

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public.
► Information about Form 990 and its instructions is alwww.irs.gov/form990.

OMB No 1545-0047

A	For the	2013 calen	dar year, or tax	year begin	ining		, 201	3, and endin			,		
В	Check if	applicable	С						D	Employer ident	ification Number		
	Add	ress change	Associati	on of C	ollege 1	Unions -	Intl		Ì	35-1816	510		
	Nam	ne change	120 West						E	Telephone num	ber		
	\vdash	al return	Bloomingt	on, IN	47404					812-245	-8051		
	\vdash	nınated											
		ended return							G	Gross receipts	\$ 9,210,340.		
	₽ -1	lication pending	F Name and add	ress of principa	l officer					up return for subo			
	☐ ^{∧₽₽}	neation pending	Same As C	•					H(b) Are all sub	ordinates include ch a list (see ins	— • • • • • • • • • • • • • • • • • • •		
	Tay.ov	empt status	X 501(c)(3)	501(c) () < (nsert no)	4947(a)(1)	or 527	If 'No,' atta	ch a list (see in:	structions) — — —		
<u>;</u>		site: ► N/		301(0) (moore no y	- 1017(4)(17		H(c) Group ever	mption number	•		
<u> </u>			X Corporation	Trust		Other ►	-	L Year of formati		_ 	legal domicile IN		
K		of organization		rust	Association	Other		L Tear of formati	on 1990	IVI State of	legal domicile TIV		
	arti‴a Ili E	Summar	y be the organiza	ation's miss	ion or most	significant a	ctivities	Fd		dan Call	loco Maione		
	1	-	•		1011 01 111031	significant a	CHVILICS	<u> Euucatio</u>	n_regaro	TING COT	<u>lege Unions</u>		
නු වු	: 1	brodrams	<u>and</u> serv	rces	-						- -		
े प्र	programs and services Check this box F if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a)												
Ž Ž	2 0	heck this bo	y ▶ Juf the	If the organization discontinued its operations or disposed of more than 25% of its net assets									
ි ලි	3 N		iting members	of the gove	rning body (Part VI, line	1a)			3	10		
ું બઇ	1 4 N		dependent voti					ne 1b)		4	10		
iës Ties	5 ⊺	otal number	of individuals	employed ir	n calendar y	ear 2013 (Pa	art V, line :	2a)		5	32		
Activities	6 T		of volunteers							6	450		
, A	. 7a ⊺	otal unrelate	ed business re	enue from	Part VIII, co	lumn (C), lin	ie 12			7 a	21,650.		
	bΛ	Net unrelated	l business taxa	ble income	from Form	 	415D			7 b	-2,581.		
					Ŋ	RECIPO	NJ 9_ 0_	70l		r Year	Current Year		
•	1		and grants (P					080		97,110.	2,196,133.		
Revenue			rice revenue (F			AHG 2	3 .2015		2,6	63,240.	2,879,053.		
ķ			ncome (Part VI			4, and /d)		18		00,552.	110,285.		
æ			e (Part VIII, co					Z=,		89,339.	824,949.		
			e – add lines 8					_lipe_12)	3,9	50,241.	6,010,420.		
	13 (Grants and s	ımılar amounts	paid (Part	IX, column ((A), lines 1-3	5) .			53,714.	66,805.		
_	14 E	Benefits paid	to or for mem										
; }	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,527,3								27,351.	1,644,266.			
Expenses	16a F	Professional	al fundraising fees (Part IX, column (A), line 11e)										
e L	61		sing expenses					73,669.	7. W.A.				
∵⊠	[] , , , ,		ses (Part IX, co					15,005.			2 000 012		
	L .	•	•				11 line 251			162,966.	3,860,813.		
	i		es. Add lines 1	744,031.	5,571,884.								
8		revenue less	expenses Su	btract line i	8 Irom line	12				206,210.	438,536.		
ents o		F-4-14-	(Dask V. June 1/	-\						f Current Year	End of Year		
- 8			(Part X, line 16 es (Part X, line	•						294,011.	3,488,575.		
Ę	51								 	780,479.	1,597,116.		
2		1	fund balances	Subtract	ine 21 from	line 20			1,5	513,532.	<u>1,891,459</u> .		
į.P	art II.	Signatu	re Block				_						
Unc	der penaltie	s of perjury, I dec	lare that I have exam arer (other than offic	ined this return,	including accomp	anying schedules	and statement	ts, and to the best wiedge	of my knowledge :	and belief, it is tru	e, correct, and		
-		l	10							25/_ Ju			
		Signati	re of officer	-17					Date	8/21/19)		
Si	gn	Olg. Id.		T.					24.0				
Here Type or print name and title							_						
					Preparer's sic			Date		· 1 r ·	PTIN		
		1	preparer's name	_	Liebalei 2 210	.17				eck lif			
	aid		L. Vaugh		1 Can	- / Van		8/12/	// se	f-employed	P01208070		
	repare				<u>ociates,</u>	, CPAs,	<u>PC</u>						
U	se Onl	Y Firm's addr		Colleg			-		Fir		-1908065		
_					IN 4740				Ph	one no (81			
			nis return with								X Yes No		
BA	AA For	Paperwork F	Reduction Act	Notice, see	the separate	e instruction	s.	TEE	A0113L 11/08/	13	Form 990 (2013)		

Form 990 (2013) Association of College Unions - Intl	35-1816510 F	age 2
Randle Statement of Program Service Accomplishments		
Check if Schedule O contains a response or note to any line in this Part	UI	X
Briefly describe the organization's mission:	orwi gos	
Education regarding College Unions programs and s	ervices	
		. – – –
2 Did the organization undertake any significant program services during the yea	which were not listed on the prior	
Form 990 or 990-EZ?	☐ Yes X	No
If 'Yes,' describe these new services on Schedule O.		
3 Did the organization cease conducting, or make significant changes in how it of if 'Yes,' describe these changes on Schedule O.	onducts, any program services? Yes X	No
4 Describe the organization's program service accomplishments for each of its th Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are others, the total expenses, and revenue, if any, for each program service report	ree largest program services, as measured by expending required to report the amount of grants and allocation ted.	ses, ons to
4a (Code:) (Expenses \$ 2,010,506. including grants of \$) (Revenue \$	
Services and programs - 1,611 participants in tou		—–′
porvious and brodiams - 1/411 bar pro-panel in 1908		
~		
		. – – -
		- - -
4b(Code:)(Expenses \$ 704,486. Including grants of \$ Regional activities - approximately 3,273 partici)(Revenue \$ pants in tournments)
		· — — — — — — — — — — — — — — — — — — —
4c (Code) (Expenses \$ 506,970. including grants of \$) (Revenue \$)
Conferences - 952 participants		
~		
~		
~		
~		
		- – – -
~		
~		
4d Other program services. (Describe in Schedule O) See Schedu. (Expenses \$ 1,082,457. including grants of \$	Le 0) (Revenue \$)	
4 e Total program service expenses ► 4,304,419.		
BAA TEEA0102L 07/02/13	Form 990	(2013)

			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	X	140
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
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		Х
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		Х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?/f 'Yes,' complete Schedule D, Part III .	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.		**************************************	; , .
	a Did the organization report an amount for land, buildings and equipment in Part X, line 10 <i>7f 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
	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	11 b		Х
	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 .	11 c		X
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		X
	e Did the organization report an amount for other liabilities in Part X, line 25?//f 'Yes,' complete Schedule D, Part X	11 e		X
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?/f 'Yes,' complete Schedule D, Part X	11 f	X	
12	a Did the organization obtain separate, independent audited financial statements for the tax year?If 'Yes,' complete Schedule D, Parts XI, and XII	12a	X	
	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 and XII is optional	12b		X
	Is the organization a school described in section 170(b)(1)(A)(ii)?If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	1 4 b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		х
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a3f 'Yes,' complete Schedule G, Part III	19		X
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		Х
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		L

Form **990** (2013) Association of College Unions - Intl 35-1816510 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Х 22 Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III 22 X 23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Х 23 Schedule I 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a. Х 24a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? 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) organizationsDid the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х 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-EZ7f 'Yes,' complete Х 25b Schedule L, Part I 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II X 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III 27 Х 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) **,** () X a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 28a b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L. Part IV 28b Х c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х 29 Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes.' complete Schedule M X 30 X 31 Х 32

	contributions, It res, complete Schedule M	1 -
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	117
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	(1)
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	1
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	3
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	3

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

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

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note, All Form 990 filers are required to complete Schedule O

Form 990 (2013)

Х

Х

X

X

Х

Х

33

34 35a

35b

36

37

<u> </u>	Check if Schedule O contains a response or note to any line in this Part V								
		_			Yes	No			
1 a 5	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a		15					
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b		0					
c [Did the organization comply with backup withholding rules for reportable payments to vendor (gambling) winnings to prize winners?	s and	reportable gaming	10		X			
2 a i	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a		32					
	If at least one is reported on line 2a, did the organization file all required federal employmen	t tax r	eturns?	21	X				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file (see inst								
	Did the organization have unrelated business gross income of \$1,000 or more during the year		•	3 8	Х				
b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O									
1	At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other f	or oth inanci:	ner authority over, al account)?	a 4 a	1	Х			
	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 F					V			
	Was the organization a party to a prohibited tax shelter transaction at any time during the ta			5 8		X			
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shell	er trai	nsaction?	5 t					
	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?			5 0	; 				
	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?			6 8	1	Х			
b	If 'Yes,' did the organization include with every solicitation an express statement that such c not tax deductible?	ontribi	utions or gifts were	61					
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 services provided to the payor?	artly f	or goods and	7 8		X			
	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?			71	,				
С	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?								
	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benef	it contract?	7 (•	X			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber	nefit co	ontract?	71		X			
g	If the organization received a contribution of qualified intellectual property, did the organizat as required?	ion file	e Form 8899	7	9				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	orga	nization file a	71	n				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng org	ganization 3 id the xcess business	8					
9	Sponsoring organizations maintaining donor advised funds.								
	Did the organization make any taxable distributions under section 4966?			9 :	2				
b	Did the organization make a distribution to a donor, donor advisor, or related person?			91)				
	Section 501(c)(7) organizations.Enter.			1		8			
	Initiation fees and capital contributions included on Part VIII, line 12	10 a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b							
	Section 501(c)(12) organizations.Enter:	1							
	Gross income from members or shareholders	11 a							
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11 b							
	Section 4947(a)(1) non-exempt charitable trusts the organization filing Form 990 in lieu of		1041?	12:	a				
	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12 b							
	Section 501(c)(29) qualified nonprofit health insurance issuers.			10					
а	Is the organization licensed to issue qualified health plans in more than one state?	In C		13:					
	Note. See the instructions for additional information the organization must report on Schedu	ie U.			i C				
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	13ь							
r	Enter the amount of reserves on hand	13c							
	Did the organization receive any payments for indoor tanning services during the tax year?		<u> </u>	14	а	X			
	If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	Schedi	ule O	14	b				
BAA	TEEA0105L 07/02/13			For	m 990	(2013)			

Form 990 (2013)

Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O b Enter the number of voting members included in line 1a, above, who are independent 1 b 10 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee? 2 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 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Х X 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? See Schedule O 6 \overline{X} 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule O Х 7 a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, See Sch O Х 7 b stockholders, or other persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8 a a The governing body? X b Each committee with authority to act on behalf of the governing body? 8 b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O 9 Х Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a X b if 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O 12a 12 a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х to conflicts? 12h c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in X Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 X Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a X X **b** Other officers of key employees of the organization See Schedule 0 15_b 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 Х taxable entity during the year? 16a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed IN Section 6104 requires an organization to make its Forms 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. Another's website |X| Upon request Other (explain in Schedule 0) Own website Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year See Schedule O State the name, physical address, and telephone number of the person who possesses the books and records of the organization 20 Dave Teske 120 W 7th St., Ste. 200 Bloomington IN 47404 (812) 245-8051

TEEA0106L 07/02/13

orm 990 (2013)	Association	of	College	Unions	_	Intl

35-1816510

Page 7

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

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

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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee'
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization	n nor any	relate	d or	gan	ızat	ion co	mpe	nsated any current of	fficer, director, or trus	stee.
		(C)								
(A) Name and Title	(B) Average hours per week (list	í one bo	x. ùn	less r	erso	k more t in is both or/trustee	n an Í	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Andrade Fearon	2				ļ					
Student Member	0	X						0.	0.	<u> </u>
(2) Mark Guthier	2									
<u>President</u>	0	X		X				0.	0.	0.
(3) Geoff Combs	2									
At-Large Member	0	X						0.	0.	0.
(4) Timothy Reed	2									
At-Large Member	0	X						0.	0.	0.
(5) David Barnes	2									
Past President	0	X						0.	0.	0.
(6) Scott Derrick	2	ļ				ĺ				
At-Large Member	0	X						0,	0.	0.
7) Kim D. Harrington Pete	2	1								
President Elect	0	X						0.	0.	0.
(8) Jeff_Pelletier	2	1								
At-Large Member	0	X						0.	0.	0.
(9) Una Redmond	2									
At-Large Member	0	X						0.	0.	0.
(10) Susan H. Payment	2		,							
At-Large Member	0	X		<u> </u>	ļ	<u> </u>		0.	0.	0.
(11) Marsha Herman-Betzen	45_	ļ	ĺ			ŀ		!		
Executive Direc	0	<u> </u>	ļ	Х	_	ļ		161,926.	0.	0.
(12)		-								
(13)										
(14)		-		-		_				
	J	ــــــــــــــــــــــــــــــــــــــ	Ь	Ь		<u> </u>				

(A) Name and title	Average hours per week	(do	Position (do not check more than box, unless person is both officer and a director/trus			than is both or/trus	one n an tee)	(D) Reportable compensation from the organization	(E) Reportable compensation fror	(F) Estimated amount of other
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	
(15)										
(16)										
(17)		1								
(18)										
(19)		-								
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1 b Sub-total	1	1	II			•	>	161,926.		0. 0.
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c) 2 Total number of individuals (including but not limited)		ose I	ısted	d ab	ove)) who	re	0. 161,926. ceived more than		0. 0. 0 ortable compensation
from the organization 1								·- <u>-</u>	**************************************	
 Did the organization list anyformer officer, director on line 1a? If 'Yes,' complete Schedule J for such For any individual listed on line 1a, is the sum of rithe organization and related organizations greater such individual 	<i>ındıvıdu</i> eportab	<i>al</i> le co	mpe	ensa	ition	and	oth	er compensation		Yes No
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,'	comper comple	satio	n fr	om ule .	any J foi	unre ' suc	late h pe	ed organization or erson	ındıvidual	5 X
1 Complete this table for your five highest compensation from the organization Report comp	ated ind	epen	deni	t cor	ntra	ctors	tha	at received more to	nan \$100,000 of	on's tax vear
(A) Name and business addre								(B)		(C) Compensation
2 Total number of independent contractors (including \$100,000 of compensation from the organization	_	t lim	ited	to t	hos	e list	ed a	above) who receiv	ed more than	

		Check if Schedule O	contains a re	sponse or note to an	y line in this Part V	ut		
١			-		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
S 7	1 a	Federated campaigns.	1	а	į.	-	, , , , , , ,	' [
돌됨	b	Membership dues	_1	b				
<u> </u>	c	Fundraising events	1	С	F			- '
	d	Related organizations	1	d	3		,	, ,
ŝ₽	е	Government grants (contribution	ons) 1	е		,	•	,]
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		All other contributions, gifts, g similar amounts not included a		<u> </u>			,	
		Noncash contributions includes	d in lines 1a-1f	\$	<u> </u>		•	آبِ '
양폭	h	Total. Add lines 1a-1f		· · · · · · · · · · · · · · · · · · ·	2,196,133.			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
PROGRAM SERVICE REVENUE	_			Business Code	···			السف سنسم
품	2 a	Registration			1,981,622.	1,981,622.		
2	b	Membership_Dues_&	<u>Assessment</u>	<u>s</u>	875,781.	875,781.	04 650	
爰	C	Advertising			21,650.		21,650.	
SS	d			_			<u></u>	<u> </u>
₹	e							<u> </u>
8		All other program service	e revenue	<u> </u>	0 070 050	1		
<u>æ</u>	9	Total. Add lines 2a-2f			2,879,053.		•	
	3	Investment income (incother similar amounts)	luding divider	nds, interest and	134,303.			134,303.
ļ		Income from investmen	t of tax ever	nt bond proceeds	134,303.			134,303.
	4		(OI (ax-exel)	ipt boria proceeds.				
	5	Royalties	(ı) Real	(II) Personal	}		,	4.1
	<i>c</i> -	Gross rents	(i) real	(ily i croomai	∯ ;		•	
		Less: rental expenses)	<u>,</u>		
		Rental income or (loss)					-	
		Net rental income or (lo)cc)				1 d . d . C . 700 , 1 april	
			(i) Securities	(II) Other	-			- 1
į	7 a	Gross amount from sales of assets other than inventory.						, , ,
		•	1,908,24	13.	<u>{</u>			
	b	Less cost or other basis and sales expenses	1 022 26	-7	*	, , ,		, ,
	_	Gain or (loss)	1,932,26 -24,01		∦,			į
		Net gain or (loss)	-24,01	<u>.0. </u>	-24,018.			-24,018.
					24,010.			24,010.
삘	8 a	Gross income from fund (not including \$	draising even	ts	ľ-		, `-	
질		of contributions reporte	d on line 1c)		· .			
OTHER REVENUE		See Part IV, line 18	,	a	, ,			1
뜊		Less: direct expenses		b		}		1
ō		Net income or (loss) fro	om fundraisin	a events		1 		
		Gross income from gam						
	98	See Part IV, line 19	ing activities	a		-		,
	Ŀ	Less direct expenses		b				
	c	Net income or (loss) fro	om gaming a	ctivities				
		Gross sales of inventor						
	102	and allowances	y, 1000 rotain	a 1,792,876.	-			,
	ŀ	Less cost of goods sol	d	b 1,267,653.				
	(: Net income or (loss) fro	om sales of ir	rventory	525, 223.	525, 223.		
		Miscellaneous Reven	ue	Business Code	,		• '	
	11 8	Administrative	fee		292,869.			292,869.
		Miscellaneous_			6,857.			6,857.
	•	:						
	_	All other revenue				<u></u>		<u></u>
		Total. Add lines 11a-11		•	299,726.			
	12	Total revenue. See inst	ructions	•	6,010,420.	3,382,626.	21,650.	410,011.
BAA	\			TEE	A0109L 07/08/13			Form 990 (2013)

RartiX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	Check if Schedule O contains a response or note to any line in this Part IX .										
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	and organizations in the United States. See Part IV, line 21			,							
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	66,805.	66,805.		<u> </u>						
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16										
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	186,042.	55,812.	126,509.	3,721.						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.						
7	Other salaries and wages	1,104,236.	607,782.	487,298.	9,156.						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	119,124.	61,266.	56,669.	1,189.						
9	Other employee benefits	141,326.	72,685.	67,231.	1,410.						
10	Payroll taxes	93,538.	48,107.	44,497.	934.						
11	Fees for services (non-employees):	23,000.	20/20/.	11/10/1	201.						
	Management										
	Legal	450.		450.							
	: Accounting	13,993.		13,993.							
	Lobbying	15, 995.	- <u></u>	10,000.							
	Professional fundraising services. See Part IV, line 17	··									
	Investment management fees			<u> </u>							
ğ	Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) Advertising and promotion	273,407.	229,873.	32,890.	10,644.						
13	Office expenses	10,662.	8,675.	1,502.	485.						
14	Information technology	19,402.	15,522.	2,910.	970.						
15	Royalties										
16	Occupancy	225,927.	128,835.	86,368.	10,724.						
17	Travel	467,796.	424,354.	35,038.	8,404.						
	Payments of travel or entertainment expenses for any federal, state, or local public officials				0,202						
19	Conferences, conventions, and meetings	701,272.	696,784.	1,406.	3,082.						
20	Interest	3,901.		3,901.							
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	76,024.	60,819.	11,404.	3,801.						
	Insurance	10,075.	5,541.	4,030.	504.						
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)										
;	Competitive shooting project	1,581,625.	1,581,625.								
	Equipment_expense	111,119.	89,558.	16,226.	5,335.						
	Bad debt expense	106,125.		106,125.							
	Credit card fees	75,645.		75,645.							
	e All other expenses	183,390.	150,376.	19,704.	13,310.						
	Total functional expenses. Add lines 1 through 24e	5,571,884.	4,304,419.	1,193,796.	73,669.						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► X if following SOP 98-2 (ASC 958-720)				Form 990 (2013)						
RAZ		TEE 401101 1	1/00/13		Form 990 (2013)						

Partx Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year **(B)** End of year 204,587 Cash - non-interest-bearing 1 943,113. 2 Savings and temporary cash investments 10,418 2 2,004. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 368,673 269,743. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other 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). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 109,443 9 161,957. 10 a Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D 10a 561,642 10b **b** Less: accumulated depreciation 314,687 68,005 10 c 246,955. Investments - publicly traded securities 11 2,532,885 11 1,864,803. Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related, See Part IV, line 11 13 14 14 Intangible assets 15 15 Other assets. See Part IV, line 11 16 3,488,575. 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,294,011 17 Accounts payable and accrued expenses 17 443,916 452,805. 18 Grants payable 18 19 Deferred revenue. 1,264,963. 19 1,144,311 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D. 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 25 71,600 1,597,116 Total liabilities. Add lines 17 through 25 1,780,479 26 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 1,282,079. 27 1,187,100. Temporarily restricted net assets 136,462. 28 28 605,527. 29 Permanently restricted net assets 94,991 29 98,832 R Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 Total net assets or fund balances 1,513,532 33 33 1,891,459. Total liabilities and net assets/fund balances. 34 34 3,294,011 3,488,575.

	m 990 (2013) Association of College Unions - Intl 35-181	6510		Pag	e 12			
Ŗā	Reconciliation of Net Assets		_					
	Check if Schedule O contains a response or note to any line in this Part XL							
1	Total revenue (must equal Part VIII, column (A), line 12)		6,01	0,42	20.			
2	Total expenses (must equal Part IX, column (A), line 25)	!	5,57	1,88	34.			
3	Revenue less expenses Subtract line 2 from line 1 .		43	8,53	36.			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))		1,51					
5	Net unrealized gains (losses) on investments		-6	0,60	9.			
6	Donated services and use of facilities . 6							
7	Investment expenses . 7							
8	8 Prior period adjustments 8							
9	Other changes in net assets or fund balances (explain in Schedule O)				0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))							
Ŗā	TIXIII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				П			
			1	es l	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other	[
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.							
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on separate basis, consolidated basis, or both:	а						
	Separate basis Consolidated basis Both consolidated and separate basis							
	b Were the organization's financial statements audited by an independent accountant?	L.	2 b	X				
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both				4.00			
	X Separate basis Consolidated basis Both consolidated and separate basis							
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the at review, or compilation of its financial statements and selection of an independent accountant?	udit,	2 c		Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O		-					
3	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?							
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required or audits, explain why in Schedule O and describe any steps taken to undergo such audits	audit	3 b					
BA	4	F	orm 9	90 (20) 13)			

SCHEDULE'A (Form 990 or 990-EZ)

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.

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

OMB No 1545-0047

Employer identification number

Schedule A (Form 990 or 990-EZ) 2013

Open to Public Inspection

35-1816510 Association of College Unions - Intl Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches or association of churches described insection 170(bX1XAXi). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described insection 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described insection 170(bX1)(AX)(iii) Enter the hospital's 4 name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described isection 5 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described insection 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives. (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts 9 Х from activities related to its exempt functions— subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, See section 509(a)(2), (Complete Part III.) An organization organized and operated exclusively to test for public safety. Sessection 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or 11 more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) Sesection 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. Type III - Functionally integrated d Type III - Non-functionally integrated Type II a Type i С By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) (i) 11 g (i) below, the governing body of the supported organization? A family member of a person described in (i) above? 11 g (ii) A 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the supported organization(s). h (III) Type of organization (described on lines 1-9 above or IRC section (vi) Is the organization in column (i) (VII) Amount of monetary (i) Name of supported (ii) EIN (iv) Is the (w) Did you notify organization in column (i) listed in the organization in column (i) of your support organization (see instructions) support7 organized in the your governing document? Yes No Yes (A) (B) (C) (D) (E) Total

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

Schedule A (Form 990 or 990-EZ) 2013 Association of College Unions - Intl 35-1816510

Partil 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.)

Sec	tion A. Public Support						
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						
Sec	tion B. Total Support		Y**				
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support, Add lines 7 through 10						
12	Gross receipts from related activ	vities, etc (see ins	structions)			12	
13	First five years, If the Form 990 organization, check this box and	is for the organization	ation's first, secor	id, third, fourth, o	r fifth tax year as	a section 501(c)(3	▶ []
	tion C. Computation of Pu						
	Public support percentage for 20			ne 11, column (f))		14	%
15	Public support percentage from	2012 Schedule A	, Part II, line 14	•		15	%
16 <i>a</i>	a 33-1/3% support test— 2013. If and stop here. The organization				nd the line 14 is 3	3-1/3% or more, c	heck this box
ŀ	a 33-1/3% support test— 2012. If the and stop here. The organization				a, and line 15 is 3	33-1 <i>1</i> 3% or more, (check this box
17 a	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-	and-circumstance:	s' test, check this	box andstop here	.Explain in Part I	V how
	o 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts- id-circumstances'	and-circumstance test. The organiza	s' test, check this ation qualifies as	box and stop here a publicly support	Explain in Part I ed organization	V how the ►
	Private foundation.If the organiz	zation did not che	eck a box on line 1	3, 16a, 16b, 17a,	or 17b, check thi	s box and see ins	tructions
D A A					C -1	A (C OC	000 EZ 0010

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.)

Secti	on A. Public Support						
Calenda	ar year (or fiscal yr beginning in)►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 9	Gifts, grants, contributions and membership fees						
r	received. (Do not include	001 050	005 001	1 050 070	1 447 170	2 071 014	7 257 025
	any 'unusual grants.')	891,953.	895,901.	1,050,078.	1,447,179.	3,0/1,914.	7,357,025.
	Gross receipts from admis- sions, merchandise sold or						
S	services performed, or facilities						
	furnished in any activity that is related to the organization's						
	tax-exempt purpose	2,726,832.	3,398,672.	3,320,866.	3,464,945.	3,774,498.	16,685,813.
	Gross receipts from activities						
	that are not an unrelated trade or business under section 513						0.
	Tax revenues levied for the						
·	organization's benefit and						
	either paid to or expended on ts behalf						0.
5 7	The value of services or						
	facilities furnished by a governmental unit to the						
Ç	organization without charge						0.
6 1	Total. Add lines 1 through 5	3,618,785.	4,294,573.	4,370,944.	4,912,124.	6,846,412.	24,042,838.
7 a A	Amounts included on lines 1,						
	2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
	Amounts included on lines 2	J	 	1		-	· ·
ā	and 3 received from other than						
9	disqualified persons that exceed the greater of \$5,000 or	İ				ļ	
	1% of the amount on line 13						_
f	for the year	0.	0.	0.	0.	0.	0.
c/	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
	Public support (Subtract line				Resident States		24,042,838.
	7c from line 6.)	CAMP AND	11、表名其一句(全面)	JAMES OF LAND STATES OF THE SECOND	。如何是他们的是	Hand Same	24,042,030.
	ion B. Total Support	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	ar year (or fiscal yr beginning in)► Amounts from line 6	3,618,785.	4,294,573.		4,912,124.	6,846,412.	24,042,838.
-	Gross income from interest,	3,010,703.	4,234,313.	4,310,344.	4, 312, 124.	0,040,412.	24,042,030.
(dividends, payments received						
	on securities loans, rents, royalties and income from]			•	
	similar sources	72,024.	57,458.	76,997.	125,123.	134,303.	465,905.
	Unrelated business taxable						
	income (less section 511 taxes) from businesses						
;	acquired after June 30, 1975	41,334.	33,732.	31,430.	28,800.	21,650.	156,946.
_	Add lines 10a and 10b	113,358.	91,190.	108,427.	153,923.	155,953.	622,851.
	Net income from unrelated business activities not included in line 10b,						
,	whether or not the business is						
	regularly carried on					ļ	0.
	Other income. Do not include gain or loss from the sale of						
	capital assets (Explain In Part IV) See Part IV	9,690.	45,278.	26,218.	35,141.	299,726.	416,053.
	Total Support. (Add Ins 9,10c, 11 and 12)		4,431,041.		5,101,188.		25,081,742.
14	First five years If the Form 990	is for the organiz					
	organization, check this box and	astop nere			<u> </u>		
<u>Sect</u>	ion C. Computation of Pu	iblic Support I	Percentage	12 (6)		1.5	05.06.%
	Public support percentage for 2			ne 13, column (1))	15	95.86 %
	Public support percentage from					. 16	96.89 %
Sect	ion D. Computation of Inv	vestment inco	me Percentag	d by line 12 cells	mp (f)	17	2.48 %
	Investment income percentage				100 (0)	. 18	2.48 %
	Investment income percentage				and line 15 :	L	
19 a	33-1/3% support tests - 2013. It is not more than 33-1/3%, check	the organization	ala not check the b here. The organ	ızatıon qualifies a	ind line 15 is more	e uiaii 53-1/5%, a orted organization	Ind line 17 ► X
h	is not more than 33-1/3%, then	n una box ancato					
-	33-1/3% support tests - 2012 If	the organization	did not check a b	ox on line 14 or li	ine 19a, and line	16 is more than 3	3-1/3%, and
		f the organization %, check this box	did not check a b andstop here. The	ox on line 14 or li e organization qua	ine 19a, and line alifies as a publicl	16 is more than 3 y supported orgar	3-1/3%, and ► ☐

Schedule A	(Form 990 or 990-EZ) 2013 ASSO	clation of	College (Jnions ~ 1	ntl	<u>85-1816510 </u>	Page 4
Part IV	Supplemental In or 17b; and Part (See instructions	formation. F	Provide the ex Iso complete	cplanations re this part for	equired by F any addition	Part II, line 10 nal informatio); Part II, line in.	17a
					-			·
								
								
								
		·						·
	_			. 				·
	. -			. _				
				. 				
								· - -
		· -						
		-		·				·
								·
				_ _				
				- 				- -
				- -				
				-				
		-						- -

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is awww.lrs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Publication number

Ass	sociation of College Unions -	Intl	35-1816510
Par	t La Organizations Maintaining Done	or Advised Funds or Other Similar F	unds or Accounts.
	Complete if the organization ans	wered 'Yes' to Form 990, Part IV, Irr	ne 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in organization's exclusive legal control?	donor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	ors, and donor advisors in writing that grant fit of the donor or donor advisor, or for any ott	unds can be used only her purpose conferring Yes No
Par	t I Conservation Easements. Complete if the organization ans	wered 'Yes' to Form 990, Part IV, Im	ne 7.
1	Purpose(s) of conservation easements held b		
	Preservation of land for public use (e.g.,		n of an historically important land area
	Protection of natural habitat	<u> </u>	n of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organizat	on held a qualified conservation contribution	in the form of a conservation easement on the
	last day of the tax year		96 977 El
	-		Held at the End of the Tax Year
	Total number of conservation easements		2 a
	Total acreage restricted by conservation ease		2 b
	: Number of conservation easements on a cert		2 c
•	Number of conservation easements included structure listed in the National Register		2 d
3	Number of conservation easements modified, tax year ▶	transferred, released, extinguished, or termi	nated by the organization during the
4	Number of states where property subject to c		
5	Does the organization have a written policy roand enforcement of the conservation easeme	nts it holds?	Yes No
6	Staff and volunteer hours devoted to monitor	ng, inspecting, and enforcing conservation e	asements during the year
7	Amount of expenses incurred in monitoring, i	nspecting, and enforcing conservation easem	nents during the year
8	Does each conservation easement reported cand section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of	section 170(h)(4)(B)(i)
9	include, if applicable, the text of the footnote	ports conservation easements in its revenue to the organization's financial statements that	and expense statement, and balance sheet, and to a scounting for at describes the organization's accounting for
Par	conservation easements. 1 Organizations Maintaining Collect Complete if the organization ans	tions of Art, Historical Treasures, or C wered 'Yes' to Form 990, Part IV, Irr	Other Similar Assets. ne 8.
1:	If the organization elected, as permitted under	er SFAS 116 (ASC 958), not to report in its re	
I	If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items:	er SFAS 116 (ASC 958), to report in its reven eld for public exhibition, education, or researc	ue statement and balance sheet works of art, ch in furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	▶ \$
	(ii) Assets included in Form 990, Part X		▶\$
2	If the organization received or held works of amounts required to be reported under SFAS	116 (ASC 958) relating to these items.	- · ·
1	a Revenues included in Form 990, Part VIII, lin	e]	▶ \$
1	Assets included in Form 990, Part X		►\$

Schedule D (Form 990) 2013 Associ					35-1810	
<u> </u>						
 Using the organization's acquisititems (check all that apply). Public exhibition 	on, accession, and			ny of the followin change programs	g that are a significant u	se of its collection
b Scholarly research		e Other		g. programme		
c Preservation for future gener	ations	٠ ــــــ				
4 Provide a description of the organ Part XIII.		s and explain ho	w they	further the orga	nızatıon's exempt purpos	e in
5 During the year, did the organiza to be sold to raise funds rather th	nan to be maintaine	d as part of the c	rgani	zation's collection	1?	Yes No
Part IV Escrow and Custodia line 9, or reported an	I Arrangements amount on Forn	. Complete if n 990, Part X,	the c	organization ai 21.	nswered 'Yes' to For	m 990, Part IV,
1 a Is the organization an agent, trus on Form 990, Part X?					her assets not included	Yes No
b If 'Yes,' explain the arrangement	in Part XIII and cor	nplete the followi	ng tat	ole:		
						Amount
c Beginning balance					1 c	
d Additions during the year					1 d	
e Distributions during the year				•	1 e	
f Ending balance					1f	
2 a Did the organization include an a					·	_ Yes
b If 'Yes,' explain the arrangement	in Part XIII. Check	here if the explai	ntion h	nas been provide	d in Part XIII	
						
Part V. Endowment Funds. Co						<u> </u>
	(a) Current year	(b) Prior yea		(c) Two years bac		(e) Four years back
1 a Beginning of year balance	122,938	. 108,5	04.	105,33	8. 93,962.	0.
b Contributions						15,766.
c Net investment earnings, gains, and losses	25,475	. 14,4	34.	3,16	66. 11,376.	
d Grants or scholarships						
 Other expenditures for facilities and programs 					0.	
f Administrative expenses	 , ,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,					93,962.
g End of year balance	148,413			108,50		93,962.
2 Provide the estimated percentage	-	_	ie 1g,	column (a)) held	as	
a Board designated or quasi-endov		<u>3.00</u> %				
b Permanent endowment ▶	67.00 %					
c Temporarily restricted endowmer	nt ►	[%]				
The percentages in lines 2a, 2b,	and 2c should equa	1 100%				
3a Are there endowment funds not a organization by.	in the possession of	the organization	that a	are held and adm	inistered for the	Yes No
(i) unrelated organizations	•					3a(i) X
(ii) related organizations						3a(ii) X
b If 'Yes' to 3a(II), are the related of	organizations listed	as required on Si	chedu	le R?		3b
4 Describe in Part XIII the intended					-+ YTTT	
Part VI Land, Buildings, and		<u>Lation o origottini</u>		do. Dee Lai	C VIII	
Complete if the organi		l 'Yes' to Form	990	, Part IV, line	11a. See Form 990,	Part X, line 10.
Description of property	(a) Co	st or other basis investment)		Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land						
b Buildings	[····
c Leasehold improvements			_	··· · -		
d Equipment				494,055.	250,304.	243,751.
e Other				67,587.	64,383.	3,204.
Total. Add lines 1a through 1e (Column	n (d) must equal Fo	rm 990, Part X, d	olumi		•	246,955.
BAA					Sched	ule D (Form 990) 2013

Part VIII Investments - Other Securities.	N/ L1 E 000	N/A	•
		, Part IV, line 11b. See Form 990, Part X, line	12.
(a) Description of security or category(including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A) (B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.)			
Pan VIII Investments — Program Related. Complete if the organization answered	'Yes' to Form 990.	N/A Part IV, line 11c, See Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market va	lue
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 13) Part 1 X & Other Assets.	N/A	the same and the s	تنتست
Complete if the organization answered 'Y	es' to Form 990, Pa	art IV, line 11d. See Form 990, Part X, line 15.	
	scription	(b) Book value	9
(1)			
(2)	···		
(4)			
(5)			
(6)			
(7)			
(8)	- <u>-</u> ,		
(9)			
(10)			
Total. (Column (b) must equal Form 990, Part X, column (E	3), line 15 ₋)		
Other Liabilities. Complete if the organization answered 'Yes' to Form	990 Part IV line 11e or 1	11f See Form 990 Part Y line 25	
(a) Description of liability	(b) Book value		
(1) Federal income taxes			
(2)			
(3)			
(4) (5)			
(5)	l e		
(6)			
(6) (7)			
(7)			
(7) (8)			
(7) (8) (9)			

Schedule D (Form 990) 2013 Association of College Unions - I		5-1816510	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements	With Revenue per Retur		
Complete if the organization answered 'Yes' to Form 990,	Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements		1 5	,969,108.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12		6 .3	
a Net unrealized gains on investments.	2a -60,609		
b Donated services and use of facilities	. 2b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII.) See Part XIII	2d 19,297		
e Add lines 2a through 2d		2 e	-41,312.
3 Subtract line 2e from line 1 .		3 6	5,010,420.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		.	
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII.)	4 b		
c Add lines 4a and 4b		4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5 6	,010,420.
Part XII Reconciliation of Expenses per Audited Financial Statement			7 7
Complete if the organization answered 'Yes' to Form 990,			
1 Total expenses and losses per audited financial statements		1 5	5,591,181.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		2.	/ /
a Donated services and use of facilities	2 a	tyli a .	
b Prior year adjustments	2 b		
c Other losses	2 c		
d Other (Describe in Part XIII) See Part XIII	2d 19,297.		
e Add lines 2a through 2d	19,291	2e	10 207
	•		19,297.
	1 1	3 3	5,571,884.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1. a Investment expenses not included on Form 990, Part VIII, line 7b	45		
b Other (Describe in Part XIII)	4 a 4 b		
c Add lines 4a and 4b	40	4c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)		5,571,884.
Part XIII Supplemental Information.	/	1.51	, 5/11, 004.
	I. Dart IV. Imaa 1b and 2b Da		
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4 line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also co	mplete this part to provide an	y additional infi	ormation.
Support for scholarships			
Part X - FIN 48 Footnote	·		
The association files Federal and Indiana income	<u>tax returns as an e</u>	xempt	
organization_under_section_501(c)(3) of the Inter	nal revenue Code. T	he_associa	ation
believes that it has no net unrelated business in	come. <u>State tax law</u>	provision	ns_are
similar Accordingly, no provision for income taxe	es has been recorde	d The	

Schedule **D** (Form 990) 2013

association is not considered to be a private foundation.

ParxIII Supplemental Information (continued)	35-1816510	Page 5
Part X - FIN 48 Footnote (continued)		
The association's Federal and Indiana income tax returns for 2010		
subject to examination by the IRS and state of Indiana, generally		
after they were filed. The agency recognizes tax benefits only to		-
agency believes it is "more likely than not" that its tax positions		<u>ed</u>
upon examination. There were no tax positions considered less that	an_50%_likely_of_	
sustainability.		
		-
		<u>-</u>
~		

SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

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

Attach to Form 990. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

0.400

OMB No 1545 0047

► Information about Schedule I (Form 990) and its instructions is atww.irs.gov/form990.

ZOLS Open to Pub	

Employer identification number 35-1816510 % X

Yes

		n maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assists	
		es' eli	
		grante	٠
		ice, the	
		ıssıstan	-
		nts or a	
		the gra	
į	0	onnt of	-
	mation on Grants and Assistance	the am	used to award the grants or assistance?
ntl	l Assi	antiate	r assist
ollege Unions - Intl	ts and	sqns o	rants o
nions	Gran	cords t	d the g
ge U	ou ou	ntain re	to awaı
Colle	ormati	on mail	$\boldsymbol{\sigma}$
of (al Info	ganızatı	oriteri
Association of	Gener	the or	selection criteri
soci	ir I	Does	thes
As	בֿ	_	

ance, and 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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)							
					_	-	
(2)							
(3)							
(4)							
(5)							
(9)							
<u>0</u>							
(8)							
	and government or	ρ	is listed in the line 1 table				0
3 Enter total number of other organizations listed in the line 1 table	ns listed in the line	1 table				A	0
BAA For Paperwork Reduction Act Notice, see the Instructions for Form	see the Instructions	s for Form 990.		TEEA3901L 07/12/13	07/12/13	Schedul	Schedule I (Form 990) (2013)

Page 2 (f) Description of non cash assistance Scholarships to attend Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. agency programs I (Form 990) (2013) Association of College Unions - Intl

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed. (e) Method of valuation (book, FMV, appraisal, other) for those who pay to attend Standard fee (d) Amount of non cash assistance 66,805. (c) Amount of cash grant (b) Number of recipients 1 Scholarships to individuals to attend agency programs (a) Type of grant or assistance Schedule I (Form 990) (2013) Part III

9

2

m

BAA

Schedule I (Form 990) (2013)

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employee ► Complete if the organization answered 'Yes' on Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions.

at www.irs.gov/form990.

Information about Schedule J (Form 990) and its instructions is

2013

OMB No. 1545-0047

প্রার্থিত কের্বুত Inspection

Department of the Treasury Internal Revenue Service

<u> Association of College Unions - Intl</u>

Employer identification number

35-1816510

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

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

section 53.4958-6(c)?

Schedule J (Form 990) 2013

If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

Page 2

35-1816510

Association of College Unions - Intl

Schedule J (Form 990) 2013 Association of College Unions - Intl 35-1816510 Partill 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individua.

		(B) Breakdown of	Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title	<u> </u>	(I) Base compensation	(ii) Bonus and incentive compensation	(III) Other reportable compensation	and other deferred compensation		deferred in prior	deferred in prior Form 990
Marsha Herman-Betzen	Θ	161,926.	0.	0	0	19, 786.	181,712.	0.
1 Executive Direc	€	0.	0.		0.	0.	0.	0.
	ε			1 1	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	1 1		1 1 1 1 1 1
2	€							
	ε		 	 		1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
8	(ii)							
	Θ			1 	 			1 1 1 1 1 1
4	€							
	Θ					 	 	1 1 1 1 1 1 1
rv.	€							
	ε			 	 	 	!	
y	(ii)							
	Θ				 1 1 1	 		1 1 1 1 1
7	<u>(ii)</u>							
	Θ		 	1 1 1	 	1 1 1	1	1 1 1 1 1 1 1 1 1
∞	<u>(E</u>							
	Θ		 				1	1 1 1 1 1
ത	()							
	Θ				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1		1 1 1 1 1
10	(ii)							
	Θ		 	 		1 1 1	1	
11	€							
	Ξ	1 1 1	 			 		
12	€							
	Ξ	 	1 1 1 1 1			1 1 1	1 1 1 1 1 1 1 1	1 1 1 1 1
13	€							
	Θ	 	1 1 1		1 1 1	1 1 1		
14	Ξ							
	Ξ	- 		1 1 1 1		1 1 1 1		
15	€							
	Ξ		1 1	1 1 1 1 1				1 1 1 1 1 1
16	€							0.00
BAA			TEEA4102L 07/08/13	/13			Schedule	Schedule J (Form 990) 2013

I/

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is

OMB No 1545-0047 2013

Open to Public Inspection '

Department of the Treasury Internal Revenue Service at www.irs.gov/form990. Name of the organization Employer identification number 35-1816510 Association of College Unions - Intl Form 990, Part III, Line 4d - Other Program Services Description Association operations - served 5,643 individual members, 528 institution members & 126 Associate members Seminars and institutes - programs served 434 participants Corporate partnerships - 126 corporate members Publications- 472 orders by members for 1,101 total items Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder There are four membership classes Institutional - which have specific voting rights Individual members - which have specific voting rights Affiliate members Subscriber members Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body Individual members elect members of the board of directors Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders Amendments to the articles of incorporation or by-laws are subject to a vote of the institutional members. Form 990, Part VI, Line 11b - Form 990 Review Process No review was or will be conducted

Schedule 0 (Form 990 or 990-E2) 2013	Page Z
Name of the organization Association of College Unions - Intl	Employer identification number 35–1816510
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers	& Key Employees
Compensation is set after reference to compensation studies fi	rom independent
organization. Board of directors gives final approval to salar	ries of senior staff.
Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available	
Governing documents, policies, audited financial statements a	nd tax returns are
available upon request at the office of the association. Final	ncial statements are
also distributed to members at the annual meeting.	· • • • • • • • • • • • • • • • • • • •
	·
	· -
	·
	-
	.

2013

Schedule A, Part IV - Supplemental Information

Page 5

Association of College Unions - Intl

35-1816510

Part III, Line 12 - Other Income

Nature and Source	 2013	 2012	 2011	_	2010	
Miscellaneous Administrative fee	\$ 6,857. 292,869.	\$ 35,141.	\$ 26,218.	\$	45,278.	\$ 9,690.
Total	\$	\$ 35,141.	\$ 26,218.	\$	45,278.	\$ 9,690.

2013

Schedule D, Part XIII - Supplemental Information

Page 4

Association of College Unions - Intl

35-1816510

Schedule D, Part XI, Line 2d Other Revenue Included In F/S But Not Included On Form 990

Cost of sales

\$ 19,297. Total \$ 19,297.

Schedule D, Part XII, Line 2d Other Expenses And Losses Per Audited F/S

Cost of sales .

\$ 19,297. Total \$ 19,297.