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DLN: 93493342007184

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

foundations)
numbers on this form as it may be made public By law, the IRS

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

A Fo	or the	2013 ca		g 03-01-2013 , 2013, and ending ()2-28-2	014				
		applicable	C Name of organization Experimental Aircraft Association Inc	<u> </u>			D Emplo	yer ic	lentification number	
Ad	dress cl	hange	Doing Business As	39-09	175	37				
	me cha		Doing Business As							
Ini	tıal retu	ım		nail is not delivered to street address) Roor	m/suite		E Telepho	one nu	ımber	
Te	rmınate	ed	PO Box 3086 Suite				(920)	426	-4800	
☐ Am	nended	return	City or town, state or province, cou Oshkosh, WI 549033086	ntry, and ZIP or foreign postal code			(320)	720		
Ap	plicatio	n pending	OSHKOSH, W1 349033000				G Gross r	eceıpt	s \$ 37,819,231	
			F Name and address of pri	ncıpal officer		i(a) Is th	ıs a group	retu		
			Brian Wierzbinski 3000 Poberezny Road			subo	rdınates?		Γ Yes Γ No	
			Oshkosh,WI 54902		1	H(b) Are a	all subordı	nates	s	
						ınclu	ded?			
I la	ıx-exen	npt status	✓ 501(c)(3) 501(c)() ◄ (insert no) 4947(a)(1) or 527		If "N	o," attach	a lis	t (see instructions)	
J W	ebsit	e:⊨ ww	w eaa org		1	I(c) Grou	ıp exempt	ion n	umber ►	
K For	m of or	rganızatıor	Corporation Trust Association	on Other ►		L Year of fo	rmation 19	55	M State of legal domicile WI	
Pa	rt I	Sum	ımary							
ě		Dedicat	escribe the organization's mission to growing aviation through pants & reduce barriers to particip	articipation & education Deliver ed	lucatio	nal offering	ıs & actıvı	ties v	which guide new	
<u> </u>										
Governance	2	Check t	his box 🕶 if the organization di	scontinued its operations or dispos	ed of m	nore than 2	5% of its	net a	assets	
ŝ	-									
26 47	3	Number	of voting members of the govern	ing body (Part VI, line 1a)				3	33	
Activities &	1		of independent voting members		4	33				
₹ 5	1		mber of individuals employed in			5	887			
⋖			mber of volunteers (estimate if r		6	4,700				
				art VIII, column (C), line 12 rom Form 990-T, line 34				7a 7b	2,342,176	
	B	Net unit	stated business taxable income i	10111 1 01111 9 90 - 1 , IIII	· · ·		r Year	78	Current Year	
	8	Contr	ibutions and grants (Part VIII, li	ne 1h)	. 1		8,426,	369	7,722,756	
₽	9			ue (Part VIII, line 2g)				390	23,425,087	
Revenue	10			n (A), lines 3, 4, and 7d)			-152,9	939	110,561	
ď	11	Other	revenue (Part VIII, column (A),	lines 5,6d,8c,9c,10c, and 11e)			3,343,4	3,484 3,861,4		
	12			(must equal Part VIII, column (A)	, line		33,367,304		35,119,825	
	13			IX, column (A), lines 1–3)			136,6	-	200,428	
	14			[X, column (A), line 4)			2007	0	0	
88	15		es, other compensation, employ		12,007,4	437	11,733,668			
Expenses	16a	Profes	ssional fundraising fees (Part IX,			0				
ੜੇ	Ь	Total fu	undraising expenses (Part IX, column (D), line 25) ► 902,719	_					
	17	Other	expenses (Part IX, column (A),	lines 11a-11d, 11f-24e)	. [19,591,8	815	20,141,650	
	18	Total	expenses Add lines 13-17 (mu	st equal Part IX, column (A), line 2	5)		31,735,	930	32,075,746	
	19	Rever	nue less expenses Subtract line	18 from line 12	• •		1,631,	\rightarrow	3,044,079	
Net Assets or Fund Balances							g of Curre 'ear	nt	End of Year	
SS et	20	Total	assets (Part X, line 16)		.		38,497,8	312	43,441,384	
AA.	21						19,627,9	$\overline{}$	20,983,063	
žZ	22	Net a	ssets or fund balances Subtract	line 21 from line 20	. [18,869,8	883	22,458,321	
Pa	rt II	Sigr	nature Block							
my k	nowle arer ha	as any k	belief, it is true, correct, and cor nowledge *** ature of officer	amined this return, including accom nplete Declaration of preparer (oth		officer) is				
			e or print name and title							
			Print/Type preparer's name Daniel Romano	Preparer's signature	Date	I CITE	eck if -employed	PTIN P005		
Pai			Firm's name 🕨 Grant Thornton LLP				n's EIN 🟲			
	pare		Firm's address ► 100 E Wisconsin Ave			Pho	ne no (920) 426.	-4800	
	ıın		5 ddd, 555 F 100 E 1115COH5HI AVE			I FIIO	110 (320	, 0		

Mılwaukee, WI 53202

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

✓ Yes No

Form	990 (2013)					Page .
Par	Statement of Check if Sched	of Program Serv			nt III	ন
1	Briefly describe the o	rganızatıon's mıssıor	1			
EDUC REDU ALL TO A PURF TO A EFFC	CATION WE STRIVE TO PAIL JCE BARRIERS TO PAIL FHAT WE DO EAA IS OSES EAA COOPER VIATION ACTIVITIE	TO DELIVER EDUCA RTICIPATION EAR ORGANIZED AND C ATES WITH AND AS S, PROMOTES AND	ATIONAL OFF A IGNITES AN OPERATED EX SSISTS GOVER ENCOURAGE	ERINGS AND ACTI D NURTURES INTE CLUSIVELY FOR E RNMENTAL AGENC S AVIATION SAFE	G AVIATION THROUGH PARENTIES WHICH GUIDE NEW EREST BY EMBRACING THE DUCATIONAL, SCIENTIFIC ELES IN THE DEVELOPMENT ETY, PROMOTES AND ENCOURAGES	PARTICIPANTS AND "SPIRIT OF AVIATION" IN AND CHARITABLE OF PROGRAMS RELATING URAGES GRASS ROOTS
2	Did the organization u	indertake any signific	ant program se	ervices during the y	ear which were not listed on	
	the prior Form 990 or	990-EZ?				
	If "Yes," describe the	se new services on S	chedule O			
3	Did the organization c	ease conducting, or	make sıgnıfıcar	nt changes in how it	conducts, any program	
	If "Yes," describe the	se changes on Sched	dule O			
4 	expenses Section 50 the total expenses, ar (Code AIRVENTURE - THE WOR	1(c)(3) and 501(c)(4 nd revenue, If any, for) (Expenses \$ LD'S LARGEST AVIATION E	1) organization: each program 12,271,897 EVENT IS HELD EAC	s are required to rep service reported including grants of \$ CH YEAR IN LATE JULY #	three largest program service port the amount of grants and of the amount of grants and of the large program (Revenue \$	allocations to others, 15,082,724)
	AIRCRAFT THROUGH EXH	HIBITS, DEMONSTRATION	AIRSHOWS, EDUC	ATIONAL SESSIONS, ANI	D INTERACTIVE DISPLAYS	
4b	(Code) (Expenses \$	3,229,980	including grants of \$) (Revenue \$	2,998,872)
טד	PUBLICATIONS - "SPORT	, , , , ,	PUBLICATION ISS	UED TO MEMBERS WITH	A VARIETY OF EDUCATIONAL INFOR	
	(Code) (Expenses \$	3,111,482	including grants of \$) (Revenue \$	5,611,834)
	MEMBERSHIP SERVICES - AND PROMOTING MEMBE			OWLEDGE AND INFORM	ATION TO ASSIST WITH TECHNICAL (QUESTIONS ON AVIATION MATTERS
	(Code MUSEUM AND OTHER PRO) (Expenses \$ OGRAM SERVICES	9,193,589	including grants of \$	200,428) (Revenue \$	2,294,544)
4d	Other program servi	ces (Describe in Sch	edule O)			
	(Expenses \$	9,193,589 ind	cluding grants o	of \$ 20	00,428) (Revenue \$	2,294,544)
4e	Total program servic	e expenses 🕨	27,806,948			

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	110
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	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		
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 1	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 2	8	Yes	
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 $\sqrt[6]{4}$	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII"	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Yes	
е	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		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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		No
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		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	Yes	
20a	Did the organization operate one or more 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		

Par	t 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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III	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? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part 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? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or 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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		1	
_		28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <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? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

'aru	V	Statements Regarding Other IRS Filings and Tax Compliant					L.
		Check if Schedule O contains a response or note to any line in this Part V		<u></u>		 Yes	▽ No
1 a E	nter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	177			.,,0
		the number of Forms W-2G included in line 1a Enter-0- if not applicable	1b	3	1		
		e organization comply with backup withholding rules for reportable payments t	o vend	ors and reportable	1		
Ç	amın	g (gambling) winnings to prize winners?			1c	Yes	
Т	ax S	the number of employees reported on Form W-3, Transmittal of Wage and tatements, filed for the calendar year ending with or within the year covered s return	2a	887	,		
b I	í fat le	east one is reported on line 2a, did the organization file all required federal em	ployme	nt tax returns?	2b	Yes	
		If the sum of lines 1a and 2a is greater than 250, you may be required to e-fil e organization have unrelated business gross income of \$1,000 or more durin			За	Yes	
		e organization have unrelated business gloss income of \$1,000 of more during s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explana</i> t	-		3b	Yes	
		y time during the calendar year, did the organization have an interest in, or a s				163	
c	ver, a	a financial account in a foreign country (such as a bank account, securities acnt)?	count,	or other financial	4a		No
b I	f "Y e:	s," enter the name of the foreign country					
		istructions for filing requirements for Form TD F 90-22 1, Report of Foreign Ba	nk and	Financial Accounts			
5a ∨	Vas tl	he organization a party to a prohibited tax shelter transaction at any time duri	na the 1	tax vear?	5a		No
		ry taxable party notify the organization that it was or is a party to a prohibited	_	•	5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			30		
C 1	ı re:	s, to fine 3a of 3b, and the organization the Form 6000-1 '			5c		
		the organization have annual gross receipts that are normally greater than \$1 ization solicit any contributions that were not tax deductible as charitable con			6a		Νo
		s," did the organization include with every solicitation an express statement toot tax deductible?	hat suc	h contributions or gifts	6b		
	_	izations that may receive deductible contributions under section 170(c).					
S	ervic	e organization receive a payment in excess of \$75 made partly as a contributes provided to the payor?			7a	Yes	
		s," did the organization notify the donor of the value of the goods or services p			7b	Yes	
		e organization sell, exchange, or otherwise dispose of tangible personal properm 8282?			7c		No
		s," indicate the number of Forms 8282 filed during the year	 7d				
					1		
		e organization receive any funds, directly or indirectly, to pay premiums on a act?	persona	al benefit	7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a pers	onal be	enefit contract?	7f		No
		organization, daring the year, pay premainly, an ectly of maneetry, and personganization received a contribution of qualified intellectual property, did the o			-		110
r	equir	ed [?]			7g		
F	orm :	organization received a contribution of cars, boats, airplanes, or other vehicle 1098-C?			7h	Yes	
t	he su	oring organizations maintaining donor advised funds and section 509(a)(3) supporting organization, or a donor advised fund maintained by a sponsoring organs or the second of the second	janızatı				1
			- •		8		
	_	oring organizations maintaining donor advised funds.			0-		
		e organization make any taxable distributions under section 4966?			9a 9b		
		e organization make a distribution to a donor, donor advisor, or related person on 501(c)(7) organizations. Enter			90		
		tion fees and capital contributions included on Part VIII, line 12	10a				
ь		receipts, included on Form 990, Part VIII, line 12, for public use of club	10a 10b		-		
		on 501(c)(12) organizations. Enter					
		Income from members or shareholders	11a				
b (Fross	income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them)	\vdash		1		
		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 99	0 ın lıe	u of Form 1041?	12a		
b I	f"Ye	s," enter the amount of tax-exempt interest received or accrued during the	12b				
•		on 501(c)(29) qualified nonprofit health insurance issuers.			1		
a I	s the	organization licensed to issue qualified health plans in more than one state? See the instructions for additional information the organization must report on	Sched	ule O	13a		
b E	nter	the amount of reserves the organization is required to maintain by the states					
		ch the organization is licensed to issue qualified health plans	13b		-		
		e organization receive any payments for indoor tanning services during the ta			14a		No
		s " has it filed a Form 720 to report these payments? <i>If "No" provide an explan</i>			14a		140

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.

56	ection 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	1a	33					
	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	1b	33					
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?	relationship with any	2		No			
3		•		3		No		
4	Did the organization make any significant changes to its governing documents since filed?	•	4		No			
5	Did the organization become aware during the year of a significant diversion of the o	raanız	ration's assets?	5		No.		
6	Did the organization have members or stockholders?	· gamz		6	Yes			
		· ·	elector appoint and ar		163			
	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?							
	Are any governance decisions of the organization reserved to (or subject to approva or persons other than the governing body?			7b	Yes			
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ui	ndertaken during the					
а	The governing body?			8a	Yes			
b	8b	Yes						
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>								
Se	ection B. Policies (This Section B requests information about policies not	requi	ired by the Internal R	evenu	ıe Cod	e.)		
					Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?			10a		Νo		
b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization			10b				
11a	Has the organization provided a complete copy of this Form 990 to all members of it			11a	Yes			
b	Describe in Schedule O the process, if any, used by the organization to review this F	orm 9	990					
	Did the organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes			
	Were officers, directors, or trustees, and key employees required to disclose annual	ly inte	rests that could give					
c	rise to conflicts?			12b	Yes			
13	In Schedule O how this was done			12c 13	Yes Yes			
	Did the organization have a written document retention and destruction policy? .			14	Yes			
14	. ,			1-4	162			
15	Did the process for determining compensation of the following persons include a rev independent persons, comparability data, and contemporaneous substantiation of th	ne deli	beration and decision?			1		
	The organization's CEO, Executive Director, or top management official			15a	Yes			
b	Other officers or key employees of the organization	•		15b	Yes			
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year?			16a		No		
b	If "Yes," did the organization follow a written policy or procedure requiring the organ participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	e step	s to safeguard the	16b				
Se	ection C. Disclosure							
17	List the States with which a copy of this Form 990 is required to be filed \blacktriangleright AZ , AR , F	FL , G	A, KS, MA, MI, NJ, NY	, PA,	. VA , W	′I		
18								

- Own website Another's website Vipon 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 ►BRIAN WIERZBINKSI 3000 POBEREZNY RD Oshkosh, WI 54902 (920)426-4812

Form 990	(2013	
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М	а	ч	u	•

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) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Tıtle	(B) A verage hours per week (list any hours	more t	tion (han d n is l	ne l both	box, an d	heck unless officer stee)	;	([Repor comper from organiza	rtable nsation i the tion (W-	(E) Reportable compensation from related organizations (W	v-	(F) Estima amount o compens from t	ted f other ation he
		for related organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)) 0	organizati relate organiza	ed
				ě			#ed							
								<u> </u>						
1b	Sub-Total				•			•						
c d	Total from continuation sheet Total (add lines 1b and 1c) .	S to Part VII, 5	ection A	. .	•	•	•	•		1,967,532		0		357,553
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	an			
		_											Yes	No
3	Did the organization list any fc on line 1a? <i>If "Yes," complete S</i>					key •	emplo	yee, •	or highes,	t compen	sated employee	3		No
4	For any individual listed on line organization and related organ individual											4	Yes	
5	Did any person listed on line 1 services rendered to the organ									janization • • •	or individual for	5		No
Se	ection B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization	e highest comp											tax vear	
	compensation from the organiz	(A)	, inpens	G C1011	101		. arciid	ai ye	ar chang	THE TOT WI	(B)	10113	(C	

(A) Name and business address	(B) Description of services	(C) Compensation
Publishers Press Inc, 13487 S PRESTON HIGHWAY LEBANON JUNCTION KY 40150	Printing	1,146,229
Hanson Dodge, 220 EAST BUFFALO ST MILWAUKEE WI 53202	Website Design	458,426
Federal Aviation Administration, 800 INDEPENDANCE AVE ROUTE 626 WASHINGTON DC 20591	ATC Services	447,924
1-2-1 Marketing Services Group, 20195 S DIAMOND LAKE ROAD ROGERS MN 55374	MEMBERSHIP MARKETING	291,699
Faith Technologies, PO BOX 260 MENASHA WI 54952	Electric Contractor	199,343

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 ►14

Form 99								Page S
Part V	/ 	Statement of Check of Schedu	o f Revenue ule O contains a respor	nse or note to any lir	ne 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
တည	1a	Federated cam	paigns 1a					
Grants mounts	ь	Membership du	ies 1b					
وق	c	Fundraising ev	ents 1c	3,023,967				
Giffs, I iilar An	d	Related organiz	zations 1d	1,087,119				
G	e	Government grant						
Sir	f	_		3,611,670				
uti.	"	similar amounts no						
를등	g	Noncash contributi 1a-1f \$	ons included in lines	1,007,226				
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1 a - 1 f	🔎	7,722,756			
				Business Code				
E E	2a	AIRVENTURE REGI	ISTRATION	900099	6,403,818	6,403,818		
82 Se	ь	MEMBERSHIP		900099	5,611,834	5,611,834		
- Ge	c			532000	4,013,065			4,013,065
ē. Z	d	AIRCRAFT ADMISS	SIONS	900099	2,377,109	2,377,109		
S =	e	PUBLICATION / AD	OVERTISING	541800	2,237,078		2,237,078	
Program Serwoe Revenue	f	All other progra	am service revenue		2,782,183	2,140,918		641,265
ž	g	Total. Add lines	s 2a-2f		23,425,087			
	3		ome (including dividen		51,270			51,270
	١,		ar amounts) stment of tax-exempt bond	F	31,270			31,270
	5	Royalties .		· · · · · · · · · · · · · · · · · · ·	545,185			545,18
	•	Royalties .	(ı) Real	(II) Personal	0.0,100			0.0,100
	6a	Gross rents	497,404	293,243				
	ь	Less rental						
	c	expenses Rental income	497,404	293,243				
	d	or (loss)	me or (loss)		790,647	293,243		497,404
	"	Net rental med	(ı) Securities	(II) O ther	,			,
	7a	Gross amount from sales of assets other	121,524	18,108				
	b	than inventory Less cost or other basis and sales expenses	80,341	0				
	c	Gain or (loss)	41,183	18,108				
	d	Net gain or (los	ss)		59,291			59,291
Other Revenue	8a	events (not inc \$3,023	s reported on line 1c)					
ŭ			а	322,600				
her	b		penses b	614,387	. 201 707			. 201 70
ŏ	c 9a		(loss) from fundraising from gaming activities	events . 🕨	-291,787			-291,787
	30		ne 19					
			а	102,000				
	b		penses b	47,300	E4 300			F4 300
	10a		(loss) from gaming acti	vities	54,700			54,700
	104	Gross sales of returns and allo						
			а	2,310,238				
	b	_	oods sold b	1,957,378				
	С		(loss) from sales of inv	· · · · · · · · · · · · · · · · · · ·	352,860	329,315	23,545	
	11a	Miscellaneous COST RECOVI AFFILIATES		Business Code 561000	1,706,780	1,706,780		
	ь	GAIN ON DEF		900099	369,664			369,664
	_	TERMINATION		900099	180,733	99,180	81,553	
	C	HOSTED EVEN		900099	152,639	134,369	01,333	18,270
	d e	Total. Add lines	ue	▶	132,039	134,309		10,270
					2,409,816			
	12	rocar revenue.	See Instructions .	· · · · •	35,119,825	19,096,566	2,342,176	5,958,327

Part IX Statement of Functional Expenses

Secti	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizat	ions must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>		<u> </u>
	ot include amounts reported on lines 6b, b, 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	64,084	64,084		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	136,344	136,344		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,574,399	1,019,640	358,746	196,013
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0			
7	Other salaries and wages	8,096,054	2,756,357	5,339,697	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	349,725		349,725	
9	Other employee benefits	1,060,841	27,099	1,033,645	97
10	Payroll taxes	652,649	229,438	415,783	7,428
11	Fees for services (non-employees)				
а	Management	0			
b	Legal	203,937		203,937	
c	Accounting	175,146		175,146	
d	Lobbying	0			
e	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	3,270,936	2,902,199	258,018	110,719
12	Advertising and promotion	737,025	560,686	104,045	72,294
13	Office expenses	4,505,797	3,967,487	448,082	90,228
14	Information technology	220,246	661	219,585	30,220
15	Royalties	0	001	219,363	
16	Occupancy	2,358,007	276,724	2,081,283	
17	Travel	1,252,301	1,068,450	160,034	23,817
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	1,232,301	1,000,430	100,034	23,617
19	Conferences, conventions, and meetings	116,312	71,379	44,271	662
20	Interest	223,162	71,373	223,155	
21	Payments to affiliates	0	 	223,133	
22	Depreciation, depletion, and amortization	1,794,587	96,448	1,698,139	
23	Insurance	1,270,259	935,434	334,605	220
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)	2,2. 3,233	555, 18	33 1,000	
а	FUEL	817,434	742,020	75,190	224
b	REPAIRS AND MAINTENANCE	806,872	513,850	293,022	
c	CREDIT CARD DISCOUNTS	563,199	187,464	375,735	
d	UNRELATED BUSINESS TAX	7,534		7,534	
e	All other expenses	1,818,896	12,251,177	-10,833,298	401,017
25	Total functional expenses. Add lines 1 through 24e	32,075,746	27,806,948	3,366,079	902,719
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)		-		<u> </u>

Part X Balance Sheet

Par	L X	Check if Schedule O contains a response or note to any line in	this Pa	art X				
					(A) Beginning of year		(B) End of year	
	1	Cash-non-interest-bearing			2,276,919	1	2,284,664	
	2	Savings and temporary cash investments			5,521,568	2	9,329,531	
	3	Pledges and grants receivable, net			166,241	3	135,606	
	4	Accounts receivable, net			907,577	4	1,076,102	
	5	Loans and other receivables from current and former officers, cemployees, and highest compensated employees. Complete Paschedule L	art II d	of	0	5	0	
đs	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	contril mploy	outing employers		6	0	
Assets	7	Notes and loans receivable, net			47.536		35.048	
AS	8	Inventories for sale or use			320,713		489,442	
	9	Prepaid expenses and deferred charges			836,055	_	751,323	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	49,132,522		9	751,525		
	ь	Less accumulated depreciation	10a 10b	26,313,934	22,678,506	10c	22,818,588	
	11	·	nvestments—publicly traded securities					
	12	Investments—other securities See Part IV, line 11			2,660,039	11 12	3,185,813	
	13	Investments—program-related See Part IV, line 11		0	13	0		
	14	Intangible assets			0		0	
	15	Other assets See Part IV, line 11			3,082,658		3,335,267	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			38,497,812	16	43,441,384	
	17	Accounts payable and accrued expenses			3,066,703	17	3,240,799	
	18	Grants payable		0,000,700	18	0,240,733		
	19	Deferred revenue			7,385,850	19	8,259,933	
	20			7,880,618	20	8,800,000		
		Tax-exempt bond liabilities			7,880,018		0,000,000	
eS	21	Escrow or custodial account liability Complete Part IV of School			0	21		
Liabiliti	22	Loans and other payables to current and former officers, direct key employees, highest compensated employees, and disquali	fied	•				
<u>.e</u>		persons Complete Part II of Schedule L			0	22	0	
_	23	Secured mortgages and notes payable to unrelated third partie			155,464	23	103,841	
	24	Unsecured notes and loans payable to unrelated third parties			160,000	24	80,000	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of	Schedule	979,294	25	498,490	
	26	Total liabilities. Add lines 17 through 25			19,627,929	26	20,983,063	
—— Ф	20	Organizations that follow SFAS 117 (ASC 958), check here ► lines 27 through 29, and lines 33 and 34.			13,321,1323			
Fund Balance	27	Unrestricted net assets			17,409,792	27	20,874,069	
<u>छ</u>	28	Temporarily restricted net assets	1,460,091	28	1,584,252			
<u> </u>	29	Permanently restricted net assets			0	29	0	
Ĭ	23	Organizations that do not follow SFAS 117 (ASC 958), check h						
		complete lines 30 through 34.	CIC F	and				
S 0.	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31		
455	32	Retained earnings, endowment, accumulated income, or other				32		
Net /	33	Total net assets or fund balances			18,869,883	33	22,458,321	
ž	34	Total liabilities and net assets/fund balances			38,497,812	34	43,441,384	
		rotal habilities and net assets/land balances	• •	• •	50,457,012	J-4	75,141,564	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		35,:	119,825
2	Total expenses (must equal Part IX, column (A), line 25)	2		32,0	75,746
3	Revenue less expenses Subtract line 2 from line 1	3		3,0	044,079
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		18,8	369,883
5	Net unrealized gains (losses) on investments	5		4	141,612
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		:	102,747
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		22,4	158,321
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversigh audit, review, or compilation of its financial statements and selection of an independent accountant?	t of the	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	า			
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?	е	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3b		

Software ID: Software Version:

EIN: 39-0917537

Name: Experimental Aircraft Association Inc

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

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours per week (list any hours for related	more than person is and a di		ne b oth ctor/	ox, u an of trus	inless fficer tee)		(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
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
Jack Pelton	10 0	х		Х				0	0	0
Chairman of the Board Stuart Auerbach	10 0	<u> </u>								
	10 0	х		х				0	0	0
Treasurer Jim Phillips	10 0									
Secretary		X		Х				0	0	0
Marc Ausman	10 0	х						0	0	0
Director Richard Beattie	10.0	ļ								
	10 0	x						0	0	0
Director Norm DeWitt	10 0									
Director		X						0	0	0
Dan Majka	10 0	Х						0	0	0
Director Don Taylor	10.0	<u> </u>								
	10 0	x						0	0	0
Director Kermit Weeks	10 0									
Director		X						0	0	0
Barry Davis	10 0	Х						0	0	0
Director	10.0	<u> </u>								
Jack Harrington Director	10 0	x						0	0	0
David Lau	10 0									
Director		Х						0	0	0
Dan Schwinn	10 0	x						0	0	0
Director Alan Shackleton	10 0									
Past Secretary	10 0	х						0	0	0
Eileen Drake	10 0	<u> </u>						_	_	_
Director		Х						0	0	0
Phil Martineau	10 0	x						0	0	0
Director Doug Sowder	10 0					-				
Director	100	X						0	0	0
Harold Cannon	10 0									
Director		Х						0	0	0
Rick Weiss	10 0	x						0	0	0
Director Carla Larsh	10 0									
Director	100	X						0	0	0
Geoff Robison	10 0	<u> </u>						_	_	
Director		Х						0	0	0
Richard Beebe	10 0	Х						0	0	0
Director Darren Pleasance	10 0						-		_	
Director	100	x						0	0	0
Charlie Precourt	10 0									
Director		Х					L	0	0	0
Mike Goulian	10 0	х						0	0	0
Director]									

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors (A) (B) (D) (F) Name and Title Average Position (do not check Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest employe <u>8</u>0€ ♂ Individual trustee or director organizations related nstitutional Trustee mer below organizations employee dotted line) t compensated ee Keith Kocourek 10 0 Χ 0 0 0 Director Jack Dueck 10 0 Χ 0 0 0 Director James Clark 10 0 Χ 0 0 Director Cody Welch 10 0 0 0 0 Х Director as of 7/2013 Alan Klapmeier 10 0 Х 0 0 0 Director as of 7/2013 David Pasahow 10.0 Χ 0 0 0 Director as of 11/2013 Joe Brown 10 0 Χ 0 0 0 Director as of 11/2013 Dick VanGrunsven 10 0 Х 0 0 0 Director as of 11/2013 Paul Poberezny 10 0 Χ 68,563 0 670 Founder, Director Thru 8/2013 Richard Hansen 10 0 Χ Director Thru 11/2013 Eric Gurley 10 0 Х Χ Past Treasurer Thru 7/2013 Fred Telling 10 0 Χ Director Thru 7/2013 Doug Bartlett 10 0 Χ Director Thru 11/2013 Brian Wierzbinski 40 0 257,569 Χ 0 48,138 Executive VP 10 0 Elissa Lines 40 0 Х 183,331 0 42,698 Development VP Sean Elliott 40 0 Х 159,680 0 43,001 Advocacy & Gov't Relations VP 10 0 Doug McNair 40 0 Х 155,313 0 21,208 Government Relations VP Jeff Skiles 40 0 Χ 195,669 0 33,141 Communities & Mbr Prog VP Jim DiMatteo 40 0 Х 178,310 0 32,711 AirVenture F&A VP Janine Diana 40 0 Х 164,212 0 27,464 Human Resources VP Rick Larsen 40 0 148,902 0 Х 26.196 Vice President, Marketing David Goelzer 40 0 0 Х 141,842 27,718 Attorney Jeff Kaufman 40 0 Х 105,747 24,928 Director of Business Relations Mary Ann Dilling 40 0 104,213 0 0 Х Events & Hosp, Director

40 0

10 0

104,181

29,680

Χ

Tony Wihlm

Controller

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As Filed Data -

DLN: 93493342007184

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

Open to Public **Inspection**

Name of	the	organization	
Experimen	tal Aı	ircraft Association	Inc

Employer identification number

									39-0917			
	rt I			blic Charity Sta						nstructions		
ſhe	organı	zatıon ıs	not a privat	e foundation becaus	eıtıs (Forl	ınes 1 throu	ıgh 11, check	only one b	oox)			
1	Г	A churc	ch, conventi	on of churches, or a	ssociation of	churches d	escribed in s e	ection 170(b)(1)(A)(i).			
2	Γ	A scho	ol described	in section 170(b)(1	.)(A)(ii). (At	tach Schedı	ule E)					
3	Г	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descr	ıbed ın sectio	n 170(b)(1)(A)(iii).			
4	Γ	A medi	cal research	n organization operat	ted ın conjun	ction with a	hospital desc	cribed in se	ction 170(b)(1)(A)(iii). E	nter the	
_	_	hospita	l's name, cı	ty, and state								
5	ļ			erated for the benefi		or universi	ty owned or o	perated by	a governmen	tal unit desc	ribed in	
	_			A)(iv). (Complete P	•							
6	<u>_</u>	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).										
7	Г			at normally receives			support from	a governm	ental unit or f	rom the gen	eral public	
8	Г			on 170(b)(1)(A)(vi). described in sectior			nplete Part II)				
9	Ī		-	at normally receives			•	-	butions, mem	bership fees	, and gross	
		receipt	s from activ	ities related to its ex	xempt function	ons—subjec	t to certain e	xceptions,	and (2) no mo	re than 331,	/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	Γ	An orga	anızatıon org	ganized and operated	d exclusively	to test for p	oublic safety	See sect io	n 509(a)(4).			
11	Γ	An orga	anızatıon orç	ganized and operated	d exclusively	for the ben	efit of, to perf	orm the fun	ictions of, or t	o carry out	the purposes of	
				ly supported organiz						ee section 5	09(a)(3). Check	
				bes the type of supp						6	11	
	_			b Type II c			· -					
е	J	•		ox, I certify that the on managers and otl	_		,		, ,	•	•	
			509(a)(2)	on managers and oc	ner than one	or more pub	mery support	ca organiza	icions desemb	ed III seedlo	11 30 3 (4)(1) 01	
f				received a written de	etermination	from the IR	S that it is a	Type I, Typ	e II, or Type	III support	ing organizatio <u>n,</u>	
			his box						6.1		Г	
g			vugust 17, 2 ig persons?	2006, has the organi	zation accep	ited any giπ	or contribution	on from any	or the			
			.	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii))	Yes No	
		and (III)) below, the	governing body of th	e supported	organizatioi	1?			11g	(i)	
		(ii) A fa	amily memb	er of a person descri	bed in (i) abo	ove?				11g	(ii)	
		(iii) A 3	35% contro	lled entity of a perso	n described	ın (ı) or (ıı) a	above?			11g	(iii)	
h		Provide	the following	ng information about	the supporte	ed organizat	ion(s)				<u> </u>	
(i) Nam	ne of	(ii) EIN	(iii) Type of	(iv) Is t	he	(v) Did you	notify	(vi) Is	the	(vii) A mount of	
	suppor			organization	organizati		the organiz		organizat		monetary	
0	organization			(described on lines 1- 9 above	col (i) list your gove		ın col (i) o suppor		col (i) org		support	
				or IRC section	docume	_	Suppor		I III tile o	3 '		
				(see	20021110	···						
				instructions))	Yes	No	Yes	No	Yes	No	1	
						··· ·	 		+	1		
T-4-									+	1	 	

Sch	edule A (Form 990 or 990-EZ) 2013						Page 2
Pa	(Complete only if you o	hecked the bo	x on line 5, 7,	or 8 of Part I o	r if the organiza	ation failed	to qualify under
_	Part III. If the organiza ection A. Public Support	tion fails to qu	alify under the	tests listed bel	low, please con	iplete Part .	.111.)
	endar year (or fiscal year beginning	(-) 2000	(1-) 2010	(-) 2011	(4) 2012	(-) 201	(5) T. I.
	in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 201:	3 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual						
	grants ")						
2	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its						
3	behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5 from line 4						
S	ection B. Total Support	I	<u> </u>		I		I
	endar year (or fiscal year beginning	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(6) 2010	(6) 2011	(u) 2012	(e) 2013	(I) I otal
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties						
	and income from similar						
	sources						
9	Net income from unrelated						
	business activities, whether or not the business is regularly carried						
	on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV)						
11	Total support (Add lines 7 through 10)						
12	Gross receipts from related activities	es, etc (see inst	ructions)	•		12	1
13	First five years. If the Form 990 is i	for the organizati	on's first, second	l, thırd, fourth, or	fifth tax year as a	501(c)(3) o	rganızatıon, check
	this box and stop here				<u> </u>	<u> </u>	<u></u>
	ection C. Computation of Pub			4.4 1 (5)			
14	Public support percentage for 2013			11, column (f))		14	
15	Public support percentage for 2012	· ·	•			15	_
16a	33 1/3% support test—2013. If the condition have				line 14 is 33 1/3%	or more, che	ck this box
b	and stop here. The organization qua 33 1/3% support test—2012. If the				and line 15 is 33	8 1/3% or more	
	box and stop here. The organization				, 10 00	. 40.001111011	► F
17a	10%-facts-and-circumstances test-	-2013. If the org	anızatıon dıd not	check a box on lı			
	is 10% or more, and if the organizat						
	in Part IV how the organization mee	ts the "facts-and	d-circumstances'	test The organ	ızatıon qualıfıes a	s a publicly s	
Ь	organization 10%-facts-and-circumstances test-	-2012 . If the ora	anization did not	check a hov on li	ne 13 16a 16b	or 17a and L	▶ 厂
	15 is 10% or more, and if the organ						
	Explain in Part IV how the organizat						ublicly
	supported organization				4-71		▶ □
18	Private foundation. If the organizat instructions	ion aid not check	k a box on line 13	, 16a, 16b, 1/a,	or 1/p, check thi	s pox and se	e ▶□
							г,

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

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

	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🏲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2	013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	16,782,108	10,089,256	8,175,946	8,426,369	7	,722,756	51,196,435
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	19,585,237	24,389,461	23,955,334	24,013,697	25	,681,702	117,625,431
3	Gross receipts from activities that are not an unrelated trade or business under section 513		623,950	618,705	262,771		424,600	1,930,026
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							0
5	The value of services or facilities furnished by a governmental unit to the organization without charge							0
6	Total. Add lines 1 through 5	36,367,345	35,102,667	32,749,985	32,702,837	33	,829,058	170,751,892
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	149,122	137,665	181,393	299,730		294,811	1,062,721
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	635,619	575,170	822,935	762,458		597,751	3,393,933
_	year Add lines 7a and 7b	784,741	712,835	1,004,328	1,062,188		892,562	4,456,654
8	Public support (Subtract line 7c from line 6)	,	,	, ,	, ,			166,295,238
Se	ction B. Total Support			<u>.</u>	•		•	
Cale	ndar year (or fiscal year beginning in) 🏲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 20	13	(f) Total
9	Amounts from line 6	36,367,345	35,102,667	32,749,985	32,702,837	33	,829,058	170,751,892
10a	Gross income from interest,	55,551,515	33,232,333				,,	
104	dividends, payments received on securities loans, rents, royalties and income from similar sources	524,433	684,459	991,058	1,104,351	1,	,093,859	4,398,160
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							0
C	Add lines 10a and 10b	524,433	684,459	991,058	1,104,351	1	,093,859	4,398,160
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	405,321	10,147	75,478	7,078		387,934	885,958
13	Total support. (Add lines 9, 10c, 11, and 12)	37,297,099	35,797,273	33,816,521	33,814,266		,310,851	176,036,010
14	First five years. If the Form 990 is check this box and stop here			, thırd, fourth, or t	fifth tax year as a	501(c)(3) organ	ızatıon, ▶┌
	ction C. Computation of Pub			10			1	
15 16	Public support percentage for 2013 Public support percentage from 203		•	13, column (†))		15		94 467 %
			·			16	I	94 755 %
<u>Se</u> 17	ction D. Computation of Inv Investment income percentage for				n (f))	17	I	2 498 %
18	Investment income percentage from					18		2 209 %
19a	33 1/3% support tests—2013. If the	e organization did	not check the bo	x on line 14, and	line 15 is more t	han 33 _{1/}	3% , and	

more than 33 $^{1/3}\%$, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶✓

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

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									
Retu	ırn Reference	Explanation								
		Schodulo A / Form 000 o	000 E7) 201							

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493342007184

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

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

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

	me of the organization erimental Aircraft Association Inc			Employer ider	ntification number
LXP	erimental Aliciait Association Inc			39-0917537	
ar	t I-A Complete if the or	ganization is exempt under	section 501(c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect politic	al campaign act	ıvıtıes ın Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the or	ganization is exempt under	section 501(c)(3).	
1	•	e tax incurred by the organization und			
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
4a	Was a correction made?				☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt under :	section 501(c), except section 50)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ction 527 exemp	ot function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to otl	ner organizations	s for section 527 ▶	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 112	0-POL, line 17b ►	\$
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments l amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fro rectly delivered	m the filing organization's to a separate political orga	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of politica contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

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

- A Check ► If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)
- B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

		Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) lobbying expenditures to influence public opinion (grass roots lobbying)					
a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)					
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)		157,735			
c	Total lobbying expenditures (add lines 1a and 1b)		157,735			
d	Other exempt purpose expenditures	31,918,011					
e	Total exempt purpose expenditures (add lines 1	32,075,746					
f	Lobbying nontaxable amount Enter the amount f		1,000,000				
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:					
	Not over \$500,000	20% of the amount on line 1e					
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000					
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000					
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000					
	Over \$17,000,000	\$1,000,000					
g	Grassroots nontaxable amount (enter 25% of lin	ue 1f)		250,000			
h	Subtract line 1g from line 1a If zero or less, ento	er -0 -	l				
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	l				
j	If there is an amount other than zero on either lin	ne 1h or line 1i, did the organization file Form 47	20 rep	ortina			

4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expend	litures During	4-Year Avera	ging Period		
	Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c	Total lobbying expenditures	240,000	240,000	240,000	157,735	877,735
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f_	Grassroots lobbying expenditures	0	0	0	0	0

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	g Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	.	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 0 (101111 330 01 330 12) 2013		i age -i
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

DLN: 93493342007184

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990)

Open to Public

ntema	Revenue Service and its instruct	ions is at <u>www.irs.gov/10111990</u> .		Inspect	ion
	me of the organization perimental Aircraft Association Inc		Employer identificat	ion numbe	er
			39-0917537		
Pa	organizations Maintaining Donor Adv organization answered "Yes" to Form 990		inds or Accounts.	Complet	te if the
	organization answered fes to Form 990	(a) Donor advised funds	(b) Funds and of	theraccou	ınts
1	Total number at end of year	(a) a since a same	(2) / 11112 1111 1		
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 advisor funds are the organization's property, subject to the or	<u> </u>	or advised	┌ Yes	Г №
6	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the benef	onor advisors in writing that grant funds o		-	-
	conferring impermissible private benefit?			Yes	No
	rt II Conservation Easements. Complete if		Form 990, Part IV,	line 7.	
1	Purpose(s) of conservation easements held by the org Preservation of land for public use (e g , recreation Protection of natural habitat	or education) Preservation of an	historically important ertified historic structi		
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	a qualified conservation contribution in th —	ne form of a conservati	on	
			Held at the E	nd of the	Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
С	Number of conservation easements on a certified histo	` `	2c		
d	Number of conservation easements included in (c) acq historic structure listed in the National Register	juired after 8/17/06, and not on a	2d		
3	Number of conservation easements modified, transferr	ed, released, extinguished, or terminated	d by the organization d	urıng	
	the tax year ►				
4	Number of states where property subject to conservat	ion easement is located ►			
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?	the periodic monitoring, inspection, hand	ling of violations, and	☐ Yes	┌ No
6	Staff and volunteer hours devoted to monitoring, inspe	cting, and enforcing conservation easem	ents during the year		
7	Amount of expenses incurred in monitoring, inspecting \$\blue\$\$, and enforcing conservation easements	during the year		
8	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?	d) above satisfy the requirements of sect	cion 170(h)(4)(B)(ı)	┌ Yes	┌ No
9	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial :			
Par	t III Organizations Maintaining Collection Complete if the organization answered "Y	s of Art, Historical Treasures, o es" to Form 990, Part IV, line 8.	or Other Similar A	ssets.	
1a	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide, in Part XIII, the text of the footnote t	ts held for public exhibition, education, o	r research in furtherar		
b	If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asse service, provide the following amounts relating to thes	ts held for public exhibition, education, o			ıc
	(i) Revenues included in Form 990, Part VIII, line 1		► \$		11,000
	(ii) Assets included in Form 990, Part X		▶ \$	2,66	58,425
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS				
а	Revenues included in Form 990, Part VIII, line 1		► \$		

b Assets included in Form 990, Part X

Par	Organizations Maintaining Co	<u>llections of Art,</u>	His	<u>tori</u>	<u>cal Tı</u>	reası	ures, or Ot	<u>the</u>	<u>r Similar As</u>	sets (continued)
3	Using the organization's acquisition, access collection items (check all that apply)	on, and other record	ls, ch	neck a	any of	the fol	lowing that a	re a	significant use	e of its	
а	Public exhibition		d	Γ	Loan	orexo	hange progra	ams			
b	Scholarly research		e		Othe	r SCF	IOOL AGE E	DUC	CATION PROG	RAMS	
c	Preservation for future generations										
4	Provide a description of the organization's co Part XIII	ollections and explai	n hov	v the	/ furthe	er the	organızatıon'	's ex	empt purpose	ın	
5	During the year, did the organization solicit of										<u>-</u>
Day	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the	·								┌ Yes	✓ No
Pell	Part IV, line 9, or reported an an						ii aliswelet	1 1	es to roilli	, ,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?						or other asse	ets i		┌ Yes	
b	If "Yes," explain the arrangement in Part XII	I and complete the f	follov	ving t	able						
									Ar	nount	
C	Beginning balance							1c			
d	Additions during the year							1d			
е	Distributions during the year						<u> </u>	1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							☐ Yes	∏ No
ь	If "Yes," explain the arrangement in Part XII	I Check here if the	expla	anatı	on has	been	provided in P	art :	XIII		<u> </u>
Pa	rt V Endowment Funds. Complete							_			
1a	Beginning of year balance	(a)Current year	(b))Prior	/ear	b (c)	wo years back	(d)	Three years back	(e)Four	years back
ь	Contributions										
c	Net investment earnings, gains, and losses										
·											
d	Grants or scholarships										
е	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the curi	ent year end balanc	e (lın	e 1g,	colum	n (a))	held as				
а	Board designated or quasi-endowment 🕨										
ь	Permanent endowment -										
c	Temporarily restricted endowment ►										
_	The percentages in lines 2a, 2b, and 2c show	uld equal 100%									
За	Are there endowment funds not in the posses	ssion of the organiza	tion	that a	re hel	dand	admınıstered	for	the		
	organization by								<u> </u>	Yes	s No
	(i) unrelated organizations			•		•		•	3a	• •	
ь	(ii) related organizations							•	<u> 3a(</u>		<u> </u>
4	Describe in Part XIII the intended uses of th	·				-		-			
Par	t VI Land, Buildings, and Equipme		he o	rgan	ızatıoı	n ans	wered 'Yes'	to	Form 990, Pa	art IV,	line
	11a. See Form 990, Part X, line : Description of property	10.		(2)	Cost or	othor	(b)Cost or otl	hor	(c) Accumulated	(4)	Book value
	Description of property				s (invest		basis (other		depreciation	(a) [ook value
1-	Land			-			3.000	OFF		+	2 060 055
	Land						2,960, 6,526,) EQE 43	:0	2,960,055
	Leasehold improvements		•				19,198,		2,585,43 5,973,58		3,940,931 13,224,706
	Equipment		•				12,494,		11,051,42		1,442,970
	 O.th.a.u						7,953,		6,703,48	_	1,249,926
	I. Add lines 1a through 1e <i>(Column (d) must e</i>		, colu	mn (i	3), line	10(c).				+	22,818,588
		·		•							990) 2013

Part VII Investments—Other Securities. Co See Form 990, Part X, line 12.	mplete if the organization	answered 'Yes' to Form	m 990, Part IV, line 11b.
(a) Description of security or category	(b)Book value	(c) Method of va	
(including name of security)		Cost or end-of-year r	narket value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<u>* </u>		000 D 1777 L 44
Part VIII Investments—Program Related. C See Form 990, Part X, line 13.	omplete if the organization	n answered 'Yes' to Fo	rm 990, Part IV, line 11c
(a) Description of investment	(b) Book value	(c) Method of va	luation
		Cost or end-of-year r	market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	on anguared 'Vac' to Form 0.00	Dort IV line 11d Coe F	form 000 Dort V line 15
(a) Desc		, raitiv, ille iiu see r	(b) Book value
(1) IN PROCESS	•		666,842
(2) AND COMPONENTS			2,205,136
(3) LIBRARY AND ART			463,289
Total. (Column (b) must equal Form 990, Part X, col.(B) line			3,335,267
Part X Other Liabilities. Complete if the org	anızatıon answered 'Yes' t	o Form 990, Part IV, li	ne 11e or 11f. See
Form 990, Part X, line 25. (a) Description of liability	(b) Book value		
<u>-</u>			
DEFERRED COMPENSATION	418,967		
REVENUE BOND INTEREST SWAP			
REVENUE DOND INTEREST SWAF	79,523		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	498,490		
2. Liability for uncertain tax positions In Part XIII, provid	le the text of the footnote to th	ue organization's financial	statements that

Part	ΧI		evenue per Audited Financial Statements With Revenue p	er R	eturn Complete if
1	Total		ered 'Yes' to Form 990, Part IV, line 12a. support per audited financial statements	1	38,955,102
2			not on Form 990, Part VIII, line 12		30,733,102
a			nents		
b		<u>-</u>	culties		
C					
d		. , -			
e		ines 2a through 2d .	2,721,012	2e	3,842,587
3		J		3	35,112,515
4			, Part VIII, line 12, but not on line 1		33,112,313
a			ded on Form 990, Part VIII, line 7b . 4a		
b		·			
c			7,510	4c	7,310
5			4c. (This must equal Form 990, Part I, line 12)	5	35,119,825
Part	_		penses per Audited Financial Statements With Expenses		<u> </u>
			wered 'Yes' to Form 990, Part IV, line 12a.	ρυ.	
1	Total	expenses and losses per	audited financial statements	1	35,366,664
2	A mou	unts included on line 1 but	not on Form 990, Part IX, line 25		
а	Dona	ted services and use of fac	cilities 2a 679,163		
b	Prior	year adjustments			
С	Othe	rlosses			
d	Othe	r (Describe in Part XIII)			
e	Addl	ines 2a through 2d		2e	3,298,228
3	Subtr	act line 2e from line 1 .		3	32,068,436
4			, Part IX, line 25, but not on line 1:		, ,
а			ded on Form 990, Part VIII, line 7b 4a		
b					
c				4c	7,310
5			d 4c. (This must equal Form 990, Part I, line 18)	5	32,075,746
		Supplemental Info			32,073,710
	', lıne		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
	Re	eturn Reference	Explanation		
ORGAN	es ex	fart and historical empt purpose TION'S LIABILITY FOR	Schedule D, Part III, Line 4 EAA, ALONG WITH THE EAA AVIATION FOR MAINTAINS A COLLECTION OF HISTORIC ARTIFACTS AND ARCHINTO THE HISTORY OF RECREATIONAL AVIATION - NUMBERING APP AIRPLANES, 400 ENGINES, 20,000 OTHER ARTIFACTS, 20,000 BOO 1 2 MILLION PHOTOGRAPHS AND 6,000 HOURS OF FILM AND VIDE ARE USED FOR EDUCATIONAL PURPOSES, THROUGH THE EXHIBITS WORLD-RENOWNED AIRVENTURE MUSEUM THE MUSEUM IS OPEN OFFERS A PUBLIC RESEARCH LIBRARY, AND IS ACCESSIBLE THROUWEBSITES THAT ATTRACT OVER 10 MILLION VISITS PER YEAR SCHEDULE D, PART X AS REQUIRED BY THE UNCERTAIN TAX POSITASSOCIATION AND THE FOUNDATION RECOGNIZE THE FINANCIA	/AL M ROXI KS AI O TH S AND TO TH JGH A	MATERIALS RELATED MATELY 200 ND PERIODICALS, ESE COLLECTIONS D PROGRAMS OF THE HE GENERAL PUBLIC, A SERIES OF GUIDANCE, THE
		740-10	OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVAN WOULD MORE-LIKELY-THAN-NOT SUSTAIN THE POSITION FOLLOW POSITIONS MEETING THE MORE-LIKELY-THAN-NOT THRESHOLD, RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE LARGEST BE GREATER THAN 50 PERCENT LIKELIHOOD OF BEING REALIZED UPOSETTLEMENT WITH THE RELEVANT TAX AUTHORITY THE ASSOCIA FOUNDATION APPLIED THE UNCERTAIN TAX POSITION GUIDANCE FOR WHICH THE STATUTE OF LIMITATIONS REMAINED OPEN AND WERE NO MATERIAL UNRECOGNIZED TAX BENEFITS AS OF FEBRUAFEBRUARY 28, 2013 AS OF FEBRUARY 28, 2014 THE STATUTE OF LONGER OPEN FOR YEARS BEFORE 2011 FOR FEDERAL INCOME TAINCOME TAX PURPOSES, THE STATUTE OF LIMITATIONS IS NO LOBEFORE 2010 THERE WERE NO INTEREST OR PENALTIES RELATED HAVE BEEN ACCRUED OR RECOGNIZED AS OF AND FOR THE YEARS 2014 AND FEBRUARY 28, 2013	NTT VING THE A ENEFI ON UL TION ETO DETE RY 28 IMITA X PUF NGER TO II	AX AUTHORITY AN AUDIT FOR TAX MOUNT T THAT HAS A TIMATE AND THE ALL TAX POSITIONS RMINED THERE 8, 2014 AND ATIONS IS NO RPOSES FOR STATE COPEN FOR YEARS
990, P	ART V	ON LINE 1 NOT FORM /III, LINE 12	SCHEDULE D, PART XI, LINE 2D COST OF GOODS SOLD \$1,957,378 EXPENSES 614,387 GAMING DIRECT EXPENSES 47,300 UNREALIZE RATE SWAP AGREEMENT 102,747 TOTAL \$2,721,812		
VIII, L	INE 1	IN FORM 990, PART 2, NOT LINE 1	SCHEDULE D, PART XI, LINE 4B Income tax expense \$7,310) F112.	DDA ICING DIRECT
		N LINE 1, NOT FORM X, LINE 25	SCHEDULE D, PART XII, LINE 2D COST OF GOODS SOLD \$1,957,378 EXPENSES 614,387 GAMING DIRECT EXPENSES 47,300 TOTAL \$2,6		
		N FORM 990, PART IX,	SCHEDULE D, PART XII, LINE 4B Income tax expense \$7,310	/ 0	
		T LINE 1			

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

DLN: 93493342007184

OMB No 1545-0047

(Form 990 or 990-EZ)

SCHEDULE G

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.

Open to Public Inspection

Department of the Treasury Attach to Form 990 or Form 990-EZ. Internal Revenue Service Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

perimental Aircraft Association	on Inc					
permiental Amerate Association	on 1110				39-0917537	
art I Fundraising Act Form 990-EZ filer	t ivities. Complet s are not required	e if the o	rganızatı plete thıs	on answered "Yes" t part.	to Form 990, Part IV	, line 17.
Indicate whether the organ	nization raised funds	through a	ny of the f	ollowing activities Che	eck all that apply	
Mail solicitations		J		Solicitation of non		
Internet and email sol	ıcıtatıons		f	Solicitation of gov		
Phone solicitations			а	Special fundraisin	=	
In-person solicitations	5		9	, Special landraisin	gevents	
Did the organization have a or key employees listed in						Г _{Yes} Г г
If "Yes," list the ten higher to be compensated at leas			(fundraisei	rs) pursuant to agreem	ents under which the fu	ndraiser is
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrai cust con	i) Did iser have tody or trol of butions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
_		Yes	No			
1						
2						
3			1			
4						
5						
6						
7						
,						
8						
9						
0						
-						
tal			>			
List all states in which the registration or licensing	organization is regis	stered or l	ıcensed to	solicit contributions o	r has been notified it is	exempt from

_		G (Form 990 or 990-EZ) 2013		1 10 7 11 1	- 000 B + 71/	Page 2
Pai		Fundraising Events. Con more than \$15,000 of funda events with gross receipts (raising event contribut			
		events with gross receipts	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
			(event type)	Hops & Props (event type)	(total number)	col (c))
₽	1	Gross receipts	3,129,967			3,346,567
Revenue	2	Less Contributions	3,023,967	7		3,023,967
<u>~</u>	3	Gross income (line 1 minus line 2)	106,000	109,203	107,397	322,600
	4	Cash prizes				
မှာ	5	Noncash prizes				
Expenses	6	Rent/facility costs	88,940	2,138		91,078
	7	Food and beverages .	82,626	29,147		111,773
Direct	8	Entertainment	1,500	4,800		6,300
Δ	9	Other direct expenses .	359,607	23,000	22,629	405,236
	10	Direct expense summary Add In	nes 4 through 9 ın columr	n (d)		(614,387)
	11	Net income summary Subtract I	ine 10 from line 3, columi	n (d)		-291,787
Par	t II	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted more than
Revenue		\$10,000 on rollings 22, ii	(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u></u>	1	Gross revenue			102,000	102,000
see	2	Cash prizes			7,500	7,500
xpenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u></u>	5	Other direct expenses			39,800	39,800
	6	Volunteer labor		☐ Yes	✓ Yes100 000 %✓ No	
	7	Direct expense summary Add line	es 2 through 5 in column ((d)	•	47,300
	8	Net gaming income summary Sub	tract line 7 from line 1, co	olumn (d)		54,700
9	Ent	ter the state(s) in which the organiz	ation operates gaming ac	tivities WI		
a b	Is	the organization licensed to operate	e gaming activities in eac	h of these states?		
10a b		re any of the organization's gaming 'Yes," explain	licenses revoked, suspei	nded or terminated during	the tax year?	· · 「Yes 「No

oes	the organiza	tion operate gaming act	tivities with nonmembers?		. Vyas ENa
. 2				or a member of a partnership or other entity	· I Yes I No
	=	= :	•	· · · · · · · · · · · · · · · · · · ·	F., F.,
.3		e percentage of gaming a			· · · I Yes I* No
a					13a 100 000 %
	_			F	13b %
4				rganization's gaming/special events books an	
	Name 🟲	TONY WIHLM			
	Address 🟲	3000 Poberezny Roa Oshkosh, WI 54902	d		
5a	Does the or	ganızatıon have a contra	act with a third party from	whom the organization receives gaming	
					,
b	If "Yes," ent	ter the amount of gamın	g revenue received by the	organization 🟲 \$ and	the
	amount of g	amıng revenue retaıned	by the third party 🟲 \$		
C	If "Yes," ent	ter name and address o	f the third party		
	Name 🟲				
	Address 🟲				
5	Gamıng mar	nager information			
	Name 🟲	TONY WIHLM			
	Gaming mar	nager compensation 🟲 \$	3		
	Description	of services provided 🕨	CONTRIBUTIONS CON	TROLLER AND VOLUNTEER COORDINATO	R
	┌ Director	/officer	Employee	☐ Independent contractor	
	Mandatory o	,			
а			tate law to make charitab	le distributions from the gaming proceeds to	
	retain the st	tate gaming license? .			
b			quired under state law dis	tributed to other exempt organizations or spe	
	ın the organ	ızatıon's own exempt ac	· tivities during the tax yea	ır ▶ \$	
ar	t IV Sup Part	plemental Informa	ation. Provide the exp 15b, 15c, 16, and 17b	lanations required by Part I, line 2b, col , as applicable. Also complete this part	
	Retu	ırn Reference		Explanation	
— А М	ING ACTIVI			III GAMING INCLUDES THE YOUNG EAGLE S SUPPORT EAA'S MISSION TO GROW THE	

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

DLN: 93493342007184 OMB No 1545-0047

Open to Public

Department of the Treasury

Schedule I

(Form 990)

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

Internal Revenue Service	► Inforn	nation about Schedule I	(Form 990) and its ins	tructions is at <u>www.ir</u> .	<u>s.gov/form990</u> .		Inspection
Name of the organization Experimental Aircraft Association	tion Inc					Employer identif	ication number
Experimental Afficiant Associa	tion the					39-0917537	
Part I General Infor	mation on Grants	and Assistance					
Does the organization methe selection criteria useDescribe in Part IV the organization	ed to award the grants or organization's procedur	or assistance? res for monitoring the us	e of grant funds in the	United States			Г Yes Г N
		Governments and recipient that receive					d "Yes" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Kiddie Hawk Air Academy 26 W Dry Creek Circle Ste 600 Littl Littleton,CO 80120	84-1482078	501(c)(3)	12,000				Educational Scholarships
(2) Oshkosh Area United Way 36 Broad St Ste 100 Oshkosh, WI 54901	39-1017908	501(c)(3)	12,342				General support
(3) EAA Warbirds of America Inc 3000 Poberezny Rd Oshkosh, WI 54902	39-1411316	501(c)(3)	6,655				General Support
(4) Tribute to Bob Hoover LLC 18925 Alta Vista Dr Brookfield, WI 53045	46-3595696		15,000				General Support

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

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

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 assistan	ce	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book FMV, appraisal, other)	, (f) Description of non-cash assistance
(1) Flight Training Assistance		15	41,000			
(2) Education Scholarshps		18	56,300			
(3) Stipend		8	2,800			
(4) Air Academy Support		47		36,244	FMV	CAMP TUITION
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					
Organization's Procedures for	Schedule I, Part I, Line 2 STUDENT SCHOLARSHIPS ARE AWARDED BASED ON DONOR DESIGNED CRITERIA THESE PARAMETERS COULD					

Return Reference

Organization's Procedures for Monitoring Use of Grant Funds

Schedule I, Part I, Line 2 STUDENT SCHOLARSHIPS ARE AWARDED BASED ON DONOR DESIGNED CRITERIA THESE PARAMETERS COULD INCLUDE GEOGRAPHIC LOCATION, GENDER, FINANCIAL NEED OR A DIVERSITY REQUEST THE DONOR IS NOT INVOLVED IN THE SELECTION PROCESS, AS THE SCHOLARSHIPS ARE AWARDED THROUGH AN INDEPENDENT SELECTION COMMITTEE AIR ACADEMY SUPPORT, EDUCATION SCHOLARSHIPS AND STIPENDS ARE AWARDED BASED ON DONOR DESIGNED CRITERIA THESE PARAMETERS COULD INCLUDE GEOGRAPHIC LOCATION, GENDER, FINANCIAL NEED OR A DIVERSITY REQUEST THE DONOR IS NOT INVOLVED IN THE SELECTION PROCESS, INDEPENDENT SELECTION COMMITTEES AWARD THE ASSISTANCE FLIGHT TRAINING ASSISTANCE IS AWARDED THROUGH AN INDEPENDENT SELECTION COMMITTEE AND IS BASED UPON A STUDENT'S POTENTIAL TO SUCCEED IN BECOMING A PILOT GRANTS PAID TO OTHER ORGANIZATIONS ARE AWARDED BY A CROSS-FUNCTIONAL GROUP OF EMPLOYEES WHO DETERMINE WHETHER THE RECEIVING ORGANIZATION'S ACTIVITIES ARE IN ALIGNMENT WITH THE MISSION OF EAA

DLN: 93493342007184

OMB No 1545-0047

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.

Open to Public Inspection

Name of the organization Experimental Aircraft Association Inc **Employer identification number**

39-0917537

Pa	art I Questions Regarding Compensation	·			
				Yes	No
1a	Check the appropriate box(es) if the organization provided any 990, Part VII, Section A, line 1a Complete Part III to provide				
	First-class or charter travel	lousing allowance or residence for personal use			
	Travel for companions	ayments for business use of personal residence			
	Tax idemnification and gross-up payments	lealth or social club dues or initiation fees			
	☐ Discretionary spending account ☐ P	ersonal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization reimbursement or provision of all of the expenses described al		1b		
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?				
3	Indicate which, if any, of the following the filing organization us organization's CEO/Executive Director Check all that apply l used by a related organization to establish compensation of th	Do not check any boxes for methods			
	▼ Compensation committee ▼ W	Vritten employment contract			
	✓ Independent compensation consultant ✓ C	Compensation survey or study			
	Form 990 of other organizations	approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Sor a related organization	Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?				
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?				
c Participate in, or receive payment from, an equity-based compensation arrangement?					Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the	applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must comple	te lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, d compensation contingent on the revenues of				
а	The organization?		5a	Yes	
	Any related organization?		5b	103	No
ט	If "Yes," to line 5a or 5b, describe in Part III		<u> </u>		INO
6	For persons listed in Form 990, Part VII, Section A, line 1a, d compensation contingent on the net earnings of	lid the organization pay or accrue any			
а	The organization?		6a	Yes	
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III				
7	For persons listed in Form 990, Part VII, Section A, line 1a, d payments not described in lines 5 and 6? If "Yes," describe in		7		No
8	Were any amounts reported in Form 990, Part VII, paid or acc	cured pursuant to a contract that was			
	subject to the initial contract exception described in Regulation				
	ın Part III		8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable section 53 $4958-6(c)$?	le presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) 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	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
(1)Brian Wierzbinski Executive VP	(i) (ii)	214,032 0	43,537 0	0	25,824 0	26,600 0	309,993 0	0
(2)Elissa Lines Development VP	(i) (ii)	147,048 0	30,447 0	5,836 0	19,092 0	26,075 0	228,498 0	0
(3)Sean Elliott Advocacy & Gov't Relations VP	(i) (ii)		24,908 0	0	14,815 0	29,939 0	204,434 0	0 0
(4)Doug McNair Government Relations VP	(i) (ii)	154,813 0	500 0	0	14,027 0	8,014 0	177,35 4 0	0
(5)Jeff Skiles Communities & Mbr Prog VP	(i) (ii)	167,577 0	28,092 0	0	8,189 0	27,562 0	231,420	0
(6)Jım DıMatteo AırVenture F&A VP	(i) (ii)	150,712 0	27,598 0	0	7,459 0	27,476 0	213,245 0	0
(7)Janine Diana Human Resources VP	(i) (ii)	134,790 0	29,422 0	0	7,150 0	21,825 0	193,187 0	0
(8) Rick Larsen Vice President, Marketing	(i) (ii)	146,509 0	0	2,393 0	7,593 0	20,212	176,707 0	0
(9) David Goelzer Attorney	(i) (ii)	140,942	900	0	11,380 0	16,759 0	169,981 0	0

Schedule J (Form 990) 2013

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
PARTICIPATION IN PAYMENT FROM SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	Schedule J, Part I, Line 4b PERSONS LISTED IN FORM 990, PART VII, SECTION A, LINE 1A THAT PARTICIPATED IN, OR RECEIVED PAYMENT FROM, A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN INCLUDE PAUL POBEREZNY AMOUNT \$ 68,563
Compensation contingent on REVENUES OF THE ORGANIZATION	Schedule J, Part I, Line 5a ONE OF THE CATEGORIES USED TO DETERMINE INCENTIVE COMPENSATION FOR THE PRESIDENT AND KEY EMPLOYEES IS GROSS OPERATING REVENUE
Compensation contingent on net earnings of the Organization	Schedule J, Part I, Line 6a ONE OF THE CATEGORIES USED TO DETERMINE INCENTIVE COMPENSATION FOR THE PRESIDENT AND KEY EMPLOYEES IS NET OPERATING INCOME
Comparable Compensation Data	SCHEDULE J, PART I, LINE 3 THE ORGANIZATION'S PROCESS FOR DETERMINING COMPENSATION TAKES INTO ACCOUNT COMPENSATION LEVELS OF COMPARABLE POSITIONS IN PEER ORGANIZATIONS

Schedule J (Form 990) 2013

Additional Data

Software ID: Software Version:

EIN: 39-0917537

Name: Experimental Aircraft Association Inc

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
Brian Wierzbinski Executive VP	(I) (II)		43,537 0	0	25,824 0	26,600 0	309,993 0	0
Elissa Lines Development VP	(I) (II)	· I	30,447 0	5,836 0	19,092 0	26,075 0	228,498 0	0
Sean Elliott Advocacy & Gov't Relations VP	(I) (II)	· I	24,908 0	0	14,815 0	29,939 0	204,434 0	0
Doug McNair Government Relations VP	(I) (II)		500 0	0	14,027 0	8,014 0	177,354 0	0
Jeff Skiles Communities & Mbr Prog VP	(I) (II)		28,092 0	0	8,189 0	27,562 0	231,420	0
Jim DiMatteo AirVenture F&A VP	(I) (II)		27,598 0	0	7,459 0	27,476 0	213,245 0	0
Janine Diana Human Resources VP	(I) (II)	1	29,422 0	0	7,150 0	21,825 0	193,187 0	0
Rick Larsen Vice President, Marketing	(ı) (ıı)		0	2,393	7,593 0	20,212	176,707 0	0
David Goelzer Attorney	(I) (II)		900	0	11,380 0	16,759 0	169,981	0

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Schedule K

(Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

► Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

► Attach to Form 990. ► See separate instructions.

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

DLN: 93493342007184OMB No. 1545-0047

2013

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Inspection

Name of the organization Employer identification number Experimental Aircraft Association Inc 39-0917537 Part I **Bond Issues** (h) On (i) Pool (g) Defeased behalf of financing (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose ıssuer Yes No Yes No Yes No Town of Nekimi Airventure Grounds Capital Imp 10.000.000 39-6083771 07-01-2009 Χ Χ Part II **Proceeds** В С D Α Amount of bonds retired 0 Amount of bonds legally defeased 2 Total proceeds of issue 3 10.000.000 Gross proceeds in reserve funds 4 5 Capitalized interest from proceeds Proceeds in refunding escrows 6 7 Issuance costs from proceeds Credit enhancement from proceeds 8 Working capital expenditures from proceeds 9 Capital expenditures from proceeds 8,800,000 10 Other spent proceeds 11 Other unspent proceeds 12 1,200,000 Year of substantial completion 13 2028 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue? Χ 14 Were the bonds issued as part of an advance refunding issue? Χ 15 Has the final allocation of proceeds been made? Χ 16 Does the organization maintain adequate books and records to support the final 17 Χ allocation of proceeds? Part III **Private Business Use** Α В C D Yes No Yes No Yes No Yes No

property financed by tax-exempt bonds?

financed property?

2

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bond-

Χ

Χ

Par	Private Business Use (Continued)									
			ı	4		В		С		D
		ļ	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private bus of bond-financed property?			Х						
b	If "Yes" to line 3a, does the organization routinely engage bond counsel or oth outside counsel to review any management or service contracts relating to the property?									
С	Are there any research agreements that may result in private business use of financed property?	f bond-		Х						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or oth outside counsel to review any research agreements relating to the financed pr									
4	Enter the percentage of financed property used in a private business use by enother than a section 501(c)(3) organization or a state or local government	entities ►		0 %		•				•
5	Enter the percentage of financed property used in a private business use as a unrelated trade or business activity carried on by your organization, another s 501(c)(3) organization, or a state or local government			0 %						
6	Total of lines 4 and 5			0 %						
7	Does the bond issue meet the private security or payment test?			Х						
8a	Has there been a sale or disposition of any of the bond financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds issued?			х						
ь	If "Yes" to line 8a, enter the percentage of bond-financed property sold or dis	posed of		0 %				•		•
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sec 1 141-12 and 1 145-2?	ctions		х						
9	Has the organization established written procedures to ensure that all nonqua bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?		Х							
Par	t IV Arbitrage									
	_	Α	1		В		С		D	
	L	Yes	No	Yes	No	Y	es	No	Yes	No
1	Has the issuer filed Form 8038-T?		Х							
2	If "No" to line 1, did the following apply?									
а	Rebate not due yet?									
b	Exception to rebate?	Χ								
С	No rebate due?									
	If you checked "No rebate due" in line 2c, provide in Part VI the date the rebate computation was performed									
3	Is the bond issue a variable rate issue?	Χ								
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X								
b		SSOCIATEI ORP	D BANK							
С	Term of hedge		5							
d	Was the hedge superintegrated?		Х							
е	Was the hedge terminated?		Х							

Part IV Arbitrage (Continued)

Return Reference

	<u> </u>	A		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		х						
b	Name of provider	0							
С	Term of GIC								
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6	Were any gross proceeds invested beyond an available temporary period?		х						
7	Has the organization established written procedures to monitor the requirements of section 148?		x						
Pa	rt V Procedures To Undertake Corrective Action								
		А		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
	Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		х						
P	art VI Supplemental Information. Provide additional inform	mation for res	ponses to qu	estions on S	chedule K (s	ee instructio	ns).		

Explanation

Schedule K (Form 990) 2013

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DLN: 93493342007184

OMB No 1545-0047

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.

Open to Public Inspection

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Name of the organization Experimental Aircraft Association Inc

Employer identification number

39-0917537

Pa	Tt 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	Method of noncash contr		_	nts
1	Art—Works of art			-				
_	Art—Historical treasures .							
	Art—Fractional interests							
	Books and publications							
	Clothing and household goods							
6	Cars and other vehicles	Х	3	8,000	Fair Market Value	3		
7	Boats and planes	Х	5	59,322	Fair Market Value	3		
8	Intellectual property							
9	Securities—Publicly traded .	Χ	9	47,249	Fair Market Value	9		
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							
	Collectibles							
	Food inventory							
	Drugs and medical supplies .							
	Taxidermy							
	Historical artifacts	Х	1	11,000	Fair Market Value	2		
	Scientific specimens							
	Archeological artifacts							
	Other ► (ations - Auction)	X	120	478,851	Fair Market Value	3		
26	Other ► (nsor Donations)	Х	5	235,087	Fair Market Value	9		
	Other • (<u> </u>	1	30.048	Fair Market Value			
Swe	epstakes Prizes) Other • (_	·				
	day Auction Items) Other ► (. X	38		Fair Market Value			
Non	Other ► (-Airventure Sponsor Donations)	^	14	59,145	Fair Market Value	=		
	Other►(neras and Film)	Х	1	24,876	Fair Market Value	2		
29	Number of Forms 8283 received by th for which the organization completed F				9			2
							Yes	No
30a	During the year, did the organization							
	it must hold for at least three years fr	om the date	e of the initial contribution,	, and which is not required	d to be used			
	for exempt purposes for the entire ho	ldıng period	[?]			30a		Νo
b	If "Yes," describe the arrangement in	Part II						
31	Does the organization have a gift acc					31	Yes	<u> </u>
32a	Does the organization hire or use thir contributions?		related organizations to s	olicit, process, or sell noi	ncash • • •	32a	Yes	
b	If "Yes," describe in Part II							
33	If the organization did not report an a describe in Part II	mount in co	lumn (c) for a type of prop	erty for which column (a)	ıs checked,			

32b, and 33, and wl	ormation. Provide the information required by Part I, lines 30b, nether the organization is reporting in Part I, column (b), the number of contributions, the ceived, or a combination of both. Also complete this part for any additional information.
Return Reference	Explanation
Contributions	SCHEDULE M, QUESTION 32B EXPERIMENTAL AIRCRAFT ASSOCIATION USES BC ZIEGLER AS A BROKER FOR SECURITIES BC ZIEGLER PROCESSES AND SELLS SECURITIES CONTRIBUTIONS UNDER THE DIRECTION OF EXPERIMENTAL AIRCRAFT ASSOCIATION EXPERIMENTAL AIRCRAFT ASSOCIATION USES A THIRD PARTY LIQUIDATOR, CHARLES PARNELL, TO SELL AND DISPOSE OF AIRCRAFT PARTS AND NON-COMMISSIONED COLLECTION ITEMS

Schedule M (Form 990) (2013)

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SCHEDULE 0

(Form 990 or 990-EZ)

Name of the organization Experimental Aircraft Association Inc

DLN: 93493342007184

Inspection

OMB No 1545-0047

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. Department of the Treasury Internal Revenue Service

► 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.

39-0917537

Employer identification number

	39-0917537
90 Schedule O, Supplemental Info	rmation
Return Reference	Explanation
ORGANIZATION NAME	FORM 990, LINE C THE ORGANIZATION'S LEGAL NAME IS "EXPERIMENTAL AIRCRAFT ASSOCIATION, INC " BUT IS ALSO REFERRED TO SIMPLY AS "EAA"
CLASSES OF MEMBERS AND THEIR RIGHTS	Form 990, Part VI, Line 6 EXPERIMENTAL AIRCRAFT ASSOCIATION, INC. HAS APPROXIMATELY
	188,00
	0 MEMBERS ALL MEMBERS 18 YEARS OF AGE AND OLDER ARE ALLOWED TO VOTE ON LIMITED BUSINESS D
	ECISIONS OF THE ORGANIZATION
Classes of Persons with Certain Board- Election Rights	Form 990, Part VI, Line 7a MEMBERS OF EXPERIMENTAL AIRCRAFT ASSOCIATION, INC. CAN VOTE DIRECTLY FOR BOARD OF DIRECTORS CANDIDATES
Classes of Persons with Certain Approval	Form 990, Part VI, Line 7b DECISIONS TO MERGE OR CONSOLIDATE WITH OTHER
Rights	CORPORATIONS OR BU SINESSES AND DECICIONS TO SELL, LEASE, EXCHANGE OR OTHERWISE DISPOSE OF ALL,
	OR SUBSTANTIA LLY ALL, OF THE PROPERTY AND ASSETS OF THE ORGANIZATION WOULD REQUIRE A VOTE
	OF THE MEMBER SHIP
STATEMENT CONCERNING Local Chapter,	Form 990, Part VI, Line 10b EXPERIMENTAL AIRCRAFT ASSOCIATION, INC. HAS DESIGNATED
Affiliate, or Branch Activities	"CHAPTE RS" BUT SUCH CHAPTERS DO NOT MEET THE DEFINITION OF "CHAPTERS" WITHIN THE
	MEANING PROVIDED
	BY FORM 990 INSTRUCTIONS EXPERIMENTAL AIRCRAFT ASSOCIATION, INC DOES NOT HAVE LEGAL AUT
	HORITY TO EXERCISE SUPERVISION AND CONTROL OVER THE AFFAIRS OF THE AFFILIATED CHAPTERS AC
	CORDINGLY, THE ORGANIZATION HAS ANSWERED FORM 990, PART VI, LINE 10A "NO"
Process the Organization Uses to Review	Form 990, Part VI, Line 11 THE FORM 990 WAS PREPARED BY A NATIONAL ACCOUNTING
Form 990	FIRM AND REV IEWED BY ORGANIZATION MANAGEMENT THE AUDIT COMMITTEE OF THE BOARD REVIEWED
	A DRAFT COPY O F THE RETURN WITH MANAGEMENT AND THE INDEPENDENT TAX RETURN PREPARERS AFTER
	APPROVAL BY T HE AUDIT COMMITTEE, THE FORM 990 WAS UPDATED TO INCORPORATE ANY NECESSARY
	CHANGES AND A CO
	PY OF THE RETURN WAS PROVIDED ELECTRONICALLY TO THE CONTROLLER TO DISTRIBUTE TO THE ENTIRE
	BOARD OF DIRECTORS WITH A REQUEST FOR FEEDBACK SUBSEQUENT TO RECEIPT OF FEEDBACK, NECESS
	ARY CHANGES WERE MADE TO THE DRAFT FORM 990 THE FINALIZED VERSION OF FORM
	990 WAS PROVIDE D TO ALL MEMBERS OF THE BOARD OF DIRECTORS AND THEN FILED WITH THE IRS ON OR
	BEFORE THE JA NUARY 15, 2015 EXTENDED FILING DEADLINE
Organization's Practices for Monitoring	Form 990, Part VI, Line 12c ALL OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED
Conflicts of Interest	TO SIG N THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IN-HOUSE LEGAL COUNSEL
	REVIEWS ALL FORMS
	ANY DISCLOSURES NOTED ARE BROUGHT TO THE ATTENTION OF THE AUDIT COMMITTEE FOR REVIEW
PROCESS FOR DETERMINING	Form 990, Part VI, Line 15a THE PRESIDENT/CEO POSITION IS CURRENTLY VACANT THE HR & GOVER
COMPENSATION OF TOP MANAGEMENT	NANCE COMMITTEE MAKES DECISIONS ABOUT THE PRESIDENT/CEO'S TOTAL COMPENSATION
	IN CLOSED SES SION WITHOUT THE PRESENCE OF THE PRESIDENT/CEO AN OUTSIDE ANALYSIS IS DONE
	EVALUATING COM PARABLE ORGANIZATIONS AS WELL AS A MARKET ANALYSIS OF LIKE POSITIONS THIS
	PROCEDURE WAS P
Decease for determining componential of	ERFORMED IN FEBRUARY, 2012 AND AGAIN IN APRIL, 2014 Form 990, Part VI, Line 15b AN OUTSIDE MARKET ANALYSIS IS DONE FOR THE SENIOR
Process for determining comepensation of officers and key employees	LEADERSHIP T
	EAM AND PRESENTED TO THE HR & GOVERNANCE COMMITTEE. THE COMMITTEE, IN PARTNERSHIP WITH THE
	CHAIRMAN OF THE BOARD, DETERMINE THE TOTAL COMPENSATION FOR THE SENIOR TEAM THIS PROCEDU
	RE WAS PERFORMED IN FEBRUARY, 2014 AND AGAIN IN APRIL, 2014 CHANGES TO THE
	OVERALL COMPEN SATION OF THE SENIOR TEAM HAS BEEN MINIMAL SINCE THE LAST REVIEW AN INTERNAL
	COMPARABLE M ARKET ANALYSIS IS DONE FOR ALL OTHER POSITIONS AND IS TYPICALLY DONE EVERY
	COUPLE OF YEARS UNLESS MARKET CONDITIONS SHIFT THIS PROCEDURE WAS LAST PERFORMED IN APRIL,
	2014 STATES
	WITH WHICH A COPY OF FORM 990 MUST BE FILED FORM 990, PART VI, LINE 17 THE ORGANIZATION FI
	LES IN THE LISTED STATES FOR CHARITABLE REGISTRATION PURPOSES
Organization's Policy Regarding Making Certain Documents Public	FORM 990, PART VI, LINES 18 & 19 THE 2014 FISCAL YEAR FORM 990 WILL BE POSTED TO ORGANIZAT
Coltain Bodanono . 22.2	ION'S WEBSITE, WWW EAA ORG UPON THE FILING OF THE RETURN WITH THE IRS THE ANNUAL AUDITED
	FINANCIAL STATEMENT IS AVAILABLE ON THE ORGANIZATION'S WEBSITE, WWW EAA ORG
	THE ORGANIZAT ION'S GOVERNING DOCUMENTS ARE ALSO AVAILABLE UPON REQUEST, EITHER IN HARD
	COPY OR ELECTRON IC FORM, WHICHEVER IS REQUESTED
Other changes in net assets or fund	Part XI, Line 9 Unrealized Gain on interest rate swap \$102,747
FORM 990 PART IX LINE 11G	DESCRIPTION AIRVENTURE WASTE/CLEANING SRVC TOTAL FEES 668911
FORM 990 PART IX LINE 11G	DESCRIPTION AIRVENTORE WASTE/CLEANING SRVC TOTAL FEES 600911 DESCRIPTION MEMBERSHIP ACQUISITION TOTAL FEES 242326
FORM 990 PART IX LINE 11G	DESCRIPTION SPORT AVIATION CONTRACTORS TOTAL FEES 165294
FORM 990 PART IX LINE 11G	DESCRIPTION MEMBERSHIP RENEWAL SERVICES TOTAL FEES 98193
FORM 990 PART IX LINE 11G	DESCRIPTION MEMBERSHIP CONSULTING TOTAL FEES 102560

DESCRIPTION OUTSIDE SERVICES TOTAL FEES 1993652

FORM 990 PART IX LINE 11G

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DLN: 93493342007184

OMB No 1545-0047

2013

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SCHEDULE R Related Organizations and Unrelated Partnerships

(Form 990)

Department of the Treasury

Internal Revenue Service

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.

Name of the organization Experimental Aircraft Association Inc Employer identification number

39-0917537

(a)	(b)	(c)	(d)	(e)		(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income E	nd-of-year assets	D	rect controlling entity		
		,,				<i>,</i>		
art II Identification of Related Tax-Exempt Orgor more related tax-exempt organizations duri		the organization ar	nswered "Yes" o	n Form 990, Pa	art IV,	line 34 because it	had on	e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	n Public charity s (if section 501)		(f) Direct controlling entity	Section (13) co ent	512(b
							Yes	No
) EAA AVIATION FOUNDATION INC	SUPPORT EAA	WI	501(C)(3)	7		EAA	Yes	
BOX 3086								
HKOSH, WI 54903 -1033301								

(a) Name, address, and EIN of related organization		(b) Primary activit	(c) Legal domicile (state or foreign country)	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		prtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man part	j) eral or aging :ner?	(k) Percentag ownersh
					314)			Yes	No]	Yes	No	
V Identification of Related Org								were	d "Yes	" on Form	990,	Part	IV,
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)		(d) Direct controllin entity	(e) Type of entit (C corp, S corp, or trust)	y Share of income	total Share e of	(g) e of end- year ssets		(h) ercentage ownership	Section (b) cont	i) on 512 (13) rolled tity?	!
					1	<u> </u>			_		Yes		No
					_	+			_				+

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

Yes No

1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more i	elated organizations li	sted in Parts II-IV?									
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity				1a		No					
b	Gift, grant, or capital contribution to related organization(s)				1b		No					
c	Gift, grant, or capital contribution from related organization(s)				1 c	Yes						
d	Loans or loan guarantees to or for related organization(s)				1d		No					
e	Loans or loan guarantees by related organization(s)				1e		No					
f	Dividends from related organization(s)				1f		No					
g	Sale of assets to related organization(s)				1g		No					
h	h Purchase of assets from related organization(s)											
i												
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		No					
k	k Lease of facilities, equipment, or other assets from related organization(s)											
ı	I Performance of services or membership or fundraising solicitations for related organization(s)											
m	m Performance of services or membership or fundraising solicitations by related organization(s)											
n	n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)											
0	Sharing of paid employees with related organization(s)				10		No					
р	Reimbursement paid to related organization(s) for expenses				1 p		No					
q	Reimbursement paid by related organization(s) for expenses				1q		No					
r	O ther transfer of cash or property to related organization(s)				1r		No					
s	Other transfer of cash or property from related organization(s)				1s		No					
_2	If the answer to any of the above is "Yes," see the instructions for information on who must complet											
	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	unt II	nvolved						
(1) E/	AA AVIATION FOUNDATION INC	С	1,087,119	FMV								
(2) E/	AA AVIATION FOUNDATION INC	К	1,009,703	FMV								
(3) E/	AA AVIATION FOUNDATION INC	L	950,860	FMV								
				<u> </u>								

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

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

revenue) that was not a related organization. See instructions i													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) anizations?	(f) Share of total Income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ⁷	_	(i) Code V ² UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	_	(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	
													_
			<u> </u>				l					<u> </u>	

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013