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DLN: 93493215013085

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

 \blacktriangleright Do not enter social security numbers on this form as it may be made public

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

OMB No 1545-0047

2014

Open to Public Inspection

| | | | endar year, or tax year begin C Name of organization | ning 01-01-2014 , and ending 12-31 | l-2014 | D Emplo | uon ida | entification number |
|--------------------------------|---------------------|---------------------|---|--|-------------|---------------------------------------|--------------|----------------------------|
| | eck ıf a dress c | applicable hange | THE AMERICAN ASSOCIATION FO | OR . | | | 38706 | |
| | me cha | _ | Doing business as | | | | 30700 | 1 |
| ┌ Ini | tıal retu | ım | | | | E Telepho | ono num | ahar. |
| Fir | nal | rmınated | Number and street (or P O box 12100 SUNSET HILLS ROAD NO | ıf mail is not delivered to street address) Ro 130 | om/suite | , i | | |
| _ | | return | | | | (/03) | 437-4 | 43// |
| | | n pending | RESTON, VA 20190 | country, and ZIP or foreign postal code | | G Gross r | eceipts | \$ 741,507 |
| , ,,, | pileatio | ii pending | F Name and address of | nrincinal officer | 11/2 | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | |
| | | | BILL CARNEY | | H(a |) Is this a group subordinates? | returr | TYes ▼ No |
| | | | 12100 SUNSET HILLS R RESTON, VA 20190 | OAD NO 130 | U/h | . | | |
| | | | | | |) Are all subordi included? | mates | Γ Y es Γ No |
| I Ta | ıx-exer | npt status | 501(c)(3) 501(c)() | ◀ (insert no) | | If "No," attach | a list | (see instructions) |
| J W | ebsit | e:► WV | VW AAAR ORG | | H(c) | Group exempt | ion nu | mber ► |
| K For | m of o | rganızatıon | Corporation Trust Assoc | ation Other ► | LY | ear of formation 19 | 981 M | State of legal domicile NY |
| Pa | rt I | Sum | nmary | | • | | • | |
| | | | | ssion or most significant activities | | | | |
| | | SEE PA | GE 2, PART III STATEMEN | T OF PROGRAM SERVICE ACCOMP | LISHMENT | S, LINE 1 FOR D | DETAI | LS |
| <u>ခို</u> | | | | | | | | |
| Ē | | | | | | | | |
| <u>ş</u> | 2 | Check t | his box দ if the organization | n discontinued its operations or dispo | sed of more | e than 25% of its | net as | ssets |
| Activities & Governance | ٦ | Number | of voting members of the gov | erning body (Part VI, line 1a) | | | з | 19 |
| න් ග් | 1 | | | ers of the governing body (Part VI, lin | | | 4 | 19 |
| Ĕ | | | | ın calendar year 2014 (Part V, line 2 | | | 5 | 0 |
| į | | | | ıf necessary) | | | 6 | 116 |
| 4 | 7a | Total un | related business revenue from | n Part VIII, column (C), line 12 . | | | 7a | 3,588 |
| | Ь | Net unre | elated business taxable incon | ne from Form 990-T, line 34 | <u> </u> | | 7b | 0 |
| | | | | | | Prior Year | | Current Year |
| <u>o</u> | 8 | | | [, line 1 h) | | | 500 | 12,858 |
| Revenue | 9 | | | I, line 2g) | | 560, 84, | | 517,286 74,057 |
| Ž | 10 | | | umn (A), lines 3, 4, and 7d) A), lines 5, 6d, 8c, 9c, 10c, and 11e | | | 739 | 33,000 |
| | 12 | | | 11 (must equal Part VIII, column (A | • — | | | |
| | | | | | | 684, | | 637,201 |
| | 13 | | · | art IX, column (A), lines 1-3) | | 27, | 0 | 48,500 |
| | 14 | | | rt IX, column (A), line 4) oyee benefits (Part IX, column (A), li | | | - | 0 |
| 8 | 15 | 5-10 | | oyee benefits (Fart 1X, Column (A), ii | | ! | 500 | 0 |
| Expenses | 16a | Profes | ssional fundraising fees (Part | IX, column (A), line 11e) | | | 0 | 0 |
| Ř | Ь | Total fu | undraising expenses (Part IX, columi | n (D), line 25) ▶ 0 | | | | |
| | 17 | Other | expenses (Part IX, column (A | A), lines 11a-11d, 11f-24e) | | 547, | 446 | 590,833 |
| | 18 | Total | expenses Add lines 13-17 (| must equal Part IX, column (A), line | 25) | 575, | 446 | 639,333 |
| | 19 | Rever | nue less expenses Subtract I | ne 18 from line 12 | | 108, | | -2,132 |
| Not Assets or Fund Balances | | | | | Be | eginning of Curre Year | nt | End of Year |
| togg Egg | 20 | Total | assets (Part X, line 16) . | | 🗀 | 1,970, | 922 | 1,957,125 |
| A A B | 21 | | | | | 108, | 968 | 69,635 |
| žZ | 22 | Net as | ssets or fund balances Subtra | act line 21 from line 20 | | 1,861, | 954 | 1,887,490 |
| Pa | rt II | Sign | nature Block | | | | | |
| my k | nowle | dge and | | examined this return, including acco complete Declaration of preparer (ot | | | | |
| | | **** | *** | | | 2015-08-03 | | |
| Sign | 1 | Sign | ature of officer | | | Date | | |
| Her | | | CARNEY EXECUTIVE DIRECTOR | | | | | |
| | | | e or print name and title Print/Type preparer's name | Preparer's signature | Date | | PTIN | |
| Pai | Ч | | Print/Type preparer's name JENNIFER SOLOT | JENNIFER SOLOT | Date | Check ıf self-employed | D0074 | 9373 |
| | u pare | | Firm's name 🕨 BBD LLP | | | Firm's EIN 🕨 2 | 3-28966 | 592 |
| | Part On | | Fırm's address 🕨 1835 MARKET STR | EET 26TH FLOOR | | Phone no (215 | 5) 567-7 | 7770 |
| -50 | . JII | , | PHILADELPHIA, PA | 19103 | | | | |

✓ Yes ☐ No

| Part TV | Check | dist of | Required | Schedules |
|---------|-------|---------|----------|-----------|
| | | | | |

| | | | Yes | No |
|-----|---|-----|-----|----|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> | 1 | Yes | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏 | 2 | Yes | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | No |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | 4 | | No |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III | 5 | | No |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i> | 6 | | No |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II | 7 | | No |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2 | 8 | | No |
| 9 | Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square} | 9 | | No |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | 10 | Yes | |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable | | | |
| a | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI | 11a | | No |
| b | Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII" | 11b | | No |
| C | Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII | 11c | | No |
| d | Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX | 11d | | No |
| e | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | | No |
| f | Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X. | 11f | Yes | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | Yes | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | No |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | No |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | No |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | No |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV | 15 | | No |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | No |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and $11e^{\gamma}$ If "Yes," complete Schedule G, Part I (see instructions) | 17 | | No |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | 18 | | No |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | No |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | No |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |

| Par | t IV Checklist of Required Schedules (continued) | | | |
|-----|--|-----|-----|----|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | No |
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | Yes | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | 23 | | No |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a | 24a | | No |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| C | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24c | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I | 25a | | No |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | No |
| 26 | 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 "Yes," complete Schedule L, Part II | 26 | | No |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | 27 | | No |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) | | | |
| а | A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part | | | |
| | | 28a | | No |
| b | A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV | 28b | | Νo |
| C | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV | 28c | | No |
| 29 | Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M | 29 | | Νo |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 30 | | No |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I | 31 | | No |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 32 | | No |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i> | 33 | | No |
| 34 | Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 | 34 | | No |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | No |
| b | If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | 36 | | No |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | No |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O | 38 | Yes | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

| | Check if Schedule O contains a response or note to any line in this Part V | | | |
|----|--|------------|-----|-----|
| | | | Yes | No |
| | Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 15 | | | |
| | Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0 | | | |
| | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | | |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | 2b | | |
| За | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Yes | |
| | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O | 3b | Yes | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | No |
| b | If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) | | | |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | Νo |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | Νo |
| c | If "Yes," to line 5a or 5b, did the organization file Form 8886-T? | | | |
| | | 5c | | |
| | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | No |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? | 7a | | Νo |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| C | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7c | | No |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 70 | | INC |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit | | | |
| | contract? | 7e | | No |
| | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7f | | Νo |
| 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 | | |
| В | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? | 8 | | |
| 9a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
|) | Section 501(c)(7) organizations. Enter | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities | | | |
| | 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 against amounts due or received from them) | | | |
| 2a | 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 | | | |
| 3 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states | | | |
| _ | mi which the organization is incensed to issue qualified fleathi plans | | | |
| | | 4.45 | | K.I |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a 14b | | Νo |

Section A. Governing Body and Management

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

| Check if Schedule O contains a response or note to any line in this Part V | Ι | | | | | | | | | | | | | | .マ |
|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|----|
|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|----|

| | <u> </u> | | Yes | No |
|-----|--|--------|--------|-----|
| 1a | Enter the number of voting members of the governing body at the end of the tax year | | | |
| | If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O | | | |
| b | Enter the number of voting members included in line 1a, above, who are independent | | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | 2 | | No |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?. | 3 | Yes | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | No |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | No |
| 6 | Did the organization have members or stockholders? | 6 | Yes | |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | 7a | Yes | |
| 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 | | No |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following | | | |
| а | The governing body? | 8a | Yes | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Yes | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | 9 | | No |
| Se | ection B. Policies (This Section B requests information about policies not required by the Internal F | Revenu | ıe Cod | e.) |
| | | | Yes | No |
| 10a | Did the organization have local chapters, branches, or affiliates? | 10a | Yes | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | 10b | Yes | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Yes | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990 | | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | Yes | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | Yes | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | 12c | Yes | |
| 13 | Did the organization have a written whistleblower policy? | 13 | Yes | |
| 14 | Did the organization have a written document retention and destruction policy? | 14 | Yes | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | | |
| а | The organization's CEO, Executive Director, or top management official | 15a | | Νo |
| b | Other officers or key employees of the organization | 15b | | Νo |
| | If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | 16a | | No |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | 16b | | |
| Se | ection C. Disclosure | | | |
| 17 | List the States with which a copy of this Form 990 is required to be filed▶NJ | | | |
| 18 | Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) | | | |

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)

- 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, address, and telephone number of the person who possesses the organization's books and records 20 ►DROHAN MANAGEMENT GROUP INC

12100 SUNSET HILLS ROAD SUITE 130 RESTON, VA 20190 (703) 437-4377

| Form 990 (2014 |) |
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| , | а | а | e | |

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - ◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- ◆ List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

| (A) Name and Title | (B) A verage hours per week (list any hours for related | Position (do not check more than one box, unless person is both an officer and a director/trustee) | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and |
|-----------------------|---|---|--|---|--|
| | organizations below dotted line) | Former Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or director | , | | related organizations |

Form 990 (2014)

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

| (A) Name and Title | (B) Average hours per week (list any hours | verage Positi urs per more th ek (list person y hours and a | | | | unless officer | i | (D) Reportable compensation from the organization (W- | (E) Reportable compensation from related organizations (W- | (F) Estimated amount of other compensation from the |
|-----------------------|--|--|-----------------------|---------|--------------|------------------------------|--------|---|--|---|
| | for related organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Ke) employee | Highest compensated employee | Former | 2/1099-MISC) | 2/1099-MISC) | organization and related organizations |

| 1b | Sub-Total | Ŧ | | | |
|----|---|---|---|---|---|
| c | Total from continuation sheets to Part VII, Section A | ۰ | | | |
| d | Total (add lines 1b and 1c) | • | 0 | 0 | 0 |

Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ►0

| | | | 165 | 140 |
|---|--|---|-----|------|
| 3 | Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | | | |
| | on the lart res, complete schedule from Such marviadar | 3 | | No |
| 4 | For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual | | | N. a |
| | | 4 | | No |
| 5 | Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for | | | |
| | services rendered to the organization? If "Yes," complete Schedule I for such person | 5 | | No |

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

| (A) Name and business address | (B) Description of services | (C) Compensation |
|-------------------------------|------------------------------------|---------------------|
| | MANAGEMENT SVCS | 191,943 |
| · | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►1

Voc No

| Part V | 4 + + 4 |
|--|----------------------------------|
| Contributions, Giffs, Grants and Other Similar Amounts | 1a b c d e f g |
| Program Service Revenue | 2a b c d e f g |
| venue | 3 4 5 6a b c d 7a b c d 8a |
| Other Re | b c 9a b c 10a |
| | 11a b c d |

| Form 99 | | | | | | | | Page 9 |
|---|----------|---|--|-----------------------|----------------------|--|---|--|
| Part V | /++1 | Statement of Check of Schedu | f Revenue lle O contains a respon: | se or note to any lir | ne in this Part VIII | | | |
| | | Oncore in Democra | ne o contamb a tespon | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| α£ | 1a | Federated camp | paigns 1a | | | | | |
| ant | ь | Membership du | es 1b | | | | | |
| وَ قِ | С | Fundraising eve | ents 1c | | | | | |
| iifts ar / | d | Related organiz | ations 1d | | | | | |
| s, G | e | Government grants | (contributions) 1e | | | | | |
| Contributions, Giffs, Grants and Other Similar Amounts | f | sımılar amounts no | | 12,858 | | | | |
| E E | g | Noncash contribution 1a-1f \$ | ons included in lines | | | | | |
| ë Ö | h | Total. Add lines | s 1a-1f | · · · • | 12,858 | | | |
| <u> </u> | | | _ | Business Code | | | | |
| æm | 2a | ANNUAL CONFEREN | NCE | 900099 | 384,960 | 279,152 | | 105,808 |
| æ | Ь | MEMBERSHIP DUES | 5 | 900009 | 85,108 | 85,108 | | |
| MCe | С | PUBLICATIONS | | 511140 | 43,630 | 43,630 | | |
| Š | d | NEWSLETTER ADVE | ERTISING | 541800 | 3,588 | | 3,588 | |
| E E | e f | All other progra | ım service revenue | | | | | |
| Program Serwce Revenue | | _ | | | 517.206 | | | |
| | g 3 | Total. Add lines | s 2a-2f | | 517,286 | | | |
| | | and other simila | aramounts) | 🟲 📗 | 58,616 | | | 58,616 |
| | 4 | | tment of tax-exempt bond p | · · · · • · • | 33,000 | | | 33,000 |
| | 5 | Royalties | (ı) Real | (II) Personal | 33,000 | | | 33,000 |
| | 6a | Gross rents | (I) Neul | (II) I CISOIIII | | | | |
| | ь | Less rental | | | | | | |
| | c | expenses Rental income | | | | | | |
| | d | or (loss) Net rental incor | ne or (loss) | | | | | |
| | | | (ı) Securities | (II) Other | | | | |
| | 7a | Gross amount from sales of assets other than inventory | 119,747 | | | | | |
| | ь | Less cost or other basis and | 104,306 | | | | | |
| | | sales expenses | 15,441 | | | | | |
| | c d | Gain or (loss) | s) | <u> </u> | 15,441 | | | 15,441 |
| | | Gross income fr | F | · · · · · • | 15,1.1 | | | 15,111 |
| Other Revenue | | events (not incl | uding reported on line 1c) | | | | | |
| <u> </u> | | | a | | | | | |
| 듔 | b c | | penses b loss)from fundraising e | vents b | | | | |
| • | | | rom gaming activities e 19 | venes : | | | | |
| | <u> </u> | Laca direct avi | a penses b | | | | | |
| | | | penses b loss)from gaming activ | ities | | | | |
| | | Gross sales of i | inventory, less | | | | | |
| | ь | Less cost of go | a oods sold b | | | | | |
| | l | | loss) from sales of inve | ntory 🛌 | | | | |
| | | Miscellaneous | | Business Code | | | | |
| | 11a | | | | | | | |
| | ь | | | | | | | |
| | С | | | | | | | |
| | d | All other revenu | L | | | | | |
| | e | Total. Add lines | | 🕨 | | | | |
| | 12 | Total revenue. | See Instructions | | 637,201 | 407,890 | 3,588 | 212,865 |

Part IX Statement of Functional Expenses

| Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must comp | lete column (A | ١) |
|--|----------------|----|
|--|----------------|----|

| Jeeen | on 301(c)(3) and 301(c)(4) organizations must complete an columns An | | | | |
|-------|--|-----------------------|-----------------------------|---------------------------------|-------------------------|
| | Check if Schedule O contains a response or note to any line in this | | (B) | | <u> </u> (D) |
| | ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII. | (A) Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21 | | | | |
| 2 | Grants and other assistance to domestic individuals See Part IV, line 22 | 47,000 | 47,000 | | |
| 3 | Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 | 1,500 | 1,500 | | |
| 4 | Benefits paid to or for members | | | | |
| 5 | Compensation of current officers, directors, trustees, and key employees | | | | |
| 6 | Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$ | | | | |
| 7 | Other salaries and wages | | | | |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | | | | |
| 10 | Payroll taxes | | | | |
| 11 | Fees for services (non-employees) | | | | |
| а | Management | 180,500 | 99,275 | 81,225 | |
| b | Legal | | | | |
| С | Accounting | | | | |
| d | Lobbying | | | | |
| е | Professional fundraising services See Part IV, line 17 | | | | |
| f | Investment management fees | 7,577 | | 7,577 | |
| g | Other (If line 11g amount exceeds 10 $\%$ of line 25, column (A) amount, list line 11g expenses on Schedule O) | 51,606 | 9,550 | 42,056 | |
| 12 | Advertising and promotion | | | | |
| 13 | Office expenses | 52,315 | 35,467 | 16,848 | |
| 14 | Information technology | 5,027 | 4,000 | 1,027 | |
| 15 | Royalties | | | | |
| 16 | Occupancy | | | | |
| 17 | Travel | 23,722 | 8,121 | 15,601 | |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 186,848 | 186,848 | | |
| 20 | Interest | | | | |
| 21 | Payments to affiliates | | | | |
| 22 | Depreciation, depletion, and amortization | | | | |
| 23 | Insurance | 4,220 | 1,598 | 2,622 | |
| 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) | | | | |
| а | JOURNAL EXPENSE | 65,854 | 65,854 | | |
| b | PROFESSIONAL FEES | 11,760 | | 11,760 | |
| С | MISCELLANEOUS | 1,404 | 254 | 1,150 | |
| d | | | | | |
| е | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 639,333 | 459,467 | 179,866 | 0 |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet

| Par | t X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X | | | |
|----------------|----------|--|--------------------------|----------|--------------------|
| | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash-non-interest-bearing | 135,234 | 1 | 135,638 |
| | 2 | Savings and temporary cash investments | 112,882 | 2 | 104,601 |
| | 3 | Pledges and grants receivable, net | | 3 | |
| | 4 | Accounts receivable, net | 37,738 | 4 | 33,000 |
| | 5 | Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L | | | _ |
| s | 6 | Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L | | 5 | |
| Š | | | | 6 | |
| Assets | 7 | Notes and loans receivable, net | | 7 | |
| | 8 | Inventories for sale or use | 25, 470 | 8 | 97.049 |
| | 9 10a | Prepaid expenses and deferred charges | 25,470 | 9 | 27,942 |
| | | Part VI of Schedule D | | | |
| | b | Less accumulated depreciation | 4.050.500 | 10c | 4.055.044 |
| | 11 | Investments—publicly traded securities | 1,659,598 | 11 | 1,655,944 |
| | 12 | Investments—other securities See Part IV, line 11 | | 12 | |
| | 13 | Investments—program-related See Part IV, line 11 | | 13 | |
| | 14 | Intangible assets | | 14 | |
| | 15 | Other assets See Part IV, line 11 | 4 070 000 | 15 | 1.057.105 |
| | 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 1,970,922 | 16 | 1,957,125 |
| | 17 | Accounts payable and accrued expenses | 32,758 | 17 | 1,711 |
| | 18 | Grants payable | 70.040 | 18 | 07.004 |
| | 19 | Deferred revenue | 76,210 | 19 | 67,924 |
| | 20 | Tax-exempt bond liabilities | | 20 | |
| S. | 21 | Escrow or custodial account liability Complete Part IV of Schedule D | | 21 | |
| Liabilitie | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified | | | |
| <u>ia</u> | | persons Complete Part II of Schedule L | | 22 | |
| _ | 23 | Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule | | <u>.</u> | |
| | 26 | D | 108,968 | 25 | 69,635 |
| | 26 | Total liabilities. Add lines 17 through 25 | 100,900 | 26 | 09,033 |
| ě | | lines 27 through 29, and lines 33 and 34. | | | |
| ä | 27 | Unrestricted net assets | 1,678,469 | 27 | 1,703,563 |
| <u> </u> | 28 | Temporarily restricted net assets | 68,485 | 28 | 68,927 |
| 교 | 29 | Permanently restricted net assets | 115,000 | 29 | 115,000 |
| · Fund Balance | | Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. | | | |
| ō | 30 | Capital stock or trust principal, or current funds | | 30 | |
| ets | 31 | Paid-in or capital surplus, or land, building or equipment fund | | 31 | |
| Assets | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| Net A | 33 | Total net assets or fund balances | 1,861,954 | 33 | 1,887,490 |
| | 34 | Total liabilities and net assets/fund balances | 1,970,922 | 34 | 1,957,125 |
| | 1 37 | i otal nabilities and liet assets/lalla balalices | 1,910,922 | 34 | 1,907,120 |

| Pai | t XI | Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI | | | | F |
|-----|-----------------|--|----------|------------|-----|---|
| | | | | | | |
| 1 | Total | revenue (must equal Part VIII, column (A), line 12) | 1 | | é | 537,201 |
| 2 | Total | expenses (must equal Part IX, column (A), line 25) | 2 | | (| 539,333 |
| 3 | Rever | nue less expenses Subtract line 2 from line 1 | 3 | | | -2,132 |
| 4 | Neta | ssets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 1,8 | 361,954 |
| 5 | Netu | nrealized gains (losses) on investments | 5 | | | 27,668 |
| 6 | | red services and use of facilities | 6 | | | |
| 7 | Inves | tment expenses | 7 | | | |
| 8 | | period adjustments | 8 | | | |
| 9 | | changes in net assets or fund balances (explain in Schedule O) | 9 | | | 0 |
| | colum | ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B)) | 10 | | 1,8 | 387,490 |
| Par | t XII | Financial Statements and Reporting | | | | _ |
| | | Check if Schedule O contains a response or note to any line in this Part XII | | | | <u>. </u> |
| | | | | | Yes | No |
| 1 | | organization changed its method of accounting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," explain in full of the counting from a prior year or checked "Other," ex | | | | |
| 2a | Were | the organization's financial statements compiled or reviewed by an independent accountant? | | 2a | | No |
| | | s,' check a box below to indicate whether the financial statements for the year were compiled or revie arate basis, consolidated basis, or both | wed or | ו | | |
| | Γs | eparate basis | | | 1 | |
| b | Were | the organization's financial statements audited by an independent accountant? | | 2b | Yes | |
| | | s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both | arate | | | |
| | V S | eparate basis | | | 1 | |
| c | | s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant? | ht of th | 2 c | Yes | |
| | If the Sched | organization changed either its oversight process or selection process during the tax year, explain i Iule O | n | | 1: | |
| | Single | result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133? | е | 3a | | No |
| b | | s," did the organization undergo the required audit or audits? If the organization did not undergo the ed audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | | 3b | | |

Software ID: Software Version:

EIN: 22-2387061

Name: THE AMERICAN ASSOCIATION FOR

AEROSOL RESEARCH INC

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

| Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors | | | | | | | | | | | |
|---|--|---|-----------------------|---------|--------------|---------------------------------|----------|--|---|--|--|
| (A) Name and Title | (B) Average hours per week (list any hours for related | r more than one box, unless t person is both an officer s and a director/trustee) | | | | | | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and | |
| | organizations below dotted line) | Individual trustee or director | Institutional Trustee | Officei | Key employee | Highest compensated employee | Former | | | related organizations | |
| (1) JAY TURNER PRESIDENT (EFF OCT 2014) | 1 00 | х | | х | | | | 0 | 0 | 0 | |
| (1) BARBARA WYSLOUZIL | 1 00 | x | | × | | | | 0 | 0 | 0 | |
| PRESIDENT ('TIL OCT 2014) (2) SHERYL EHRMAN | 1 00 | × | | X | | | | 0 | 0 | 0 | |
| VICE PRESIDENT (EFF OCT 2014) (3) JAY TURNER | 1 00 | | _ | | | | | | | | |
| VICE PRESIDENT ('TIL OCT 2014) | | Х | | х | | | | 0 | 0 | 0 | |
| VICE PRES-ELECT (EFF OCT 2014) | 1 00 | х | | х | | | | 0 | 0 | 0 | |
| (5) SHERYL EHRMAN VICE PRES-ELECT ('TIL OCT 2014) | 1 00 | х | | х | | | | 0 | 0 | 0 | |
| (6) LINSEY MARR TREASURER (2014-2016) | 1 00 | х | | х | | | | 0 | 0 | 0 | |
| (7) LYNN RUSSELL TREASURER ('TIL OCT 2014) | 1 00 | х | | х | | | | 0 | 0 | 0 | |
| (8) LINSEY MARR | 1 00 | х | | х | | | | 0 | 0 | 0 | |
| TREASURER ELECT ('TIL OCT 2014) (9) SURESH DHANIYALA | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| SECRETARY (2013-2015) (10) JAMES SMITH | 1 00 | X | | X | | | | 0 | 0 | 0 | |
| SECRETARY ELECT (EFF OCT 2014) (11) BARBARA WYSLOUZIL | 1 00 | | | | | | | | | | |
| IMMED PAST PRES (EFF OCT 2014) (12) BARBARA TURPIN | 1 00 | X | | Х | | | | 0 | 0 | 0 | |
| IMMED PAST PRES ('TIL OCT 2014) (13) DEBORAH GROSS | 1 00 | X | | Х | | | | 0 | 0 | 0 | |
| MEMBER (2012-2015) (14) HANS MOOSMULLER | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| MEMBER (2012-2015) | | x | | | | | | 0 | 0 | 0 | |
| (15) ILONA RIIPINEN MEMBER (2013-2016) | 1 00 | х | | | | | | 0 | 0 | 0 | |
| (16) JACKY ROSATI ROWE | 1 00 | х | | | | | | 0 | 0 | 0 | |
| MEMBER (2011-2014) (17) KELLEY BARSANTI | 1 00 | х | | | | | | 0 | 0 | 0 | |
| MEMBER (2013-2016) (18) LEAH WILLIAMS | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MEMBER (2012-2015) (19) SCOT MARTIN | 1 00 | | | | | | | | | | |
| MEMBER (2011-2014) (20) SERGEY NIZKORODOV | 1 00 | X | | | | | | 0 | 0 | 0 | |
| MEMBER (2013-2016) (21) V FAYE MCNEILL | 1 00 | Х | | | | | | 0 | 0 | 0 | |
| MEMBER (2011-2014) | | Х | | | | | | 0 | 0 | 0 | |
| (22) DONALD DABDUB MEMBER (2014-2017) | 1 00 | х | | | | | | 0 | 0 | 0 | |
| (23) ATHANASIOS NENES MEMBER (2014-2017) | 1 00 | х | | | | | | 0 | 0 | 0 | |
| (24) AMY SULLIVAN | 1 00 | х | | | | | | 0 | 0 | 0 | |
| MEMBER (2014-2017) | 1 |] | <u> </u> | | | | <u> </u> | | | | |

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

| (A) Name and Title | (B) A verage hours per week (list any hours for related organizations below dotted line) | Posit the orange of a lindividual trustae or director | ion (d ian oi n is b | ne booth a ctor/ | ox, u an of trust | nless ficer ee) | Former | (D) Reportable compensation from the organization (W- 2/1099-MISC) | (E) Reportable compensation from related organizations (W- 2/1099-MISC) | (F) Estimated amount of other compensation from the organization and related organizations |
|--|--|---|----------------------------|------------------|-------------------------|-----------------------|--------|--|---|--|
| (26) MELISSA BALDWIN | 13 00 | | | Х | | | | 0 | 0 | 0 |
| (1) BILL CARNEY EXECUTIVE DIRECTOR (EFF DEC 2014) | 13 00 | | | х | | | | 0 | 0 | 0 |

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493215013085

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

2014

Open to Public Inspection

Name of the organization
THE AMERICAN ASSOCIATION FOR
AEROSOL RESEARCH INC

Employer identification number
22-2387061

| EROSOL RESEARCH INC 22-2387061 | | | | | | | | | | | | |
|--------------------------------|----------|---|-----------------|-------------------------------------|--------------------------|-----------------------|-------------------------------------|-------------------------------------|--|--|--|--|
| Pa | rt I | Reason for Publi | c Charity S | tatus (All organıza | tions must co | mplete this | part.) See instruction | ons. | | | | |
| he o | organı | zation is not a private fo | oundation beca | ause it is (For lines 1 | through 11, ch | eck only one b | oox) | | | | | |
| 1 | Γ | A church, convention | of churches, o | r association of churc | hes described i | n section 170(| b)(1)(A)(i). | | | | | |
| 2 | Γ | A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) | | | | | | | | | | |
| 3 | Γ | A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). | | | | | | | | | | |
| 4 | Γ | A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state | | | | | | | | | | |
| 5 | | | | | | | | | | | | |
| | | section 170(b)(1)(A) | (iv). (Complete | e Part II) | | | | | | | | |
| 6 | Г | A federal, state, or loc | | | described in se | ction 170(b)(| 1)(A)(v). | | | | | |
| 7 | | An organization that n | | | | | | ieneral public | | | | |
| 8 | _ | described in section 1 A community trust des | 70(b)(1)(A)(v | /i). (Complete Part II |) | _ | - | , | | | | |
| 9 | <u></u> | An organization that n | | | | | ibutions, membership | fees, and aross | | | | |
| | , | receipts from activitie | | | | | | | | | | |
| | | its support from gross | | | | | | | | | | |
| | | acquired by the organi | | | | | | | | | | |
| 10 | Г | An organization organ | | • | | • | • | | | | | |
| 11 | , _ | An organization organ | • | • | • | • | | uit the nurnoses of | | | | |
| | , | one or more publicly s | | | | | | | | | | |
| | | the box in lines 11a th | | | | | | | | | | |
| а | Г | Type I. A supporting of | | | | | | | | | | |
| | | supported organization | | | | ty of the direct | tors or trustees of the | supporting | | | | |
| ь | \vdash | organization You mus Type II. A supporting | | | | with its sunn | orted organization(s) h | ov having control or | | | | |
| ט | , | management of the su | | | | | | | | | | |
| | | must complete Part IV | | | | | 3 11 | 3 () | | | | |
| C | Г | Type III functionally i | | | | | | grated with, its | | | | |
| | _ | supported organization | | | | | | | | | | |
| d | ı | Type III non-function not functionally integr | | | | | | | | | | |
| | | (see instructions) Yo | | | | | rement and an accentiv | eness requirement | | | | |
| е | Γ | Check this box if the o | | | | | ıs a Type I, Type II, T | ype III functionally | | | | |
| | | ıntegrated, or Type III | | | | | | | | | | |
| f | | Enter the number of su | | | | | | | | | | |
| g | | Provide the following i | nformation abo | out the supported orga | ınızatıon(s) | | | | | | | |
| | | | | | T | | Т | T | | | | |
| | | ame of supported | (ii) EIN | (iii) Type of | (iv) Is the org | | (v) A mount of | (vi) A mount of | | | | |
| | 1 | organization | | organization (described on lines | listed in your docume | | monetary support (see instructions) | other support (see instructions) | | | | |
| | | | | 1-9 above or IRC | docume | 110. | (see instructions) | mistractions; | | | | |
| | | | | section (see | | | | | | | | |
| | | | | ınstructions)) | | | - | | | | | |
| | | Yes No | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | † | | | | | |

| Sch | edule A (Form 990 or 990-EZ) 2014 | | | | | | Page 2 |
|-----|---|--------------------------|--------------------|----------------------|----------------------|-----------------|----------------------|
| Pa | Support Schedule for (Complete only if you c | hecked the bo | x on line 5, 7, | or 8 of Part I o | r if the organiza | ation failed | to qualify under |
| | Part III. If the organiza ection A. Public Support | tion fails to qu | alify under the | tests listed bel | ow, please com | ipiete Part I | 11.) |
| | endar year (or fiscal year beginning | (-) 2010 | (1) 2011 | (-) 2012 | (4) 2012 | (-) 201 | (6) T. t. l |
| | in) 🟲 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received (Do not include any "unusual | | | | | | |
| | grants ") | | | | | | |
| 2 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either | | | | | | |
| | paid to or expended on its | | | | | | |
| 3 | behalf The value of services or facilities | | | | | | |
| , | furnished by a governmental unit to | | | | | | |
| | the organization without charge | | | | | | |
| 4 | Total. Add lines 1 through 3 | | | | | | |
| 5 | The portion of total contributions | | | | | | |
| | by each person (other than a | | | | | | |
| | governmental unit or publicly supported organization) included on | | | | | | |
| | line 1 that exceeds 2% of the | | | | | | |
| | amount shown on line 11, column | | | | | | |
| | (f) | | | | | | |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | |
| S | ection B. Total Support | 1 | l | | | 1 | |
| | endar year (or fiscal year beginning | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 2014 | (f) Total |
| | in) ► | (a) 2010 | (0) 2011 | (6) 2012 | (d) 2013 | (e) 2014 | (I) Total |
| 7 | A mounts from line 4 | | | | | | |
| 8 | Gross income from interest, | | | | | | |
| | dividends, payments received on securities loans, rents, royalties | | | | | | |
| | and income from similar | | | | | | |
| | sources | | | | | | |
| 9 | Net income from unrelated | | | | | | |
| | business activities, whether or not the business is regularly carried | | | | | | |
| | on | | | | | | |
| 10 | Other income Do not include gain | | | | | | |
| | or loss from the sale of capital | | | | | | |
| | assets (Explain in Part VI) | | | | | | |
| 11 | Total support Add lines 7 through 10 | | | | | | |
| 12 | Gross receipts from related activities | es, etc (see inst | ructions) | | • | 12 | <u> </u> |
| 13 | First five years. If the Form 990 is f | or the organizati | on's first, second | l, thırd, fourth, or | fifth tax year as a | section 501 | (c)(3) |
| | organization, check this box and sto | | | | | <u> </u> | <u> </u> |
| | ection C. Computation of Pub | | | 4.4 1 (5) | | | |
| 14 | Public support percentage for 2014 | · · | | 11, column (f)) | | 14 | |
| 15 | Public support percentage for 2013 | • | • | | | 15 | |
| 16a | 33 1/3% support test—2014. If the | | | | line 14 is 33 1/3% | ∕o or more, ch | |
| h | and stop here. The organization qua 33 1/3% support test—2013. If the | | | | and line 15 is 3 | 3 1/3% or mo | re check this |
| | box and stop here. The organization | | | | , and fine 13 is 3. | 3 1/3/0 01 1110 | re, check this ▶□ |
| 17a | 10%-facts-and-circumstances test- | -2014. If the org | anızatıon dıd not | check a box on li | | | , |
| | is 10% or more, and if the organizat | | | | | | |
| | in Part VI how the organization mee | ts the "facts-and | d-circumstances' | test The organi | zation qualifies as | s a publicly s | |
| h | organization 10%-facts-and-circumstances test- | -2013. If the ora | anization did not | check a hov on li | ne 13 16a 16b | or 17a and b | ▶ ┌ |
| | 15 is 10% or more, and if the organ | | | | | | |
| | Explain in Part VI how the organizat | | | | | | ublicly |
| | supported organization | | | | 471 | | ▶ ┌ |
| 18 | Private foundation. If the organizations | on ala not check | ca box on line 13 | , 16a, 16b, 1/a, | or 1 / b, check this | s pox and see | • ▶ □ |

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

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

| | ction A. Public Support | | | | | | | |
|---|--|--|--|--|--|----------------------|---|---|
| Cale | ndar year (or fiscal year beginning in) 🟲 | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 20 | 014 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") | 247,110 | 158,724 | 183,459 | 42,316 | | 56,241 | 687,850 |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose | 686,461 | 360,516 | 361,970 | 461,620 | | 407,890 | 2,278,457 |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | 40,700 | 39,975 | 56,525 | 58,425 | | 62,425 | 258,050 |
| 4 | Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | | |
| 5 | The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | | |
| 6 | Total. Add lines 1 through 5 | 974,271 | 559,215 | 601,954 | 562,361 | | 526,556 | 3,224,357 |
| 7a | Amounts included on lines 1, 2, and 3 received from disqualified persons | | | | | | | 0 |
| b | Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year | | | | | | | 0 |
| c | Add lines 7a and 7b | | | | | | | 0 |
| 8 | Public support (Subtract line 7c from line 6) | | | | | | | 3,224,357 |
| | ction B. Total Support | | | | | | | |
| Cale | ndar year (or fiscal year beginning | (a) 2010 | (b) 2011 | (c) 2012 | (d) 2013 | (e) 20 | 014 | (f) Total |
| | | | | | | | | |
| ۵ | in) ► A mounts from line 6 | 974.271 | 559.215 | 601.954 | 562.361 | | 526,556 | 3.224.357 |
| 9 10a | A mounts from line 6 | 974,271 | 559,215 | 601,954 | 562,361 | | 526,556 | 3,224,357 |
| 9 10a | A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 974,271 65,210 | 559,215 65,943 | 601,954 78,431 | 562,361 83,352 | | 91,616 | 3,224,357 384,552 |
| | A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar | · | , | , | | | | |
| 10a | A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after | · | , | , | | | | 384,552 |
| 10a b | A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 | 65,210 | 65,943 | 78,431 | 83,352 | | 91,616 | 384,552 |
| 10a b | A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the | 65,210 | 65,943 | 78,431 | 83,352 | | 91,616 | |
| 10a b c 11 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, | 65,210 | 65,943 65,943 | 78,431 78,431 | 83,352 83,352 | | 91,616 | 384,552 384,552 |
| 10a b c 11 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is | 65,210 65,210 1,039,481 | 65,943 65,943 300 625,458 | 78,431 78,431 3,400 683,785 | 83,352 83,352 1,000 646,713 | | 91,616 | 384,552 384,552 4,700 3,613,609 3) organization, |
| 10a b c 11 12 13 14 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to the check this box and stop here | 65,210 65,210 1,039,481 For the organizatio | 65,943 65,943 300 625,458 n's first, second, | 78,431 78,431 3,400 683,785 | 83,352 83,352 1,000 646,713 | | 91,616 | 384,552 384,552 4,700 3,613,609 |
| 10a b c 11 12 13 14 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is | 65,210 65,210 1,039,481 for the organizatio | 65,943 65,943 300 625,458 n's first, second, | 78,431 78,431 3,400 683,785 third, fourth, or f | 83,352 83,352 1,000 646,713 | | 91,616 | 384,552 384,552 4,700 3,613,609 3) organization, |
| 10a b c 11 12 13 14 See 15 16 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to the check this box and stop here ction C. Computation of Pub Public support percentage from 2014 | 1,039,481 for the organizatio lic Support Pe (line 8, column (f | 65,943 65,943 300 625,458 n's first, second, rcentage) divided by line: rt III, line 15 | 78,431 78,431 3,400 683,785 third, fourth, or f | 83,352 83,352 1,000 646,713 | section | 91,616 | 384,552 4,700 3,613,609 8) organization, |
| 10a b c 11 12 13 14 Se 15 16 Se | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to the check this box and stop here ection C. Computation of Pub Public support percentage from 201 ection D. Computation of Inventors | 1,039,481 for the organizatio lic Support Pe (line 8, column (f 3 Schedule A, Pa | 65,943 65,943 300 625,458 n's first, second, rcentage) divided by line: rt III, line 15 ne Percentag | 78,431 78,431 3,400 683,785 third, fourth, or f | 83,352 83,352 1,000 646,713 in thax year as a | 15 | 91,616 | 384,552 4,700 3,613,609 3) organization, 89 230 % 89 100 % |
| 10a b c 11 12 13 14 Se 15 16 Se 17 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is check this box and stop here ction C. Computation of Pub Public support percentage for 2014 Public support percentage from 201 ction D. Computation of Invention of Invention of Invention Investment income percentage for 201 | 1,039,481 for the organizatio lic Support Pe (line 8, column (f 3 Schedule A, Pa estment Incom | 65,943 65,943 300 625,458 n's first, second, rcentage) divided by line: rt III, line 15 me Percentag lumn (f) divided by | 78,431 78,431 3,400 683,785 third, fourth, or f 13, column (f)) je py line 13, column | 83,352 83,352 1,000 646,713 in thax year as a | section | 91,616 | 384,552 4,700 3,613,609 3) organization, • |
| 10a b c 11 12 13 14 Se 15 16 Se 17 18 | Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is to the check this box and stop here ection C. Computation of Pub Public support percentage from 201 ection D. Computation of Inventors | 65,210 1,039,481 for the organization lic Support Pe (line 8, column (for 3 Schedule A, Palestment Incore) 2014 (line 10 c, cone) 2013 Schedule A | 65,943 65,943 300 625,458 n's first, second, rcentage) divided by line: rt III, line 15 me Percentag lumn (f) divided by , Part III, line 1: | 78,431 78,431 3,400 683,785 third, fourth, or f 13, column (f)) 1e by line 13, column | 83,352 83,352 1,000 646,713 ifth tax year as a | 15 16 17 18 | 91,616 91,616 618,172 501(c)(3 | 384,552 4,700 3,613,609 3) organization, 89 230 % 89 100 % 10 640 % 10 780 % |

b 33 1/3% support tests—2013. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V $\,)$

| Section A. All Supporting Organizations |
|---|
|---|

| Se | ection A. All Supporting Organizations | | | |
|-----|---|-----|-----|----|
| | | | Yes | No |
| 1 | Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. | 1 | | |
| 2 | Did the organization have any supported organization that does not have an IRS determination of status under section $509(a)(1)$ or (2) ? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section $509(a)(1)$ or (2) . | 2 | | |
| За | Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. | За | | |
| b | Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination. | 3b | | |
| c | Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. | 3с | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below. | 4a | | |
| b | Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations. | 4b | | |
| c | Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or $(2)^7$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section $170(c)(2)(B)$ purposes. | 4c | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document). | 5a | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI . | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990). | 7 | | |
| 8 | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990). | 8 | | |
| 9a | Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI . | 9a | | |
| b | Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If</i> "Yes," provide detail in Part VI . | 9b | | |
| c | Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI . | 9c | | |
| L0a | Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below. | 10a | | |
| b | Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings). | 10b | | |
| l1 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, | | | |
| | the governing body of a supported organization? | 11a | | |
| b | A family member of a person described in (a) above? | 11b | | |

c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

11c

| Pa | rt IV Supporting Organizations (continued) | | | |
|----|--|----|-----|----|
| S | ection B. Type I Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. | 1 | | |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization. | 2 | | |
| S | ection C. Type II Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). | 1 | | |
| S | ection D. All Type III Supporting Organizations | | | |
| | | | Yes | No |
| 1 | Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | | |
| 2 | Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | |
| 3 | By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. | 3 | | |
| S | ection E. Type III Functionally-Integrated Supporting Organizations | | | |
| 1 | Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see The organization satisfied the Activities Test Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions. | | | |
| 2 | Activities Test Answer (a) and (b) below. | | Yes | No |
| | a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. | 2a | | |
| | b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. | 2b | | |
| 3 | | | | |
| | a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI. | 3a | | |
| | b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each | | 1 1 | |

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

3b

Part V - Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

| 1 | _ | Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 See instructions. All other |
|-----|----|---|
| ype | [] | II non-functionally integrated supporting organizations must complete Sections A through E |

| | Section A - Adjusted Net Income | | (A) Prior Year | (B) Current Year (optional) |
|---|--|---|----------------|--------------------------------|
| 1 | Net short-term capital gain | 1 | | |
| 2 | Recoveries of prior-year distributions | 2 | | |
| 3 | Other gross income (see instructions) | 3 | | |
| 4 | Add lines 1 through 3 | 4 | | |
| 5 | Depreciation and depletion | 5 | | |
| 6 | Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) | 6 | | |
| 7 | Other expenses (see instructions) | 7 | | |
| 8 | Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) | 8 | | |

| | Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
|---|--|----|----------------|-----------------------------|
| 1 | Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year) | 1 | | |
| а | Average monthly value of securities | 1a | | |
| b | Average monthly cash balances | 1b | | |
| c | Fair market value of other non-exempt-use assets | 1c | | |
| d | Total (add lines 1a, 1b, and 1c) | 1d | | |
| e | Discount claimed for blockage or other factors (explain in detail in Part VI) | | | |
| 2 | Acquisition indebtedness applicable to non-exempt use assets | 2 | | |
| 3 | Subtract line 2 from line 1d | 3 | | |
| 4 | Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | | |
| 5 | Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | | |
| 6 | Multiply line 5 by 035 | 6 | | |
| 7 | Recoveries of prior-year distributions | 7 | | |
| 8 | Minimum Asset Amount (add line 7 to line 6) | 8 | | |

Section C - Distributable Amount

- **1** Adjusted net income for prior year (from Section A, line 8, Column A)
- 2 Enter 85% of line 1
- 3 Minimum asset amount for prior year (from Section B, line 8, Column A)
- 4 Enter greater of line 2 or line 3
- 5 Income tax imposed in prior year
- **6 Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)
- 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

| | Current Year |
|---|--------------|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |

| Section D - Distributions | Current Year | | | | | | |
|---|---|--|---|--|--|--|--|
| 1 Amounts paid to supported organizations to accom | plish exempt purposes | | | | | | |
| 2 A mounts paid to perform activity that directly furthexcess of income from activity | ported organizations, in | | | | | | |
| 3 Administrative expenses paid to accomplish exemp | ot purposes of supported org | anızatıons | | | | | |
| 4 Amounts paid to acquire exempt-use assets | A mounts paid to acquire exempt-use assets | | | | | | |
| | Qualified set-aside amounts (prior IRS approval required) | | | | | | |
| | | | | | | | |
| 6 Other distributions (describe in Part VI) See instru | JCTIONS | | | | | | |
| 7 Total annual distributions. Add lines 1 through 6 | 7 Total annual distributions. Add lines 1 through 6 | | | | | | |
| 8 Distributions to attentive supported organizations t details in Part VI) See instructions | | | | | | | |
| 9 Distributable amount for 2014 from Section C, line | 6 | | | | | | |
| 10 Line 8 amount divided by Line 9 amount | | | | | | | |
| | | (::) | (:::) | | | | |
| Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributions Pre-2014 | (iii) Distributable Amount for 2014 | | | | |
| 1 Distributable amount for 2014 from Section C, line 6 | | | | | | | |
| 2 Underdistributions, if any, for years prior to 2014 (reasonable cause requiredsee instructions) | | | | | | | |
| 3 Excess distributions carryover, if any, to 2014 | | | | | | | |
| a From 2009 | | | | | | | |
| b From 2010 | | | | | | | |
| c From 2011 | | | | | | | |
| d From 2012 | | | | | | | |
| e From 2013 | | | | | | | |
| f Total of lines 3a through e | | | | | | | |
| g Applied to underdistributions of prior years | | | | | | | |
| h Applied to 2014 distributable amount i Carryover from 2009 not applied (see instructions) | | | | | | | |
| j Remainder Subtract lines 3g, 3h, and 3i from 3f | | | | | | | |
| 4 Distributions for 2014 from Section D, line 7 \$ | | | | | | | |
| A pplied to underdistributions of prior years | | | | | | | |
| b Applied to 2014 distributable amount | | | | | | | |
| c Remainder Subtract lines 4a and 4b from 4 | | | | | | | |
| 5 Remaining underdistributions for years prior to 2014, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions) | | | | | | | |
| 6 Remaining underdistributions for 2014 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions) | | | | | | | |
| 7 Excess distributions carryover to 2015. Add lines 3j and 4c | | | | | | | |
| 8 Breakdown of line 7 | | | | | | | |
| a From 2010 | | | | | | | |
| b From 2011 | | | | | | | |
| c From 2012 | | | | | | | |
| d From 2013 | | | | | | | |

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

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

Schedule A (Form 990 or 990-EZ) 2014

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

DLN: 93493215013085

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

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

Open to Public

| mai | Trevenide dervice | · · · · · · · · · · · · · · · · · · · | | | Inspect | |
|-----|--|---|------------|-------------------|-------------|----------|
| ΉΕ | ne of the organization AMERICAN ASSOCIATION FOR DSOL RESEARCH INC | | | oloyer identifica | ation numbe | r |
| Pa | organizations Maintaining Donor Adv | | | | s. Complet | e if the |
| | organization unionered 100 to 101111 550 | (a) Donor advised funds | | (b) Funds and | other accou | nts |
| | Total number at end of year | | | | | |
| | Aggregate value of contributions to (during year) | | | | | |
| | Aggregate value of grants from (during year) | | | | | |
| | Aggregate value at end of year | | | | | |
| | Did the organization inform all donors and donor adviso funds are the organization's property, subject to the org | - | onor advi | ısed | ┌ Yes | ┌ No |
| | Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefit conferring impermissible private benefit? | | | | ┌ Yes | ┌ No |
| a r | Conservation Easements. Complete if | the organization answered "Yes" | to Forn | n 990, Part I' | V, line 7. | |
| | Purpose(s) of conservation easements held by the organization of land for public use (e.g., recreation in Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a | or education) Preservation of a | a certifie | d historic struc | cture | |
| | easement on the last day of the tax year | | | T | | |
| | Total acceptance of a construction of a construc | | <u> </u> | Held at the | End of the | Year |
| | Total number of conservation easements | | 2a | | | |
| | Total acreage restricted by conservation easements Number of conservation easements on a certified histo | ric structure included in (a) | 2b | | | |
| | Number of conservation easements included in (c) acq | • • | 2c | | | |
| | historic structure listed in the National Register | | 2d | | 4 | |
| | Number of conservation easements modified, transferre | ed, released, extinguisned, or termina | itea by tr | ie organization | auring | |
| | the tax year ▶ | | | | | |
| | Number of states where property subject to conservati | on easement is located ► | | | | |
| | Does the organization have a written policy regarding t enforcement of the conservation easements it holds? | he periodic monitoring, inspection, ha | indling of | violations, and | ☐ Yes | ┌ No |
| | Staff and volunteer hours devoted to monitoring, inspect | cting, and enforcing conservation eas | ements o | during the year | | |
| | Amount of expenses incurred in monitoring, inspecting | , and enforcing conservation easemer | nts durin | g the year | | |
| | ▶ \$ | | | | | |
| | Does each conservation easement reported on line 2(d and section $170(h)(4)(B)(II)$? |) above satisfy the requirements of so | ection 17 | 70(h)(4)(B)(ı) | ┌ Yes | ┌ No |
| | In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme | e footnote to the organization's financi nts | al stater | ments that des | cribes | |
| ī | Organizations Maintaining Collections Complete if the organization answered "Ye | | , or Ot | her Similar | Assets. | |
| | If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to | ts held for public exhibition, educatior | n, or rese | arch in further | | |
| | If the organization elected, as permitted under SFAS 1 works of art, historical treasures, or other similar asset service, provide the following amounts relating to these | ts held for public exhibition, education | | | | ıc |
| | (i) Revenue included in Form 990, Part VIII, line 1 | | | ► \$ | | |
| | (ii) Assets included in Form 990, Part X | | | | | |
| | If the organization received or held works of art, historic following amounts required to be reported under SFAS: | | | | | |
| | Revenue included in Form 990, Part VIII, line 1 | | | ► \$ | | |
| | Assets included in Form 990, Part X | | | <u></u> | | |
| | 133cc meraded in Form 330, Falc A | | | F 4 | | |

| Par | Organizations Maintaining Co | <u>llections of Art,</u> | <u>Histo</u> | <u>orical Ti</u> | reasur | es, or O | <u>ther</u> | <u>Similar Ass</u> | sets (d | :ontinued) |
|--------|---|--------------------------|--------------|-------------------------|-----------------|--------------------------|---------------|--------------------------------|-----------------|------------|
| 3 | Using the organization's acquisition, access collection items (check all that apply) | on, and other records | s, che | ck any of | the follo | wing that a | re a s | ignificant use | of its | |
| а | Public exhibition | | d | Loan | or exch | ange progr | ams | | | |
| b | Scholarly research | | e | Othe | r | | | | | |
| c | Preservation for future generations | | | | | | | | | |
| 4 | Provide a description of the organization's co | ollections and explain | how t | hey furth | er the or | ganızatıon | 's exei | mpt purpose ıı | n | |
| 5 | During the year, did the organization solicit o | | | | | | | | _ | _ |
| | assets to be sold to raise funds rather than t | | | | | | | | Yes | │ No |
| Pal | t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an | | | | | answered | ı Yes | s" to Form 9 | 90, | |
| 1a | Is the organization an agent, trustee, custod included on Form 990, Part X? | | | | | other ass | ets no | | - Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XII | I and complete the fo | llowir | ng table | | | | | | |
| | | | | | | | | Am | ount | |
| C | Beginning balance | | | | | | 1c | | | |
| d | Additions during the year | | | | | | 1d | | | |
| e | Distributions during the year | | | | | | 1e | | | |
| f | Ending balance | | | | | | 1f | | | |
| 2a | Did the organization include an amount on Fo | orm 990, Part X, line | 21, fo | rescrow | orcusto | dıal accour | nt liabi | lity? [| _ Yes | ┌ No |
| b | If "Yes," explain the arrangement in Part XII | I Check here if the e | xplan | ation has | been pr | ovided in P | art XI | II | | Γ |
| Pa | rt V Endowment Funds. Complete | | | | | | | | | |
| | • | (a)Current year | | or year | b (c)Two | o years back | (d) Th | ree years back | (e) Four | years back |
| 1a | Beginning of year balance | 396,588 | | 347,608 | <u> </u> | 299,999 | | 267,746 | | 254,365 |
| b | Contributions | 12,358 | | 4,500 | | 16,000 | | 40,539 | | 1,676 |
| С | Net investment earnings, gains, and losses | 24,865 | | 55,059 | | 42,565 | | 714 | | 36,440 |
| d | Grants or scholarships | 35,018 | | 10,579 | | 10,956 | | 9,000 | | 23,208 |
| e | Other expenditures for facilities and programs | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | 1,527 |
| g | End of year balance | 398,793 | | 396,588 | 1 | 347,608 | | 299,999 | | 267,746 |
| 2 | Provide the estimated percentage of the curi | ent year end balance | (line | 1g, colum | nn (a)) he | eld as | | | | |
| а | Board designated or quasi-endowment 🕨 | 53 870 % | | | | | | | | |
| ь | Permanent endowment > 28 850 % | | | | | | | | | |
| c | Temporarily restricted endowment > 17 2 The percentages in lines 2a, 2b, and 2c short | 280 % uld equal 100% | | | | | | | | |
| За | Are there endowment funds not in the posses | ssion of the organizat | ion th | at are hel | d and ad | lmınıstered | l for th | ie | | |
| | organization by | | | | | | | | Yes | No No |
| | (i) unrelated organizations | | | | | | | 3a(i | | No |
| L | (ii) related organizations | | | | | | | 3a(i | | No |
| ь 4 | Describe in Part XIII the intended uses of the | · | | | | | | 3b | <u> </u> | |
| | t VI Land, Buildings, and Equipme | = | | | n answ | ered 'Yes | ' to Fo | orm 990. Pa | rt IV. l | ine |
| | 11a. See Form 990, Part X, line | | | | | | | | | |
| | Description of property | | | (a) Cost basıs (ınve | | (b)Cost or basis (oth | | (c) Accumulate depreciation | d (d) | Book value |
| 1a | Land | | | | | | | | | |
| b | Buildings | | ļ | | | | | | | |
| c | Leasehold improvements | | . | | | | | | | |
| d | Equipment | | . | | | | | | | |
| | Other | | | | | | | | | |
| | I. Add lines 1a through 1e <i>(Column (d) must e</i> | | | n (B), lıne | 10(c).) | | | > | | 0 |
| | | | | | | | | Schedule D | (Form | 990) 2014 |

| Part VII Investments—Other Securities. Co | mplete if the organizatio | n answered 'Yes' to Form 990, Part IV, line 11b. |
|--|--------------------------------|--|
| See Form 990, Part X, line 12. (a) Description of security or category | (b)Book value | (c) Method of valuation |
| (including name of security) | | Cost or end-of-year market value |
| (1)Financial derivatives | | |
| (2)Closely-held equity interests Other | | |
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| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 12) | F | |
| Part VIII Investments—Program Related. C | complete if the organizati | on answered 'Yes' to Form 990, Part IV, line 11c |
| See Form 990, Part X, line 13. (a) Description of investment | (b) Book value | (c) Method of valuation |
| (a) Description of investment | (b) Book value | Cost or end-of-year market value |
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| | | |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 13) | F | |
| Part IX Other Assets. Complete if the organization | on answered 'Yes' to Form 9 | 90, Part IV, line 11d See Form 990, Part X, line 15 |
| (a) Desc | ription | (b) Book value |
| | | |
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| Total. (Column (b) must equal Form 990, Part X, col.(B) line | | |
| Part X Other Liabilities. Complete if the org Form 990, Part X, line 25. | anization answered 'Yes' | to Form 990, Part IV, line 11e or 11f. See |
| 1 (a) Description of liability | (b) Book value | |
| Federal income taxes | | - |
| rederal income taxes | | - |
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| | | |
| Total (Column (h) must equal Form 000, Part V cal (P) line 35.) | _ | - |
| Total. (Column (b) must equal Form 990, Part X, col (B) line 25) | do the toyt of the fortunation | About a second of the second o |

| Par | | Revenue per Audited Financial Stat wered 'Yes' to Form 990, Part IV, line 1 | | ts With Revenue p | oer R | eturn Complete if |
|------|--|---|-----------------------------------|---|------------|---|
| 1 | | er support per audited financial statements | | | 1 | 657,292 |
| 2 | Amounts included on line 1 b | ut not on Form 990, Part VIII, line 12 | | | | |
| а | Net unrealized gains (losses) | on investments | 2a | 27,668 | | |
| b | Donated services and use of | facılıtıes | 2b | | 1 | |
| c | Recoveries of prior year grant | ts | 2c | | 1 | |
| d | Other (Describe in Part XIII |) | 2d | |] | |
| e | Add lines 2a through 2d | | | | 2e | 27,668 |
| 3 | Subtract line ${f 2e}$ from line ${f 1}$. | | | | 3 | 629,624 |
| 4 | Amounts included on Form 99 | 90, Part VIII, line 12, but not on line 1 | | | | |
| а | Investment expenses not inc | luded on Form 990, Part VIII, line 7b . | 4a | 7,577 | | |
| b | Other (Describe in Part XIII |) | 4b | | | |
| c | Add lines 4a and 4b | | | | 4c | 7,577 |
| 5 | Total revenue Add lines 3 an | d 4c. (This must equal Form 990, Part I, line | 12) . | | 5 | 637,201 |
| Part | | xpenses per Audited Financial Stanswered 'Yes' to Form 990, Part IV, line | | nts With Expenses | per | Return. Complete |
| 1 | Total expenses and losses pe | er audited financial statements | | | 1 | 631,756 |
| 2 | A mounts included on line 1 bi | ut not on Form 990, Part IX, line 25 | | | | |
| а | Donated services and use of t | facilities | 2a | | | |
| b | Prior year adjustments | | 2b | | | |
| c | Otherlosses | | 2c | | | |
| d | Other (Describe in Part XIII |) | 2d | | | |
| e | Add lines 2a through 2d | | | | 2e | 0 |
| 3 | Subtract line ${f 2e}$ from line ${f 1}$. | | | | 3 | 631,756 |
| 4 | Amounts included on Form 99 | 00, Part IX, line 25, but not on line 1: | | | | |
| а | Investment expenses not inc | luded on Form 990, Part VIII, line 7b | 4a | 7,577 | | |
| b | Other (Describe in Part XIII |) | 4b | | | |
| c | Add lines 4a and 4b | | | | 4c | 7,577 |
| 5 | Total expenses Add lines 3 a | ınd 4c. (Thıs must equal Form 990, Part I, lın | e 18) | | 5 | 639,333 |
| Part | XIII Supplemental In | formation | | | | |
| Part | | r Part II, lines 3, 5, and 9, Part III, lines 1a I, lines 2d and 4b, and Part XII, lines 2d and | | | | de any additional |
| | Return Reference | Explanation | | | | |
| PART | V, LINE 4 | INTENDED USE OF ORGANIZATION'S E ENDOWMENT FUNDS ARE TO BE USED I AEROSOLS AS AN ENABLING DISCIPLI | ORAV | | | |
| PART | X, LINE 2 | UNCERTAIN TAX POSITIONS UNDER A MEASURE, RECOGNIZE AND DISCLOSE THEIR TAX RETURNS GAAP PRESCRIBE REQUIRED TO MEET IN ORDER TO BE RASSOCIATION BELIEVES THAT IT HAD GAAP AND THE STANDARD HAD NO IM STATEMENTS | ANY U S A MI ECOGI NO UI | NCERTAIN INCOME T NIMUM THRESHOLD NIZED IN THE FINANC ICERTAIN TAX POSIT | TAX POTHAT | OSITIONS TAKEN ON A TAX POSITION IS STATEMENTS THE AS DEFINED IN |

| | | r age 3 | |
|------------------------------------|----------------|----------------|--|
| Part XIII Supplemental Information | on (continued) | | |
| Return Reference | Explanation | | |
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Schedule D (Form 990) 2014

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493215013085 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public Department of the Treasury **Inspection** Internal Revenue Service Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Employer identification number Name of the organization THE AMERICAN ASSOCIATION FOR 22-2387061 AEROSOL RESEARCH INC Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and √ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (c) IRC section (a) Name and address of **(b)** EIN (d) Amount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization ıf applıcable valuation non-cash assistance grant cash orassistance or government assistance (book, FMV, appraisal, other) Enter total number of section 501(c)(3) and government organizations listed in the line 1 table.

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

| (a)Type of grant or assistance | (b) Number of recipients | (c) A mount of cash grant | (d)A mount of non-cash assistance | (e)Method of valuation (book, FMV, appraisal, other) | (f)Description of non-cash assistance |
|---|---------------------------------|-------------------------------------|--------------------------------------|---|---------------------------------------|
| (1) TRAVEL AWARDS TO ATTEND THE ANNUAL CONFERENCE | 30 | 15,000 | | | |
| (2) RESEARCH AWARDS | 9 | 32,000 | | | |

| Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information. | | | | |
|---|--|--|--|--|
| Return Reference | Explanation | | | |
| | THE ORGANIZATION VERIFIES WITH EACH AWARDEE THAT THE AWARD RECEIVED IS USED FOR TRAVEL TO THE ANNUAL CONFERENCE OR FOR RESEARCH THROUGH ANNUAL DISCUSSION | | | |

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493215013085

OMB No 1545-0047

2014

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

| Name of the organization THE AMERICAN ASSOCIATION FOR | Employer identification number | | |
|---|--------------------------------|--|--|
| AEROSOL RESEARCH INC | 22-2387061 | | |

990 Schedule O, Supplemental Information

| Return Reference | Explanation |
|---|---|
| FORM 990, PART VI, SECTION A, LINE 3 | |
| FORM 990, PART VI, SECTION A, LINE 6 | MEMBERS OF THE ORGANIZATION THE ORGANIZATION HAS ONE CLASS OF VOTING MEMBERS - FULL MEMBERSHIP |
| FORM 990, PART VI, SECTION A, LINE 7A | ELECTION OF MEMBERS OF GOVERNING BODY ALL FULL MEMBERS ARE ENTITLED TO VOTING PRIVILEGES A ND MAY HOLD OFFICE AND SERVE ON THE BOARD OF DIRECTORS |
| FORM 990, PART VI, SECTION B, LINE 11 | GOVERNING BODY REVIEW OF FORM 990 PRIOR TO ITS FILING WITH THE IRS, A COPY OF THE FINAL FORM 990 IS PROVIDED TO EACH BOARD MEMBER |
| FORM 990, PART VI, SECTION B, LINE 12C | MONITORING AND ENFORCEMENT OF THE CONFLICT OF INTEREST POLICY THE BOARD OF DIRECTORS AND M ANAGEMENT ANNUALLY SIGN A CONFLICT OF INTEREST STATEMENT THAT REQUIRES ANY INDIVIDUAL TO D ISCLOSE ANY POTENTIAL CONFLICTS ALL CONFLICTS ARE DISCUSSED WITH THE BOARD OF DIRECTORS A ND ADDRESSED, AS NEEDED |
| FORM 990, PART VI, SECTION C, LINE 19 | PUBLIC AVAILABILITY OF OTHER DOCUMENTS COPIES OF THE ORGANIZATION'S GOVERNING DOCUMENTS, C ONFLICT OF INTEREST POLICY, FINANCIAL STATEMENTS AND FORM 990 ARE PROVIDED UPON REQUEST |