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Part III

Statement of Program Service Accomplishments

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

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1

Briefly describe the organization’s mission

THE SOCIETY ASSISTS U S AIR FORCE MEMBERS AND THEIR FAMILIES WITH EMERGENCY ASSISTANCE LOANS AND GRANTS, EDUCATION GRANTS AND SCHOLARSHIPS, AND BASE COMMUNITY ENHANCEMENT PROGRAMS IN 2013, THE SOCIETY PROVIDED OVER \$17 4 MILLION IN DIRECT SUPPORT TO AIRMEN

2

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

☐ Yes ☒ No

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

3

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

☐ Yes ☒ No

If “Yes,” describe these changes on Schedule O

4

Describe the organization’s program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a

(Code) (Expenses \$ 6,488,633 including grants of \$ 5,691,894) (Revenue \$ 0)

EDUCATION ASSISTANCE - THE GENERAL HENRY "HAP" ARNOLD EDUCATION GRANT PROGRAM PROVIDES EDUCATIONAL GRANTS TO CHILDREN AND SPOUSES OF ACTIVE DUTY, RETIRED, AND DECEASED AIRMEN, HELPING THEM REALIZE THEIR EDUCATION GOALS THESE GRANTS ARE NEEDS-BASED AND STIPULATED FOR USE ON DIRECT EDUCATION EXPENSES ONLY IN 2013, THE SOCIETY AWARDED OVER \$5 8 MILLION IN GRANTS TO 2,648 STUDENTS TO HELP PAY FOR COLLEGE THE SOCIETY ADDED MERIT-BASED SCHOLARSHIPS TO THE PROGRAM IN 2011 FOR THE HIGHEST ACHIEVING INCOMING FRESHMEN SELECTION IS BASED ON A STUDENT’S CUMULATIVE GPA, SAT/ACT SCORES, TRANSCRIPTS, ACTIVITIES, AND A WRITTEN ESSAY ON A SPECIFIC TOPIC CHOSEN BY THE SOCIETY IN 2013, THE SOCIETY AWARDED 37 \$5,000 SCHOLARSHIPS, EQUATING TO AN ADDITIONAL \$185,000 IN EDUCATIONAL SUPPORT FOR THE FAMILIES OF US AIRMEN

4b

(Code) (Expenses \$ 2,163,376 including grants of \$ 663,133) (Revenue \$ 5,603)

EMERGENCY ASSISTANCE (EA) - EMERGENCY ASSISTANCE IS PRIORITY NUMBER ONE FOR THE SOCIETY THIS PROGRAM AIMS TO HELP RELIEVE THE FINANCIAL PRESSURES FELT BY AIR FORCE MEMBERS AND THEIR FAMILIES BY MEETING IMMEDIATE FINANCIAL NEEDS IN AN EMERGENCY SITUATION DEPENDING ON THE INDIVIDUAL CIRCUMSTANCE, SUPPORT IS PROVIDED BY GRANTS, INTEREST-FREE LOANS, OR A COMBINATION OF BOTH EA IS GENERALLY PROVIDED FOR BASIC LIVING EXPENSES, EMERGENCY TRAVEL, VEHICLE REPAIRS, FUNERAL COSTS, MEDICAL/DENTAL COSTS, CHILD/RESPITE CARE, AND MOVING EXPENSES IN 2013, THE SOCIETY ASSISTED AIRMEN WITH OVER \$9 6 MILLION, HELPING ALMOST 19,000 AIRMEN WORLDWIDE THIS SUPPORT WAS PROVIDED THROUGH \$663,133 IN GRANTS AND AN ADDITIONAL \$9 0 MILLION IN INTEREST-FREE LOANS

4c

(Code) (Expenses \$ 1,853,834 including grants of \$ 1,624,995) (Revenue \$ 0)

COMMUNITY ENHANCEMENT PROGRAMS - THE SOCIETY SUPPORTS SEVERAL BASE-LEVEL PROGRAMS AIMED AT IMPROVING THE QUALITY OF LIFE OF AIR FORCE FAMILIES FUNDING FOR CHILDCARE SERVICES WAS \$826,810 IN 2013 AS OVER 21,740 AF CHILDREN WERE CARED FOR AS PART OF THE GIVE PARENTS A BREAK, PCS MOVES, AND VOLUNTEER PROGRAMS THE BUNDLES FOR BABIES PROGRAM PROVIDES EXPECTING AF FAMILIES WITH IMPORTANT INFORMATION ON BUDGETING FOR THE NEW BABY AND VARIOUS SUPPORT PROGRAMS THAT ARE AVAILABLE IN THE COMMUNITY FOR ATTENDING THE CLASS, EACH FAMILY RECEIVES A TOTE BAG FULL OF BABY-RELATED ITEMS THE SOCIETY HANDED OUT OVER 4,000 TOTES IN 2013 AT A COST OF \$212,691 THE SPOUSES EMPLOYMENT PROGRAM PROVIDED ENTRY-LEVEL TRAINING TO ALMOST 1,000 AF SPOUSES IN 2013, AT A COST OF \$163,677, IN AN EFFORT TO HELP THEM PROCURE VIABLE EMPLOYMENT AREAS OF STUDY INCLUDED NURSING, COMPUTER SKILLS, AND BOOKKEEPING THE CAR CARE PROGRAM SPENT \$144,146 TO HELP 4,144 AF FAMILIES GET OIL CHANGES AND REGULAR MAINTENANCE ON THEIR PRIMMARY VEHICLES THE PHONE HOME PROGRAM PROVIDED PREPAID CALLING CARDS TO DEPLOYED AIRMEN TO HELP THEM MAINTIAIN CONTACT WITH FAMILY MEMBERS BACK HOME IN 2013, OVER 20,000 CARDS WERE DISTRIBUTED AT A COST OF \$108,308 TO THE SOCIETY OTHER PROGRAMS FUNDED BY THE SOCIETY IN 2013 WERE THE YOUTH EMPLOYMENT SKILLS (YES) PROGRAM AND THE SPOUSE HEARTLINK PROGRAM

4d

Other program services (Describe in Schedule O)

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

4e

Total program service expenses

10,505,843

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1 Yes	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 	2 Yes	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	No
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	No
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	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 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	No
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 Yes	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI. 	11a Yes	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b 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 and XII 	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 and XII 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 Yes	
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 	14b Yes	
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 Yes	
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 Yes	
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	No
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 	18 Yes	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 	19	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	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? <i>If so, complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> . .	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

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		Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a	161				
b	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 gaming (gambling) winnings to prize winners?	1c	Yes				
2a	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.	2a	22				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a				No	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a				No	
b	If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a				No	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b				No	
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a				No	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes				
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	Yes				
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	29				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e					No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f					No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.						
a	Did the organization make any taxable distributions under section 4966?	9a					
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter						
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b					
11	Section 501(c)(12) organizations. Enter						
a	Gross income from members or shareholders.	11a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a					
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b					
c	Enter the amount of reserves on hand.	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a				No	
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b					

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
	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		
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?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
7a	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?		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No

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

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		No
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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	Yes	
b	Other officers or key employees of the organization	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?		No
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 take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed	AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ☒ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	COL SIDNEY R HEETLAND RET AFAS 241 18TH STREET SOUTH STE 202 ARLINGTON, VA 222023409 (703)972-2650

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR FRANK J MCKEOWN PRESIDENT AND TRUSTEE	2 00	X		X				0	0	0
(2) HONORABLE WILLIAM A MOORMAN VICE PRESIDENT AND TRUSTEE	2 00	X		X				0	0	0
(3) MAJGEN EDWARD L BOLTON JR TRUSTEE	1 00	X						0	0	0
(4) HONORABLE MICHAEL B DONLEY TRUSTEE	1 00	X						0	0	0
(5) MAJGEN ALFRED K FLOWERS RET TRUSTEE	1 00	X						0	0	0
(6) CMSGT DENNIS L FRITZ RET TRUSTEE	1 00	X						0	0	0
(7) CMSAF JAMES A CODY TRUSTEE	1 00	X						0	0	0
(8) MRS ATHENA CODY TRUSTEE	1 00	X						0	0	0
(9) LTGEN RICHARD C HARDING TRUSTEE	1 00	X						0	0	0
(10) DR WILLIAM W JENNINGS TRUSTEE	2 00	X						0	0	0
(11) LTGEN DARRELL D JONES TRUSTEE	1 00	X						0	0	0
(12) MRS ELLEN JUMPER TRUSTEE	1 00	X						0	0	0
(13) MR LOUIS KINGSLAND TRUSTEE	1 00	X						0	0	0
(14) DR JERROLD IW MITCHELL TRUSTEE	1 00	X						0	0	0
(15) HONORABLE SUSAN L PAMERLEAU TRUSTEE	1 00	X						0	0	0
(16) MR ELI COHEN TRUSTEE	1 00	X						0	0	0
(17) MR JAMES C REAGAN TRUSTEE	1 00	X						0	0	0

Part VII

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) HONORABLE EUGENE R SULLIVAN TRUSTEE	1 00	X						0	0	0
(19) LTGEN DR THOMAS W TRAVIS TRUSTEE	1 00	X						0	0	0
(20) MRS BETTY WELSH TRUSTEE	1 00	X						0	0	0
(21) GEN MARK A WELSH III TRUSTEE	1 00	X						0	0	0
(22) LTGEN JOHN D HOPPER JR RET CHIEF EXECUTIVE OFFICER	40 00			X				205,964	0	51,884
(23) COL SIDNEY R HEETLAND RET CHIEF FINANCIAL OFFICER	40 00			X				152,831	0	47,831
(24) COL LINDA F EGENTOWICH RET CHIEF OPERATIONS OFFICER	40 00			X				151,357	0	43,306
(25) MRS DEBRA VOSBURG DIRECTOR OF COMMUNICATIONS	40 00					X		107,109	0	39,347
(26) MR MICHAEL C PARNAROUSKIS JR CONTROLLER	40 00					X		107,022	0	41,470
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								724,283	0	223,838

2

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

5

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

Section B. Independent Contractors

1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
	(A) Name and business address	(B) Description of services	(C) Compensation
	SCHOLARSHIP AMERICA ONE SCHOLARSHIP WAY ST PETER MN 56082	ED PROGRAM ADMIN	242,653
	BAM TECHNOLOGIES 2001 JEFFERSON DAVIS HWY STE 610 ARLINGTON VA 22202	IT SOFTWARE DEVELOPMENT	191,913
	NORTHERN TRUST 50 LASALLE ST M-15 CHICAGO IL 60603	INVESTMENT MANAGEMENT	125,453
	ACT INC 500 ACT DRIVE PO BOX 168 IOWA CITY IA 52243	ED PROGRAM ADMIN	103,910
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization		4

Part VIII

Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a3,012			
	b	Membership dues	1b			
	c	Fundraising events	1c856,006			
	d	Related organizations	1d40,190			
	e	Government grants (contributions)	1e191,755			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f6,244,768			
	g	Noncash contributions included in lines 1a-1f \$	229,281			
	h	Total. Add lines 1a-1f	7,335,731			
Program Service Revenue	2a	UNCOLLECTIBLE LOAN REPAYMENTS	Business Code 900099	5,603	5,603	
	b					
	c					
	d					
	e					
	f	All other program service revenue				
	g	Total. Add lines 2a-2f	5,603			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)	4,155,301			4,155,301
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
	6a	Gross rents	(i) Real	(ii) Personal		
	b	Less rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		
			119,578,858			
	b	Less cost or other basis and sales expenses	108,774,720			
	c	Gain or (loss)	10,804,138			
	d	Net gain or (loss)	10,804,138			10,804,138
	8a	Gross income from fundraising events (not including \$ 856,006 of contributions reported on line 1c) See Part IV, line 18	a187,113			
	b	Less direct expenses	b326,098			
	c	Net income or (loss) from fundraising events	-138,985			-138,985
	9a	Gross income from gaming activities See Part IV, line 19	a			
	b	Less direct expenses	b			
	c	Net income or (loss) from gaming activities				
	10a	Gross sales of inventory, less returns and allowances	a			
	b	Less cost of goods sold	b			
	c	Net income or (loss) from sales of inventory				
	Miscellaneous Revenue		Business Code			
	11a	CLASS ACTION SETTLEMENTS	900099	5,041		5,041
	b	MISCELLANEOUS	900099	1,583		1,583
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	6,624			
	12	Total revenue. See Instructions	22,168,412	5,603	0	14,827,078

Part IX

Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21.	36,038	36,038		
2	Grants and other assistance to individuals in the United States. See Part IV, line 22.	7,185,097	7,185,097		
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16.	758,887	758,887		
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	653,173	371,655	224,692	56,826
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.	1,383,127	787,001	475,794	120,332
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	123,464	70,251	42,472	10,741
9	Other employee benefits.	552,650	314,458	190,111	48,081
10	Payroll taxes.	135,036	76,836	46,452	11,748
11	Fees for services (non-employees):				
a	Management.				
b	Legal.				
c	Accounting.	42,429		42,429	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	420,795		420,795	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	93,383	53,134	32,125	8,124
12	Advertising and promotion.				
13	Office expenses.	118,498	72,636	36,747	9,115
14	Information technology.	140,263	79,810	48,250	12,203
15	Royalties.				
16	Occupancy.	274,671	156,288	94,487	23,896
17	Travel.	12,332	7,017	4,242	1,073
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	4,613		4,613	
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	178,205	101,398	61,303	15,504
23	Insurance.	49,116	27,947	16,896	4,273
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O):				
a	EDUCATION GRANT ADMINIS	346,563	346,563		
b	OTHER FUNDRAISING COSTS	48,334			48,334
c	BAD DEBT EXPENSE	28,864	28,864		
d					
e	All other expenses.	70,763	31,963	34,341	4,459
25	Total functional expenses. Add lines 1 through 24e.	12,656,301	10,505,843	1,775,749	374,709
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing		1,605,862	1	1,549,766
	2	Savings and temporary cash investments		1,490,777	2	2,395,806
	3	Pledges and grants receivable, net		48,223	3	24,290
	4	Accounts receivable, net		79,230	4	120,668
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L.			5	
	6	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	
	7	Notes and loans receivable, net		5,765,851	7	5,531,517
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		41,790	9	62,754
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a2,039,172			
	b	Less: accumulated depreciation	10b1,403,638	440,968	10c	635,534
	11	Investments—publicly traded securities		145,929,829	11	148,154,980
	12	Investments—other securities. See Part IV, line 11.		10,649,120	12	27,859,983
	13	Investments—program-related. See Part IV, line 11.			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11.		467,650	15	518,868
	16	Total assets. Add lines 1 through 15 (must equal line 34).		166,519,300	16	186,854,166
Liabilities	17	Accounts payable and accrued expenses		212,851	17	356,749
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.			21	
	22	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	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	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.		1,190,698	25	1,248,644
	26	Total liabilities. Add lines 17 through 25.		1,403,549	26	1,605,393
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		163,136,130	27	183,224,679
	28	Temporarily restricted net assets		229,817	28	237,290
	29	Permanently restricted net assets		1,749,804	29	1,786,804
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		165,115,751	33	185,248,773
	34	Total liabilities and net assets/fund balances		166,519,300	34	186,854,166

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	22,168,412
2	Total expenses (must equal Part IX, column (A), line 25)	2	12,656,301
3	Revenue less expenses Subtract line 2 from line 1	3	9,512,111
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	165,115,751
5	Net unrealized gains (losses) on investments	5	10,620,911
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	185,248,773

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		No
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis	Yes	
2c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

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.

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

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization AIR FORCE AID SOCIETY INC	Employer identification number 54-1797281
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Part I

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1	☐	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
2	☐	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)
3	☐	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
4	☐	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state _____
5	☐	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)
6	☐	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
7	☒	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)
8	☐	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)
9	☐	An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III)
10	☐	An organization organized and operated exclusively to test for public safety See section 509(a)(4).
11	☐	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated
e	☐	By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)
f	☐	If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
g	☐	Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above?
h	☐	Provide the following information about the supported organization(s)

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

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

Part II

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 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 ")	6,205,328	6,489,363	6,249,207	6,685,304	7,335,731	32,964,933
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	6,205,328	6,489,363	6,249,207	6,685,304	7,335,731	32,964,933
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						32,964,933

Section B. Total Support							
Calendar year (or fiscal year beginning in) ▶		(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	6,205,328	6,489,363	6,249,207	6,685,304	7,335,731	32,964,933
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	4,204,336	3,855,274	3,849,251	3,943,383	4,155,301	20,007,545
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)	141,216	166,813	142,874	231,520	193,737	876,160
11	Total support (Add lines 7 through 10)						53,848,638
12	Gross receipts from related activities, etc (see instructions)					12	96,521
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage			
14	Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	61 220 %
15	Public support percentage for 2012 Schedule A, Part II, line 14	15	60 050 %
16a	33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b	33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a	10%-facts-and-circumstances test—2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
b	10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization		
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		

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

Section A. Public Support						
Calendar year (or fiscal year beginning in) ▶	(a) 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 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6)						

Section B. Total Support						
Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here ▶						

Section C. Computation of Public Support Percentage		
15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization ▶		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶		

Part IV

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

Facts And Circumstances Test	
Return Reference	Explanation
SCHEDULE A, PART II, LINE 10 -	OTHER INCOME INCLUDES TWO MAIN ITEMS (1) GROSS FUND-RAISING EVENT INCOME GENERATED BY THE SOCIETY'S ANNUAL USAF CHARITY BALL, WHICH WAS HELD ON APRIL 6, 2013 (2) THE SOCIETY RECEIVED PROCEEDS FROM THE SETTLEMENT OF CLASS ACTION LAWSUITS RELATING TO CORPORATE SECURITIES OWNED WITHIN THE SOCIETY'S INVESTMENT PORTFOLIO

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
AIR FORCE AID SOCIETY INC

Employer identification number
54-1797281

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

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

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or education) ☐ Preservation of an historically important land area
☐ Protection of natural habitat ☐ Preservation of a certified historic structure
☐ Preservation of open space

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

a Total number of conservation easements

b Total acreage restricted by conservation easements

c Number of conservation easements on a certified historic structure included in (a)

d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register

	Held at the End of the Year
2a	
2b	
2c	
2d	

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3

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

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other
- 4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5

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

☐ Yes

☐ No

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

- 1a

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

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII and complete the following table
- c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance
- | | |
|----|--------|
| | Amount |
| 1c | |
| 1d | |
| 1e | |
| 1f | |
- 2a

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

☐ Yes

☐ No
- b

If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

☐

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

- | | (a)Current year | (b)Prior year | b (c)Two years back | (d)Three years back | (e)Four years back |
|--|-----------------|---------------|---------------------|---------------------|--------------------|
| 1a Beginning of year balance | 1,749,804 | 1,749,804 | 1,724,804 | 1,624,804 | 1,549,804 |
| b Contributions | 37,000 | | 26,218 | 100,000 | 75,000 |
| c Net investment earnings, gains, and losses | 254,417 | 203,431 | -1,218 | 196,236 | 280,603 |
| d Grants or scholarships | 254,417 | 203,431 | | 196,236 | 280,603 |
| e Other expenditures for facilities and programs | | | | | |
| f Administrative expenses | | | | | |
| g End of year balance | 1,786,804 | 1,749,804 | 1,749,804 | 1,724,804 | 1,624,804 |
- 2

Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a

Board designated or quasi-endowment
- b

Permanent endowment 100 000 %
- c

Temporarily restricted endowment

The percentages in lines 2a, 2b, and 2c should equal 100%
- 3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- (i) unrelated organizations

3a(i)

☐ Yes

☐ No

(ii) related organizations

3a(ii)

☐ Yes

☐ No
- b

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

3b

☐ Yes

☐ No
- 4

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

Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		353,533	226,842	126,691
d Equipment		390,106	247,508	142,598
e Other		1,295,533	929,288	366,245
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				635,534

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return 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	32,559,682
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	2e	10,620,911
a	Net unrealized gains on investments	2a	10,620,911
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	10,620,911
3	Subtract line 2e from line 1	3	21,938,771
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	4c	229,641
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	420,795
b	Other (Describe in Part XIII)	4b	-191,154
c	Add lines 4a and 4b	4c	229,641
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	22,168,412

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	12,426,660
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	2e	191,154
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	191,154
e	Add lines 2a through 2d	2e	191,154
3	Subtract line 2e from line 1	3	12,235,506
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :	4c	420,795
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	420,795
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	420,795
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	12,656,301

Part XIII Supplemental Information

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, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
PART V, LINE 4	THE SOCIETY'S EDUCATION GRANT ENDOWMENT CONSISTS OF DONOR-RESTRICTED CONTRIBUTIONS THAT ARE INVESTED TO PROVIDE FUTURE EARNINGS TO FUND NAMED EDUCATION GRANTS, DESIGNATED BY THE DONOR, AS PART OF THE SOCIETY'S GENERAL HENRY ARNOLD EDUCATION GRANT PROGRAM. ALL RETURNS GENERATED BY THE EDUCATION FUND ARE USED TO FUND THE NAMED GRANTS ON AN ANNUAL BASIS.
PART X, LINE 2	PART X, LINE 2 - FIN 48 (ASC 740) (ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES)- THE SOCIETY IS EXEMPT FROM PAYMENT OF INCOME TAXES UNDER THE PROVISIONS OF SECTION 501 (C)(3) OF THE INTERNAL REVENUE CODE. THE SOCIETY BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR INCOME TAX POSITIONS TAKEN. GENERALLY, INCOME TAX RETURNS RELATED TO THE CURRENT AND THREE PRIOR YEARS REMAIN OPEN FOR EXAMINATION BY TAXING AUTHORITIES.
PART XI, LINE 4B - OTHER ADJUSTMENTS	CHARITY BALL EVENT EXPENSES -191,154. THIS IS THE DIRECT COST OF THE SOCIETY'S USAF CHARITY BALL FUND-RAISING EVENT HELD IN 2013. THE 990 REQUIRES THESE COSTS TO BE NETTED AGAINST THE FUND-RAISING EVENT EARNINGS IN THE STATEMENT OF REVENUES IN PART VIII. THESE COSTS ARE REPORTED AS FUND-RAISING EXPENSES IN THE SOCIETY'S 2013 AUDIT REPORT.
PART XII, LINE 2D - OTHER ADJUSTMENTS	CHARITY BALL EVENT EXPENSES 191,154. SEE NOTE FOR 4B ABOVE FOR MORE INFORMATION.

[illegible]

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990,
Part IV, line 14b, 15, or 16.

► Attach to Form 990. ► See separate instructions.

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
AIR FORCE AID SOCIETY INC

Employer identification number
54-1797281

Part I

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☐ Yes ☒ No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC	5	41	GRANTS & PROGRAM SERVICES	SEE PART V	166,183
(2) EUROPE	11	82	GRANTS & PROGRAM SERVICES	SEE PART V	484,751
(3) MIDDLE EAST	0	0	PROGRAM SERVICES	SEE PART V	107,953
(4)					
(5)					
3a Sub-total	16	123			758,887
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	16	123			758,887

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE	YOUTH PROGRAM SUPPORT	12,086	CHECK			
(2)									
(3)									
(4)									

2

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

1

3

Enter total number of other organizations or entities ▶

Part III

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

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) EDUCATION GRANTS FOR COLLEGE COURSES	EAST ASIA AND THE PACIFIC	53	92,628	CHECK			
(2) EDUCATION GRANTS FOR COLLEGE COURSES	EUROPE	136	268,118	CHECK			
(3) EMERGENCY FINANCIAL ASSISTANCE	EAST ASIA AND THE PACIFIC	2	900	CHECK			
(4) EMERGENCY FINANCIAL ASSISTANCE	EUROPE	17	23,582	CHECK			
(5) CAR MAINTENANCE	EAST ASIA AND THE PACIFIC	173			5,335	OIL CHANGE COUPON	COST
(6) CAR MAINTENANCE	EUROPE	599			35,925	OIL CHANGE COUPON	COST
(7) AF BASE CHILDCARE SERVICES	EAST ASIA AND THE PACIFIC				44,667	CHILDCARE PROVIDED	COST
(8) AF BASE CHILDCARE SERVICES	EUROPE				84,464	CHILDCARE PROVIDED	COST
(9) AF BASE EDUCATION PROGRAMS	EAST ASIA AND THE PACIFIC	270			8,212	CLASSES PROVIDED	COST
(10) AF BASE EDUCATION PROGRAMS	EUROPE	571			31,408	CLASSES PROVIDED	COST
(11) BUNDLES FOR BABIES	EAST ASIA AND THE PACIFIC	261			12,099	TOTE BAG OF BABY GEAR	COST
(12) BUNDLES FOR BABIES	EUROPE	466			24,526	TOTE BAG OF BABY GEAR	COST
(13) PHONE CARDS FOR DEPLOYED AIRMEN	MIDDLE EAST	20,391			107,953	PREPAID PHONE CARDS	COST
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1

Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*

☒ Yes

☐ No
- 2

Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)*

☐ Yes

☒ No
- 3

Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)*

☐ Yes

☒ No
- 4

Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)*

☐ Yes

☒ No
- 5

Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)*

☐ Yes

☒ No
- 6

Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713).*

☐ Yes

☒ No

Part V

Supplemental Information
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	THE SOCIETY PROVIDES EDUCATIONAL GRANTS AND EMERGENCY FINANCIAL ASSISTANCE GRANTS TO AIR FORCE FAMILIES STATIONED AT BASES LOCATED OUTSIDE THE UNITED STATES. THESE PROGRAMS ARE ADMINISTERED BY THE AF SUPPORT STAFF AT THE BASE LEVEL. RECIPIENTS OF THE EDUCATION GRANTS MUST SUBMIT AN INVOICE OR FINANCIAL STATEMENT FROM THE SCHOOL TO VERIFY THEIR ATTENDANCE AT THE INSTITUTION. EDUCATION GRANT PAYMENTS ARE MADE DIRECTLY TO THE SCHOOL. THE EMERGENCY FINANCIAL ASSISTANCE GRANTS ARE ISSUED ON A CASE-BY-CASE BASIS BASED ON THE ADEQUATE DOCUMENTATION OF THE FINANCIAL NEED SUBMITTED BY THE AF MEMBER. ALL ASSISTANCE PROVIDED THROUGH THE SOCIETY'S PROGRAMS ARE TRACKED THROUGH THE SOCIETY'S DATABASE SYSTEM TO PROVIDE A HISTORICAL RECORD OF THE ASSISTANCE PROVIDED.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III, COL (C)	NO ESTIMATES ARE MADE FOR THE NUMBER OF AIRMEN PARTICIPATING IN THE BASE CHILDCARE PROGRAMS IN EAST ASIA AND THE PACIFIC AND EUROPE

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART 1, LINE 3, COLUMN (E)	EAST ASIA AND THE PACIFIC - IN ADDITION TO EDUCATION AND EMERGENCY GRANTS, SEVERAL OF THE SOCIETY'S COMMUNITY/BASE ENHANCEMENT PROGRAMS WERE ALSO AVAILABLE AT OVERSEAS USAF BASES I N ASIA THE PROGRAMS ACTIVE AT THESE BASES DURING 2013 INCLUDED THE CAR CARE, CHILDCARE, SPOUSE EDUCATION, AND BUNDLES FOR BABIES PROGRAMS

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART 1, LINE 3, COLUMN (E)	EUROPE - IN ADDITION TO EDUCATION AND EMERGENCY GRANTS, SEVERAL OF THE SOCIETY'S COMMUNITY /BASE ENHANCEMENT PROGRAMS WERE ALSO AVAILABLE AT OVERSEAS USAF BASES IN EUROPE. THE PROGR AMS ACTIVE AT THESE BASES DURING 2013 INCLUDED THE CAR CARE, CHILDCARE, SPOUSE EDUCATION, AND BUNDLES FOR BABIES PROGRAMS

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART 1, LINE 3, COLUMN (E)	MIDDLE EAST - THE SOCIETY PROVIDED CALLING CARDS TO THE AIRMEN DEPLOYED IN IRAQ AND AFGHANISTAN AS PART OF THE PHONE HOME PROGRAM IN 2013

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding
Fundraising or Gaming Activities

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

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

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization AIR FORCE AID SOCIETY INC	Employer identification number 54-1797281
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Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.
Form 990-EZ filers are not required to complete this part.

- 1

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

☐ Mail solicitations
- e

☐ Solicitation of non-government grants
- b

☐ Internet and email solicitations
- f

☐ Solicitation of government grants
- c

☐ Phone solicitations
- g

☐ Special fundraising events
- d

☐ In-person solicitations
- 2a

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

☐ Yes ☐ No
- b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total ▶						

- 3

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		CHARITY BALL (event type)	(event type)	(total number)	(add col (a) through col (c))
Revenue	1	Gross receipts	1,043,119		1,043,119
	2	Less Contributions . . .	856,006		856,006
	3	Gross income (line 1 minus line 2)	187,113		187,113
Direct Expenses	4	Cash prizes			
	5	Noncash prizes . . .			
	6	Rent/facility costs . . .	6,915		6,915
	7	Food and beverages .	73,080		73,080
	8	Entertainment	477		477
	9	Other direct expenses .	245,626		245,626
	10	Direct expense summary Add lines 4 through 9 in column (d) ▶			
	11	Net income summary Subtract line 10 from line 3, column (d) ▶			

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1	Gross revenue			
	2	Cash prizes			
	3	Non-cash prizes			
	4	Rent/facility costs			
	5	Other direct expenses . . .			
Direct Expenses	6	Volunteer labor			
	7	Direct expense summary Add lines 2 through 5 in column (d) ▶			
	8	Net gaming income summary Subtract line 7 from line 1, column (d) ▶			

9 Enter the state(s) in which the organization operates gaming activities _____

a Is the organization licensed to operate gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

Does the organization operate gaming activities with nonmembers? ☐ **Yes** ☐ **No**

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ **Yes** ☐ **No**

13 Indicate the percentage of gaming activity operated in

a The organization's facility	13a	%
b An outside facility	13b	%

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

Name ▶ _____

Address ▶ _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ **Yes** ☐ **No**

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

c If "Yes," enter name and address of the third party

Name ▶ _____

Address ▶ _____

16 Gaming manager information

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ **Yes** ☐ **No**

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

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation
------------------	-------------

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public
Inspection

Name of the organization
AIR FORCE AID SOCIETY INC

Employer identification number
54-1797281

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

0

3

Enter total number of other organizations listed in the line 1 table

0

Part III

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) EDUCATION GRANTS FOR COLLEGE	2649	5,379,213			
(2) EMERGENCY FINANCIAL ASSISTANCE	538	638,651			
(3) AF BASE CHILDCARE SERVICES			697,678	COST	CHILDCARE SERVICES PROVIDED
(4) AF BASE EDUCATION PROGRAMS	3482		193,740	COST	CLASSES PROVIDED ON BASE
(5) BUNDLES FOR BABIES SEMINAR	3343		172,574	COST	TOTE BAG OF BABY GEAR
(6) CAR MAINTENANCE PROGRAM ASSISTANCE	3372		102,886	COST	OIL CHANGE COUPON
(7) PHONECARDS PROVIDED TO DEPLOYED AIRMEN	67		355	COST	PREPAID PHONE CARDS

Part IV

Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

Return Reference	Explanation
PART I, LINE 2	THE SOCIETY PROVIDES EDUCATION GRANTS AND EMERGENCY FINANCIAL ASSISTANCE GRANTS TO AIR FORCE FAMILIES STATIONED AT ALL AF BASES LOCATED WITHIN THE US THESE PROGRAMS ARE ADMINISTERED BY THE AF SUPPORT STAFF AT THE BASE LEVEL RECIPIENTS OF THE EDUCATION GRANTS MUST SUBMIT AN INVOICE OR FINANCIAL STATEMENT FROM THE SCHOOL TO VERIFY THEIR ATTENDANCE EDUCATION GRANT PAYMENTS ARE MADE DIRECTLY TO THE SCHOOL THE EMERGENCY FINANCIAL ASSISTANCE GRANTS ARE ISSUED ON A CASE-BY-CASE BASIS BASED ON THE ADEQUATE DOCUMENTATION OF THE FINANCIAL NEED SUBMITTED BY THE AF MEMBER ALL ASSISTANCE PROVIDED THROUGH THE SOCIETY'S PROGRAMS IS TRACKED THROUGH THE SOCIETY'S DATABASE SYSTEM TO PROVIDE A HISTORICAL RECORD OF THE ASSISTANCE PROVIDED

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

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

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.
▶ Attach to Form 990. ▶ See separate instructions.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
AIR FORCE AID SOCIETY INC

Employer identification number
54-1797281

Part I

Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Travel for companions ☐ Tax idemnification and gross-up payments ☐ Discretionary spending account ☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence ☒ Health or social club dues or initiation fees ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Independent compensation consultant ☒ Form 990 of other organizations ☐ Written employment contract ☒ Compensation survey or study ☒ Approval by the board or compensation committee		
4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		No
Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?		No
b Any related organization? If "Yes," to line 5a or 5b, describe in Part III.		No
6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?		No
b Any related organization? If "Yes," to line 6a or 6b, describe in Part III.		No
7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III.		No
8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.		No
9 If "Yes" to line 8, did the organization also follow the rebuttable 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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1)LTGEN JOHN D HOPPER JR RET CHIEF EXECUTIVE OFFICER	(i) (ii)	189,318 0	12,000 0	4,646 0	18,119 0	33,765 0	257,848 0	0 0
(2)COL SIDNEY R HEETLAND RET CHIEF FINANCIAL OFFICER	(i) (ii)	141,143 0	9,000 0	2,688 0	13,513 0	34,318 0	200,662 0	0 0
(3)COL LINDA F EGENTOWICH RET CHIEF OPERATIONS OFFICER	(i) (ii)	139,077 0	9,000 0	3,280 0	13,327 0	29,979 0	194,663 0	0 0

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	THE SOCIETY OFFERS A TAXABLE REIMBURSEMENT PROGRAM FOR ALL EMPLOYEES OF UP TO \$650 PER YEAR TO COVER THE COST OF HEALTH CLUB DUES OR OTHER FITNESS ACTIVITIES
PART I, LINE 3	THE SOCIETY'S COMPENSATION COMMITTEE IS CHARGED BY THE BOARD OF TRUSTEES TO SET COMPENSATION FOR THE CEO. EACH YEAR STAFF PROVIDES THE COMMITTEE WITH SALARY SURVEYS AND OTHER COMPARATIVE SALARY DATA TO HELP THE COMMITTEE FORMULATE A COMPENSATION PACKAGE FOR THE CEO. THE COMPENSATION COMMITTEE APPROVES THE FULL COMPENSATION PACKAGE FOR THE CEO ON AN ANNUAL BASIS, DOCUMENTING THE DECISION WITH A REBUTTABLE PRESUMPTION FORM THAT IS SIGNED BY THE SOCIETY'S PRESIDENT, WHO IS ALSO THE CHAIR OF THE COMPENSATION COMMITTEE.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
AIR FORCE AID SOCIETY INC

Employer identification number
54-1797281

Part I

Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	2	94,337	AVG HIGH/LOW PRICE
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (AUCTION ITEMS)	X	307	134,944	FAIR VALUE
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

29

Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

29

0

30a

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

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

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

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

32a

Yes

b

If "Yes," describe in Part II

33

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

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 32B	(1) THE SOCIETY MAINTAINS A POLICY OF SELLING ALL DONATED SECURITIES UPON RECEIPT THE SECURITIES ARE TRANSFERRED, GENERALLY BY THE DONOR, DIRECTLY TO A CUSTODY ACCOUNT WITHIN THE SOCIETY'S INVESTMENT PORTFOLIO THE INVESTMENT CUSTODIAN/BROKER IS DIRECTED TO SELL THE DONATED SECURITIES ONCE THE SALE OF THE DONATED SECURITIES IS SETTLED, THE FUNDS RAISED ARE MADE AVAILABLE FOR USE ON THE SOCIETY'S PROGRAMS (2) AN AIR FORCE SPOUSES' CLUB HELPS RUN THE SILENT AUCTION HELD IN CONJUNCTION WITH THE ANNUAL USAF CHARITY BALL THE CLUB SOLICITS IN-KIND DONATIONS ON BEHALF OF THE SOCIETY AND FACILITATES THE SALE OF THE DONATED ITEMS AT THE EVENT

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.

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

www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization AIR FORCE AID SOCIETY INC	Employer identification number 54-1797281
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990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 2	
FORM 990, PART VI, SECTION B, LINE 11	THE SOCIETY'S 990 IS PREPARED INTERNALLY BY THE ACCOUNTING STAFF THE FILING IS THEN REVIE WED BY THE SOCIETY'S CFO AND OTHER OFFICERS FOLLOWING THIS INTERNAL REVIEW, THE 990 IS SE NT TO AN OUTSIDE ACCOUNTING FIRM FOR AN INDEPENDENT REVIEW PRIOR TO FILING THE 990 WITH T HE IRS, THE SOCIETY MAKES THE DRAFT FILING AVAILABLE TO THE FULL BOARD OF TRUSTEES VIA E-M AIL ONCE THE FULL REVIEW PROCESS IS COMPLETE, THE 990 IS FILED ELECTRONICALLY WITH THE IR S, AND THE PUBLIC VERSION OF THE FILING IS POSTED ON THE SOCIETY'S WEBSITE
FORM 990, PART VI, SECTION B, LINE 12C	THE SOCIETY REQUIRES ITS OFFICERS, STAFF MEMBERS, AND ALL MEMBERS OF THE BOARD OF TRUSTEES TO DISCLOSE POTENTIAL CONFLICTS OF INTEREST ON AN ANNUAL BASIS THE STATEMENTS SUBMITTED BY EACH PERSON ARE REVIEWED BY STAFF AND REPORTED TO THE AUDIT COMMITTEE IF ANY CONFLICTS ARE DETERMINED TO EXIST, THE AUDIT COMMITTEE WOULD DECIDE THE APPROPRIATE ACTION TO BE TA KEN THE MATTER WOULD THEN BE PRESENTED TO THE FULL BOARD OF TRUSTEES WHERE A VOTE ON THE COMMITTEE'S RECOMMENDATION WOULD BE TAKEN
FORM 990, PART VI, SECTION B, LINE 15	THE DETERMINATION OF THE EXECUTIVE COMPENSATION IS HANDLED BY THE BOARD-APPOINTED COMPENSA TION COMMITTEE THIS COMMITTEE IS RESPONSIBLE FOR PREPARING AND REVIEWING THE CEO'S COMPEN SATION ON AN ANNUAL BASIS THE REVIEW OF OFFICER COMPENSATION INCLUDES COMPARISONS WITH SI MILAR MILITARY RELIEF ORGANIZATIONS, OTHER NON-PROFIT ORGANIZATIONS, AND SALARY GUIDE SURV EYS THE COMPENSATION COMMITTEE ALSO REVIEWS THE SALARY LEVELS AND PROPOSED BONUSES OF THE OTHER OFFICERS AND THE FULL STAFF
FORM 990, PART VI, SECTION C, LINE 19	THE SOCIETY PROVIDES DIRECT PUBLIC ACCESS TO ITS ANNUAL AUDIT REPORT AND 990 TAX FILING BY MAKING THE DOCUMENTS AVAILABLE ONLINE THROUGH ITS AFAS ORG WEBSITE BOARD OF TRUSTEE BY-L AWS, MEETING MINUTES, CONFLICT OF INTEREST POLICY, AND OTHER GOVERNING DOCUMENTS ARE AVAIL ABLE ONLY ON REQUEST THROUGH THE SOCIETY'S HEADQUARTERS OFFICE
FORM 990, PART XII, LINE 2C	THE AUDIT OVERSIGHT PROCESS HAS REMAINED UNCHANGED FROM THE PREVIOUS YEAR

SCHEDULE R
(Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990. ▶ See separate instructions.
▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open to Public Inspection

Name of the organization
AIR FORCE AID SOCIETY INC

Employer identification number
54-1797281

Part I Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

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

Part II Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ARMED FORCES RELIEF TRUST C/O AER 200 STOVALL STREET 5S33 ALEXANDRIA, VA 223320600 52-6468495	SUPPORT MILITARY SOCIETIES	VA	501 (C)(3)	509(A)(3) TYPE I	N/A		No

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

Transactions With Related Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

1

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

a

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

b

Gift, grant, or capital contribution to related organization(s)

c

Gift, grant, or capital contribution from related organization(s)

d

Loans or loan guarantees to or for related organization(s)

e

Loans or loan guarantees by related organization(s)

f

Dividends from related organization(s)

g

Sale of assets to related organization(s)

h

Purchase of assets from related organization(s)

i

Exchange of assets with related organization(s)

j

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

k

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

l

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

m

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

n

Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o

Sharing of paid employees with related organization(s)

p

Reimbursement paid to related organization(s) for expenses

q

Reimbursement paid by related organization(s) for expenses

r

Other transfer of cash or property to related organization(s)

s

Other transfer of cash or property from related organization(s)

	Yes	No
1a		No
1b		No
1c	Yes	
1d		No
1e		No
1f		No
1g		No
1h		No
1i		No
1j		No
1k		No
1l	Yes	
1m		No
1n		No
1o		No
1p		No
1q		No
1r		No
1s		No

2

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2013

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

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

[illegible]

Part VII

Supplemental Information

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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