | | | | | |
| | Explain in Part IV how the organizat | | | • | | <u>-</u> | clv |
| | supported organization | aon meets the 16 | aces and circuitis | tances test life | . organization qual | iiiies as a publi | ETY ▶ ¯ |
| 18 | Private Foundation If the organizati | on did not check | a box on line 13 | . 16a. 16b. 17a o | r 17b. check this | box and see | - 1 |
| | instructions | a.a not eneck | | , , 0 0 , 7 0 0 | . 2. 2, 511558 61115 | | ▶ □ |

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

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

| Se | ction A. Public Support | | aam, anaor are | cests listed be | ilow, piease co | Inplete | GIC 111.7 | <u> </u> |
|----------------------------|--|---|--|---|----------------------------------|---------------|--------------------|-------------------------------------|
| | ndar year (or fiscal year beginning | | | | | | Т | |
| Carc | in) - | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 20 | 010 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | | |
| | membership fees received (Do | 2,601,242 | 2,863,831 | 2,941,193 | 3,299,425 | 2 | ,655,107 | 15,360,798 |
| | not include any "unusual | 2,001,242 | 2,003,031 | 2,941,193 | 3,299,423 | ی | ,033,107 | 13,300,730 |
| | grants ") | | | | | | | |
| 2 | Gross receipts from admissions, | | | | | | | |
| | merchandise sold or services | | | | | | | |
| | performed, or facilities furnished | 24,559,531 | 27,704,932 | 26,107,878 | 29,839,922 | 21 | ,573,440 | 139,785,703 |
| | in any activity that is related to | 24,339,331 | 27,704,932 | 20,107,676 | 29,039,922 | 31 | ,3/3,440 | 139,763,703 |
| | the organization's tax-exempt | | | | | | | |
| | purpose | | | | | | | |
| 3 | Gross receipts from activities | | | | | | | |
| • | that are not an unrelated trade or | | | | | | | |
| | business under section 513 | | | | | | | |
| 4 | Tax revenues levied for the | | | | | | | |
| 4 | organization's benefit and either | | | | | | | |
| | paid to or expended on its | | | | | | | |
| | behalf | | | | | | | |
| 5 | The value of services or facilities | | | | | | | |
| 3 | furnished by a governmental unit | | | | | | | |
| | to the organization without | | | | | | | |
| | - | | | | | | | |
| _ | charge | 27,160,773 | 30,568,763 | 29,049,071 | 33,139,347 | 25 | ,228,547 | 155,146,501 |
| 6 | Total. Add lines 1 through 5 | 27,100,773 | 30,300,703 | 29,049,071 | 33,139,347 | 33 | ,220,347 | 133,140,301 |
| 7a | A mounts included on lines 1, 2, | | | | | | | _ |
| | and 3 received from disqualified | | | | | | | 0 |
| | persons | | | | | | | |
| b | A mounts included on lines 2 and | | | | | | | |
| | 3 received from other than | | | | | | | |
| | disqualified persons that exceed | | | | | | | 0 |
| | the greater of \$5,000 or 1% of | | | | | | | · · |
| | the amount on line 13 for the | | | | | | | |
| | year | | | | | | | |
| С | Add lines 7a and 7b | | | | | | | 0 |
| 8 | Public Support (Subtract line 7c | | | | | | | |
| Ü | from line 6) | | | | | | | 155,146,501 |
| Se | ction B. Total Support | | | I | I | | | |
| | ndar year (or fiscal year | | | | | | | |
| care | beginning in) | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 20 | 10 | (f) Total |
| _ | A mounts from line 6 | 27,160,773 | 30,568,763 | 29,049,071 | 33,139,347 | 35 | 228,547 | 155,146,501 |
| 9 | | 27,100,773 | 30,300,703 | 23,013,071 | 33,133,317 | 33, | 220,317 | 155,110,501 |
| 10a | Gross income from interest, | | | | | | | |
| | dividends, payments received | 1 020 210 | 020 227 | 660.027 | 722 450 | | 772 040 | 4 122 702 |
| | on securities loans, rents, | 1,029,319 | 938,237 | 669,827 | 722,450 | | 772,949 | 4,132,782 |
| | royalties and income from | | | | | | | |
| | sımılar sources | | | | | | | |
| b | Unrelated business taxable | | | | | | | |
| | income (less section 511 | | | | | | | |
| | taxes) from businesses | | | | | | | |
| | acquired after June 30, 1975 | | | | | | | |
| C | Add lines 10a and 10b | 1,029,319 | 938,237 | 669,827 | 722,450 | | 772,949 | 4,132,782 |
| 11 | Net income from unrelated | | | | | | | |
| | business activities not included | | | | | | | |
| | ın lıne 10b, whether or not the | | | | | | | |
| | business is regularly carried on | | | | | | | |
| | | | | | | | | |
| 12 | | | | | | | | |
| 12 | Other income Do not include | 700 705 | 511 210 | 706 507 | 000 (52 | | 445 563 | 4 4 4 4 0 6 7 |
| 12 | Other income Do not include gain or loss from the sale of | 799,795 | 511,349 | 786,507 | 898,653 | 1, | 145,563 | 4,141,867 |
| 12 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part | 799,795 | 511,349 | 786,507 | 898,653 | 1, | 145,563 | 4,141,867 |
| | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) | | · | | | | | 4,141,867 |
| 12 13 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, | 799,795 28,989,887 | 511,349 32,018,349 | 786,507 30,505,405 | 898,653 34,760,450 | | 145,563 147,059 | |
| 13 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) | 28,989,887 | 32,018,349 | 30,505,405 | 34,760,450 | 37, | 147,059 | 163,421,150 |
| | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is | 28,989,887 | 32,018,349 | 30,505,405 | 34,760,450 | 37, | 147,059 | 163,421,150) organization, |
| 13 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) | 28,989,887 | 32,018,349 | 30,505,405 | 34,760,450 | 37, | 147,059 | 163,421,150 |
| 13 14 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here | 28,989,887 for the organizati | 32,018,349 on's first, second, | 30,505,405 | 34,760,450 | 37, | 147,059 | 163,421,150) organization, |
| 13 14 Se | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here | 28,989,887 for the organizati | 32,018,349 on's first, second, | 30,505,405 third, fourth, or f | 34,760,450 | 37, | 147,059 | 163,421,150) organization, ▶ |
| 13 14 Se | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here | 28,989,887 for the organizati | 32,018,349 on's first, second, | 30,505,405 third, fourth, or f | 34,760,450 | 37, | 147,059 | 163,421,150) organization, |
| 13 14 Se 15 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here | 28,989,887 for the organization lic Support Po | 32,018,349 on's first, second, ercentage f) divided by line | 30,505,405 third, fourth, or f | 34,760,450 | 37, | 147,059 | 163,421,150) organization, ▶ |
| 13 14 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub | 28,989,887 for the organization lic Support Po | 32,018,349 on's first, second, ercentage f) divided by line | 30,505,405 third, fourth, or f | 34,760,450 | 37, section5 | 147,059 | 163,421,150) organization, |
| 13 14 Se 15 16 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub Public Support Percentage from 201 | 28,989,887 for the organization lic Support Po O (line 8 column (| 32,018,349 on's first, second, ercentage f) divided by line art III, line 15 | 30,505,405 third, fourth, or f 13 column (f)) | 34,760,450 | 37, section5 | 147,059 | 163,421,150) organization, |
| 13 14 Se 15 16 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub Public Support Percentage for 201 Public support percentage from 201 ction D. Computation of Inv | 28,989,887 for the organization lic Support Po (line 8 column (0.9 Schedule A, P | 32,018,349 on's first, second, ercentage f) divided by line art III, line 15 me Percentage | 30,505,405 third, fourth, or f 13 column (f)) | 34,760,450 Ifth tax year as a | 37, section 5 | 147,059 | 163,421,150) organization, |
| 13 14 Se 15 16 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub Public Support Percentage from 201 | 28,989,887 for the organization lic Support Po (line 8 column (0.9 Schedule A, P | 32,018,349 on's first, second, ercentage f) divided by line art III, line 15 me Percentage | 30,505,405 third, fourth, or f 13 column (f)) | 34,760,450 Ifth tax year as a | 37, section5 | 147,059 | 163,421,150) organization, |
| 13 14 Se 15 16 | Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is check this box and stop here ection C. Computation of Pub Public Support Percentage for 201 Public support percentage from 201 ction D. Computation of Inv | 28,989,887 for the organization lic Support Po (line 8 column (09 Schedule A, P estment Inco 2010 (line 10c co | 32,018,349 on's first, second, ercentage f) divided by line is art III, line 15 me Percentage lumn (f) divided b | 30,505,405 third, fourth, or f 13 column (f)) ge y line 13 column | 34,760,450 Ifth tax year as a | 37, section 5 | 147,059 | 163,421,150) organization, |

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

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

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

| Schedule A (Fo | orm 990 or 990-EZ) 2010 | Pa |
|----------------|---|----|
| Part IV | Supplemental Information. Supplemental Information. Complete this par required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Als additional information. (See instructions). | • |

| Facts And Circumstance | s i est |
|------------------------|---------|
| | |
| | |
| | |

Explanation

SCHEDULE A, PART II, LINE 12, EXPLANATION OF OTHER INCOME MISCELLANEOUS INCOME

Schedule A (Form 990 or 990-EZ) 2010

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493089004202

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

Political Campaign and Lobbying Activities

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ 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

| | e organization answered "Ye ection 501(c)(4), (5), or (6) organ | es," to Form 990, Part IV, Line 5 (Izations Complete Part III | Proxy Tax) or For | m 990-EZ, Part V, line 3 | 35a (Proxy Tax), then |
|-----|--|--|---|---|--|
| | me of the organization TIONAL DEFENSE INDUSTRIAL ASSOCIA | TION | | Employer | dentification number |
| IVA | TIONAL DEI ENSE INDUSTRIAL ASSOCIA | HON | | 53-01965 | 47 |
| Par | t I-A Complete if the or | ganization is exempt unde | r section 501(| c) or is a section 5 | 27 organization. |
| 1 | Provide a description of the or | ganızatıon's dırect and ındırect polı | tıcal campaıgn act | ivities in Part IV | |
| 2 | Political expenditures | | | ▶ | \$0 |
| 3 | V olunteer hours | | | | 0 |
| Par | rt I-B Complete if the or | ganization is exempt unde | r section 501(| c)(3). | |
| 1 | | e tax incurred by the organization u | | | - \$ 0 |
| 2 | Enter the amount of any excis | e tax incurred by organization mana | agers under sectio | n 4955 🕨 | \$0 |
| 3 | If the organization incurred a : | section 4955 tax, did it file Form 47 | 720 for this year? | | ☐ Yes ☐ No |
| 4a | Was a correction made? | | | | ┌ Yes |
| b | If "Yes," describe in Part IV | | | | |
| Par | rt I-C Complete if the or | ganization is exempt unde | r section 501(| c) except section 5 | 01(c)(3). |
| 1 | Enter the amount directly exp | ended by the filing organization for | section 527 exemp | pt function activities 🕨 🕨 | \$0 |
| 2 | Enter the amount of the filing of exempt funtion activities | organization's funds contributed to | other organizations | s for section 527 ► | \$0 |
| 3 | Total exempt function expend | itures Add lines 1 and 2 Enter her | e and on Form 112 | .0-POL, line 17b ► | \$ |
| 4 | Did the filing organization file | Form 1120-POL for this year? | | | ⊤ Yes |
| | organization made payments amount of political contributio | nd employer identification number (For each organization listed, enter in seceived that were promptly and political action committee (PAC) ((b) Address | the amount paid fro directly delivered | om the filing organization to a separate political o | 's funds Also enter the rganization, such as a mation in Part IV (e) A mount of political contributions received and promptly and |
| | | | | | directly delivered to a separate political organization If none, enter -0- |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

section 4911 tax for this year?

┌ Yes ┌ No

| Ρ | art II-A Complete if the organization under section 501(h)). | is exempt under section 501(c)(3) a | nd filed Form 5768 | (election |
|----|--|---|--|--|
| | Check If the filing organization belongs to a | | | |
| В | Check If the filing organization checked bo | x A and "limited control" provisions apply | | |
| | Limits on Lobbying E (The term "expenditures" means ar | | (a) Filing Organization's Totals | (b) Affiliated Group Totals |
| 1a | Total lobbying expenditures to influence public o | ppinion (grass roots lobbying) | 7,768 | |
| b | Total lobbying expenditures to influence a legisl | ative body (direct lobbying) | 119,500 | |
| c | Total lobbying expenditures (add lines 1a and 1 | b) | 127,268 | |
| d | Other exempt purpose expenditures | | 34,346,195 | |
| е | Total exempt purpose expenditures (add lines 1 | c and 1d) | 34,473,463 | |
| f | Lobbying nontaxable amount Enter the amount to | from the following table in both | 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 lir | ne 1f) | 250,000 | |
| h | Subtract line 1g from line 1a If zero or less, ent | er -0- | 0 | |
| i | Subtract line 1f from line 1c If zero or less, ente | er - 0 - | 0 | |

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

| | Lobbying Expendi | tures During | 4-Year Avera | ging 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 |
| ь — | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 6,000,000 |
| _с | Total lobbying expenditures | 243,667 | 109,510 | 120,365 | 127,268 | 600,810 |
| _d | Grassroots non-taxable amount | 250,000 | 250,000 | 250,000 | 250,000 | 1,000,000 |
| e | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000 |
| f | Grassroots lobbying expenditures | 750 | 490 | 555 | 7,768 | 9,563 |

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

| | | 1. | a) | | (b) | |
|---|---|---------------------------------------|-------------|-------------|--------|----|
| | | Yes | No | | \ moun | nt |
| 1 | During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of | | | | | |
| а | Volunteers? | | | _ | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | - | | |
| c | Media advertisements? | | | | | |
| d | Mailings to members, legislators, or the public? | | | | | |
| 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 | | | | | |
| | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | | | |
| | ** THE A. Commisse if the every instinction is every medical exception FA4/s\/4\ exception [| | | | | n |
| Par | t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6). | 501(c |)(5), (| or se | | |
| | 501(c)(6). | 501(c |)(5), « | | Yes | No |
| 1 | 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? | 501(c |)(5), (| 1 | | |
| 1 2 | 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 501(c |)(5), (| 1 2 | | |
| 1 2 3 | 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? | | | 1 2 3 | Yes | No |
| 1 2 3 | 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 501(c |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 | 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I | 501(c |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par | 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". | 501(c II-A, |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par | Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political | 501(c II-A, |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par 1 2 | Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members 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). | 501(c II-A, |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par 1 2 | Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year | 501(c II-A, |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par 1 2 | Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year Carryover from last year | 501(c II-A, 1 2a 2b |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par 1 2 a b | Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 | 501(c II-A, 1 2a 2b 2c |)(5), (| 1 2 3 | Yes | No |
| 1 2 3 Par 1 2 a b c | Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members 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). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess | 2a 2b 2c 3 |)(5), (| 1 2 3 | Yes | No |

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 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493089004202

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Open to Public

| emai | Revenue Service F Attach to Fo | orm 990. F See separate instructions. | | | lispeci | 1011 |
|----------|---|---|-----------|---------------------------|-------------|-----------|
| | ne of the organization IONAL DEFENSE INDUSTRIAL ASSOCIATION | | Empl | oyer identificatio | n numbe | <u></u> |
| | | | | 196547 | | |
| Pa | rt I Organizations Maintaining Donor Ad | | unds | or Accounts. (| Complet | te if the |
| | organization answered "Yes" to Form 990 I | U, Part IV, line 6. (a) Donor advised funds | 1 | b) Funds and other | .r. 2660111 | ntc |
| | Total number at end of year | (a) Dollor advised failus | + ' |) i ulius aliu otile | er accour | 111.5 |
| | · | | | | | |
| | Aggregate contributions to (during year) | | | | | |
| , | Aggregate grants from (during year) | | | | | |
| • | Aggregate value at end of year | | | | | |
| i | Did the organization inform all donors and donor advis funds are the organization's property, subject to the o | | nor advi: | | Yes | ┌ No |
| , | Did the organization inform all grantees, donors, and oused only for charitable purposes and not for the bene conferring impermissible private benefit | - _ - | • | r purpose | ┌ Yes | ┌ No |
| Pai | t III Conservation Easements. Complete | ıf the organızatıon answered "Yes" t | to Form | 1 990, Part IV, l | ıne 7. | |
| <u>!</u> | Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreation of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified easement on the last day of the tax year | on or pleasure) Preservation of a | certified | I historic structur | e | |
| | | | | Held at the En | d of the | Year |
| а | Total number of conservation easements | | 2a | | | |
| b | Total acreage restricted by conservation easements | | 2b | | | |
| C | Number of conservation easements on a certified his | toric structure included in (a) | 2c | | | |
| d | Number of conservation easements included in (c) ac | cquired after 8/17/06 | 2d | | | |
| 3 | Number of conservation easements modified, transfer | | ed by th | e organization du | ring | |
| | Number of states where property subject to conserva Does the organization have a written policy regarding enforcement of the conservation easements it holds? | the periodic monitoring, inspection, han | idling of | violations, and | Yes | ┌ No |
| | Staff and volunteer hours devoted to monitoring, insp | ecting and enforcing conservation easer | ments du | ırıng the year ► | | |
| | A mount of expenses incurred in monitoring, inspecting | ng, and enforcing conservation easement | s during | the year ► \$ | | |
| ; | Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$? | (d) above satisfy the requirements of se | ction | | Yes | ┌ No |
|) | In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easem | he footnote to the organization's financia | • | • | | |
| ar | Complete if the organization answered " | ns of Art, Historical Treasures, Yes" to Form 990, Part IV, line 8. | or Oth | ner Similar As | sets. | |
| la | If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its find | for public exhibition, education or resear | ch ın fur | | | ≘, |
| b | If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for p provide the following amounts relating to these items | public exhibition, education, or research | | | • | |
| | (i) Revenues included in Form 990, Part VIII, line 1 | | | ► \$ | | |
| | (ii) Assets included in Form 990, Part X | | | ► \$ | | |
| ! | If the organization received or held works of art, histofollowing amounts required to be reported under SFAS | | or financ | · | | |
| а | Revenues included in Form 990, Part VIII, line 1 | - | | ► \$ | | |
| | | | | | | |

b Assets included in Form 990, Part X

| Part | IIII Organizations Maintaining Co | llections of Art | t, His | torical Tr | easu | res, or O | the | <u>r Similar</u> | Asse | ts (co | ntınued) |
|-------|---|-----------------------|----------|----------------|---------|---------------|--|------------------|-----------------|----------------|-----------|
| 3 | Using the organization's accession and other items (check all that apply) | r records, check an | y of th | e following t | hat ar | e a significa | int u | se of its col | lection | 1 | |
| а | Public exhibition | | d | Loand | orexcl | hange progr | ams | | | | |
| b | Scholarly research | | e | ┌ Other | | | | | | | |
| c | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's co Part XIV | ollections and expla | ıın hov | they furthe | r the o | organization | 's ex | empt purpo | se in | | |
| 5 | During the year, did the organization solicit of assets to be sold to raise funds rather than t | | | | | | | ılar | Г | Yes | ┌ No |
| Par | Escrow and Custodial Arrange Part IV, line 9, or reported an am | ements. Compl | ete ıf | the organı | zatıor | | | es" to Fori | n 990 | , | · |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | | | • | | or other ass | ets r | not | Г | Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XIV | / and complete the | follow | ıng table | | Г | | | A mau | | |
| _ | _ | | | | | | _ | | A mou | nτ | |
| C . | Beginning balance | | | | | F | 1c | | | | |
| d | Additions during the year | | | | | - | 1d | | | | |
| e | Distributions during the year | | | | | - | 1e | | | | |
| f | Ending balance | | | | | L | 1f | | | | |
| 2a | Did the organization include an amount on Fo | orm 990, Part X, lin | e 21? | | | | | | Γ | Yes | ☐ No |
| | If "Yes," explain the arrangement in Part XIV | | | | | | | | | | |
| Par | t V Endowment Funds. Complete | | | | | | | | | | |
| | _ | (a)Current Year | (b) | Prior Year | (c)Tw | o Years Back | _ | Three Years B | ack (e |)Four Y | ears Back |
| 1a | Beginning of year balance | 822,237 | | 756,445 | | 721,58 | _ | | _ | | |
| b | Contributions | 3,000 | | | | 7,00 | _ | | | | |
| С | Investment earnings or losses | 34,979 | | 65,792 | | 27,85 | 9 | | _ | | |
| d | Grants or scholarships | | | | | | | | _ | | |
| e | Other expenditures for facilities and programs | | | | | | | | | | |
| e | Administrative expenses | | | | | | | | - | | |
| ' | - | 860,216 | | 822,237 | | 756,44 | 5 | | _ | | |
| g | End of year balance | <u> </u> | | 022,237 | | 730,44 | <u> 1 </u> | | | | |
| 2 | Provide the estimated percentage of the year | r end balance held | as | | | | | | | | |
| а | Board designated or quasi-endowment 🕨 | | | | | | | | | | |
| b | Permanent endowment ► 82 500 % | | | | | | | | | | |
| c | Term endowment ▶ 17 500 % | | | | | | | | | | |
| 3a | Are there endowment funds not in the posses | ssion of the organiz | ation t | :hat are held | and a | dministere | d for | the | | | |
| | organization by (i) unrelated organizations | | | | | | | Г | 2-/:\ | Yes Yes | No |
| | | | | | | | • | H- | 3a(i) 3a(ii) | res | N o |
| b | (ii) related organizations | | donS | chedule R? | • • | | • • | · · · [| 3b | <u> </u> | 110 |
| 4 | Describe in Part XIV the intended uses of the | • | | | | | • | | | <u> </u> | |
| | t VI Investments—Land, Buildings | | | | 90. Pa | art X. line | 10. | | | | |
| | · · · | -, <u></u> | | (a) Cost or | | (b)Cost or o | | (c) Accumi | ılated | | |
| | Description of investment | | | basis (invest | | basis (oth | | deprecia | | (d) Bo | ok value |
| 1a L | and | | | | | | | | | | |
| b E | Buildings | | | | | | | | | | |
| | easehold improvements | | | | | | | | | | |
| | Equipment | | | | | 2.80 | 0,468 | 2.6 | 44,973 | | 155,495 |
| | Other | | | | | _,,,, | , | | , | | _, |
| | Add lines 1a-1e (Column (d) should equal Fo | orm 990, Part X. colu | mn (B) | , line 10(c).) | | | | ▶ | | | 155,495 |
| | ,, | ,,, | 1-7 | | | | • | | le D (F | orm 9 | 90) 2010 |

| Part VIII Investments—Other Securities. See | Form 990, Part X, line 1. | 2. |
|--|---------------------------|--|
| (a) Description of security or category | (b)Book value | (c) Method of valuation |
| (including name of security) | (B)Book value | Cost or end-of-year market value |
| (1)Financial derivatives | | |
| (2)Closely-held equity interests | | |
| (3)O ther | 2 077 260 | _ |
| (A) DEFERRED COMPENSATION INVESTMENT | 3,877,260 | F |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 12) | | |
| Part VIII Investments—Program Related. See | e Form 990, Part X, line | |
| (a) Description of investment type | (b) Book value | (c) Method of valuation Cost or end-of-year market value |
| | | Cost of end-of-year market value |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 13) | | |
| Part IX Other Assets. See Form 990, Part X, III | | /h) Baak walus |
| (a) Descrip | otion | (b) Book value |
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| T. I. (2) 4 4 4 4 5 4 5 4 6 1 4 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 | | |
| Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 | | <u> </u> |
| Part X Other Liabilities. See Form 990, Part X | | |
| 1 (a) Description of Liability | (b) A mount | |
| Federal Income Taxes | | |
| DEFERRED COMPENSATION OBLIGATION | 3,877,260 | |
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| Total. (Column (b) should equal Form 990, Part X, col (B) line 25) | 3,877,260 | |
| | -,,200 | |

| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 38,114,678 |
|------|---|------|------------|
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 34,473,463 |
| 3 | Excess or (deficit) for the year Subtract line 2 from line 1 | 3 | 3,641,215 |
| 4 | Net unrealized gains (losses) on investments | 4 | -1,080,445 |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV) | 8 | -170,164 |
| 9 | Total adjustments (net) Add lines 4 - 8 | 9 | -1,250,609 |
| 10 | Excess or (deficit) for the year per financial statements Combine lines 3 and 9 | 10 | 2,390,606 |
| Par | t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p | er R | eturn |
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 34,009,551 |
| 2 | A mounts included on line 1 but not on Form 990, Part VIII, line 12 | | |
| а | Net unrealized gains on investments | | |
| b | Donated services and use of facilities | | |
| c | Recoveries of prior year grants | | |
| d | Other (Describe in Part XIV) 2d | | |
| e | Add lines 2a through 2d | 2e | 0 |
| 3 | Subtract line 2e from line 1 | 3 | 34,009,551 |
| 4 | A mounts included on Form 990, Part VIII, line 12, but not on line 1 | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b . 4a 145,968 | | |
| b | Other (Describe in Part XIV) | | |
| c | Add lines 4a and 4b | 4c | 4,105,127 |
| 5 | Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12) | 5 | 38,114,678 |
| Part | Reconciliation of Expenses per Audited Financial Statements With Expenses | per | |
| 1 | Total expenses and losses per audited financial statements | 1 | 30,969,730 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25 | | |
| а | Donated services and use of facilities | | |
| ь | Prior year adjustments | | |
| С | Other losses | | |
| d | Other (Describe in Part XIV) 2d | | |
| e | Add lines 2a through 2d | 2e | 0 |
| 3 | Subtract line 2e from line 1 | 3 | 30,969,730 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b 4a 145,968 | | |
| ь | Other (Describe in Part XIV) 4b 3,357,765 | | |
| С | Add lines 4a and 4b | 4c | 3,503,733 |
| 5 | Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18) | 5 | 34,473,463 |
| Dar | t XIV Supplemental Information | | |

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

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

| Ident if ier | Return Reference | Explanation |
|---|------------------|--|
| DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS | | THE ACTIVE ENDOWMENT FUNDS ARE PRIMARILY USED FOR SCHOLARSHIP AWARDS THE CHOU AND ZERNOW FUNDS ARE PRIMARILY FOR RECOGNIZING PROFESSIONAL COMPETENCE IN TERMS OF BEST PAPER AND BEST AUTHOR AT THE NORMALLY, ANNUAL BALLISTICS CONFERENCE |
| DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48 | | THE ASSOCIATION IS EXEMPT FROM THE PAYMENT OF INCOME TAXES ON ITS EXEMPT ACTIVITIES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) THE INTERNAL REVENUE SERVICE HAS DETERMINED THAT THE ASSOCIATION IS NOT A PRIVATE FOUNDATION AS THE ASSOCIATION IS CLASSIFIED UNDER SECTION 509(A)(2) OF THE IRC HOWEVER, THE ASSOCIATION IS SUBJECT TO TAXES ON ITS UNRELATED BUSINESS ACTIVITIES THE ASSOCIATION HAS ADOPTED THE GUIDANCE IN THE INCOME TAX STANDARD REGARDING THE RECOGNITION AND MEASUREMENT OF UNCERTAIN TAX POSITIONS THE ADOPTION OF THIS STANDARD HAD NO IMPACT ON THE ASSOCIATION'S FINANCIAL STATEMENTS THE ASSOCIATION FILES AS A TAX-EXEMPT ORGANIZATION SHOULD THAT STATUS BE CHALLENGED IN THE FUTURE, THE ASSOCIATION'S 2008, 2009, AND 2010 TAX YEARS ARE OPEN FOR EXAMINATION BY THE IRS |
| | | SCHEDULE D, PART XII, LINE 4B DESCRIPTION OF OTHER CHAPTER REVENUE \$3,594,292 INVESTMENT INCOME \$364,867 SCHEDULE D, PART XIII, LINE 4B DESCRIPTION OF OTHER CHAPTER EXPENSES \$3,357,765 |

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DLN: 93493089004202

OMB No 1545-0047

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

Employer identification number

53-0196547

Department of the Treasury Internal Revenue Service Name of the organization

NATIONAL DEFENSE INDUSTRIAL ASSOCIATION

Schedule I

(Form 990)

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

Inspection

| | nation on Grants | | | | | | |
|--|-------------------------|--|------------------------------|---|--|--|--|
| Does the organization man the selection criteria usedDescribe in Part IV the or | d to award the grants o | rassistance [?] | | | | | Г Yes Г |
| Form 990, Part I | V, line 21 for any re | Governments and ecipient that received ded | d more than \$5,000 | . Check this box if n | no one recipient rece | ived more than \$5,0 | |
| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC Code section if applicable | (d) A mount of cash grant | (e) A mount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
| (1) WOUNDED WARRIOR PROJECT4899 BELFORT ROAD JACKSONVILLE,FL 32256 | 20-2370934 | 501(C)(3) | 10,300 | 0 | N/A | | GENERAL DONATION TO SUPPORT THE OBJECTIVE OF PROVIDING PROGRAMS AND SERVICES TO SEVERELY INJURED SERVICE MEMBERS DURING THE TIME BETWEEN ACTIVE DUTY AND TRANSITION TO CIVILIAN LIFE |
| (2) SPECIAL OPERATIONS WARRIOR FOUNDATIONPO BOX 13483 TAMPA,FL 33681 | 52-1183585 | 501(C)(3) | 10,000 | | N/A | | |
| 2 Enter total number of sect | tion 501(c)(3) and gov | ernment organizations | | | | | ▶ 2 |
| 3 Enter total number of othe | er organizations | | | | | . | |

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) A mount of cash grant | (d)A mount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|--------------------------------|-------------------------|-------------------------------------|-----------------------------------|--|---------------------------------------|
| (1) SKIBBIE SCHOLARSHIP | 1 | 10,000 | 0 | N/A | |
| (2) I/ITSEC SCHOLARSHIP | 1 | 10,000 | 0 | N/A | |
| (3) USW FELLO WSHIP A WARD | 3 | 18,000 | 0 | N/A | |
| (4) HORIZONS SCHOLARSHIP AWARD | 2 | 18,625 | 0 | N/A | |
| | | | | | |
| | | | | | |
| | | | | | |

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

PROCEDURE FOR MONITORING GRANTS IN THE U S Return Reference

PART I, LINE 2

Ident if ier

Explanat ion

SCHEDULE I, PART I, LINE 2 I/ITSEC TRAINING SYSTEMS A SCHOLARSHIP AWARD FUNDED BY THE ANNUAL MEETING SCHOLARSHIPS ARE OFFERED AT A MASTERS LEVEL IN THE AMOUNT \$5,000, AND AT A DOCTORAL LEVEL IN THE AMOUNT OF \$10,000 APPLICANTS MUST BE ENROLLED OR ACCEPTED FOR A FULL-TIME MASTERS OR DOCTORAL PROGRAM IN CERTAIN DISCIPLINES, BE A US CITIZEN, AND HAVE A STATED INTEREST AND CAREER GOAL IN THE MODELING, SIMULATION & TRAINING SYSTEMS AND/OR EDUCATION INDUSTRY THE AWARD WILL BE BASED ON STUDENT MERIT AND NEEDS AS DETERMINED FROM THE SUBMITTED APPLICATION DOCUMENTS IF THE AWARDEE TERMINATES HIS/HER GRADUATE STUDIES AND THERE ARE REMAINING FUNDS, THE INSTITUTION WILL RETAIN SUCH FUNDS FOR AWARD TO ANOTHER STUDENT OF THEIR CHOICE FOLLOWING THE ELIGIBILITY GUIDELINES A PANEL CONSISTING OF INDIVIDUALS FROM THE MILITARY SERVICES AND PAST AND PRESENT I/ITSEC CHAIRS DETERMINE THE SELECTION UNDERSEA WARFARE FUND THE NDIA UNDERSEA SYSTEMS WARFARE DIVISION (USWD) UNIVERSITY FELLOWSHIP FUND IS TO FUND SCHOLARSHIPS FOR DOCTORAL CANDIDATES IN SCIENCE AND ENGINEERING RELATED TO UNDERSEA WARFARE AT THE UNIVERSITY OF TEXAS AUSTIN, THE PENNSYLVANIA STATE UNIVERSITY AT STATE COLLEGE, AND THE UNIVERSITY OF WASHINGTON SEATTLE SPECIFIC ELIGIBILITY RULES FOR THE FELLOWSHIP ARE ESTABLISHED AT THE PARTICIPATING UNIVERSITIES, WHICH FORWARD CANDIDATES TO THE DIRECTOR OF APPLIED RESEARCH LABORATORIES AT THE UNIVERSITY OF TEXAS WITH THEN REVIEW AND APPROVAL BY UNDERSEA WARFARE EXECUTIVE BOARD THE FELLOWSHIP IS NORMALLY FOR ONE-YEAR NOT TO EXCEED IN-STATE TUITION COSTS AND FEES, EXTENDIBLE TO A SECOND YEAR BASED ON STUDENT PERFORMANCE HORIZONS SCHOLARSHIP THE SCHOLARSHIP IS INTENDED TO PROVIDE FINANCIAL ASSISTANCE TO FURTHER EDUCATIONAL OBJECTIVES OF WOMEN WHO ARE US CITIZENS EITHER EMPLOYED OR PLANNING CAREERS IN DEFENSE OR NATIONAL SECURITY AREAS (THIS IS NOT LAW ENFORCEMENT OR CRIMINAL JUSTICE) THE AMOUNT OF THE AWARDS VARIES EACH YEAR THE APPLICANT MUST BE CURRENTLY ENROLLED EITHER PART OR FULL TIME AT AN ACCREDITED UNIVERSITY OR COLLEGE WITH A MINIMUM GRADE POINT AVERAGE OF 3 25 AWARDS ARE BASED ON ACADEMIC ACHIEVEMENT, PARTICIPATION IN DEFENSE AND NATIONAL SECURITY ACTIVITIES, FIELD OF STUDY, WORK EXPERIENCE, STATEMENTS OF OBJECTIVES, RECOMMENDATIONS, AND FINANCIAL NEED A PANEL OF JUDGES, COMPOSED OF WID (NDIA AFFILIATE) MEMBERS, CONSIDERS APPLICATIONS AND MAKES AWARDS ONCE EACH YEAR SKIBBIE SCHOLARSHIP THE SCHOLARSHIP IS INTENDED TO SUPPORT ONE OR MORE ADVANCED GRADUATE STUDENT(S) IN ENGINEERING, SCIENCE, OR MANAGEMENT, WITH THE TOTAL AVAILABLE FOR AWARD BEING \$10,000 THE APPLICANT MUST BE ENROLLED OR ACCEPTED FOR A FULL-TIME MASTERS OR DOCTORAL PROGRAM IN ENGINEERING, THE SCIENCES OR MANAGEMENT AS RELATED TO THE NDIA MISSION, BE A US CITIZEN, AND HAVE A STATED INTEREST AND CAREER GOAL IN THE DEFENSE OR NATIONAL SECURITY INDUSTRY, THE AWARD WILL BE BASED ON STUDENT MERIT AND NEEDS AS DETERMINED FROM THE APPLICATION DOCUMENTS FINAL SELECTION OF THE AWARDEE(S) IS MADE BY THE NDIA EXECUTIVE COMMITTEE THE AWARD WILL BE MADE DIRECTLY TO THE INSTITUTION FOR TUITION AND IS SUBJECT TO THEIR POLICIES AND PROCEDURES IF THE AWARDEE TERMINATES HIS/HER GRADUATE STUDIES AND THERE ARE REMAINING FUNDS, THE INSTITUTION WILL RETAIN SUCH FUNDS FOR AWARD TO ANOTHER STUDENT OF THEIR CHOICE SUBJECT TO THE ELIGIBILITY GUIDELINES

DLN: 93493089004202

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

| NAI | IONAL DEFENSE INDUSTRIAL ASSOCIATION | | 53-0196547 | | | |
|-----|---|---|---|----|-----|----|
| Pa | rt I Questions Regarding Compensation | n | 100 02300 | | | |
| | | | | | Yes | Νo |
| 1a | Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III | | | | | |
| | First-class or charter travel | Г | Housing allowance or residence for personal use | | | |
| | Travel for companions | Г | Payments for business use of personal residence | | | |
| | Tax idemnification and gross-up payments | | Health or social club dues or initiation fees | | | |
| | Discretionary spending account | Γ | Personal services (e g , maid, chauffeur, chef) | | | |
| b | If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses descr | - | | 1b | | |
| 2 | Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive | | | 2 | | |
| 3 | Indicate which, if any, of the following the organization organization's CEO/Executive Director Check all the | at apply | y | | | |
| | Compensation committee | | Written employment contract | | | |
| | Independent compensation consultant | 굣 | , , | | | |
| | Form 990 of other organizations | <u> - </u> | Approval by the board or compensation committee | | | |
| 4 | During the year, did any person listed in Form 990, For a related organization | Part VII | , Section A , line 1a with respect to the filing organization | | | |
| а | Receive a severance payment or change-of-control | paymen | t from the organization or a related organization? | 4a | | Νo |
| b | Participate in, or receive payment from, a supplemen | ntal non | qualified retirement plan? | 4b | | Νo |
| С | Participate in, or receive payment from, an equity-ba | ased co | mpensation arrangement? | 4c | | Νo |
| | If "Yes" to any of lines 4a-c, list the persons and pro | ovide th | e applicable amounts for each item in Part III | | | |
| | Only 501(c)(3) and 501(c)(4) organizations only mu | ıst comp | olete lines 5-9. | | | |
| 5 | For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of | line 1a, | did the organization pay or accrue any | | | |
| а | The organization? | | | 5a | | Νo |
| b | Any related organization? | | | 5b | | Νo |
| | If "Yes," to line 5a or 5b, describe in Part III | | | | | |
| 6 | For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of | line 1a, | did the organization pay or accrue any | | | |
| а | The organization? | | | 6a | | Νo |
| b | Any related organization? | | | 6b | | Νo |
| | If "Yes," to line 6a or 6b, describe in Part III | | | | | |
| 7 | For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," d | | | 7 | | No |
| 8 | Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III | | | 8 | | No |
| 9 | If "Yes" to line 8, did the organization also follow the | e rebutta | able presumption procedure described in Regulations | | | |

section 53 4958-6(c)?

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-MIS | SC compensation | (C) Retirement and | (D) Nontaxable | (E) Total of columns | (F) Compensation |
|------------------------------|-------------|--------------------------|---|---|--------------------------------|------------------------|----------------------|---|
| | | (i) Base compensation | (ii) Bonus & ıncentive compensation | (iii) Other reportable compensation | other deferred compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or Form 990-EZ |
| (1) BRONISLAW PROKUSKI JR | (1) (11) | 226,618 0 | 370,000 0 | 61,449 0 | 41,150 0 | 8,084 0 | 707,301 0 | |
| (2) LAWRENCE P FARRELL JR | (1) (11) | 349,534 0 | 549,780 0 | 150,650 0 | 33,300 0 | 8,718 0 | 1,091,982 0 | |
| (3) DAVID E CHEESEBROUGH | (1) (11) | 114,504 0 | 59,975 0 | 0 0 | 51,147 0 | 16,442 0 | 242,068 0 | |
| (4) FREDERICK L LEWIS | (ı) (ıı) | 178, 44 6 0 | 132,500 0 | 28,207 0 | 32,922 0 | 695 0 | 372,770 0 | |
| (5) BARRY D BATES | (ı) (ıı) | 175,781 0 | 132,500 0 | 26,128 0 | 33,333 0 | 4,357 0 | 372,099 0 | |
| (6) SANDRA I ERWIN | (1) (11) | 119,916 0 | 68,000 0 | 1,945 0 | 34,700 0 | 6,158 0 | 230,719 0 | |
| (7) JAMES E MCINERNEY JR | (ı) (ıı) | 139,195 0 | 47,302 0 | 5,378 0 | 97,768 0 | 6,261 0 | 295,904 0 | |
| (8) DINO K PIGNOTTI | (ı) (ıı) | 107,473 0 | 58,455 0 | 0 0 | 78,195 0 | 20,844 0 | 264,967 0 | |
| (9) PETER M STEFFES | (ı) (ıı) | 146,978 0 | 62,737 0 | 12,076 0 | 121,811 | 6,033 0 | 349,635 0 | |
| (10)THOMAS NORDBY | (ı) (ıı) | 131,805 0 | 72,500 0 | 2,138 0 | 40,696 0 | 21,124 0 | 268,263 0 | |
| (11) SASAN OGHLIDOS | (ı) (ıı) | 118,325 0 | 45,000 0 | 0 0 | 32,982 0 | 5,003 0 | 201,310 | |
| (12) E RICHARD TAYLOR | (I) (II) | 98,714 0 | 45,000 0 | 0 | 28,711 0 | 8,109 0 | 180,534 0 | |
| (13) DONALD B ROULSTONE | (1) (11) | 91,256 0 | 50,000 0 | 0 | 26,434 0 | 4,645 0 | 172,335 0 | |
| (14) SAMUEL CAMPAGNA | (ı) (ıı) | 91,149 0 | 50,000 0 | 0 | 26,835 0 | 6,266 0 | 174,250 0 | |
| (15) SCOTT J REKDAL | (ı) (ıı) | 115,341 0 | 25,000 0 | 0 | 30,086 0 | 19,187 0 | 189,614 0 | |
| (16) LUELLEN HOFFMAN | (ı) (ıı) | 82,900 0 | 45,000 0 | 0 | 22,203 | 6,158 0 | 156,261 | |

Schedule J (Form 990) 2010 Page **3**

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

Schedule J (Form 990) 2010

Software ID: Software Version:

EIN: 53-0196547

Name: NATIONAL DEFENSE INDUSTRIAL ASSOCIATION

| Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees | | | | | | | | |
|---|-------------|--------------------------|---|-----------------------------|--------------|----------------|----------------------|--|
| (A) Name | | (B) Breakdown o | of W-2 and/or 1099-MIS | SC compensation | (C) Deferred | (D) Nontaxable | (E) Total of columns | (F) Compensation |
| ſ | | (i) Base Compensation | (ii) Bonus & incentive compensation | (iii) Other compensation | compensation | benefits | (B)(ı)-(D) | reported in prior Form 990 or Form 990-EZ |
| BRONISLAW PROKUSKI JR | (ı) (ıı) | | 370,000 0 0 | 61,449 | 41,150 | 8,084 | 707,301 | 0 0 |
| LAWRENCE P FARRELL JR | (ı) (ıı) | | 549,780 0 0 | 150,650 | 33,300 | 8,718 | 8 1,091,982 0 0 | 0 0 |
| DAVID E CHEESEBROUGH | (ı) (ıı) | | 59,975 0 0 | 0 | 51,147 | 16,442 | 2 242,068 | 0 0 |
| FREDERICK L LEWIS | (ı) (ıı) | | 132,500 | 28,207 | 32,922 | 695 | 372,770 0 0 | 0 0 |
| BARRY D BATES | (ı) (ıı) | | 1 132,500 | 26,128 | 33,333 | 4,357 | 7 372,099 0 0 | 0 0 |
| SANDRA I ERWIN | (ı) (ıı) | | 68,000 | 1,945 | 34,700 | 6,158 | 8 230,719 0 0 | 0 0 |
| JAMES E MCINERNEY JR | (1) (11) | | 5 47,302 0 0 | 5,378 | 97,768 | 6,261 | 295,904 | 0 0 |
| DINO K PIGNOTTI | (ı) (ıı) | | 58,455 0 0 | 0 | 78,195 0 | 20,844 | 264,967 0 0 | 0 0 |
| PETER M STEFFES | (ı) (ıı) | | 8 62,737 0 0 | 7 12,076 | 121,811 | 6,033 | 349,635 | 0 0 |
| THOMAS NORDBY | (ı) (ıı) | | 72,500 0 | 2,138 | 40,696 | 21,124 | 268,263 | 0 0 |
| SASAN OGHLIDOS | (ı) (ıı) | | 5 45,000 0 0 | 0 | 32,982 | 5,003 | 201,310 | 0 0 |
| E RICHARD TAYLOR | (1) (11) | | 4 45,000 | 0 0 | 28,711 | 8,109 | 9 180,534 | 0 0 |
| DONALD B ROULSTONE | (ı) (ıı) | | 50,000 | 0 0 | 26,434 | 4,645 | 5 172,335 0 0 | 0 0 |
| SAMUEL CAMPAGNA | (ı) (ıı) | | 50,000 | 0 0 | 26,835 0 | 6,266 | 6 174,250 0 0 | 0 0 |
| SCOTT J REKDAL | (ı) (ıı) | | 25,000 | 0 0 | 1/1 | 19,187 | 7 189,614 0 0 | 0 0 |
| LUELLEN HOFFMAN | (ı) (ıı) | | 45,000 | 0 | 22,203 | 6,158 | 8 156,261 0 0 | 0 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493089004202

OMB No 1545-0047

2010

Open to Public Inspection

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.

Name of the organization NATIONAL DEFENSE INDUSTRIAL ASSOCIATION Employer identification number

53-0196547

| ldentifier | Return Reference | Explanation |
|---|---------------------|--|
| FORM 990, PART VI, SECTION A, LINE 1 | | THE EXECUTIVE COMMITTEE SHALL CONSIST OF THE CHAIRMAN AND VICE CHAIRMAN OF THE BOARD OF DIRECTORS, THE IMMEDIATE PAST CHAIRMAN, AND THREE ADDITIONAL MEMBERS ELECTED BY THE BOARD OF DIRECTORS FOR A TERM OF OFFICE OF ONE YEAR THE EXECUTIVE COMMITTEE SHALL HAVE AND EXERCISE THE AUTHORITY OF THE BOARD OF DIRECTORS IN THE MANAGEMENT OF THE ASSOCIATION, EXCEPT THE AUTHORITY TO ADOPT AMENDMENTS TO THE BY LAWS, IN ADDITION IT SHALL REVIEW ALL NEW REGULAR, INTERNATIONAL, AND ASSOCIATE CORPORATE MEMBERSHIP APPLICATIONS AT EACH OF ITS REGULAR MEETINGS |

| Identifier | Return Reference | Explanation |
|---|---------------------|--|
| FORM 990, PART VI, SECTION A, LINE 6 | | THE ASSOCIATION HAS THREE CLASSES OF MEMBERSHIP INDIVIDUAL, CORPORATE, AND ALLIED INDIVIDUAL MEMBERSHIP SHALL BE EITHER REQULAR, LIFE STUDENT, OR HONORARY, AS DESCRIBED BELOW INDIVIDUAL MEMBERS MUST BE UNITED STATES CITIZENS INDIVIDUAL MEMBERS SHALL BE ENTITLED TO VOTE AS A MEMBER OF ONE OF THE ASSOCIATION'S CHAPTERS ONLY ON MATTERS AFFECTING THE CHAPTER (A) REGULAR MEMBERSHIP IS OPEN TO THOSE INDIVIDUALS WHO DO NOT QUALIFY FOR ANY OTHER TYPE OF INDIVIDUAL MEMBERSHIP IS OPEN TO THOSE INDIVIDUALS. WHO DO NOT QUALIFY FOR ANY OTHER TYPE OF INDIVIDUAL MEMBERSHIP IS OPEN TO THOSE INDIVIDUALS. WHO DO NOT QUALIFY FOR ANY OTHER TYPE OF INDIVIDUAL MEMBERSHIP IS OPEN TO HOSE INDIVIDUAL MEMBERSHIP DAY MEMBER THE FIRE THE MEMBERSHIP DUES, (C) STUDENT MEMBERSHIP IS OPEN TO STUDENTS IN COLLEGES AND TECHNICAL SCHOOLS, AND (D) HONORARY MEMBERSHIP IS CONFERRED IN THE DISCRETION OF THE BOARD OF DIRECTORS OR THE EXECUTIVE COMMITTEE ON THOSE WHO HAVE REPORTED MEMBERS HERD FOR THE CAUSE OF DEFENSE PREPAREDNESS AND NATIONAL SECURITY HONORARY MEMBERS WILL PAY NO DUES CORPORATE MEMBERS SHALL BE TERMED REGULAR CORPORATE MEMBERS REGULAR CORPORATE MEMBERS SHALL BE TERMED REQULAR CORPORATE MEMBERS REGULAR CORPORATE MEMBERS INCLUDING PARTNERSHIPS, SOLE PROPRIETORSHIPS, CORPORATIONS, FINE SOLECATIONAL INSTITUTIONS, FOUNDATIONS, ASSOCIATIONS, AND COMPONENTS THEREOF (HEREINAFTER REFERRED TO AS "CORPORATIONS") ORGANIZED OR OTHERSWISE CHARTERED WITHIN THE UNITED STATES A KEY "EPERSENSTATIVE, BURNOWSEED TO SPEAK (VOTE) FOR HIS OR HER CORPORATION ON MATERS AFFECTING THE ASSOCIATION, THE TOTAL NUMBER OF SUMMERS TO BE SOLECATIONAL MEMBERSHIP IN THE ASSOCIATION, THE TOTAL NUMBER OF SUMMERS SHALL HAVE THE RIGHT TO NOMINATE EMPLOYEES TO REGULAR MEMBERSHIP IN THE ASSOCIATION, THE TOTAL NUMBER OF SUMMERS SHALL HAVE THE RIGHT TO NOMINATE DE REQUIRED TO PAY INDIVIDUAL MEMBERSHIP DUES OF THE EXECUTIVE COMMITTEE SUCH MEMBERS, AS MAY BE PRESCRIBED BY THE BOARD OF DIRECTORS OR THE EXECUTIVE COMMITTEE SUCH MEMBERS AS AND SHE PRESCRIBED TO THE ASSOCIATION ON NO |

| ldentifier | Return Reference | Explanation |
|--|---------------------|--|
| FORM 990, PART VI, SECTION A, LINE 7A | | THE ASSOCIATION'S BOARD OF DIRECTORS ARE ELECTED BY A MAJORITY VOTE FROM THE FOLLOWING ELECTORS THE PRESIDENT OF EACH CHAPTER IN THE FIFTY STATES SHALL BE AN ELECTOR WHO SHALL HAVE ONE VOTE FOR EACH 100 INDIVIDUAL MEMBERS OF THE CHAPTER, OR A PORTION THEREOF THE CHAIRMAN OF EACH DIVISION SHALL BE AN ELECTOR WHO SHALL HAVE ONE VOTE THE KEY REPRESENTATIVE OF EACH REGULAR CORPORATE MEMBER SHALL BE AN ELECTOR WHO SHALL HAVE ONE VOTE |

| ldentifier | Return Reference | Explanation |
|--|---------------------|---|
| FORM 990, PART VI, SECTION B, LINE 11 | | FORM 990, PART VI, SECTION A, LINE 10 THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND IS PROVIDED PRIOR TO FILING TO THE NDIA BOARD OF DIRECTORS FOR THEIR INFORMATION AND REVIEW AT THE SAME TIME, A DETAILED REVIEW IS CONDUCTED BY THE NDIA TREASURER, THE NDIA PRESIDENT, THE NDIA VICE PRESIDENT FOR BUSINESS OPERATIONS (FINANCE), THE NDIA CONTROLLER, THE NDIA AUDIT COMMITTEE, AND THE NDIA EXECUTIVE COMMITTEE WHICH HAS BOARD AUTHORITY DESIGNATED TO IT ALL PARTIES ARE ABLE TO ASK QUESTIONS AND REQUEST CHANGES TO THE FORM 990 PRIOR TO FILING WITH THE IRS |

| Identifier Return Reference | Explanation |
|---|--|
| FORM 990, PART VI, SECTION B, LINE 12C | EACH BOARD MEETING BEGINS WITH A REVIEW OF A CHART OUTLINING THE CONFLICT OF INTEREST POLICY AND THE BOARD CHAIRMAN CALLING FOR ANY DISCLOSURES THE POLICY IS ALSO OUTLINED IN THE DIRECTOR'S HANDBOOK, WHICH EACH BOARD MEMBER RECEIVES BOARD MEMBERS, OFFICERS, AND INDIVIDUALS HOLDING STAFF EXECUTIVE POSITIONS ARE REQUIRED TO COMPLETE DISCLOSURE FORMS ANNUALLY AT THE BEGINNING OF EACH FISCAL YEAR, LISTING ALL INTERESTS WHICH EITHER DO, OR POTENTIALLY COULD REPRESENT A CONFLICT OF INTEREST OFFICERS AND THOSE INDIVIDUALS HOLDING EXECUTIVE POSITIONS ARE REQUIRED TO UPDATE THEIR DISCLOSURE FORMS THROUGHOUT THE YEAR SHOULD CIRCUMSTANCES CHANGE THE DISCLOSURE FORM IS A THREE PART FORM THE FIRST SECTION ASKS IF THERE ARE ANY RELEVANT RELATIONSHIPS TO DISCLOSE (RELEVANT BEING THOSE RELATIONSHIPS RELATED TO THE INTERESTS AND ACTIVITIES OF NDIA AND ITS AFFILIATES), THE SECOND SECTION REQUESTS DISCLOSURE OF RELEVANT FINANCIAL, COMMERCIAL OR OTHER ORGANIZATIONAL RELATIONSHIPS, AND THE FINAL SECTION REQUESTS A CATEGORY LISTING OF RELATIONSHIPS TO BE DISCLOSED AS APPROPRIATE ANY ISSUES RAISED WOULD BE PRESENTED TO THE PRESIDENT AND CEO OF NDIA, SUBSEQUENTLY TO THE NDIA FINANCE COMMITTEE CHAIRMAN AND THE NDIA BOARD EXECUTIVE COMMITTEE FOR APPROPRIATE ACTION ALL POTENTIAL AND ACTUAL CONFLICTS AND PROCEEDINGS ARE NOTED IN THE MEETING MINUTES |

| Identifier Refere | | Explanation |
|---------------------------------------|---------------|--|
| FORM 9 PART V SECTIO LINE 15 | VI, ION B, | THE COMPENSATION FOR THE PRESIDENT & CEO OF NDIA, LAWRENCE P FARRELL, JR, LT GEN USAF (RET), IS UNDER CONTRACT AS SIGNED BY THE CHAIRMAN, NDIA, THE LAST REVISION BEING IN NOVEMBER, 2011 THE PRESIDENT'S BASE COMPENSATION IS REVIEWED ON AN ANNUAL BASIS BY THE NDIA COMPENSATION COMMITTEE AS PART OF ITS REVIEW OF THE INCENTIVE AWARDS JUSTIFICATIONS AS PRESENTED TO IT AND SUBSEQUENTLY BY THE NDIA EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE MEETING AGENDA FOLLOWING THE BOARD MEETING IN EXECUTIVE SESSION, WITH GENERAL COUNSEL PARTICIPATING THE MOST RECENT REVIEW WAS IN NOVEMBER, 2011 THE JUSTIFICATION PACKAGE PRESENTED TO BOTH COMMITTEES INCLUDES SURVEY COMPENSATION DATA PRIMARILY THAT OF PRM CONSULTING GROUP WHICH DOES EXTENSIVE SURVEYS OF THE NON-PROFIT INDUSTRY THERE HAS BEEN NO CHANGE IN THE PRESIDENT'S BASE COMPENSATION FOR THE LAST FIVE FISCAL YEARS THE COMPENSATION OF THE OTHER OFFICERS IS REVIEWED ON AN ANNUAL BASIS BY THE NDIA PRESIDENT AND THE NDIA COMPENSATION COMMITTEE AS PART OF ITS REVIEW OF THE INCENTIVE AWARDS JUSTIFICATIONS AS PRESENTED TO IT AND SUBSEQUENTLY BY THE NDIA EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE COMMITTEE AT THE FALL NDIA BOARD AS PART OF THE EXECUTIVE REFERSIONS. IN ANOVEMBER, 2011 FOR THE OTHER OFFICERS AFFILLATE PRESIDENTS, D CHEESENOUGH AND FLEWIS, AND VICE PRESIDENTS, B BATES, S ERWIN, TA OWENS, D PIGNOTTI, B PROKUSKI, AND P STEFFES KEY EMPLOYEES' COMPENSATION IS REVIEWED ON AN ANNUAL BASIS BY THE NDIA PRESID |

| Identifier | Return Reference | Explanation | | | | | | | |
|------------|--|---|--|--|--|--|--|--|--|
| | FORM 990, PART VI, SECTION C, LINE 19 | THE ASSOCIATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST | | | | | | | |

| ldentifier Return Reference | | Explanation | | | | | | | |
|---|------------------------------|--|--|--|--|--|--|--|--|
| CHANGES IN NET ASSETS OR FUND BALANCES | FORM 990, PART XI, LINE 5 | NET UNREALIZED LOSSES ON INVESTMENTS -1,080,445 CHAPTER ADJUSTMENTS -243 CHANGE IN PREPAID PENSION ASSET -169,921 TOTAL TO FORM 990, PART XI, LINE 5 - 1,250,609 | | | | | | | |

Software ID: Software Version:

EIN: 53-0196547

Name: NATIONAL DEFENSE INDUSTRIAL ASSOCIATION

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

| Compensated Employees, and Independent Contractors | | | | | | | | | | |
|--|-------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|---|--|
| (A) Name and Title | (B) Average hours | Posi t | (C tion (hat a | che | | II | | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
| | per week | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | from the organization (W- 2/1099-MISC) | from related organizations (W- 2/1099- MISC) | compensation from the organization and related organizations |
| JOHN D ILLGEN BOARD CHAIR | 1 00 | Х | | х | | | | 0 | 0 | 0 |
| SEAN O'KEEFE | 1 00 | Х | | Х | | | | 0 | 0 | 0 |
| BOARD VICE CHAIR HAROLD L YOH III | 1 00 | X | | х | | | | 0 | 0 | 0 |
| BO ARD PAST CHAIR BRO NISLAW PRO KUSKI JR | | | | | | | | | | |
| VICE PRES/BOARD SECR-TREAS | 40 00 | Х | | Х | | | | 658,067 | 0 | 49,234 |
| RICHARD BENSINGER DIRECTOR | 1 00 | Х | | | | | | О | 0 | 0 |
| DALE W CHURCH DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| RICHARD A CODY | 1 00 | X | | | | | | 0 | 0 | 0 |
| DIRECTOR MARGARET A DIVIRGILIO | | | | | | | | 0 | 0 | 0 |
| DIRECTOR STEVEN F GAFFNEY | 1 00 | X | | | | | | 0 | 0 | |
| DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| MAURICE A GAUTHIER DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| HELEN GREINER DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| GERALD G HARVEY JR DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| RICHARD L HAVER DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| RICHARD ANDREW HOVE DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| DWAYNE N JUNKER DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| STEPHEN E KELLY DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| JOANNA T LAU DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| JAMES T MCALEESE DIRECTOR | 1 00 | X | | | | | | 0 | 0 | 0 |
| RICHARD D MCCONN DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| ANDREW M MCHUGH DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| JOHN H MOELLERING DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| WILLIAM B MOORE DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| MARGARET MYERS DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| ARNOLD J PUNARO DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| JOE R REEDER DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |

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

| Compensated Employees, and Independent Contractors | | | | | | | | | | |
|--|-------------------------|-----------------------------------|-----------------------|---------|--------------|------------------------------|--------|--|--|--|
| (A) Name and Title | (B) Average hours | | ((tion (hat a | che | | I | | (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 |
| | per week | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | | | |
| GRAHAM E SHIRLEY DIRECTOR | 1 00 | х | | | | | | o | 0 | 0 |
| FREDERICK M STRADER DIRECTOR | 1 00 | х | | | | | | 0 | 0 | 0 |
| BOBBY STURGELL DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| KENNETH J WOLBECK DIRECTOR | 1 00 | Х | | | | | | 0 | 0 | 0 |
| LAWRENCE P FARRELL JR CEO/PRESIDENT | 40 00 | | | х | | | | 1,049,964 | 0 | 42,018 |
| DAVID E CHEESEBROUGH PRESIDENT, AFEI | 40 00 | | | х | | | | 174,479 | 0 | 67,589 |
| FREDERICK L LEWIS PRESIDENT, NTSA | 40 00 | | | х | | | | 339,153 | 0 | 33,617 |
| BARRY D BATES VICE PRESIDENT | 40 00 | | | х | | | | 334,409 | 0 | 37,690 |
| SANDRA I ERWIN VICE PRESIDENT | 40 00 | | | х | | | | 189,861 | 0 | 40,858 |
| JAMES E MCINERNEY JR VICE PRESIDENT | 40 00 | | | х | | | | 191,875 | 0 | 104,029 |
| DINO K PIGNOTTI VICE PRESIDENT | 40 00 | | | х | | | | 165,928 | 0 | 99,039 |
| PETER M STEFFES VICE PRESIDENT | 40 00 | | | х | | | | 221,791 | 0 | 127,844 |
| THOMAS NORDBY ASSISTANT VICE PRESIDENT | 40 00 | | | | x | | | 206,443 | 0 | 61,820 |
| SASAN OGHLIDOS DIRECTOR, NETWORK SYSTEMS | 40 00 | | | | х | | | 163,325 | 0 | 37,985 |
| E RICHARD TAYLOR CONTROLLER | 40 00 | | | | | Х | | 143,714 | 0 | 36,820 |
| DONALD B ROULSTONE ASSISTANT VICE PRESIDENT | 40 00 | | | | | Х | | 141,256 | 0 | 31,079 |
| SAMUEL CAMPAGNA ASSISTANT VICE PRESIDENT | 40 00 | | | | | х | | 141,149 | 0 | 33,101 |
| SCOTT J REKDAL ASSISTANT VICE PRESIDENT | 40 00 | | | | | х | | 140,341 | 0 | 49,273 |
| LUELLEN HOFFMAN DIRECTOR, EXHIBITS | 40 00 | | | | | х | | 127,900 | 0 | 28,361 |