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Form 990

# Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public

Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection 6/30/2014 For the 2013 calendar year, or tax year beginning 7/1/2013 and ending American Action Network, Inc. Employer Identification number Check if applicable Doing Business As American Action Network, Inc. Address change Number and street (or P.O. box if mail is not delivered to street address) Room/suite 27-0730508 Name change 1747 Pennsylvania Avenue NW 5th fl Telephone number Initial return City or town ZIP code (202) 559-6420 Washington DC DC 20006 Terminated Foreign postal code Foreign country name Foreign province/state/county Amended return G Gross receipts \$ 9,445,000 F Name and address of principal officer: Application pending H(a) is this a group return for subordinates? Michael Shields 1747 Pennsylvania Ave NW 5th fl., Washington DC, 201 H(b) Are all subordinates included? If "No." attach a list. (see instructions) 501(c)(3) X 501(c) ( 4 ) ◀ (insert no ) Website: ► www.americanactionnetwork.org H(c) Group exemption number X Corporation Trust K Form of organization: Association L Year of formation 2009 M State of legal domicile: DE Part I Summary Briefly describe the organization's mission or most significant activities: The American Action Network will create, & Governance encourage and promote center-right policies based on the principles of freedom, limited government, American exceptionalism, and strong national security. Check this box • if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . . . Number of independent voting members of the governing body (Part VI, line 1b). 4 12 Activities Total number of individuals employed in calendar year 2013 (Part V, line 2a) . . . 5 19 Total number of volunteers (estimate if necessary) . . . . . . . . . 6 12 Total unrelated business revenue from Part VIII, column (C), line 12. 0 7a Net unrelated business taxable income from Form 990-T, line 34. 0 Prior Year **Current Year** Contributions and grants (Part VIII, line 1h) . . . . . . 23,578,433 9,445,000 Program service revenue (Part VIII, line 2g) . . . . . . . 0 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d). 0 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e). 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12). 24,423,083 9,445,000 11,472,633 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . . 996,001 14 Benefits paid to or for members (Part IX, column (A), line 4). Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 974,467 882,340 16a Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . 612,289 245,490 Total fundraising expenses (Part IX, column (D), line 25) ▶ 4 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . . 21,142,382 7,252,816 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 18 34,201,771 9,376,647 19 Revenue less expenses. Subtract line 18 from line 12. 9,778,688 68.353 End of Year Beginning of Current Year Total assets (Part X, line 16) . . . 20 4,657,277 5,488,942 Total liabilities (Part X, line 26) . . . . . . 21 248,464 474,587 22 Net assets or fund balances. Subtract line 21 from line 20 4,408,813 5,014,375 Signature Block Under penalties of perjury, I dectare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 5/15/2015 Sign Signature of officer Here Michael Shields President Type or print name and title Pont/Type preparer's name Check X if Aon Proch, CPA Paid Jonathan T Proch, CPA 5/15/2015 self-employed Preparer Firm's name ► Jonathan T Proch LLC CPA Firm's EIN > 20-0762207 **Use Only** Firm's address > 1 Research Ct., Ste 450, Rockville, MD 20850 301-253-8686 Phone no. May the IRS discuss this return with the preparer shown above? (see instructions) . . . . . . . . . Yes X No For Paperwork Reduction Act Notice, see the separate instructions.





Form **990** (2013)

Form 9	90 (2013)	American Action Network, Inc	27-0730508	Page <b>2</b>
Pa	rt III	Statement of Program Service Accomplishments		[ <del></del> ]
		Check if Schedule O contains a response or note to any line in this Part III	<del> </del>	X
1		escribe the organization's mission		
	on the r	erican Action Network will create, encourage and promote center-right policies based inciples of freedom, limited government, American exceptionalism, and strong		·
	national	security.		
2		organization undertake any significant program services during the year which were not listed on		
	•	Form 990 or 990-EZ?	Yes	X No
		describe these new services on Schedule O.		
3	Did the services	organization cease conducting, or make significant changes in how it conducts, any program	X Yes	□No
		describe these changes on Schedule O.	X Yes	
4		e the organization's program service accomplishments for each of its three largest program service.	ces, as measured by	
		es. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and		
	the total	expenses, and revenue, if any, for each program service reported.		
4a	(Code	) (Expenses \$ 5,163,528 including grants of \$ 440,000 ) (Reve		
		cy American Action Network conducted extensive issue advocacy and grassroots mobilization, grassroots to television advertising, direct mail, automated phone calls, digital advocacy, public		
		surveys, public policy events, grassroots advocacy and print advertising to constituencies		
	across t	he country advocating for, among other things, supporting immigration reform, the repeal		
	legislati	on concerning fiscal, regulatory and entitlement reforms		
4b	(Code	) (Expenses \$ including grants of \$ ) (Reve	enue \$	)
				<b></b>
				·
4c	(Code	) (Expenses \$including grants of \$) (Reve	enue \$	)
				· <b>-</b>
			•	
4d	Other or	ogram services. (Describe in Schedule O.)		
<b>→</b> u	(Expens		0)	
4e		ogram service expenses > 5,163,528	<del></del>	_

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,"			ĺ
	complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I.	3	Х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	ŀ		
	Part III	5		x
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			i
	"Yes," complete Schedule D, Part I	6		x
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		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	Ť		
•	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt			i
	negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	٣		Ĥ
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	Ě		
• •	VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
a	Schedule D, Part VI.	11a	х	İ
h	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	IIa		$\vdash$
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	110		<del>  ^</del>
C	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	44.		x
		11c		<del>  ^</del>
a	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	444		V
_	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	<u>X</u>	_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	İ
40.	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Х	-
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			İ
	Schedule D, Parts XI and XII	12a	X	$\vdash$
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
40	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
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		X
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		<u> </u>
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		X
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	Χ.	<u> </u>
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		X
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part	Checklist of Required Schedules (continued)			
			Yes	No
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	х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			}
	employees? If "Yes," complete Schedule J	23	x	
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than		<u> </u>	
244	\$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		x
			<del>                                     </del>	^-
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	_	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١.,	ļ	
_	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	<u> </u>	
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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		X
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		х
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? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	<del></del>		<u> </u>
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
_	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28a		X
a		20a		<del>  ^</del>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	206		l
	Schedule L, Part IV	28b		Х
C /	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			١.,
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
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	L	X
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	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	$\overline{}$	1
	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	x	l
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		<u> </u>	T
	organization? If "Yes," complete Schedule R, Part V, line 2	36		l
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	130	<del>                                     </del>	$\vdash$
J1	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI .	27		,
20		37	-	<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		١	
	19? Note. All Form 990 filers are required to complete Schedule O	38	ιX	i .

_Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		,	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			l
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		<u> </u>	<del> </del>
_	gaming (gambling) winnings to prize winners?	1c	X	₩
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			ł
	Statements, filed for the calendar year ending with or within the year covered by this return		X	<del>                                     </del>
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	-^-	┢
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	$\vdash$	┝
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			┢
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		x
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCen Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			$\mathbf{I}_{}$
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		$oxed{oxed}$
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Х	ـــــ
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b	X	₩
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		├
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		╁
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	76		$\vdash$
·	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>		$\vdash$
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	l	1
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			<u> </u>
	organization, have excess business holdings at any time during the year?	8	<u> </u>	╙
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the organization make any taxable distributions under section 4966?	9a	<u> </u>	⊢
. b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	⊢
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12			
a b	Initiation fees and capital contributions included on Part VIII, line 12			
11	Section 501(c)(12) organizations. Enter			•
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			ŀ
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u>L</u>
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	igsqcup	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O			
Ь	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	الما	<del></del>	<del>                                     </del>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b	$\vdash \vdash$	<u>X</u>
b	n res, has it lieu a norm rzo to report these payments rii ivo, provide an explanation in Schequie V	, 14D	. '	1

Form 990 (2013) American Action Network, Inc. 27-0730508 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No Part VI response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI......... Section A. Governing Body and Management No Enter the number of voting members of the governing body at the end of the tax year . . . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent . . . 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Χ any other officer, director, trustee, or key employee? . . . . . . . . . . Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?. Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?. 4 Did the organization become aware during the year of a significant diversion of the organization's assets?. 5 5 Did the organization have members or stockholders?. Did the organization have members, stockholders, or other persons who had the power to elect or appoint b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . . . . . . . . . . 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? . . 8a 8b Х Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O. . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?... 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?. 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a 12b Х Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 13 Did the organization have a written document retention and destruction policy?... 14 Х Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ The organization's CEO, Executive Director, or top management official . 15a Other officers or key employees of the organization . 15b X If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed ► CT, FL, PA, UT, VA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website 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.

State the name, physical address, and telephone number of the person who possesses the books and records of the

1747 Pennsylvania Avenue NW 5th fl, Washington DC, 20006

organization 

The organization

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Form 990 (2013)	American Action Network, Inc. 27-0730508	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated	
	Employees, and Independent Contractors Check if Schedule O contains a response or note to any line in this Part VII	. <b>X</b>
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, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

Position (A) (B) (do not check more than one (D) Name and Title Reportable Average box, unless person is both an Reportable Estimated hours per officer and a director/trustee) compensation compensation amount of week (list any from related Highest compensated Individual trustee Institutional trustee Key employee employee compensation hours for organizations director related organization (W-2/1099-MISC) from the organization organizations (W-2/1099-MISC) below dotted and related line) organizations 2.00 (1) Norm Coleman Director, Chairman 0.25 Х (2) Fred Malek 1.00 0.25 X X Director, Treasurer (3) Isaac Appibaum 1.00 Director (4) Rick Berg 1.00 Director 1.00 (5) Dylan Glenn Director (6) Luis Fortuno 1.00 Director 1.00 (7) Jeff Larson Х Director (8) Jim Nussle 1.00 Director X (9) Tom Reynolds 1.00 Director 0.25 (10) Gregory Slayton 1.00 Director 1.00 (11) Vin Weber 0.25 Director, Secretary (12) Barry Jackson 1.00 Director 32.25 (13) Brian Walsh

3.75

18.50

10.00

President

(14) Trent Edwards

**Director of Development** 

5,796

5,051

28,950

35,625

244,324

65,712

Pa	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) Name and title		(B) Average hours per week (list any	box, offic	unle: er an	Pos neck ss pe d a d	rson irecto	than o	an ee)	(D) Reportable compensation from	(E) Reportable compensation from related	ation amount of		
			hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key emptoyee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	fr org an	ipensation the anization of relate	on ed
(15)	Hope Hudson		23.25		Ī									
	ctor of Development		13.75		_			Х	L	67,278	40,139			417
(16)														
(17)														
(18)											-			
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b	Sub-total									377,314	104,714		11	,264
c d	Total from continuation shee Total (add lines 1b and 1c).	•	ecuon A							377,314	0 104,714		11	.264
2	Total number of individuals (in													,204
	reportable compensation from					3			_		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
,													Yes	No
3	Did the organization list any for employee on line 1a? If "Yes,"			-	•	loye	e, o	r hıg	hes	t compensated		3		X
4	For any individual listed on line	-				n a	nd c	 ther	· ·	nnensation from		-		
•	the organization and related o		•	•						•	h			
	indıvıdual											4	X	
5	Did any person listed on line 1		•			•			•					
	for services rendered to the or		es," complete Sc	hedu	ıle J	for	suc	h pei	sor	<u> </u>	<u> </u>	5		Χ.
Sec 1	tion B. Independent Contracts  Complete this table for your five		nested indepen	iont (	cont	ract	orc	that		awad mara than t	\$100,000 of			
•	compensation from the organi year.	•	•									tax		
	Na	(A) ame and business add	ress							(B) Description of sen	vices (	(C) Compen		
Inspe			Suite 100, Kenr			A 3	014	4	em	ployee leasing s	ervices		1,359	,985
	Mohler Consulting LLC 3 W Irving St, Chevy Chase, MD 20815 media advocacy services 958,000													
	rt Media Group LLC		e, Alexandria, VA		01					edia advocacy se				,676
	P Data Trust LLC rica Rising LLC		Arlington, VA 22 vd Ste 307, Arlin		1/^	221	200		_	ta modeling serv	ices			000
2	Total number of independent of							d abo	_	who received			400	,000
	more than \$100,000 of compe			<b>•</b>				9		·				

27-0730508

Part VIII Statement of Revenue

		Check if Schedule O contains	a response or r	note to any line in	this Part VIII			🔲
	-				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
FR 00	1a	Federated campaigns	<u>1a</u>	0				
	b	Membership dues	1b	0				
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	1c	0				
<u>₽</u> ₹	d	Related organizations		0				
o, ≣	е	Government grants (contributions		0				
ig ig								
돌	·	similar amounts not included abo		9,445,000				
풀 읽	g	Noncash contributions included in li	· · · · · · <u> </u>	0				
ပိန်	h	Total. Add lines 1a-1f	•		9,445,000			
_	- 11	Total. Add lines ra-11		Business Code	9,445,000			
5	2-			240111000 0000		·		
8	2a				0			
5	b				0			<u> </u>
돌	C				0		_	
S	d				0			
E	е				0			ļ
Program Service Revenue	f	All other program service revenue		L	0			
•	g	Total. Add lines 2a-2f			0			
	3	Investment income (including div						
					0			
	4	Income from investment of tax-ex			0			
	5	Royalties	<u> </u>	<u></u> ▶	0			
			(ı) Real	(ii) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	C	Rental income or (loss)	0	0				
	d	Net rental income or (loss)			0			l
	7a	Gross amount from sales of	(ı) Secunties	(II) Other				
		assets other than inventory	0	0				
	b	Less: cost or other basis						
		and sales expenses	0	l o				
	С	Gain or (loss)	0	0				
	d	Net gain or (loss)			ol			
enu	8a	Gross income from fundraising						
		events (not including \$	0					
Other Reve		of contributions reported on line 1						
		See Part IV, line 18		l o				
ᆲᅵ	b	Less direct expenses		0				
ō	C	Net income or (loss) from fundral		•	· ol			
	9a	Gross income from gaming activity					· · · · · · · · · · · · · · · · · · ·	
	-	See Part IV, line 19		l o	İ			
	b	Less direct expenses		- 0	İ			
	c	Net income or (loss) from gaming					~	
		Gross sales of inventory, less	acaraco					
	104	returns and allowances	•	ام				
	ь	Less cost of goods sold		- 0	}			! !
	с	Net income or (loss) from sales o	i mvemory	Business Code	0			<del> </del>
- 1	11a			Busiliess Code	ار	ŀ		
I	TTA b				0			<del> </del>
ĺ				<del></del>				
	C	All other revenue		<del></del>	0			<del></del>
	d	All other revenue		<u> </u>	0			<u> </u>
	e 42	Total Add lines 11a-11d			0 145 000			
	12	Total revenue. See instructions		<u>.</u> . <b>&gt;</b>	9,445,000	0	0	

### Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response or note to any line in this Part IX					
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses	
1	Grants and other assistance to governments and					
	organizations in the United States. See Part IV, line 21	996,001	996,001			
2	Grants and other assistance to individuals in the					
	United States. See Part IV, line 22	0				
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	297,158	186,2 <u>6</u> 9	44,819	66,070	
6	Compensation not included above, to disqualified					
	persons (as defined under section 4958(f)(1)) and					
_	persons described in section 4958(c)(3)(B)	505 400	474 000	222 224	474.070	
7	Other salaries and wages	585,182	171,906	239,204	174,072	
8	Pension plan accruals and contributions (include	o				
9	section 401(k) and 403(b) employer contributions) Other employee benefits	0				
10	Payroll taxes	0				
11	Fees for services (non-employees):	<u> </u>				
'' a	Management	اه				
b	Legal	807,917	395,839	215,798	196,280	
C	Accounting	89,188	000,000	89,188	150,200	
d	Lobbying	3,766,248	3,766,248	- 00,100		
e	Professional fundraising services. See Part IV, line 17.	245,490	0,7 00,2 10		245,490	
f	Investment management fees	0				
g	Other (If line 11g amount exceeds 10% of line 25, column	1				
Ū	(A) amount, list line 11g expenses on Schedule O)	1,945,671	1,913,344	32,171	156	
12	Advertising and promotion	0	· · · · <u>- · · · · - · · · · · · · · · ·</u>			
13	Office expenses	87,558	40,040	24,467	23,051	
14	Information technology	66,182	37,791	14,868	13,523	
15	Royalties	0				
16	Occupancy	378,858	185,621	101,195	92,042	
17	Travel	36,369	4,437	5,905	26,027	
18	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials	0				
19	Conferences, conventions, and meetings	14,766	2,482	1,258	11,026	
20	Interest	0				
21	Payments to affiliates	0				
22	Depreciation, depletion, and amortization	22,507	11,027	6,012	5,468	
23	Insurance	3,947		3,947		
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.)  Dues and subscriptions	22 605	20 605			
a b		33,605	28,605		5,000	
C		0				
d		0				
e	All other expenses	0		<del></del>		
25	Total functional expenses. Add lines 1 through 24e .	9,376,647	7,739,610	778,832	858,205	
26	Joint costs. Complete this line only if the	2,0.0,011	. ,,, 55,510		555,256	
	organization reported in column (B) joint costs	j				
	from a combined educational campaign and	İ				
	fundraising solicitation. Check here ▶ ☐ if					
	following SOP 98-2 (ASC 958-720)					

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5	D 1 Ol 4	
Part X	Balance Sheet	
, ares	Datation City	

		Check if Schedule O contains a response or	note to	any line in this Part X .			<i>.</i>
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			4,385,562	1	5,275,991
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			0	3	0
	4	Accounts receivable, net	0	4	0		
	5	Loans and other receivables from current and for			- "		
		trustees, key employees, and highest compensation					
		Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified person		<u> </u>			
		4958(f)(1)), persons described in section 4958(c)(3)(B), a	•				
		sponsoring organizations of section 501(c)(9) voluntary e					
22	i	organizations (see instructions). Complete Part II of Sche				6	
Assets	7	Notes and loans receivable, net			155,655	7	114,899
Ą	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges		_	36,856	9	3,556
	10a	Land, buildings, and equipment cost or	ı i i	ı · · · · · · ·	50,050		0,000
	''"	other basis. Complete Part VI of Schedule D	10a	128,887			
	Ь		10b	56,798	27,988	10c	72,089
	11	Investments—publicly traded securities			27,000	11	0
	12	Investments—other securities. See Part IV, line			0	12	0
	13	Investments—program-related. See Part IV, line		· · · · · · · · · · · · · · · · · · ·		13	0
	14	Intangible assets		14	0		
	15	Other assets. See Part IV, line 11	51,216		22,407		
	16	Total assets. Add lines 1 through 15 (must equ	4,657,277	16	5,488,942		
	17	Accounts payable and accrued expenses			248,464	17	254,272
	18	Grants payable			240,404	18	204,212
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
60	22	Loans and other payables to current and former					
Liabilities	22	trustees, key employees, highest compensated					
<u>≡</u>		disqualified persons. Complete Part II of Schedi				22	
<u>.</u>	,,	Secured mortgages and notes payable to unrela			0	23	0
_	23	Unsecured notes and loans payable to unrelate		-	0	24	-0
	24 25	Other liabilities (including federal income tax, pa		-	<u> </u>		<u> </u>
	25	· · · · · · · · · · · · · · · · · · ·	-				
		parties, and other liabilities not included on lines		). Complete	0	25	220,295
	۰.	Part X of Schedule D			248,464	26	474,567
	26	Total liabilities. Add lines 17 through 25			240,404	20	474,507
ø	İ	Organizations that follow SFAS 117 (ASC 95		ck here ▶ X and			
<u> </u>		complete lines 27 through 29, and lines 33 ar	nd 34.				
直	27	Unrestricted net assets			4,408,813	27	5,014,375
8	28	Temporarily restricted net assets				28	
P	29	Permanently restricted net assets				29	
or Fund Balances		Organizations that do not follow SFAS 117 (ASC958),	check l	here   and			
ō		complete lines 30 through 34.		_			
इ	30	Capital stock or trust principal, or current funds		-		30	
Net Assets	31	Paid-in or capital surplus, or land, building, or e				31	
ţ	32	Retained earnings, endowment, accumulated in		<u> </u>		32	
2	33	Total net assets or fund balances			4,408,813		5,014,375
	34	Total liabilities and net assets/fund balances			4,657,277	34	5,488,942
					.,,		<u> </u>

Column (B))  Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  Accounting method used to prepare the Form 990	Form 9	990 (2013) American Action Network, Inc	27-07	30508	Pag	<sub>je</sub> 12
Total revenue (must equal Part VIII, column (A), line 12). 1 9,445,000  Total expenses (must equal Part IX, column (A), line 25). 2 9,376,647  Revenue less expenses. Subtract line 2 from line 1 3 68,353  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 4,408,813  Net unrealized gains (losses) on investments 5  Donated services and use of facilities 6  Investment expenses 7  Prior period adjustments 7  Net assets or fund balances (explain in Schedule O). 9 537,209  Other changes in net assets or fund balances (explain in Schedule O). 9 537,209  Other changes in net assets or fund balances (explain in Schedule O). 9 537,209  Check if Schedule O contains a response or note to any line in this Part XII.	Part	XI Reconciliation of Net Assets		_	<u>-</u>	
Total expenses (must equal Part IX, column (A), line 25).  Revenue less expenses. Subtract line 2 from line 1. 3 68,353  Net ansests or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 4,408,813  Net unrealized gains (losses) on investments 5  Donated services and use of facilities 6  Donated services and use of facilities 7  Investment expenses 7  Prior period adjustments 9  Other changes in net assets or fund balances (explain in Schedule O). 9 537,209  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.		Check if Schedule O contains a response or note to any line in this Part XI				X
Revenue less expenses. Subtract line 2 from line 1	1	Total revenue (must equal Part VIII, column (A), line 12)	1		9,445	5,000
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).  4	2	Total expenses (must equal Part IX, column (A), line 25).	2		9,376	,647
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O). 9 \$ 537,209 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X 2f If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis, or both Separate basis Separate basis Consolidated basis, or both Separate basis Separate basis Separate basis Separate basis Separate basis Separate basis Separate Se	3	Revenue less expenses. Subtract line 2 from line 1	3		68	3,353
6 Donated services and use of facilities 7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O). 9 \$537,209 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)). 10 \$5,014,375  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,408	3,813
7 Investment expenses 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990  Cash  Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a  X  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis in Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  2b  X  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis in Both consolidated and separate basis  c If "Yes," to line 2 a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain by in Schedule O and describe any steps taken to undergo such audits	5	Net unrealized gains (losses) on investments	5			
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O). 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a X  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  2c X  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  3a X  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O). 9 537,209 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)).  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990	8	Prior period adjustments	8			
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.  1 Accounting method used to prepare the Form 990	9	Other changes in net assets or fund balances (explain in Schedule O)	9		537	<sup>7</sup> ,209
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.    Accounting method used to prepare the Form 990	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
Check if Schedule O contains a response or note to any line in this Part XII			10		5,014	<u> 1,375</u>
Accounting method used to prepare the Form 990	Part	· · · · · · · · · · · · · · · · · · ·				_
Accounting method used to prepare the Form 990		Check if Schedule O contains a response or note to any line in this Part XII				<u>ட</u>
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?					Yes	No
Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b	1	Accounting method used to prepare the Form 990 Cash X Accrual Other				
Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  Separate basis  Consolidated basis  Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  3a X  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b		If the organization changed its method of accounting from a prior year or checked "Other," explain in				
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b		Schedule O.				
reviewed on a separate basis, consolidated basis, or both  Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
Separate basis Consolidated basis Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits  3b		reviewed on a separate basis, consolidated basis, or both				
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		Separate basis Consolidated basis Both consolidated and separate basis				1
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	b	Were the organization's financial statements audited by an independent accountant?		2b	X	
separate basis, consolidated basis, or both  X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		· · · · · · · · · · · · · · · · · · ·				
X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		·				
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?						
the audit, review, or compilation of its financial statements and selection of an independent accountant?						
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  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?	·	, g		20	X	
Schedule O.  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?		·			<u> </u>	
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?						
the Single Audit Act and OMB Circular A-133?	32					
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	Ja			3a		l x
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3b	h		•	<u> </u>		广
				3b		
Form <b>990</b> (2013)					990	(2013)

#### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► 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

• 3	section 501(c)(3) organization	is that have NOT filed Form 5766 (election	on under section 50	r(n)). Complete Part II-B. Do n	iot complete Part II-A.
	_	Yes," to Form 990, Part IV, line 5 (Pro	ky Tax) or Form 99	0-EZ, Part V, line 35c (Proxy	/ Tax), then
	Section 501(c)(4), (5), or (6) one of organization	rganizations Complete Part III.		Emplana	er identification number
	•			Employe	27-0730508
	erican Action Network, Inc.	the organization is exempt und	ler section 501	(c) or is a section 527 (	
1		he organization's direct and indirect p			Jiganization.
2					2.576.082
3					C
Pa		the organization is exempt und			
1	Enter the amount of any	excise tax incurred by the organization	on under section 49	955 ▶ \$	•••••
2	Enter the amount of any	excise tax incurred by organization m	anagers under se	ction 4955 <b>&gt;</b> \$	<u></u>
3	•	ed a section 4955 tax, did it file Form			. Yes No
4a	Was a correction made?				. Yes No
	If "Yes," describe in Part				
Pa		the organization is exempt und			(c)(3).
1	Enter the amount directly	expended by the filing organization f	for section 527 exe	empt function	
					2,522,219
2	Enter the amount of the f	iling organization's funds contributed	to other organizati	ions	
		unction activities			
3	Total exempt function exp	penditures. Add lines 1 and 2. Enter h	nere and on Form	1120-POL,	0.500.040
_	line 17b			> \$	2,522,219
4		file Form 1120-POL for this year?.			
5		ses and employer identification numb ents. For each organization listed, en			
		entributions received that were prompt			
		d fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(6) 2.114	filing organization's	contributions received and
				funds If none, enter -0	promptly and directly delivered to a separate
					political organization. If none, enter -0-
					none, enter o
(1)					
<del>\ ''</del>					
(2)					
(3)					
(4)					
(5)					
(6)					

Sch	edule C (Form 990 or 990-EZ) 2013					Page 2
Р	art II-A Complete if the organization	on is exempt	under section 5	01(c)(3) and filed	Form 5768 (ele	ction
	under section 501(h)).					
Α	Check ▶ if the filing organization b	elongs to an a	affiliated group (a	nd list in Part IV e	each affiliated gro	up member's
	name, address, EIN, exp	enses, and sh	are of excess lob	bying expenditur	es).	
В	Check ▶ ☐ If the filing organization of	hecked box A	and "limited conf	rol" provisions ap	ply.	
_	l imits on Lob	bying Expendit	tures		(a) Filing	(b) Affiliated
	(The term "expenditures" n				organization's totals	group totals
1a	Total lobbying expenditures to influence pu	ıblıc opinion (gra	iss roots lobbying)		_	0
b	Total lobbying expenditures to influence a					0
C	Total lobbying expenditures (add lines 1a a	-			0	0
d	Other exempt purpose expenditures				-	0
e	Total exempt purpose expenditures (add li				0	0
f	Lobbying nontaxable amount. Enter the an					
	columns		_		0	0
	If the amount on line 1e, column (a) or (b) is	: The lobbyir	ng nontaxable amou	int is:		
	Not over \$500,000		mount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plu	us 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,500,000		us 10% of the excess			
	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%				0	0
h	Subtract line 1g from line 1a. If zero or less				0	<u> </u>
i	Subtract line 1f from line 1c If zero or less		•		0	0
j	If there is an amount other than zero on eit					
	section 4911 tax for this year?					Yes No
	4	-Year Averaging	Period Under Se	ction 501(h)		
	(Some organizations that					
	columns below	w. See the instr	uctions for lines 2	a through 2f on pa	ge 4.)	
_			5 . 4 . 4			
_	Lobby	ing Expenditure	es During 4-Year A	veraging Period		I
	Calendar year (or fiscal year	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
	beginning in)					
_						
2a	Lobbying nontaxable amount	•	•			
_		0	0		0	0
ь	Lobbying ceiling amount (150% of line 2a, column(e))					o
_						
	Total lobbying expenditures	0	0	_ 0	0	0
d	Grassroots nontaxable amount	_	_	_	_	_
	Occasion and an arrange	0	0	0	0	0
e	Grassroots ceiling amount (150% of line 2d, column (e))					o
				· · · · · · · · · · · · · · · · · · ·		
f	Grassroots lobbying expenditures	0	l o	0	l o	l o

Par	t II-B Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	l For	m 576	i8	
		(;	a)		(b)	
	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description e lobbying activity.	Yes	No	/	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or					
	referendum, through the use of	<u> </u>	<u> </u>	ļ		
а	Volunteers?		ļ	l		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			ļ		
C	Media advertisements?	<u> </u>		├		
d	Mailings to members, legislators, or the public?	<u> </u>	<del>                                     </del>	├		
e	Publications, or published or broadcast statements?	-				
f	Grants to other organizations for lobbying purposes?	<u> </u>				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	<b>-</b>	-	-		
h :	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?	$\vdash$	<del>                                     </del>	_		
		<u> </u>	-			
2a	Total. Add lines 1c through 1i	<u> </u>	<del>                                     </del>	<u> </u>		
b	If "Yes," enter the amount of any tax incurred under section 4912	<u> </u>	_			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	l				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u> </u>	- <del>-</del>			
	tili-A Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	or s	ectio	n	
	501(c)(6).	-/(-/:	,			
	CO NO NO I				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			. 1	$\top$	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?					
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?					
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."					3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible			ļ		
	lobbying and political expenditure next year?	•	4	<u> </u>		
5	Taxable amount of lobbying and political expenditures (see instructions)		5	L		0
Prov Part	Supplemental Information  Ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group  II-B, line 1. Also, complete this part for any additional information.  I-A Line 1 - American Action Network spent a portion of its resources to support or oppose					
cand	idates who agreed or disagreed with our center-right principles by engaging in independent				<i>-</i>	
cand	idate advocacy advertising expenditures and making in-kind contributions to a related 527					
orga	nization, the Congressional Leadership Fund, disclosed on Schedules I and R. During the tax					
year,	the Network also ran grassroots lobbying communications and similar messages on issues of					
impo	rtance to the organization such as fiscal responsibility, protecting Medicare, rejecting key	·				
aspe	cts of the new health care law, and center-right immigration reform. These communications					

Page 4

Part IV Supplemental Information (continued)
sometimes expressed views on the records of the officials the Network asked the public to contact.
but the Network avoided any reference to voting or elections and did not disseminate the
communications in close proximity to an election. The communications were not classified as
political campaign intervention if they were in reference to an upcoming legislative action of
interest to the organization, or if they were part of a series of communications on the same topic.

#### SCHEDULE D (Form 990)

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.

2013

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	of the organization		Employer identification number
	ican Action Network, Inc.		27-0730508
Par			ids or Accounts.
	Complete if the organization answered "Yes" to Form 99	90, Part IV, line 6.	
	(a) Donor advised	d funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year) .		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that		
	funds are the organization's property, subject to the organization's excl		
6	Did the organization inform all grantees, donors, and donor advisors in		
	used only for charitable purposes and not for the benefit of the donor of		
	purpose conferring impermissible private benefit?		Yes No
Par	Conservation Easements.		
	Complete if the organization answered "Yes" to Form 99	90, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the organization (check		
	Preservation of land for public use (e.g., recreation or education)		an historically important land area
	Protection of natural habitat	=	a certified historic structure
		Fleservation of	a certified flistoric structure
_	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conse	ervation contribution in	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		
þ	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic structure incl		. 2c
d	Number of conservation easements included in (c) acquired after 8/17/		
_	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, released, ex	ktinguisnea, or termin	ated by the organization
	during the tax year	I	
4	Number of states where property subject to conservation easement is		
5	Does the organization have a written policy regarding the periodic mon		
	violations, and enforcement of the conservation easements it holds?		
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	cing conservation eas	sements during the year
7	Amount of expenses incurred in monitoring, inspecting, and enforcing	conconvation cocomo	unte during the year
7	S	Conservation easeme	ents during the year
8	Does each conservation easement reported on line 2(d) above satisfy	the requirements of s	rection
•	170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservation easem		
3	balance sheet, and include, if applicable, the text of the footnote to the		
	the organization's accounting for conservation easements.	organization s imano	an statements that accombes
Par		ical Treasures, or	Other Similar Assets
	Complete if the organization answered "Yes" to Form 99		
	<del></del>		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), n	•	
	works of art, historical treasures, or other similar assets held for public of public service, provide, in Part XIII, the text of the footnote to its fina		
_			
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to		
	works of art, historical treasures, or other similar assets held for public		, or research in furtherance
	of public service, provide the following amounts relating to these items		<b>.</b> •
	(i) Revenues included in Form 990, Part VIII, line 1		
•	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical treasures, or		<u> </u>
_	following amounts required to be reported under SFAS 116 (ASC 958)		
a	Revenues included in Form 990, Part VIII, line 1		
<u>b</u>	Assets included in Form 990, Part X	<u> </u>	<u> </u>

Sched	ule D (Form 990) 2013 American Action Network	, Inc.					27-073	0508		Page 2
Part	III Organizations Maintaining Colle	ections of /	Art, Hist	orical Tr	easures, o	r Oth	er Similar Ass	ets (con	tinued	d)
3	Using the organization's acquisition, accession	on, and other	records,	check any	of the follow	ng tha	t are a significant	_		
	use of its collection items (check all that apply	y)	_	_						
а	Public exhibition		d	Loan	or exchange	progra	ms			
b	Scholarly research		е 🗌	Other						
С	Preservation for future generations			_						
4	Provide a description of the organization's co	lections and	explain h	ow they fu	urther the orga	anızatı	on's exempt purp	ose in		
	Part XIII.		•	•	J					
5	During the year, did the organization solicit of	r receive don	ations of	art, histori	cal treasures,	or oth	er sımılar			
	assets to be sold to raise funds rather than to	be maintain	ed as par	t of the or	ganization's c	ollectio	on?	Y	es 🗌	No
Part	IV Escrow and Custodial Arranger	nents.							_=	
	Complete if the organization answ		to Form	990, Pa	rt IV, line 9,	or rep	orted an amou	nt on Fo	orm	
	990, Part X, line 21.			,	,	•				
1a	Is the organization an agent, trustee, custodia	an or other in	termediar	ry for cont	ributions or of	her as	sets not			
	included on Form 990, Part X?			·				<b>□</b> Y₁	es 🗌	No
b	If "Yes," explain the arrangement in Part XIII	and complete	the follo	wing table	•					, 
								Amount		
C	Beginning balance					1	c			0
d	Additions during the year					1	d			
e	Distributions during the year					1				
f	Ending balance					1	<u>f  </u>			0
2a	Did the organization include an amount on Fe	orm 990, Parl	t X, line 2	12.				Y(	es X	No
b	If "Yes," explain the arrangement in Part XIII.	Check here	ıf the expl	lanation h	as been provi	ded in	Part XIII .			
Part	V Endowment Funds.									
	Complete if the organization answ	vered "Yes"	to Form	990, Par	rt IV, line 10	).				
	·- I	Current year		or year	(c) Two years		(d) Three years back	(e) Fc	our years	back
1a	Beginning of year balance .	0		0		0		0		
b	Contributions									
C	Net investment earnings, gains,						=			
	and losses									
d	Grants or scholarships									
e	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
9	End of year balance	0		0	<u> </u>	0		<u> </u>		0
2	Provide the estimated percentage of the curr	ent year end		line 1g, co	olumn (a)) hel	d as				
a	Board designated or quasi-endowment	0/	<u>%</u> .							
b	Permanent endowment  Temporarily restricted endowment	<u>%</u> %								
С	The percentages in lines 2a, 2b, and 2c shou		0/_							
3a	Are there endowment funds not in the posses	•		on that are	held and adr	ministe	red for the			
-	organization by	30.0 0. 4 0	· gaza	) td. d.c	Tiola and ad		100 101 1110		Yes	No
	(i) unrelated organizations							3a(i)		<del></del>
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations	s listed as rec	guired on	Schedule	R?			3b		
4	Describe in Part XIII the intended uses of the	organization	's endowr	ment fund	s.					
Part										
	Complete if the organization answ	vered "Yes"	to Form	990, Pa	rt IV, line 11	a. Se	e Form 990, Pa	rt X, line	e 10.	
	Description of property	(a) Cost or ot			st or other	•	) Accumulated	(d) B	ook valu	е
		(ınvestm			s (other)		depreciation			
1a	Land		0		0					0
b	Buildings		0	<del>                                     </del>	0		0			0
c	Leasehold improvements		0	-	27,485		2,162			25,323
d	Equipment		0	<del></del>	101,402		54,636		4	6,766
E Total	Other	aual Farm 00	0 0 Port Y		0) B) (mo 10(a)	1				0 080
()Tabl	, augumes la miouou le (Collinn ini Milst A	ana com uu	u Pan Y	TOURNE !	~, une 11//C)					. , , , , , , , ,

Part VII	Investments—Other Securities.

Complete if the organization ar	nswered "Yes" to Form 99	0, Part IV, line 11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives	0	
(2) Closely-held equity interests	0	
(3) Other		
(A)		
(B)	_	
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	0	
Part VIII Investments—Program Relat	ted.	-
Complete if the organization ar	nswered "Yes" to Form 99	0, Part IV, line 11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		

(a) Description of investment	(b) Book value	(c) Method of vatuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	0	

#### Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description
(b) Book value

(1)
(2)
(3)
(4)
(5)
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, col (B) line 15)

#### Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Deferred rent	220,295
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	220,295

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Par	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	er Keturn	
1	Total revenue, gains, and other support per audited financial statements	11	9,445,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	<del>                                     </del>	9,440,000
a	Net unrealized gains on investments		
b	Donated services and use of facilities	┥ ┃	
c	Recoveries of prior year grants	╡	
d	Other (Describe in Part XIII.)	┥ ┃	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	9,445,000
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		0,4-10,000
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)	7	
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	9,445,000
Pari		ner Retur	
- 41	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	poi itotai	
1	Total expenses and losses per audited financial statements	1	8,839,438
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments	7	
С	Other losses	<b>1</b>	
d	Other (Describe in Part XIII.)	9	
е	Add lines 2a through 2d	2e	-537,209
3	Subtract line 2e from line 1	3	9,376,647
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	<b>1</b>	
C	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	9,376,647
Part	t XIII Supplemental Information		_
Provi	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, P	art V, line 4	, Part X, line
2, Pa	rt XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional inforr	nation.	
Part >	XII Line 2d The Network received \$500,000 in returned grant funds this year, in the		
	<u> </u>		
previo	ous year it received \$37,209 in leftover equipment and supplies a third party service		
provid	der had purchased with Network funds for use in its National Grassroots Network.		
These	e amounts were treated as negative expenses on the Network's books, but pursuant to		
the F	orm 990 instructions they were treated as "other changes to net assets" reported in		
Part >	XI rather than as items of income or negative expense.		
Part >	X Line 2 The Network has adopted FASB ASC 740-10, accounting for uncertainty in		
incon	ne taxes. That standard prescribes a comprehensive model for how an organization		
shoul	ld measure, recognize, present, and disclose in its financial statements uncertain tax		
positi	ons that an organization has taken or expects to take on a tax return.		
	······	<del>-</del>	

Schedule D (Form 990) 2013		American Action Network, Inc.	27-0730508	Page 5
Part XIII	Supple	mental Information (continued)		
				<del>-</del>
			·	<del>-</del> -
				·
		•		·
				<del>-</del>
		••••••••••••••		,
			·	
			·	

#### **SCHEDULE G** (Form 990 or 990-EZ)

American Action Network, Inc.

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Inspection Employer identification number

27-0730508

Part I Fundraising Activities. Co	•	•		ered "Yes" to Forr	n 990, Part IV, Iir	ne 17.			
Form 990-EZ filers are not required to complete this part.									
Indicate whether the organization raised funds through any of the following activities. Check all that apply.  a X Mail solicitations e X Solicitation of non-government grants									
a X Mail solicitations		=							
<b>b</b> X Internet and email solicitations		=		of government grants	3				
c X Phone solicitations		g S	pecial fund	raising events					
d X In-person solicitations									
2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or									
key employees listed in Form 990, F	-				1	X Yes No			
b If "Yes," list the ten highest paid indi			-		-	draiser is			
to be compensated at least \$5,000 to		-	.,,	<b>.</b>					
•	, ,								
(i) Name and address of individual or entity (fundraiser)  (ii) Activity  (iii) Did fundraiser have custody or control of contributions?  (iv) Gross receipts from activity  (v) Amount paid to (or retained by) fundraiser listed in col (i)  organization									
		Yes	No						
1 PRH Consulting Group	various								
4597 Neiswander Sq New Albany OH 4305		i	x	125,000	12,500	112,500			
2 Marriott Group	various			,		, <u></u>			
PO Box 980847 Park City UT 84098	<u> </u>		X	1,000,000	77,550	922,450			
3 Michael Byrd	various								
400 Treat Ave Ste E San Francisco CA 94			Х	225,000	17,500	207,500			
4 PKL Consulting	various								
621 Thornwood Lane Northfield IL 60093			Х	0	30,000	0			
5 The McIntosh Company Inc	various								
5310 Harvest Hill Rd Ste 209 Dallas TX 75			X	50,000	5,000	45,000			
6 SCR & Associates, LLC	various	1							
100 Trade Center Ste G700 Woburn MA 0	<u> </u>		Х	235,000	23,500	211,500			
7 EV Strategies	various								
2 W Windsor Ave Alexandria VA 22301			X	<u> </u>	12,500	0			
8 Clark Hill PLC	various								
601 Pennsylvania Ave NW Ste 1000 Wash		ļ	X	0	63,750	0			
9									
		<del> </del>	ļ	0	0	0			
10	i			ا	0	•			
	l	<u> </u>		. 0	0	0			
Total				1,635,000	242,300	1 408 050			
Total	ion is registered	or hoones	d to colucit	<del></del>	<del></del>	1,498,950			
	ion is registered	or license	u to solicit t	contributions or nas	been notilied it is e	xempt from			
registration or licensing. CT, FL, PA									
C1, FL, FA						·			
······································									
						<del></del>			

			merican Action Network,			27-0730508 Page <b>2</b>
Pa	art II	Fundraising Events. more than \$15,000 of				
		events with gross rece	_			·
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
•			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts			0	0
Re	_	1 0				
	2 3	Less Contributions Gross income (line 1	<del>-</del>		0	0
		minus line 2)		······································	0	0
	4	Cash prizes			0	0
	5	Noncash prizes			0	0
Direct Expenses	6	Rent/facility costs			0	0
χ Exp	7	Food and beverages			0	0
Öğ	8	Entertainment			0	0
	9	Other direct expenses			0	0
	10 11	Direct expense summary. Add Net income summary. Subtract				( 0)
Pa	rt III		he organization answ	ered "Yes" to Form 99	00, Part IV, line 19, or r	eported more
		than \$15,000 on Form	990-EZ, line 6a.		T	<del></del>
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
(eve						
u.		Gross revenue				0
nses	2	Cash prizes				0
Direct Expenses	3	Noncash prizes				0
Direct	4	Rent/facility costs				0
	_ 5	Other direct expenses			<u></u>	0
	6	Volunteer labor	☐ Yes <u>%</u> No		Yes %  No	
	7	Direct expense summary. Add	I lines 2 through 5 in colu	mn (d)		( 0)
	8	Net gaming income summary.	Subtract line 7 from line	1, column (d)	<u> ▶</u>	0
9	F	inter the state(s) in which the org	ganization operates gami	na activities		
	a Is	s the organization licensed to op	erate gaming activities in	each of these states?.		. Yes No
		-				

Sched	ule G (Form 990 or 990-EZ) 2013 American Action Network, Inc.	27	<u>-0730508</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity operated in			
а		13a		%
b	An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Name ▶	<b></b>		
	Address ▶			
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization > \$0 and the			<u> </u>
	amount of gaming revenue retained by the third party $ ightharpoonup$ \$0 .			
C	If "Yes," enter name and address of the third party			
	Name ▶			
	Address ►			
16	Gaming manager information			
	Name ▶			
	Gaming manager compensation ▶ \$0			
	Description of services provided	· <b></b> -		
	Director/officer Employee Independent contractor			
17	Mandatory distributions			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations			
	or spent in the organization's own exempt activities during the tax year  \$			0
Part	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to			ind
Dort I	additional information (see instructions).  Line 2b - Fundraisers listed in Part I include some consultants that did not	-		<del>_</del>
	the receive contributions in this field year but whose offerts supported the general			
	aising efforts of the organization.		<del>-</del>	
		·- <b></b>		
- <b>-</b>		· <b></b>		
				<b></b>

# SCHEDULE (Form 990)

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

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

▶ Attach to Form 990.

Open to Public

Inspection Employer Identification number 27-0730508 ŝ

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

American Action Network, Inc.

Department of the Treasury Internal Revenue Service Name of the organization

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	5	sistance?	
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	or the	•	
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	sistar	•	t ci a
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	itiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and		or montoring the use of great finds in the United States
	of the		901
9	ount (	•	4
stanc	he arr	nce?	T CT C
Assis	tiate tl	ssistai	
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Info	zation	teria u	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
neral	organı	on cri	Dar.
Part General Information on Grants and Assistance	Does the organization maintain records to substanti	the selection criteria used to award the grants or ass	Describe in Part IV the organization's procedures for
Ę	Doe	the	200
Pal	-		c

Part II Grants and Other Assistance to Governments Part IV, line 21, for any recipient that received mos	Assistance to any recipient t		and Organizations in the United States. Complete if the organizatione than \$5,000. Part II can be duplicated if additional space is needed.	n the United States I can be duplicated	. Complete if the or f additional space is	ganization answere needed.	and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, re than \$5,000. Part II can be duplicated if additional space is needed.
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) American Action Forum 1747 Pa Ave NW Wash, DC 20006	27-0567765	501 c 3	000'00€				general support
(2) Stop Voter Fraud 7650 S McClintock Dr #103-347 Temp	46-3449377	see Part IV	000'09				general support
(3) Center for Individual Freedom 815 King St Ste 303 Alexandria, VA 22	54-1916980	501 c 4	40,000				general support
(4) Freedom Vote 131 N Ludlow St Ste 315 Dayton, OH	27-3004397	501 c 4	150,000				general support
(5) National Rifle Association of Ameri 11250 Waples Mill Rd Fairfax, VA 220	53-0116130	501 c 4	175,000				general support
(6) Main Street Advocacy 325 7th St NW Ste 610 Washington Dt	27-0273223	501 c 4	000'09				general support
(7) Susan B. Anthony List 1707 L St NW Ste 500 Washington DC	54-1850126	501 c 4	000'09				general support
(8) Congressional Leadership Fund 1747 Pennsylvania Avenue NW 5th fl	45-3578123	527		181,001	Book	see Part IV	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 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

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Schedule I (Form 990) (2013)

(f) Description of non-cash assistance Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. (e) Method of valuation (book, FMV, appraisal, other) general support of like-minded organizations or other purposes that the Network's leadership believed would advance the adoption of center-right policies supported by the Network. The Network restricts grants made as part of its legislative issue advocacy program Part I Line 2 - The Network maintains records that substantiate the amounts and recipients of all grants. While the organization did not make enough grants during the tax year to have elaborate grant eligibility and selection procedures, all grants were made for (d) Amount of non-cash assistance (c) Amount of cash grant Part III can be duplicated if additional space is needed (b) Number of recipients (a) Type of grant or assistance Part IV Part III

S

burposes

agreements, and reporting on the use of the funds, in order to ensure the grant funds are used in furtherance of the Network's exempt

process in connection with its legislative issue advocacy program. The enhanced process includes written grant applications, grant

from being used for political purposes, except where such restrictions are redundant, as in the case of grants to a section 501(c)(3)

organization. After the end of the tax year, as the Network's grant program expanded, the Network further enhanced its grantmaking

Part II Line 1 a 2 - Stop Voter Fraud is an Arizona ballot initiative committee. We have not been able to determine its tax

classification

American Action Network, Inc. Schedule I (Form 990) (2013)
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Part III	Grants and Other Assistance to Individu	dividuals in the	Jnited States. Con	nplete if the organiza	ation answered "Yes" to	als in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	(a) Type of grant or assistance (b) Number of	(b) Number of	ا ا	(d) Amount of	(e) Method of valuation (book,	(f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, orner)	
						:
7						
10						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information	the information r	equired in Part I, lin	e 2, Part III, column	(b), and any other addit	ional information.
art II Line	art II Line 1 a 8 - The Network paid the portion of a third-party service provider's fee allocable to that service provider's services	ird-party service pro	vider's fee allocable to	that service provider's	services	
o a related	o a related organization, the Congressional Leadership Fund,	p Fund, and that is r	eported as a grant her	and that is reported as a grant here The Network also allowed that	lowed that	
rganizatio	rganization to share its facilities. See Schedule R.					
						:
! ! ! ! !						
		; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		· · · · · · · · · · · · · · · · · · ·	1   1   1   5   5   1   1   5   5   5	

Schedule I (Form 990) (2013)

#### 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" on Form 990, Part IV, line 23.
 ► Attach to Form 990.
 ► See separate instructions.

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

OMB No 1545-0047

**2013** 

Open to Public Inspection

Employer Identification number Name of the organization 27-0730508 American Action Network, Inc. **Questions Regarding Compensation** No Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 2 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. X Compensation committee Written employment contract Independent compensation consultant X Compensation survey or study X Form 990 of other organizations X Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII. Section A, line 1a, with respect to the filing organization or a related organization: Receive a severance payment or change-of-control payment? . . . . . Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? . . . . . . . 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of 5a X 5b If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of. The organization?.... 6a 6h If "Yes" to line 6a or 6b, describe in Part III. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed 7 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53 4958-6(c)?

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American Action Network, Inc. Schedule J (Form 990) 2013 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

(F) Compensation reported as deferred in prior Form 990 Note. The sum of columns (B)(i)—(iii) for each listed individual must equal the total amount of Form 990. Part VIII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (B) Breakdown of W-2 and/or 1099-MISC compensation 249,506 29,564 (E) Total of columns (B)(I)—(D) 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 5,182 614 (D) Nontaxable benefits (C) Retirement and other deferred compensation (Iii) Other reportable compensation (ii) Bonus & incentive compensation instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII 244,324 (i) Base compensation ≘≘  $\Xi$ €≣ ≘⊜ ≘≘  $\equiv$  $\equiv$  $\equiv$ ≘≘  $\equiv$ (A) Name and Title Brian Walsh 1 President 14 16 ~ က Ŋ 9 œ 6 F 12 13 15 **9** 

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2013
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number 27-0730508 American Action Network, Inc. Form 990, Part I, Line 6. Although the Network successfully encouraged thousands of individuals to take action in support of its causes by contacting their representatives, speaking with others about our issues, writing op-eds, or taking other action in favor of the Network's policy positions, such individuals were generally expressing their own views and not acting on behalf of the Network. Accordingly, we have not counted the citizens we mobilized as Network volunteers. The volunteers reported here are our board members, who serve without compensation. Form 990, Part III, Line 3. During the tax year, American Action Network wound down its Hispanic Leadership Network and did not conduct any public policy awareness events or policy panels in connection with that program. Any social media, digital or other outreach to interested Americans as part of that program was minimal, and any ongoing outreach to HLN members has been merged into the Network's general legislative issue advocacy program. Also during the tax year, the Network's National Grassroots Network program shifted exclusively to online engagement with network participants, wound up all existing leases of office space, and was merged into the American Action Network's general issue advocacy program in line 4a. Form 990, Part III, Line 4 Program services reported in this section do not include expenses for political campaign intervention or other activities of the Network that do not directly further its purposes according to current IRS guidance. In contrast, some such expenses are reported as "program service" expenditures rather than management or fundraising expenditures in Part IX, given the slightly broader definition of program service there. Form 990, Part IV, Line 5. The Network did not receive any member dues or voluntary payments from members this year. However, the Network's general practice is to inform all donors, whether or not they are members, that their contributions are not tax deductible as charitable contributions or as business expenses. Form 990, Part IV, Lines 27 and 28a-28c The organization had no transactions above the

applicable thresholds of Schedule L

Name of the organization	Employer identification number
American Action Network, Inc.	27-0730508
Form 990, Part V, Line 2a The organization contracted with a separate corporation to provide	
staffing services, and that organization was the employer who handled payroll taxes and	
provided W-2s to staff members. The number of employees reported here is the number of staff	
members provided by the third party.	
Form 990, Part VI, Section A, Line 1a The Network has a four-person executive committee	
consisting of Norm Coleman, Fred Malek, Vin Weber, and Tom Reynolds. It is empowered to revi	ew
and advise on decisions of management in between full board meetings, consistent with the	
direction set by the full board. It has no power to amend the Network's governing documents,	
dissolve or merge the Network, approve the sale or exchange of any assets of the corporation,	
or elect or remove directors or officers.	
Form 990, Part VI, Section A, Line 3 The Network used Insperity, an employee leasing company	<b></b>
but all significant decisions remained under the control of the Network's officers and	
directors. Amounts paid to Insperity for Network staff are reported in aggregate in Part	
VII.B, and to the extent attributable to particular employees it is also reported in Part	
VII.A	
Form 990, Part VI, Section A, Line 5 In 2012, the Network paid an unrelated third-party	
vendor approximately \$300,000 to sponsor a fundraising concert, which was cancelled because of	of
rain. The Network believes it was entitled to receive a refund of this amount, and when the	
vendor would not agree to do so, the Network brought suit to get its funds back. The parties	
ultimately reached a confidential settlement of the dispute	
Form 990, Part VI, Section A, Line 8b The audit committees and compensation committees keep	·
contemporaneous minutes, but the executive committee generally does not. The executive	
committee serves primarily to advise management, and thus does not exercise board powers to	
pass resolutions with binding effect	
Form 990, Part VI, Section B, Line 11a The Form 990 is reviewed by the President of the	
organization, with consultation with accounting and legal professionals as appropriate	
Thereafter, a penultimate draft is circulated to all of the members of the organization's	
governing body for review and comment. The organization provides each member of the governing	ng

Form 990, Part IX The organization occasionally incurred costs shared with other

Schedule O (Form 990-EZ) (2013)	Page Z
Name of the organization  American Action Network, Inc	Employer Identification number 27-0730508
	127-0730300
organizations (primarily the American Action Forum), with the other organizations reimbursing	••••••
it for their allocable share of the costs. In such circumstances the organization has reported	
only its net amount paid as expenses on Part IX. Such reimbursements totaled less than	
\$650,000.	
Form 990, Part IX, Line 11g Media \$1,513,615, Surveys \$349,416, Other Consultants \$82,640	
Form 990, Part XI, Line 9 A grantee returned \$500,000 of unused funds from a grant made the	
previous fiscal year. Furthermore, leftover office equipment and supplies used by a	
third-party contractor to furnish local grassroots network offices were returned to AAN in the	
previous fiscal year. The estimated value of this equipment and supplies was \$37,209. These	
amounts are reported here rather than being counted as current income or a current negative	
expense. Approximately \$7,000 of depreciation relating to the returned equipment has been	
booked as depreciation expense for the current year in accordance with the Network's audited	
financial statements	
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SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

American Action Network, Inc. Name of the organization

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OMB No. 1545-0047	2013	Open to Public	Inspection
OMB	Ø	Open	lne

Employer Identification number

27-0730508

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► See separate instructions. Attach to Form 990.

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

(f)
Direct controlling
entity End-of-year assets 9 Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (d) Total income Legal domicile (state or foreign country) Ō Primary activity (a)
 Name, address, and EIN (if applicable) of disregarded entity Part I

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	(b)(13)
						Yes	ę
(1) Congressional Leadership Fund 45-3578123	political						
DC 2000		DE	527		Amer Action Netwi	×	
(2)							
(3)		-					
(4)							
(5)							
(9)							
(2)							
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	190.				Schedule R (Form 990) 2013	orm 990) 2	2013

Direct confusion more (related, moome sassets)  accluded from scaluded f	ration d orga	Identification of Related Organizations Taxable as because it had one or more related organizations treated	Identification of Related Organizations Taxable as a Partnership Complete if the organizations that one or more related organizations treated as a partnership during the tax year	ship Com	plete if the during the	organizatic tax year.	on answer	ed "Yes"		27-0730508 30, Part IV,	line 34	
rganizations Taxa	(a) (b) Name, address, and EIN of Primary activity related organization		(d) Direct controlling entity	Predomi Income (re unrelat excluded tax unc		·	(8) Share of end-of year assets		(I)  Code V—UBI s? amount in box 20 of Schedule K-1 (Form 1065)		General or managing partner?	(k) Percentage ownership
rganizations Taxa									0	Yes	2	i
rganizations Taxa											†	
rganizations Taxa												
rganizations Taxa							į					
rganizations Taxa												
rganizations Taxa											†····	
rganizations Taxa												
Primary activity Legal domicile (C corp. S corp. or furst) (State of foreign country) (C corp. S corp. or furst) (C corp. S corp.	ation of Related Organiz 4 because it had one or m	zations Taxable	as a Corpora nizations treat	ition or Ti ted as a c	rust Comple corporation	ete if the o or trust dur	rganizatio	n answe x year.	red "Yes" on F	orm 990	, Part	
	(a) Name, address, and EIN of related organization	(b) Pnmary activity	(c) Legal dor (state or foreig		(d) Direct controlling entity	(e) Type of e (C corp. S corp		(f) are of total income	(g) Share of end-of-year assets	(h) Percentage ownership		(I) Section 512(b)(13) controlled entity?
					,						Yes	Ŷ.
			:									
				-								_
											<u> </u>	

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Note.	<b>Note.</b> Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes	ŝ
-	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ins listed in P	arts II–IV?			
æ	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity			1a		×
٥	Gift, grant, or capital contribution to related organization(s)			<b>1</b>	×	
ပ	Gift. grant, or capital contribution from related organization(s)	•		10		×
7	Loans or loan quarantees to or for related organization(s).			19		×
,						,
ø	Loans or loan guarantees by related organization(s)			Φ.	ŀ	<
<b>-</b>	Dividends from related organization(s)			#		×
5	Sala of accept to related organization(s)			10		×
ב כב	Outs of address of related of annual potential annu			7 4		>
= .	ריייי מיאיפיט ווכודו ופומופט טוקמוובמוטווט)			<b>:</b>		;
	Exchange of assets with related organization(s)			=		× :
-	Lease of facilities, equipment, or other assets to related organization(s)			=		×
•				];		,
¥	Lease of facilities, equipment, or other assets from related organization(s)			¥		<
_	Performance of services or membership or fundraising solicitations for related organization(s)	•		=		×
Ε	Performance of services or membership or fundraising solicitations by related organization(s)			13		×
5	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			£	×	
•	Sharno of neid employees with related organization(s)			9	×	
>				2	\ <u>\</u>	
1	Dampurganish to soloted assessing the successions			4		<b>&gt;</b>
_	Neimbul sement paid to letated organization(s) for expenses.			<u>.</u>		;
σ	Reimbursement paid by related organization(s) for expenses .			5	- 414	×
-	Other transfer of cash or property to related organization(s)			+		×
s	Other transfer of cash or property from related organization(s).			18		×
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, includir	covered relati	including covered relationships and transaction thresholds	on threst	splot	
		(a)	(2)		<u>e</u>	
	Name of related organization Tr.	Transaction type (a-s)	Amount involved	Method of amou	Method of determining amount involved	guiut Pe
				see Part VII	₹	
(1)	(1) Congressional Leadership Fund	bno	222,631			
(2)						
(3)						
{						
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(5)						
(9)				:		
			Sched	Schedule R (Form 990) 2013	rm 990	) 2013

27-0730508

Schedule R (Form 990) 2013

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

(a)	(q)	(0)		(0)	l	(6)	ε	_		8
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)	9	Are all partners section 501(c)(3)	total income	Share of end-of-year assets	Disproportionate aflocations?	amount in box 20 of Schedule K-1	General or managing partner?	Percentage ownership
			from tax under sections 512-514)	organization	25			(Form 1065)		
				Yes No			Yes No		Yes No	
(1)										
(2)										
(3)				_						
(4)										
(5)										
(9)										
(7)									:	
(8)										
(6)						-				
(10)										
(11)										
(12)										
(13)									-	
(14)										
(15)						_				
(16)			-							
								Schec	Schedule R (Form 990) 2013	990) 2013

Schedule R (Form 990) 2013	American Action Network, Inc	27-0730508 Page 5
	nental Information additional information for responses to questions on Sched	
Part V Line 2 - The organ	nization shared some staff with the Congressional Leadership Fund	d, a
related organization All	such staff were employed by a third party employee leasing compa	any,
and time spent working f	for each organization was tracked. The American Action Network p	aid the
portion of the third party'	s services fee attributable to the Congressional Leadership Fund,	
\$181,001. In addition, the	e shared employees used space and equipment of the Network. The	he
Network estimated that of	overhead attributable to shared staff working for the Congressional	
Leadership Fund was \$4	1,630.	
	·	
•••••		