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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)

▶ 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

2015

Open to Public Inspection

A F	or the	2015 ca	<u> </u>	inning 01-01-2015 , and ending	12-31-201	5	_		
		pplicable	C Name of organization ASSOCIATION OF THE UNITED	STATES ARMY			D Emplo	yer ic	lentification number
	dress ch	_	% JERRY SINN				53-0	1933	61
	me char		Doing business as						
Ini	tıal retur	m	N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>		E Teleph	one nu	ımber
Fir	nal :urn/term	nınated	Number and street (or P O bo 2425 WILSON BLVD	x if mail is not delivered to street addres	ss) Room/suit	ie	(703	841	-4300
_	nended r		City or town state or province	country, and ZID or foreign nectal code				, 0 - 1	-4300
_		pending	ARLINGTON, VA 22201	, country, and ZIP or foreign postal code			G Gross	receipt	s \$ 64,718,874
			F Name and address o	f principal officer		H(a) is t	ាា :his a group	retu	rn for
			AUA				ordinates?		⊢Yes √ No
			2425 WILSON BLVD ARLINGTON, VA 2220)1			all subord uded?	ınates	s [Yes [No
								n a lıs	t (see instructions)
I Ta	ax-exem	pt status	▼ 501(c)(3)	◀ (insert no) 4947(a)(1) or	527		oup exemp		
J W	ebsite	∷ ► www	v ausa org						
			Corporation Trust Asso	ciation Other 🕨		L Year of	formation 1	950	M State of legal domicile VA
Pa	rt I	Sum	mary						
nce	AL	JSA IS	A PRIVATE, NON-PROFIT	ssion or most significant activitie EDUCATIONAL ORGANIZATIC RVE, CIVILIANS, RETIREES, AN	N COMMI			NG A	MERICA'S ARMY-
<u> </u>	=								
Governance	2 C	heck th	ıs box ┡┌ ıf the organızatıo	n discontinued its operations or o	disposed of	more than	25% of its	net a	ssets
	3 N	lumber o	of voting members of the gov	verning body (Part VI, line 1a) .				3	28
<u>ie</u> s				ers of the governing body (Part V				4	28
Activities &				d ın calendar year 2015 (Part V,				5	103
्र	6 T	otal nur	nber of volunteers (estimate	e if necessary)				6	128
	7a ⊤	otal unr	elated business revenue fro	m Part VIII, column (C), line 12				7a	1,230,359
	b N∈	et unrela	ited business taxable incom	ne from Form 990-T, line 34 .				7b	-18,161
						Pr	ior Year		Current Year
a .	8			II, line 1h)			935,	,267	1,063,879
Revenue	9		m service revenue (Part VIII, line 2g)				26,965,980		27,327,964
3Aet	10			lumn (A), lines 3, 4, and 7d) .	5,682	-	3,445,761		
_	11			(A), lines 5, 6d, 8c, 9c, 10c, and			2,833,	,675	2,030,784
	12	10tali 12)	revenue—add lines 8 throug	h 11 (must equal Part VIII, colur	mn (A), line		36,417,	660	33,868,388
	13	Grants	and similar amounts paid (Part IX, column (A), lines 1–3)			643,	,298	1,244,874
	14	Benefi	ts paid to or for members (P	art IX, column (A), line 4)				0	0
83	15	Saları 5–10)		ployee benefits (Part IX, column	(A), lines		9,270	,665	9,108,973
Expenses	16a	•		rt IX, column (A), line 11e)	line 11e)				0
ੜੀ	Ь	Total fu	ndraising expenses (Part IX, colun	nn (D), line 25) ▶ <mark>990,981</mark>					
_	17	Other	expenses (Part IX, column	(A), lines 11a-11d, 11f-24e) .			19,548,	535	20,743,009
	18	Total e	expenses Add lines 13-17	(must equal Part IX, column (A),	line 25)		29,462,	498	31,096,856
	19	Reven	ue less expenses Subtract	line 18 from line 12		•	6,955	,162	2,771,532
Not Assets or Fund Balances						Beginning	of Current	Year	End of Year
988 984	20	Totala	assets (Part X, line 16) .				117,955	,718	113,060,235
풀	21	Total I	iabilities (Part X, line 26)				24,534,	668	22,921,271
ZÏ	22		sets or fund balances Subt	ract line 21 from line 20			93,421,	050	90,138,964
Unde my k	nowled	Ities of p		e examined this return, including I complete Declaration of prepare					
		****					2016-06-29		
Sign		F Signa	ature of officer				Date		
Her	е		PRESIDENT AND CEO or print name and title						
			rint/Type preparer's name	Preparer's signature	l Da	ate C	heck 🗀 ıf	PTIN	
Pai	d		effrey J Schragg	Jeffrey J Schragg		10	neck J if elf-employed		34543
	u pare	r F	ırm's name ► BDO USA LLP			Fı	m's EIN 🕨		
	Onl	1 F	ım's address 🟲 8401 GREENSBOF	O DRIVE 8TH FLOOR		Pl	none no (70:	3) 893-	-0600
Jac	<i>,</i> Oill	'Y	MCLEAN, VA 221	02					

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

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

THE ASSOCIATION OF THE UNITED STATES ARMY (AUSA) IS A PRIVATE, NON-PROFIT EDUCATIONAL ORGANIZATION THAT REPRESENTS EVERY AMERICAN SOLIDER AND SUPPORTS AMERICA'S ARMY - REGULAR ARMY, ARMY NATIONAL GUARD, US ARMY RESERVE, GOVERNMENT CIVILIANS, PRIVATE CITIZENS, RETIREES, VETERANS, AND FAMILY MEMBERS AUSA IS A VOICE FOR ALL COMPONENTS OF AMERICA'S ARMY, FOSTERING PUBLIC SUPPORT OF THE ARMY'S ROLE IN NATIONAL SECURITY, AND PROVIDING PROFESSIONAL EDUCATION AND INFORMATION PROGRAMS OUR MISSION AND PURPOSE IS TO PROVIDE EDUCATIONAL, LITERARY, AND SCIENTIFIC PROGRAMS, FOSTER ESPRIT DE CORPS, DISSEMINATE PROFESSIONAL KNOWLEDGE, AND PROMOTE THE EFFICIENCY OF THE ARMY COMPONENTS OF THE ARMED FORCES OF OUR COUNTRY

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

4a (Code) (Expenses \$ 12,675,929 including grants of \$ 0) (Revenue \$ 21,117,094)

INDUSTRY AFFAIRS AND ANNUAL MEETINGS AUSA Global Force Symposium & Exposition A Professional Development Forum Von Braun Center Held each year in Huntsville, Alabama, the AUSA Global Force Symposium is a three-day educational, professional development forum Exhibit space and sponsorships are sold to both members and non-members of AUSA More than 6,000 people from around the world participate in this event each year including key leaders from the Army, DoD, academia and worldwide defense industry AUSA Annual Meeting & Exposition A Professional Development Forum Walter E Washington Convention Center Held every October in Washington, DC, the AUSA Annual Meeting & Exposition is the largest land power exposition and professional development forum in North America This event consists of informative and relevant presentations, panel discussions on pertinent military and national security subjects, workshops and important AUSA business meetings. Last year more than 26,000 people participated in this event. In addition, there were more than 500 exhibitors from around the world. Exhibit space is sold to members and non-members of AUSA Attendance is free but restricted to members of AUSA and those with an identifiable relationship to our organization. This includes all active duty military and government personnel. IDEX International Defense Exhibition and Conference USA Security and Defense Pavilion Abu Dhabi National Exhibition Centre (ADNEC). Held every other year in Abu Dhabi, UAE, IDEX is one of the largest defense expositions in the world. In 2015 100,000 people participated in this event, including more than 1,000 exhibitors. AUSA is the official USA Pavilion organizer. AUSA sells exhibit space and manages the USA Security and Defense Pavilion. In 2015, the Pavilion included more than 100 U.S. companies occupying 4,000 square meters of space.

4b (Code) (Expenses \$ 5,940,423 including grants of \$ 0) (Revenue \$ 4,848,511)

MEMBERSHIP AND REGIONAL ACTIVITIES AUSA executes these missions at national, regional, and local levels through dedicated, engaged volunteer organizations in 9 regions and 119 chapters located across the United States and wherever our Soldiers are stationed around the world. Additional volunteers also serve as State Presidents to help integrate efforts across statewide programs and with elected officials. Our programs support the concepts of lifetime service and Solider for Life outcomes through membership and outreach efforts. Membership is open to all who support our mission and values. Members include individuals and life members, as well as corporate and sustaining members. We help connect civic leaders, academics, large and small businesses, and local communities to their Army and provide programs that lead to better understanding of complex and difficult issues and choices our Army faces in defending our nation. Scheduled events at the national, region, and local levels keep Soldiers and those who support them connected to a very busy and engaged Army. Chapters provide a series of year-round events including staff rides, young professional mentoring and networking events, book and movie review programs highlighting leadership attributes, subject matter expert speakers, professional development symposia, family forums, social events that foster esprit and goodwill, and community projects that target needs at local levels. Our chapters and regions also promote education through scholarships, contributions and awards valued at \$1.2 million.

4c (Code) (Expenses \$ 2,515,191 including grants of \$ 0) (Revenue \$ 35,308)

Institute of Land Warfare (ILW) is to extend the reach and increase the influence of AUSA by informing and educating our membership, local, regional and national leaders, and the American public on the critical nature and importance of land warfare and the U.S. Army. The stated goal is to get the facts concerning defense issues to the people who can have the greatest impact on those issues. The Institute will carry out its program through research projects, publication and distribution of a wide range of papers and other education materials, conferences and activities that will further accomplish AUSAs mission. ILW Publications List. Land Warfare Papers monographs on key defense issues written by defense experts and screened for publication by AUSAs senior fellows. Landpower Essays The series is designed to provide an outlet for original essays (shorter in length than the Land Warfare Papers) on topics that will stimulate professional discussion and further public understanding of the landpower aspects of national security. Screened for publication by AUSAs senior fellows. National Security Watches The series is designed to provide news and analysis on pertinent national security issues to the members and leaders of the Association of the United States Army and to the larger policymaking community Defense Reports The series is designed to provide information on topics that will stimulate professional discussion and further public understanding of the Armys role in national defense Profile of the U.S. Army a reference handbook This ILW Special Report is a user-friendly reference book for people familiar with the Army and an easy-to-read introduction for family members, civilian employees, industry partners and future Soldiers. It describes the Armys role as a key element in the national security structure and then the Armys organization. It also contains information and helpful graphics on the Soldier, the uniform, the Armys command structure, Army families, installations and the Armys current operations. For readers seeking more details, each chapter includes a list of relevant websites. Finally, Profile contains a glossary of acronyms and maps illustrating locations of current Army combat corps and divisions, Army National Guard divisions and brigade combat teams, and Army Reserve direct reporting commands. Torchbearer Series Torchbearer Issue Papers. 46 page papers examining in detail a particular issue (in policy, technology, etc.) pertinent to current events. Torchbearer National Security Report. Longer, more substantial examinations of topics similar to those covered in the Torchbearer Issue Papers Torchbearer Special Reports A variety of short papers, such as Good News Flyers (detailed list of what AUSA and others have spoken out for in support of the Army and a corresponding list of what Congress has or has not done in response) published when the need arises ILW Professional Development Programs and Events ILW Contemporary Military Forums ILW host a series of Contemporary Military Forums on topics of current interest to Army professionals and AUSA members during the Annual Meeting each October Topics include, but are not limited to Conventional ForceSpecial Operations Forces Interdependence, Threats in a Complex World, Developing Future Leaders ILW Rogers Strategic Issues Forum series ILW host four to six Rogers Strategic Issues Forums to inform and continue the public debate on critical defense issues, particularly those related to landpower. The Rogers series is named for General Bernard W. Rogers. These late-afternoon/early-evening events continue to provide speaking opportunities for senior leaders in the uniformed. services, the Department of State, academia and think tanks. Rogers Forums featured, among others, General Carter Ham, USA (then commander, U.S. Africa Command), Admiral James "Sandy" Winnefeld, USN (then Vice Chairman, Joint Chiefs of Staff), General John Abizaid, USA Ret (former commander, U S. Central Command), Ambassador Ken Adelman (former ambassador to the United Nations) and Lieutenant General Jay Garner, USA Ret (former Assistant Vice Chief of Staff, Army) The event is held at the AUSA national headquarters. ILW Lemnitzer Lecture series Named to honor General Lyman L. Lemnitzer and launched in September 1998, the series offers lectures on topics of interest to people in the Army, professionals and others who are interested in what the Army does and has done and will do for the United States of America. The lectures take place quarterly at AUSA national headquarters. November 2015 Emma Sky spoke about her book The Unravelling. High Hopes and Missed Opportunities in Iraq. The Army Historical Foundation, our Lemnitzer Lecture cosponsor, arranges a book sale and signing to follow the presentation

4d Other program services (Describe in Schedule O)

(Expenses \$ 4,598,091 including grants of \$ 1,244,874) (Revenue \$ 1,993,581)

le Total program service expenses ► 25,729,634

Form 990 (2	2015)	
Part IV	Checklist of Required Schedules	

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

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	Yes	
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		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
	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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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	Yes	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		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? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2015)					Page
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this		v			
	ensum a consuma a consuma a copensum or more to any mile in amo				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	143			
b	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to gaming (gambling) winnings to prize winners?	veno •	dors and reportable	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	103			
b	If at least one is reported on line 2a, did the organization file all required federal emp Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during	g the	year [,]	За	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	on in S	Schedule O	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities account)? \cdot .			4a	Yes	
b	If "Yes," enter the name of the foreign country ► KU See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank (FBAR)	and	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	g the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited t	ax sh	elter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?					
62	Does the organization have annual gross receipts that are normally greater than \$10		O and did the	5с 6а		No
	organization solicit any contributions that were not tax deductible as charitable cont If "Yes," did the organization include with every solicitation an express statement the	rıbutı	ons?			110
	were not tax deductible?			6b		
а	Did the organization receive a payment in excess of \$75 made partly as a contributive services provided to the payor?	on an	d partly for goods and	7a	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services \boldsymbol{p}	rovide	ed?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal proper file Form 8282?	ty for	which it was required to	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	· · · · · · · · · · · · · · · · · · ·	76		110
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a p	ersor	nal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a person	nal b	enefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the o required?		zation file Form 8899 as	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles Form 1098-C?	, dıd •	the organization file a	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess but during the year?	sınes	s holdings at any time			
02	Did the sponsoring organization make any taxable distributions under section 4966			8 9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or rela			9a 9b		
10	Section 501(c)(7) organizations. Enter	.ccu p				
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	10b				
11	Section 501(c)(12) organizations. Enter					
а	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990	ın lıe	eu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state? N additional information the organization must report on Schedule O	ote. S	See the instructions for	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the tax		?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana	•		14b		

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 28			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 28			
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		No
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		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	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	
	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	ction B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie 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		No
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	
c	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		Νo
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	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture 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	ction C. Disclosure			
<u> </u>	List the States with which a copy of this Form 990 is required to be filed▶			
18	CA , IN , MD , VA Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website. Another's website. Upon request. Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year			

State the name, address, and telephone number of the person who possesses the organization's books and records In JERRY SINN 2425 WILSON BLVD ARLINGTON, VA 22201 (703) 841-4300

Part VII 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	more t perso	tion (han d in is l	one b both	ox, an c	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										
										Form 990 (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	one I both	box, an	heck unless officer stee)	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 trustae or director	Institutional Trustee	Officei	Highest compensated employee Key employee		Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
See Additional Data Table											
				\vdash							
	+			\vdash							
	_			<u> </u>							
				T							
		-		\vdash	<u> </u>						
				├							
		<u> </u>									
1b Sub-Total	<u> </u>	٠	<u> </u>	<u> </u>	<u> </u>	<u> </u> ►			<u> </u>		
c Total from continuation shee						. 🕨					
d Total (add lines 1b and 1c)	<u>.</u>					►		3,212,400	0	301,381	
Total number of individuals (i							e) wl	ho received more th	an		

			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee			
	on line 1a? If "Yes," complete Schedule J for such individual	3		Νo
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 I for such			
	ındıvıdual	1	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for			
	services rendered to the organization? If "Yes," complete Schedule I for such person	5		Νo

Section B. Independent Contractors

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
	INVESTMENT ADVISOR	409,061
RR DONNELLEY, 35 WEST WACKER DRIVE CHICAGO, IL 60601	PRINTING	435,919
HUFFMAN DEVELOPMENT, 1314 E SONTERRA BLVD 5204 SAN ANTONIO, TX 78258	PROJECT MANAGEMENT	642,247
GLOBAL EXPERIENCE SPECIALISTS, 7000 LINDELL RD LAS VEGAS, NV 89118	EXHIBIT SVCS	601,045
HBW GROUP, 1055 FIRST ST 200 ROCKVILLE, MD 20850	CONSTRUCTION SERVICE	2,679,676

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 🕨 15

Part V	1 1 1	Statement o						
		Check If Sched	ule O contains a respon	se or note to any lin	e in this Part VIII (A)	(B)	(C)	 (D)
					Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512-514
	1a	Federated cam	paigns 1a					512-514
nts nts	ь	Membership du						
Grants mounts	c	Fundraising eve						
Giffs, iilar A	d		zations 1d					
t, Gi mila	e	Government grant						
Contributions, and Other Sim	f		ons, gifts, grants, and 1f	1,063,879				
	g	sımılar amounts no Noncash contributi	ot included above ions included in lines	112.010				
ontri id O		1a-1f \$	- 4 - 46	112,818	1,063,879			
a C	h	Total. Add lines	S 1 a - 1 f		1,003,879			
an I	2a	ADVERTISING		Business Code	4 220 250		4 220 250	
wer	_		ID MEETINGS	541800	1,230,359	0.020.700	1,230,359	
2 <u>2</u>	b	SYMPOSIA & OTHE		900099	9,038,709	9,038,709		
МС€	С	ANNUAL MEETING		900099	12,078,385	12,078,385		
Ser.	d	MEMBERSHIP DUE	-	900099	4,848,511	4,848,511		
E	e	ALLOWANCE TO RE		900099	132,000	132,000		
Program Serwce Revenue	f	All other progra	am service revenue					
Δ	g	Total. Add lines	s 2a-2f	🕨	27,327,964			
	3		ome (including dividend		1 040 622			1 040 63
	_		aramounts)	-	1,949,622			1,949,62
	4	5	stment of tax-exempt bond p	proceeds	451,342			451,34
	5	Royalties .	· · · · · · · · · · · · · · · · · · ·	(··) Darranal	431,342			431,34
	6a	Gross rents	(ı) Real 1,398,845	(II) Personal				
	b	Less rental	1,089,791					
		expenses Rental income	309,054	0				
	C .	or (loss)	·	-	200 054			200.05
	d	Net rental inco	me or (loss) (ı) Securities	► (II) O ther	309,054			309,05
	7a	Gross amount from sales of assets other than inventory	30,238,119	-9,056				
	ь	Less cost or other basis and sales expenses	28,732,924					
	С	Gain or (loss)	1,505,195	-9,056				
₩ue	d 8a	Gross income f	from fundraising		1,496,139			1,496,13
Other Revenue		s of contributions See Part IV , lir	s reported on line 1c) ne 18	1,603,161				
₹	ь	Less direct ex	penses b	999,303				
	С	Net income or	loss) from fundraising (events	603,858			603,85
	9a		from gaming activities ne 19 a					
	ь	Less direct ex	penses b					
	С		(loss) from gaming activ	/ities . ►	0			
	10a	Gross sales of						
		returns and allo	-	39,133				
	L	less sostata	a oods sold b	•				
	b c	_	oods sold b [(loss) from sales of inve	28,468 entory	10,665	10,665		
	_	Miscellaneous	· · ·	Business Code	10,003	23,003		
	11a	OTHER REVEN		900099	655,865	655,865		
	ь	O I HEK KEVEN	NOL .		,	,		
	C C	All ather warra						
	d e	Total. Add lines	ue [s 11a-11d	🕨				
	12		See Instructions		655,865			
	**	iocai ievenuė.	See Instructions	· · · •	33,868,388	26,764,135	1,230,359	4,810,01

	ction 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)							
Section								
_	Check if Schedule O contains a response or note to any line in th		(B)	(C)	<u>l</u> (D)			
	t include amounts reported on lines 6b, , 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	1,244,874	1,244,874					
2	Grants and other assistance to domestic individuals See Part IV, line 22	1/211/071	1/211/071					
	·	0						
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0						
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors, trustees, and key employees	2,754,440	1,178,569	1,575,871				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0						
7	Other salaries and wages	4,921,508	4,866,067	-325,248	380,689			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	431,145		431,145				
9	Other employee benefits	477,933	477,933					
10	Payroll taxes	523,947		523,947				
11	Fees for services (non-employees)							
а	Management	0						
b	Legal	800		800				
c	Accounting	78,255		78,255				
d	Lobbying	245	245					
е	Professional fundraising services See Part IV, line 17	0						
f	Investment management fees	518,759	250,501	268,258				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	50,464	11,686	25,884	12,894			
12	Advertising and promotion	585,426	245,986	645	338,795			
13	Office expenses	1,330,016	932,759	321,828	75,429			
14	Information technology	1,231,695	848,478	301,635	81,582			
15	Royalties	0						
16	Occupancy	577,595	410,819	126,836	39,940			
17	Travel	521,905	422,448	93,057	6,400			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0						
19	Conferences, conventions, and meetings	9,566,099	9,566,099					
20	Interest	0						
21	Payments to affiliates	1,820,530	1,820,530					
22	Depreciation, depletion, and amortization	249,167	194,280	36,167	18,720			
23	Insurance	183,303	101,592	81,711				
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	PUBLICATION COSTS	1,362,056	1,268,754	79,804	13,498			
b	CREDIT CARD FEES	312,309	286,801	3,796	21,712			
c	DUES & SUBSCRIPTIONS	956,195	934,065	21,639	491			
d	TAXES & LICENSES	87,726		87,726				
e	All other expenses	1,310,464	667,148	642,485	831			
25	Total functional expenses. Add lines 1 through 24e	31,096,856	25,729,634	4,376,241	990,981			
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)							

Form 990 (2015) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 1 6,143,783 1 10.010.693 Cash-non-interest-bearing 2 Savings and temporary cash investments . 18,527,291 2 63,383,022 3 3 0 Pledges and grants receivable, net . . 11,492,922 12,176,561 4 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 600,000 5 600,000 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 0 6 0 Notes and loans receivable, net 0 7 0 7 105,518 8 23,705 8 Inventories for sale or use . 9 4,876,039 9 4,024,789 Prepaid expenses and deferred charges Land, buildings, and equipment cost or other basis 10a 25,938,882 Complete Part VI of Schedule D 10a 10b 13.568.399 8,200,781 10c 12,370,483 b Less accumulated depreciation . 67.275.617 10.443.379 11 11 0 12 0 12 Investments—other securities See Part IV, line 11 13 0 0 Investments—program-related See Part IV, line 11 . 13 14 0 14 0 733.767 27.603 15 15 Other assets See Part IV, line 11 113,060,235 Total assets.Add lines 1 through 15 (must equal line 34) . . 117,955,718 16 16 17 839.113 **17** 1.090.276 Accounts payable and accrued expenses 18 0 18 0 Grants payable 21,736,131 19 23,582,034 19 20 Tax-exempt bond liabilities 20 0 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . _iabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 22 0 0 23 23 0 Secured mortgages and notes payable to unrelated third parties . . 0 0 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 113,521 25 94,864 24.534.668 22.921.271 26 26 **Total liabilities.**Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ► 🔽 and complete **Fund Balances** lines 27 through 29, and lines 33 and 34. 27 93,069,483 89,803,897 27 Unrestricted net assets 28 351,567 28 335,067 Temporarily restricted net assets 29 0 29 0 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. Net Assets or 30 30 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 33 93,421,050 90,138,964 Total net assets or fund balances 33 Total liabilities and net assets/fund balances 117.955.718 34 113.060.235

Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				৮
	Tabel and the form of Dark WWW and beautiful (A.) In a 4.2.)				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		33,8	368,388
2	Total expenses (must equal Part IX, column (A), line 25)	2		31,0	096,856
3	Revenue less expenses Subtract line 2 from line 1	3		2 7	771,532
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))				
5	Net unrealized gains (losses) on investments	5			421,050 059,664
6	Donated services and use of facilities	6			733,00
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		- 9	993,954
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	90,138,9		138,964
Par	t XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				<u>. Г</u>
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review a separate basis, consolidated basis, or both	wed on			
	Separate basis Consolidated basis Both consolidated and separate basis				
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Software ID: Software Version:

EIN: 53-0193361

Name: ASSOCIATION OF THE UNITED STATES ARMY

Form 990, Part VII - Compensation Compensated Employees, and Ind	n of Officers, ependent Coi	ers, Directors,Trustees, Key : Contractors			(ey	Employees, Higl	nest			
(A) Name and Title	(B) A verage hours per week (list any hours for related	Posit more ti perso and a	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)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			related organizations
Nicholas D Chabarja CHAIRMAN	1 0	х						0	0	0
Rudy de Leon TRUSTEE	10	x						0	0	0
Christipher M Chadwick TRUSTEE	1 0	х						0	0	0
Richard H Edwards TRUSTEE	1 0	х						0	0	0
Robert E Hall TRUSTEE	10	х						0	0	0
John D Harris II TRUSTEE	10	х						0	0	0
Patricia PHickerson TRUSTEE	10	х						0	0	0
Larry R Jordan TRUSTEE	10	х						0	0	0
Steven R England TRUSTEE	10	х						0	0	0
Thomas Arsenault TRUSTEE	10	х						0	0	0
Dennis J Reimer TRUSTEE	10	х						0	0	0
Carl E Vuono TRUSTEE	10	х						0	0	0
Thomas W Rabaut TRUSTEE	1 0	х						0	0	0
Jack L Tilley TRUSTEE	1 0	х						0	0	0
Roger C Schultz TRUSTEE	10	х						0	0	0
David H Ohle TRUSTEE	1 0	х						0	0	0
George T Singley III TRUSTEE	1 0	х						0	0	0
Hank Zolla TRUSTEE	1 0	х						0	0	0
Sandy McLeod TRUSTEE	1 0	х						0	0	0
Mary Trier TRUSTEE	1 0	х						0	0	0
Charley Smith TRUSTEE	1 0	х						0	0	0
Lawrence Bethel II TRUSTEE	10	х						0	0	0
Ann E Dunwoody TRUSTEE	10	х						0	0	0
Ron Taylor TRUSTEE	10	х						0	0	0
Doug Stuart TRUSTEE	10	х						0	0	0
		<u> </u>	1		1			i		I

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

Compensated Employees, and Inde	ependent Cor	ntracto '	rs					1	1	ı
(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		
	organizations below dotted line)	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-M15C)	organization and related organizations
LaVoy Sam Thiessen	1 0	l x						0	0	0
TRUSTEE	0.0	_ ^						Ü	Ü	Ů
Eric Lien	1 0									
TRUSTEE	0 0	X						0	0	0
Phebe N Novakovic TRUSTEE	10	х						0	0	0
Philip E Sakowitz	1 0									
TRUSTEE	0 0	Х						0	0	0
Stan Lenox III	1 0	x						0	0	0
TRUSTEE	38 0									
Gordon R Sullivan President AND ceo	0 0			х				807,221	0	52,736
Guy C Swan	38 0									
V P Education	0 0			X				361,453	0	22,920
Roger G Thompson	38 0									
V P Membership & Meetings	0 0			Х				362,117	0	34,350
Jerry L Sinn	38 0			Х				376,066	0	21,663
V P Finance & Admin	0.0									
Helen I Hegyı	38 0			×				147,783	0	30,646
Controller	0 0			,				117,703	,	30,010
Ann Belyea	38 0			X				138,816	0	16,247
Corporate Secretary	0 0							130,010	0	10,247
Harry Rothman	38 0							172.007	0	20 511
Director, Info Systems	0.0				X			172,807	0	38,511
Rick Maze	38 0				,,			147.100		22.024
Editor-in-Chief, ARMY magazine	0 0				X			147,180	0	23,924
Michael Scanlan	38 0									
Director, Industry Affairs	0 0					X		144,870	0	11,243
John Davies	38 0								_	
Director, Regional Affairs	0 0					×		143,804	0	11,174
George Coan Director, National Security	38 0					x		139,236	0	12,307
Roger Cırıllo Director, Books	38 0					х		129,911	0	20,144
Kenneth Preston	38 0					x		141,136	0	5,516
Director, NCO Affairs & Soldie	0 0	<u> </u>								

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As Filed Data -

DLN: 93493182002026

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Total

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.

2015

Open to Public Inspection

		ne organization I OF THE UNITED STATES AR	MV				Employer identifica	ation number	
ASSU	LIATION	TOF THE UNITED STATES AK	I*I T				53-0193361		
Pa	rt I	Reason for Publi	c Charity S	itatus (All organiza	itions must co	mplete this p		ns.	
		zation is not a private fo					•		
1	Г	A church, convention							
2	, T	A school described in	•			=			
3	,	A hospital or a cooper							
4	Ë	A medical research or) Enter the	
7	'	hospital's name, city,	-	erated in Conjunction v	vicii a nospicai d	iescribed iii sec	.c.ioii 170(D)(1)(A)(iii	J. Linter the	
5	Γ		ated for the be	nefit of a college or un I)	iversity owned	or operated by	a governmental unit o	lescribed in section	
6	Γ	A federal, state, or loc	al governmen	t or governmental unit	described in se	ection 170(b)(1	.)(A)(v).		
7	_	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II)							
8	Г	A community trust de	scribed in sect	ion 170(b)(1)(A)(vi)	(Complete Par	tII)			
9	□	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4).							
	<u>'</u>	-	•	·	•	•			
11	1	An organization organ one or more publicly s the box in lines 11a th	upported orga	nızatıons described in	section 509(a)(1) or section	509(a)(2) See sect ic	n 509(a)(3). Check	
a	Γ	Type I. A supporting of supported organization You mus	organization op n(s) the power	perated, supervised, or to regularly appoint o	r controlled by 1 r elect a majori	ts supported o	rganization(s), typical	ly by giving the	
b	Γ	Type II. A supporting management of the su must complete Part IV	pporting organ	nization vested in the					
С	\vdash	Type III functionally			n operated in c	onnection with	and functionally inte	rrated with its	
_	'	supported organization						gracea men, no	
d	Γ	Type III non-function						anızatıon(s) that ıs	
		not functionally integr					ement and an attentiv	eness requirement	
_	Г	(see instructions) Yo Check this box if the o					ca Type I Type II T	vna III functionally	
е	'	integrated, or Type II					s a rype i, rype ii, r	ype III lulictionally	
f	Ente	r the number of support							
g		Provide the following i					_		
		(i)	(ii)EIN	(iii)	(iv)		(v)	(vi)	
Name of supported organization			Type of organization (described on lines 1-9 above (see instructions))	Is the organization listed in your governing document?		A mount of monetary support (see instructions)	A mount of other support (see instructions)		
					Yes	No			
					İ				

Pa	Support Schedule for (Complete only if you Part III. If the organize	checked the bo	x on line 5, 7,	or 8 of Part I o	or if the organiz	ation failed to d	jualify under
Se	ection A. Public Support	•	•		, <u>, , , , , , , , , , , , , , , , , , </u>		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
•	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	(4,72022	(-)	(9,2323	(=,===	(0)2020	(i)
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge 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 ection B. Total Support						
	Calendar year						
(or	fiscal year beginning in)	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) ⊤otal
7	A mounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
14	ection C. Computation of Pul Public support percentage for 2019			11 column (f))		14	
15	Public support percentage for 201			: 11, Column (1))		14	
		-	•	v on line 12 and	lino 14 is 22 1/20	15	this box
	 33 1/3% support test—2015. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3% support test—2014. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 						
17a	10%-facts-and-circumstances test is 10% or more, and if the organization Part VI how the organization me	— 2015. If the organization meets the fa	anization did not o	check a box on lir tances test, chec	ck this box and st	op here. Explain	orted ▶□
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization	nızatıon meets th	e "facts-and-circ	umstances" test	c, check this box a	nd stop here.	
18	Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box 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.)

Se	ction A. Public Support					,	
	Calendar year	(a)2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
-	iscal year beginning in) F Gifts, grants, contributions, and		. ,		. ,		
1	membership fees received (Do not include any "unusual grants")	1,245,367	2,101,726	1,296,974	935,267	1,063,879	6,643,213
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished	35,156,476	32,914,741	26,473,440	25,965,036	26,803,268	147,312,961
_	in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities						
3	that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	36,401,843	35,016,467	27,770,414	26,900,303	27,867,147	153,956,174
	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	A mounts 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						0
_	year Add lines 7a and 7b						0
8	Public support. (Subtract line 7 c from line 6)						153,956,174
Se	ction B. Total Support		T		Т		
(or f	Calendar year iscal year beginning in) 📂	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	A mounts from line 6	36,401,843	35,016,467	27,770,414	26,900,303	27,867,147	153,956,174
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties and income from similar sources	2,367,367	2,992,786	4,035,327	4,111,626	3,799,809	17,306,915
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	128,728	3,767	0	0	0	132,495
c	Add lines 10a and 10b	2,496,095	2,996,553	4,035,327	4,111,626	3,799,809	17,439,410
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	902,974	0	0	0	0	902,974
	Other income Do not include						
12	gain or loss from the sale of capital assets (Explain in Part VI)						0
13	gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9,	39,800,912	38,013,020	31,805,741	31,011,929	31,666,956	172,298,558
13 14	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	for the organizati	lon's first, second			, ,	172,298,558
13 14	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	for the organizati	lon's first, second	, third, fourth, or		, ,	172,298,558
13 14	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	for the organizati	lon's first, second	, third, fourth, or		, ,	172,298,558
13 14 Se	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	for the organizati blic Support F 5 (line 8, column	on's first, second Percentage (f) divided by line	, third, fourth, or		section 501(c)(172,298,558 3) organization, ▶
13 14 Se 15 16	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 ection C. Computation of Pu	for the organizati blic Support F 5 (line 8, column)14 Schedule A, F	on's first, second Percentage (f) divided by line Part III, line 15	, third, fourth, or		15	172,298,558 3) organization, ► 89 354 %
13 14 Se 15 16	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 ection C. Computation of Pu Public support percentage for 201 Public support percentage from 20	for the organization blic Support F 5 (line 8, column 14 Schedule A, F vestment Inco	Percentage (f) divided by line Part III, line 15	, third, fourth, or 13, column (f))	fifth tax year as a	15	172,298,558 3) organization, ► 89 354 %
13 14 Se 15 16	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 ection C. Computation of Pu Public support percentage from 20 p	for the organization of the formula for the organization of the formula for formul	Percentage (f) divided by line Part III, line 15 Dame Percenta column (f) divided	third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	172,298,558 B) 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

Section A. All Supporting Organizations			
I, complete Sections A and D, and complete	te Part V)		
11b of Part I, complete Sections A and C	If you checked 11c of Part I, com	iplete Sections A , D , and E If y	ou checked 11d of Par

			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		ı
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		
4 a	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		ı
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	4b		
c	by or in connection with its supported organizations. 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) ? 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.	4 c		
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		ı
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? If "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		
0a	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		l
	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		<u> </u>
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		_

Pai	Supporting Organizations (continued)			
Se	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		
Se	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		
Se	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		
Se	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b	The organization is the parent of each of its supported organizations Complete line 3 below			
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		
Ŀ	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	Parent of Supported Organizations Answer (a) and (b) below.			
	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? <i>Provide details in Part VI</i> .	3a		
Ŀ	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each			

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

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	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		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	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)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
i	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	· · · · · · · · · · · · · · · · · · ·				
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 furth excess of income from activity	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity						
3 Administrative expenses paid to accomplish exemp							
4 A mounts paid to acquire exempt-use assets							
5 Qualified set-aside amounts (prior IRS approval re	quired)						
6 Other distributions (describe in Part VI) See instru	uctions						
7 Total annual distributions. Add lines 1 through 6							
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide					
9 Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015				
1 Distributable amount for 2015 from Section C, line 6							
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)							
3 Excess distributions carryover, if any, to 2015							
d From 2013							
e From 2014							
f Total of lines 3a through e							
g Applied to underdistributions of prior years							
h Applied to 2015 distributable amount							
 Carryover from 2010 not applied (see instructions) 							
j Remainder Subtract lines 3g, 3h, and 3i from 3f							
4 Distributions for 2015 from Section D, line 7							
\$							
a Applied to underdistributions of prior years							
b Applied to 2015 distributable amount							
c Remainder Subtract lines 4a and 4b from 4							
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)							
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)							
7 Excess distributions carryover to 2016. Add lines 31 and 4c							
8 Breakdown of line 7							
c Excess from 2013							
d From 2014							
e From 2015							

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	Circum	stances	Test
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Return Reference	Explanation

Schedule A (Form 990 or 990-EZ) 2015

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

DLN: 93493182002026

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

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

www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

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

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

◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV. Line 4. or Form 990-EZ. Part VI. line 47 (I obbying Activities) the

● S ● S If the line	Section 501(c)(3) organizations of Section 501(c)(3) organizations of corganization answered "Yes 35c (Proxy Tax) (see separate	•	er section 501(h)) under section 50	Complete Part II-A Do not 1(h)) Complete Part II-B Do	complete Part II-B not complete Part II-A
Na	Section 501(c)(4), (5), or (6) org me of the organization OCIATION OF THE UNITED STATES AR	·		Employer iden	tification number
				53-0193361	
Par	Complete if the or	rganization is exempt under s	section 501(c	or is a section 527	organization.
1 2	Provide a description of the o	rganızatıon's dırect and ındırect polıtıc	al campaign activ	rities in Part IV	
olit	ıcal expenditures				
Þ					
3					\$
	nteer hours				
Par	t I-B Complete if the o	rganization is exempt under s	section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization und	er section 4955		\$
2	Enter the amount of any excis	e tax incurred by organization manage	ers under section	4955	\$
3	If the organization incurred a	section 4955 tax, did it file Form 472	O for this year?		┌ Yes ┌ No
4a					
	a correction made?				
_ Y(•				
	If "Yes," describe in Part IV	rganization is exempt under s	section E01/c	\ avcent section E0	1(0)(3)
				-	
1	► the amount directly exp	ended by the filing organization for sec	ction 527 exempt	Tunction activities	\$
2					
	r the amount of the filing organi opt function activities	zation's funds contributed to other org	anızatıons for sed	ction 527	
_	.,				
•					\$
3	Total exempt function expend	itures Add lines 1 and 2 Enter here a	and on Form 1120	-POL line 17h	Ψ
3	Foral exempt function expend	itules Add lilles I alid 2 Eliter liere a	ilia 011 F01111 1120	-POL, IIIIe 17b	\$
4					
Oid t	he filing organization file Form 1	.120-POL for this year?			
- _Y	es No				
5	Enter the names, addresses a organization made payments amount of political contribution	ind employer identification number (EI For each organization listed, enter the ins received that were promptly and di i political action committee (PAC) If a	amount paid fron rectly delivered to	n the filing organization's f o a separate political orga	unds Also enter the nızatıon, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a

•	political action committee (PAC) If a	•		•
(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-
r Paperwork Reduction Act Notice, se	e the instructions for Form 990 or 990-	EZ. Ca	nt No 50084S Schedule C (F	orm 990 or 990-EZ) 2015

Schedule C (I	onn 550 or 550 E2/2015	raye
Part II-A	Complete if the organization is exempt under section 501(c)(3) and	filed Form 5768 (election
	under section 501(h)).	

A Check ▶ 🗔 if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ► If the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
---	--	--------------------------------

Total lobbying expenditures to influence public opinion (grass roots

1a lobbying)

- $oldsymbol{b}$ Total lobbying expenditures to influence a legislative body (direct lobbying)
- Total lobbying expenditures (add lines 1a and 1b)
- $oldsymbol{d}$ O ther exempt purpose expenditures
- Total exempt purpose expenditures (add lines 1c and 1d) ${f e}$

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-

Subtract line 1f from line 1c If zero or less, enter -0-

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 i reporting section 4911 tax for this year?

Yes 🔽

4-Year Averaging Period Under section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000			
ь —	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000			
_c	Total lobbying expenditures	7,710	5,229	6,318	4,869	24,126			
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000			
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000			
f	Grassroots lobbying expenditures	260	1,328	528	90	2,206			
				Sched	lule C (Form 990	or 990-EZ) 2015			

4,869

4,959

32,206,388

32,211,347

1,000,000

250,000

-or each "Yes" r	Complete if the o filed Form 5768 (election under Section 501(n)).	1 ,	// \
ctivity.	esponse on lines 1a thro	ugh 11 below, provide in Part IV a detailed description of the lobbying	(a)	(b) No Amount
1 During th		ganization attempt to influence foreign, national, state or local of the public opinion on a legislative matter or referendum,	Yes	Amount
a olunteers?	.iie use oi		1 1	ı
1	I			
b Paid staf	f or management (ınclu	de compensation in expenses reported on lines 1c through 1i)?		
edıa advertıs	ements?			
d aılıngs to me	mbers, legislators, or th	ne public?		
e Publicati	ons, or published or bro	adcast statements?		<u> </u>
f Grants to	 o other organizations fo	r lobbying purposes?		ı
	•			
g Direct co	 ontact with legislators,	their staffs, government officials, or a legislative body?		
h Rallies, d	iemonstrations, semina	rs, conventions, speeches, lectures, or any similar means?		
i			ı	
ther activitie I	s ⁄ I			
j	<u></u>			
otal Add line	s 1c through 1ı			
		e the organization to be not described in section 501(c)(3)? y tax incurred under section 4912		
c If "Yes,"	enter the amount of an	y tax incurred by organization managers under section 4912		
d If the fili	ng organization incurred	a section 4912 tax, did it file Form 4720 for this year?		
Part III-A		rganization is exempt under section 501(c)(4), section	_ n 501(c)(5), or section
	501(c)(6).			Yes
		nore) dues received nondeductible by members?		1
	,	n-house lobbying expenditures of \$2,000 or less?		2
		rry over lobbying and political expenditures from the prior year?	- F04/->/	3
Part III-B		rganization is exempt under section 501(c)(4), sectior either (a) BOTH Part III-A, lines 1 and 2, are answered ed "Yes."		
	nents and sımılar amouı	nts from members		
1				
	s for which the section	bbying and political expenditures (do not include amounts of political 527(f) tax was paid).		
a				
urrent year				
urrent year 2a b	Jactycar			
urrent year 2a b arryover from	ı last year			
urrent year 2a b	ı last year			
urrent year 2a b arryover from 2b c	n last year			
urrent year 2a b arryover from 2b c otal 2c		ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
urrent year 2a b arryover from 2b c otal 2c 3 Aggregat	te amount reported in s	ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
urrent year 2a b arryover from 2b c otal 2c 3 Aggregat 4 Inotices were bes the organ	te amount reported in so	ection 6033(e)(1)(A) notices of nondeductible section 162(e) dues in line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and	3	
urrent year 2a b arryover from 2b c otal 2c 3 A ggregat 4 f notices were oes the organ	te amount reported in so sent and the amount of dization agree to carryov	n line 2c exceeds the amount on line 3, what portion of the excess	3	
urrent year 2a b arryover from 2b c otal 2c 3 Aggregat 4 Inotices were besthe organ blitical expen	te amount reported in so sent and the amount of lization agree to carryow diture next year?	n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and	3	
turrent year 2a b arryover from 2b c otal 2c 3 Aggregat 4	te amount reported in so sent and the amount of lization agree to carryov diture next year? amount of lobbying and	n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions)		
turrent year 2a b arryover from 2b c otal 2c 3	te amount reported in some sent and the amount of lobbying and Supplemental Inflesscriptions required for	n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Formation Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr	5	art II-A, lines 1 a
turrent year 2a b tarryover from 2b c otal 2c 3 Aggregat 4 f notices were oes the organ olitical expen 4 5 Taxable Part IV Provide the d 2 (see instruction	te amount reported in some sent and the amount of local distance o	n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Formation Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grant 1 Also, complete this part for any additional information	5	art II-A, lines 1 a
turrent year 2a b tarryover from 2b c otal 2c 3 Aggregat 4 f notices were oes the organ olitical expen 4	te amount reported in some sent and the amount of lobbying and Supplemental Inflesscriptions required for	n line 2c exceeds the amount on line 3, what portion of the excess ver to the reasonable estimate of nondeductible lobbying and political expenditures (see instructions) Formation Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated gr	5 oup list), P	WHICH WOULD

Schedule C (Form 990 or 990EZ) 2015

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DLN: 93493182002026

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

► Attach to Form 990.

Open to Public

ernal Revenue Sen	Information about Schedule D	(Form 990) and its instructions is at <u>www.ir</u>	s.gov/f	orm990. Inspection
	e organization OF THE UNITED STATES ARMY		Empl	oyer identification number
			53-0	193361
		or Advised Funds or Other Similar F red "Yes" on Form 990, Part IV, line 6.	unds o	or Accounts.
		(a) Donor advised funds	(b)	Funds and other accounts
. Tota	I number at end of year			
. Aggr year	egate value of contributions to (during)			
A ggr	egate value of grants from (during year)			
. Aggr	egate value at end of year			
	-	advisors in writing that the assets held in dor the organization's exclusive legal control?	nor advis	red ☐ Yes ☐ No
used or		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a		purpose Yes No
Part II	Conservation Easements. Comp	lete if the organization answered "Yes" (on Forn	າ 990, Part IV, line 7.
☐ Pred ☐ Pred ☐ Pred Comple	ection of natural habitat servation of open space te lines 2a through 2d if the organizatior	eation or education) Preservation of ar	certified	historic structure
easeme	ent on the last day of the tax year			Held at the End of the Year
a Totalnı	umber of conservation easements		2a	neid at the End of the Year
	creage restricted by conservation easem	nents	2b	
c Numbei	of conservation easements on a certifie	d historic structure included in (a)	2c	
	of conservation easements included in structure listed in the National Register		2d	
Numbe tax yea		ansferred, released, extinguished, or terminate	ed by the	e organization during the
Numbe	of states where property subject to con	servation easement is located 🗠		
Does th		irding the periodic monitoring, inspection, han	dling of	┌ Yes
Staff an year	d volunteer hours devoted to monitoring	, inspecting, handling of violations, and enforc	ing cons	ervation easements during the
<u>-</u>				
	of expenses incurred in monitoring, insp	pecting, handling of violations, and enforcing c	onserva	tion easements during the year
► \$		2/4) - have rate 6: the man		0/5//4)
(B)(ı) a	nd section 170(h)(4)(B)(ii)?	ine 2(d) above satisfy the requirements of sec		☐ Yes ☐ No
balance	· · · · · · · · · · · · · · · · · · ·	rts conservation easements in its revenue an it of the footnote to the organization's financia asements		•
art III	Organizations Maintaining Colle	ctions of Art, Historical Treasures,	or Oth	er Similar Assets.
	<u> </u>	red "Yes" on Form 990, Part IV, line 8.		
works o	f art, historical treasures, or other simila	SFAS 116 (ASC 958), not to report in its reve ir assets held for public exhibition, education, tnote to its financial statements that describe	or resea	arch in furtherance of public
works o		SFAS 116 (ASC 958), to report in its revenue ir assets held for public exhibition, education, to these items		
(i) _{Reven}	ue included on Form 990, Part VIII, line	1	► \$	
	included in Form 990, Part X			
If the o	rganızatıon received or held works of art,	historical treasures, or other similar assets f SFAS 116 (ASC 958) relating to these items	or financ	
a Revenu	e included on Form 990, Part VIII, line :	L		► \$

b Assets included in Form 990, Part X

Par	Continued)	Collections of A	Art, His	storic	al Tre	easures, d	or Ot	her Similar	Asse	ets	
3	Using the organization's acquisition, accollection items (check all that apply)	ession, and other red	cords, ch	neck an	ny of th	e following t	hat ar	e a significant	use of	ıts	
а	Public exhibition		d	Гι	Loan or	exchange p	rogra	ms			
b	Scholarly research		e		Other						
c	Preservation for future generations										
4	Provide a description of the organization Part XIII	's collections and ex	plaın hov	w they 1	further	the organiza	atıon's	exempt purpo	se in		
5	During the year, did the organization sol assets to be sold to raise funds rather the								es	– _{No}	
Par	rt IV Escrow and Custodial Arra		as part (or the o	rigariize	ition's cone	- CIOII·	, ·	-		
	Complete if the organization Part X, line 21.		n Form	990, F	Part IV	, line 9, or	repo	orted an amo	unt o	n Forn	n 990,
1a	Is the organization an agent, trustee, cu included on Form 990, Part X?	stodian or other inter	rmediary	for cor	ntrıbutı	ons or other	asse	ts not	es	No	
b	If "Yes," explain the arrangement in F	art XIII and complet	te the fol	lowing	table			A	moun	t	
c	Beginning balance						1 c				
d	Additions during the year					Ī	1d				
e	Distributions during the year						1e				
f	Ending balance					ľ	1f				
2a	Did the organization include an amount of	on Form 990. Part X.	line 21.	for esc	row or	ے custodial ac	count	lability? Γ Y	es	_ No	
b Pa	If "Yes," explain the arrangement in Par										Γ
	<u> </u>	(a)Current year	(b) Prio			Two years ba		I)Three years bac		Four ye	ars back
1a	Beginning of year balance	35,999,877	3	33,425,3	71	24,872,2	260	20,965,48	37	20	0,343,090
b	Contributions	-1,752,623		2,081,9	67	5,087,3	386	4,467,65	i3		110,463
c	Net investment earnings, gains, and losses	-436,559		3,216,0	32	6,247,0)30	2,485,01	.8	3	3,330,025
d	Grants or scholarships										
е	Other expenditures for facilities and programs	2,515,191		2,699,3	98	2,755,4	143	3,020,08	19	2	2,789,688
f	Administrative expenses	20,701		24,0	95	25,8	362	25,80	19		28,403
g	End of year balance	31,274,803	3	35,999,8	77	33,425,3	371	24,872,26	50	20	0,965,487
2	Provide the estimated percentage of the	•	ance (lın	ne 1g, c	olumn	(a)) held as	·				
а	Board designated or quasi-endowment	100 000 %									
b	Permanent endowment ►										
С	Temporarily restricted endowment F The percentages on lines 2a, 2b, and 2c	should equal 100%									
За	Are there endowment funds not in the po	ssession of the orgai	nızatıon	that ar	e held a	and adminis	tered	for the			
	organization by	_						_		Yes	No
	(i) unrelated organizations							H-	3a(i)		No
	(ii) related organizations					•		Ļ	3a(ii)		No
ь 4	If "Yes" on 3a(II), are the related organized Describe in Part XIII the intended uses	·					• •		3b		
	rt VI Land, Buildings, and Equip		GHUUWIII	icht full	iuo						
Pal	Complete if the organization		Form 9	90. Pa	rt IV.	line 11a.S	ee Fo	rm 990. Pari	t X. In	ne 10.	
	Description of property		Cos	(a) st or oth	er basıs	(b) Cost or othe	r basıs	Accumulate (c) depreciatio	ed .	(d) Bool	
1-	Land			(ınvestm	ient)	(other)			\dashv		4EE 205
	Land		-				55,285	4.053	267		455,285
	Leasehold improvements		\vdash				62,267	1,062,			0
_	·					440	<i>c</i> ¬ ¬ ¬ ~ ~				9,808,868
	Equipment		·			<u> </u>	62,780 82,191	5,153, 740,	_		,,141,543

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

12,370,483

Part VII Investments—Other Securities. Com See Form 990, Part X, line 12.	nplete if the organ	nization answered 'Ye	es' on Form 990, P	art IV, line 11b.
(a) Description of security or category (including name of security)		(b)Book value		l of valuation year market value
(1)Financial derivatives				
(2)Closely-held equity interests (3)Other			+	
(6,6 s			_	_
	•			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related.				
Complete if the organization answered	'Yes' on Form 990), Part IV, line $11c{S}$		
(a) Description of investment		(b) Book value		l of valuation year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization	answered 'Yes' on	Form 990 Part IV line		Part X line 15
(a) Descri				ook value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15	5.)			
Part X Other Liabilities. Complete if the orga				or 11f.
See Form 990, Part X, line 25. 1. (a) Description of liability	(b) Book value			
Federal income taxes		0		
TENANT DEPOSITS	94,8	64		
	<u></u>			
		_		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	,-			
2. Liability for uncertain tax positions. In Part XIII provide	the text of the foot	note to the organization	's financial statemen	te that reports the

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per F	Return
1	Total revenue, gains, and other support per audited financial statements	1	26,698,311
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a -5,059,664		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	-5,059,664
3	Subtract line 2e from line 1	3	31,757,975
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 5,000		
ь	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	2,110,413
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	33,868,388
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expense	s pe	
	Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	28,900,505
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	1,138,960
3	Subtract line 2e from line 1	3	27,761,545
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 5,000		-
b	Other (Describe in Part XIII)		
_	Add lines 4a and 4h	4c	3 3 3 5 3 1 1

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information.

Total expenses Add lines $\bf 3$ and $\bf 4c.$ (This must equal Form 990, Part I, line $\bf 18$) .

ınformatıon	
Return Reference	Explanation
OTHER REVENUE ON RETURN BUT NOT ON BOOKS	FORM 990, SCH D, PART XI, LINE 4B REVENUE FROM UNAUDITED DIVISIONS OF ENTITY 4,222,975 COST OF GOODS SOLD (28,468) COST OF SPECIAL EVENTS (999,303) RENTAL EXPENSES (1,089,791) TOTAL PART XI LINE 4B 2,110,413
OTHER EXPENSES ON BOOKS BUT NOT ON RETURN	FORM 990, SCH D, PART XII, LINE 2D RENTAL EXPENSE 1,089,791 COST OF GOODS SOLD 28,468 SPECIAL EVENT EXPENSES 20,701 TOTAL PART XII LINE 2D 1,138,960
OTHER EXPENSES ON RETURN BUT NOT ON BOOKS	FORM 990, SCH D, PART XII, LINE 4B EXPENSES FROM UNAUDITED DIVISIONS OF ENTITY 3,330,311
FIN 48 AUDIT FOOTNOTE	IN ACCORDANCE WITH AUTHORITATIVE GUIDANCE ISSUED BY THE FASB, THE ASSOCIATION RECOGNIZE TAX LIABILITIES WHEN, DESPITE MANAGEMENT'S BELIEF THAT TAX RETURN POSITIONS ARE SUPPORTABLE, THE ASSOCIATION BELIEVES THAT CERTAIN POSITIONS MAY NOT BE FULLY SUSTAINED UPON REVIEW BY TAX AUTHORITIES BENEFITS FROM TAX POSITIONS ARE MEASURED AT THE LARGEST AMOUNT OF BENEFIT THAT IS GREATER THAN 50% LIKELY OF BEING REALIZED UPON SETTLEMENT TO THE EXTENT THAT THE FINAL TAX OUTCOME OF THESE MATTERS IS DIFFERENT THAN THE AMOUNTS RECORDED, SUCH DIFFERENCES IMPACT INCOME TAX EXPENSE IN THE PERIOD IN WHICH SUCH DETERMINATION IS MADE INTEREST AND PENALTIES, IF ANY, RELATED TO ACCRUED LIABILITIES FOR POTENTIAL TAX ASSESSMENTS ARE INCLUDED IN INCOME TAX EXPENSE WITH FEW EXCEPTIONS, THE ASSOCIATION IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS BY THE US FEDERAL, STATE OR LOCAL TAX AUTHORITIES FOR YEARS ENDED DECEMBER 31, 2011 AND PRIOR MANAGEMENT HAS EVALUATED THE ASSOCIATION'S TAX POSITIONS AND HAS CONCLUDED THAT THE ORGANIZATION HAS NOT TAKEN ANY MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE ADJUSTMENT TO THE FINANCIAL STATEMENTS TO COMPLY WITH THE PROVISIONS OF THIS GUIDANCE
USE OF ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4 THE INSTITUTE OF LAND WARFARE WAS ESTABLISHED AS A DESIGNATED FUND FOR THE RESEARCH, PUBLICATION, AND DISTRIBUTION OF INFORMATION ON NATIONAL DEFENSE ISSUES IN ACCORDANCE WITH THE ASSOCIATION'S CHARTER AND BY-LAWS

5

31,096,856

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

efile GRAPHIC print - DO NOT PROCESS

ASSOCIATION OF THE UNITED STATES ARMY

As Filed Data -

DLN: 93493182002026

OMB No 1545-0047

2015

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public **Inspection Employer identification number**

53-0193361

				1 22-0132201			
Part I General Informati Complete if the orga			he United States. orm 990, Part IV, line	14b.			
For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?							
	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.						
3 Activites per Region (The follo	owing Part I, line	3 table can be d	uplicated if additional sp	ace is needed)			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region		
(1) See Add'l Data							
(2)							
(3)							
(4)							
(5)							
3a Sub-total b Total from continuation sheets to Part I		8.0)		352,430		
c Totals (add lines 3a and 3b)		80			352,430		
			<u> </u>				

Schedule F (Form 990) 2015

<u> </u>		(b) IRS code		(d) Purpose of	t IV, line 15, for an	(f) Manner of	(g) A mount	(h) Description	(i) Method of
	organization	section and EIN (if applicable)	(c) region	grant	cash grant	cash disbursement	of non-cash assistance	of non-cash assistance	valuation (book, FMV, appraisal, othe
(1)								
(2)								
(3)								
(4)								
2					ecognized as charit ovided a section 501				
3	Enter total nu	mber of other or	ganızatıons or ent	ities					

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be	<u>duplicated if addit</u>	tional space is ne	eded.				
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)					1		
(2)		+ + +			 		<u>'</u>
(3)		1	·		,		1
(4)		+ +	·		+		
(5)		+ +	 I		+		
(6)		+ +	 I		+		
(7)		+ + +			†		<u> </u>
(8)		+ + +			†		<u> </u>
(9)		+ +			<u> </u>		<u> </u>
(10)		+	·		<u> </u>		<u> </u>
(11)		+			†		<u> </u>
(12)		+ + +			<u> </u>		<u> </u>
(13)		+	·		 		<u> </u>
(14)		+ + +			,		
(15)		+ + +			,		
(16)		1			,		
(17)					,		
(18)					,		
							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Г	Yes	ত	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Г	Yes	<u>~</u>	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	Г	Yes	I~	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	Г	Yes	<u>~</u>	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships. (see Instructions for Form 8865)	Г	Yes	দ	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	~	Yes	Г	No

Schedule F (Form 990) 2015

Additional Data

Software ID: **Software Version:**

EIN: 53-0193361

Name: ASSOCIATION OF THE UNITED STATES ARMY

Schedule F (Form 990) 2015

Page 5

Part V Supplemental Information

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

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Middle East and North Africa		9	Fundraising	EDUCATION/FUNDRAISING	102,124
Europe (Including Iceland and Greenland)		23	Program Services	EDUCATION/FUNDRAISING	51,019
East Asia and the Pacific		28	Program Services	EDUCATION/FUNDRAISING	152,219

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
East Asia and the Pacific		10	Fundraising	EDUCATION/FUNDRAISING	45,946					
Central America and the Caribbean		2	Program Services	EDUCATION	386					
Central America and the Caribbean		8	Program Services	EDUCATION	736					

DLN: 93493182002026

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Supplemental Information Regarding

In	Form 990-EZ file dicate whether the orga	ctivities.Compleers are not requirently	ete if the ed to co		ation answered "Yes	" on Form	53-0193361	
In V	Form 990-EZ file dicate whether the orga Mail solicitations Internet and email so	ers are not requi	ed to co			" on Form	990 Part IV	/ line 17
- - -	dicate whether the orga Mail solicitations Internet and email so	anization raised fun		mplete t			i 550, raitiv	, mie 17.
- - - -	Mail solicitations Internet and email so		ds throug		his part.			
□	Internet and email so				=			
	-				e Solicitation of			
Γ	Phone solicitations	licitations			f Solicitation of			
					g 🔽 Special fundrai	sıng event	s	
	In-person solicitation	าร						
or se	d the organization have key employees listed i rvices?	n Form 990, Part V	II) or ent	ity in con	nection with profession	al fundraıs	ing TYe	s√ No
	f "Yes," list the ten high o be compensated at lea				users) pursuant to agre	ements un	der which the f	undraiser is
(i) N	ame and address of	(ii) Activity	(iii)) Did	(iv) Gross receipts	(v) Am	ount paid to	(vi) A mount paid t
	ındıvıdual			ser have	from activity		tained by)	(or retained by)
or	entity (fundraiser)			ody or rol of		fundraiser listed in col (i)	organization	
			contributions?			` `		
			Yes	No				
						1		
						1		
ı						1		
)								
al		l	1	P				
	all states in which the stration or licensing	organization is regi	stered or	licensed	to solicit contributions	or has bee	n notified it is e	exempt from

Part II	Fundra	isina	Events

Fundraising Events.

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

	receipts greater than \$5,000).			
		(a) Event #1	(b) Event #2	(c)O ther events	(d)
		GOLF TOURNAMENT	GOLF CLASSIC	58	Total events (add col (a) through
		(event type)	(event type)	(total number)	col (c))
Ф					
HE	•				
Reveilue	1 Gross receipts	80,075	84,090	1,438,996	1,603,161
ä					
	2 Less Contributions				
	3 Gross income (line 1 minus line 2)	80,075	84,090	1,438,996	1,603,161
				_	
	4 Cash prizes				
	5 Noncash prizes				
(0	6 Rent/facility costs				
Expenses	7 Food and beverages				
per	_				
页	8 Entertainment				
Direct	9 Other direct expenses	27,558	51,327	920,418	999,303
₫	10 Direct expense summary Add lines	4 through 9 ın column (d)	►	999,303
	11 Net income summary Subtract line 1	.0 from line 3. column (d)		603,858
Par	t III Gaming.	(,		
	Complete if the organization	answered "Yes" on F	orm 990, Part IV, line	19, or reported mor	e than \$15,000 on
	Form 990-EZ, line 6a.				
ds		()5	(b)Pull tabs/Instant	() () ()	(d)
Revenue		(a)Bingo	bingo/progressive bingo	(c)O ther gaming	Total gaming (add col
φ					(a) through col (c))
ž	1 Gross revenue				
8 9 8	2 Cash prizes				
ĕ					
ă	3 Noncash prizes				
ਲੂ	4 Rent/facility costs				
Direct Expenses					
_	5 Other direct expenses				
		┌ Yes %	┌ Yes %	┌ Yes %	
	6 Volunteerlabor	┌ No	┌ No	□ No	
	Volunteer labor 1 1 1 1				
	7 Direct expense summary Add lines	2 through 5 ın column (d)	🛌	
	8 Net gaming income summary Subtra	ict line 7 from line 1, col	umn (d)	· · · · · · · •	
9	Enter the state(s) in which the organiza	tion conducts gaming as	rtivities		
a	Is the organization licensed to conduct				
a					
b	If "No," explain				
10-	Were any of the organization's gaming l				 「Yes
				the tax year	163 NO
b	If "Yes," explain				

Schedule	G (Form	990	or 990-EZ)	201

Page	3
------	---

L1	Does the organization conduct gaming	activities with nonmember	ers?	Yes N	0
12	Is the organization a grantor, beneficia	ry or trustee of a trust or	a member of a partnership or other entit	ty	
	formed to administer charitable gaming	g?		┌Yes ┌N	0
13	Indicate the percentage of gaming acti	ıvıty conducted ın			
а	The organization's facility			13a	%
b	An outside facility			13b	%
L4	Enter the name and address of the pers	son who prepares the orga	anızatıon's gamıng/specıal events books	s and records	
	Name 🟲				
	Address ►				
.5a	Does the organization have a contract				
	revenue?			┌Yes ┌N	0
b	If "Yes," enter the amount of gaming re	evenue received by the or	ganızatıon 🟲 \$ a	and the	
	amount of gaming revenue retained by	the third party 🟲 \$			
c	If "Yes," enter name and address of th	e thırd party			
	Name 🟲				
	Address ►				
L 6	Gaming manager information				
	Name 🕨				
	Gaming manager compensation * \$				
	Description of services provided				
	Director/officer	Employee	☐ Independent contractor		
.7	Mandatory distributions				
а	Is the organization required under stat	e law to make charitable o	distributions from the gaming proceeds t	to	
	retain the state gaming license?			ΓYes ΓΝ	0
b	Enter the amount of distributions requi	red under state law distril	buted to other exempt organizations or s	spent	
	in the organization's own exempt activ				
Pai	rt IV Supplemental Information	on. Provide the explar 5b, 15c, 16, and 17b, a	nations required by Part I, line 2b, one applicable. Also complete this pa); and
	Return Reference		Explanation		
		•			

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

(Form 990)

Department of the

DLN: 93493182002026OMB No 1545-0047

2015

Open to Public

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

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

Attach to Form 990.

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

Inspection

TEC A DMV					Employer identificati	on number
TES ARMY					53-0193361	
n on Grants and	d Assistance				•	
ard the grants or as	sıstance?				tance, and	▽ Yes
			plete if the organization	answered "Yes" on F	orm 990, Part IV, line 21	., for any recipient
(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
1	ecords to substant and the grants or as tion's procedures fo nce to Domestic Or 5,000 Part II can	n on Grants and Assistance ecords to substantiate the amount of the ard the grants or assistance?	ecords to substantiate the amount of the grants or assistance, the driving the grants or assistance, the grants or assistance?	ecords to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance?	ecords to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistant the grants or assistance?	cords to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ard the grants or assistance?

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

(a)Type of grant or assistance	ce	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
Part IV Supplemental I	nforma	tion. Provide the info	rmation required in P	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanati	on				
Grants and Other Assistance	FORM 99	O, SCHEDULE I, LINE 2	AUSA ONLY monitors g	rants given for education	nal purposes from its Scholarsh	nip Funds Based on various criteria

and the applicant's CV, a committee consisting of AUSA officers decides who deserves and receives scholarship funding

Schedule I (Form 990) 2015

Additional Data

Software ID:

Software Version:

EIN: 53-0193361

Name: ASSOCIATION OF THE UNITED STATES ARMY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	, ,	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Army Historical Foundation 2425 Wilson Blvd Arlington, VA 22201	52-1367225	501C3	725,044				National Museum of US Army
The National Ranger Association 10810-850 Schneider Rd FtBenning, GA 31905	58-2023357	501C3	6,000				Spons Best Ranger
Army War College Foundation 122 Forbes Ave Carlisle, PA 17013	23-2034407	501C3	25,000				Annual Support

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	, (5)	(h) Purpose of grant or assistance		
Penfed Foundation 2930 Eisenhower Ave Alexandria, VA 22314	54-2062271	501C3	11,000				Support		
Caddy for Cure 2067 NWc104th Ave Coral Springs,FL 33071	20-0667507	501C3	10,000				Support		
Marriott Ranch 5305 Marriott Ln Hume, VA 22639	52-1886690	For Profit Enti	5,565				Support		

Form 990,Schedule I, Par	t II, Grants and	1 Other Assistance	<u>e to Domestic Orga</u>	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
The Freedom Center 2581 World Gateway Pl Detroit, MI 48242	45-2813231	501C3	6,000				Hospitality ctr for veteran's families
Guardian Angels Medical Service Dogs Inc 3251 Northeast 180th Ave Willison,FL 32696	27-2667123	501C3	42,941				Dog training for handicapped vets
Operation Once in a Lifetime 211 Parker Rd560 Plano,TX 75023	20-8948979	501C3	15,000				Support

Form 990,Schedule I, Par	t II, Grants and	Other Assistance ✓	a to Domestic Org	anizations and D	<u>omestic Governm</u> €	∍nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1	(f) Method of valuation (book, FMV, appraisal, other)	n (g) Description of non-cash assistance	(h) Purpose of grant or assistance
Equest 3800 Troy Rd PO Box 2109 Wylie,TX 75098	75-1823701	501C3	10,000				Support
Northern NY Community Foundation 120 WashingtonSt400 Watertown,NY 13601	15-6020989	501C3	20,000				Support
Asley Inc 800 Tydings Lane Havre de Grace, MD 21078	52-1126145	501C3	6,622				Support

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	<u>omestic Governme</u>	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Maryland National Guard Youth Challenge Foundation 1203 Cloverfield Ct Bel Air, MD 21015	26-1433863	501C3	6,500				Scholarship
National Infantry Association 1775 Legacy Way Columbus,GA 31903	58-2422819	501C3	5,500				Support
Fisher House 111 Rockville Pike 420 Rockville, MD 20850	11-3158401	501C3	36,500				Support

Form 990,Schedule I, Par	rt II, Grants an	d Other Assistanc	e to Domestic Org	<u>anizations and D</u>	<u> Oomestic Governme</u>	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	1 ` '	(f) Method of valuation (book, FMV, appraisal, other)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(h) Purpose of grant or assistance
Langley Joint Air Force Base Ft Eustis Ft Eustis, VA 23604		govt agency	10,061				Gold Star Family Memorial Installation
PALO ALTO VA SYSTEM MEDICAL CENTER 3801 MIRANDA AVE PALO ALTO,CA 94304		govt agency	35,000				SUPPORT

DLN: 93493182002026

Schedule J

Compensation Information

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

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

Name of the organization ASSOCIATION OF THE UNITED STATES ARMY **Employer identification number**

53-0193361

Pa	art I Questions Regarding Compensation	on	·			
					Yes	No
1a	Check the appropriate box(es) if the organization pr 990, Part VII, Section A, line 1a Complete Part II					
	▼ First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	<u>~</u>	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the creimbursement or provision of all of the expenses of			1b	Yes	
2	Did the organization require substantiation prior to directors, trustees, officers, including the CEO/Exc			2	Yes	
3	Indicate which, if any, of the following the filing orgorganization's CEO/Executive Director Check allowed by a related organization to establish compens	that apply				
	✓ Compensation committee	<u> </u>	Written employment contract			
	☐ Independent compensation consultant	굣	Compensation survey or study			
	Form 990 of other organizations	<u>~</u>	Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990 or a related organization), Part VI	I, Section A, line 1a with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymen	nt?	4a		No
b	Participate in, or receive payment from, a supplem	ental non	qualified retirement plan?	4b		No
C	Participate in, or receive payment from, an equity-	based co	mpensation arrangement?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organiz	ations m	ust complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section compensation contingent on the revenues of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		No
	If "Yes," on line 5a or 5b, describe in Part III					
6	For persons listed on Form 990, Part VII, Section compensation contingent on the net earnings of	A, line 1a	a, did the organization pay or accrue any			
а	The organization?			6a		No
b	Any related organization?			6b		No
	If "Yes," on line 6a or 6b, describe in Part III					
7	For persons listed on Form 990, Part VII, Section payments not described in lines 5 and 6? If "Yes,"			7		No
8	Were any amounts reported on Form 990, Part VII					
			itions section 53 4958-4(a)(3)? If "Yes," describe	8		No
9	If "Vac" on line 8 did the organization also follows	he rebutt	able presumption procedure described in Regulations			110
9	section 53 4958-6(c)?	.ne reputt	able presumption procedure described in Regulations	9		

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

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

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in		
	Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation		(B)(ı)-(D)	column(B) reported as deferred on prior Form 990		
See Additional Data Table									

Schedule J (Form 990) 2015

Part III Supplemental Information

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

Return Reference

Explanation

EXPLANATION OF TRAVEL AND DUES

FORM 990, SCHEDULE J, PART I, LINE 1A FIRST-CLASS TRAVEL THE PRESIDENT USES FIRST CLASS AIR TRAVEL EMPLOYEES CAN TRAVEL BUSINESS CLASS IF THE TRIP GOES BEYOND TWO CONTINENTS (E.G. TO KUALA LUMPUR) HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES. THE PRESIDENT BELONGS TO SEVERAL OFFICER CLUBS, WHICH ARE USED FOR BUSINESS PURPOSES

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 53-0193361

Name: ASSOCIATION OF THE UNITED STATES ARMY

(A) Name and Title		(B) Breakdown o	of W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1Gordon R Sullivan President AND ceo	(ı) (ıı)		275,000	o!	31,926	20,810	859,957	,
	("'	o	- <u></u>		0	0		
1Guy C SwanV P Education	(1)		110,000	0	19,410	3,510	384,373	0
	(11)	0	- ار	- ار 'o	0	0	,	- · o o
2 Roger G Thompson V P Membership & Meetings	(1)		7 110,000	0	13,540	20,810	396,467	, 0
	(11)	0	- اُر	-1	0	- 0	. -	,
3Jerry L Sinn V P Finance & Admin	(1)) 256,066	5 120,000	, 0	19,823	1,840	397,729	0
VI I Hance & January	(11)	,		_ - n	- 0			,
4Helen I HegyıController	(1)) 131,943	3 15,840	, 0	10,274	20,372	178,429	0
	(11)	,	 -					
5 Ann Belyea Corporate Secretary	(1)) 101,816	5 37,000	5	7,675	8,572	155,063	-
	(11)		ے	_	-	 -		j ;
6 Harry Rothman Director, Info Systems	(1)) 156,637	7 16,170		12,402	26,109	211,318	3 0
Director, and Systems	(11)	,)	_ _ _ 0	- 0		0	
7 Rick Maze Editor-in-Chief, ARMY	(1)) 147,180	0	0	11,508	12,416	171,104	·
magazine	(11)	- c		_	-	C		
8Michael Scanlan Director, Industry Affairs	(1)) 128,360	16,510	0	9,892	1,351	. 156,113	3 0
,	(11))						
9 John Davies Director, Regional Affairs	(1)) 127,422	16,382	<u> </u>	 	1,344	154,978	
Director, Regional Analis	(11)	,)		- 0			
10George Coan Director, National Security	(1)) 127,036	12,200	, 0	9,653	2,654	151,543	+
,	(11))			- 0			
11Roger Cırıllo Dırector, Books	(1)) 118,911	1 11,000	0	9,024	11,120	150,055	
Directory 2001.0	(11))	-					_

DLN: 93493182002026

Schedule L

(Form 990 or 990-EZ)

Transactions with Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ► Attach to Form 990 or Form 990-EZ.

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

www.irs.gov/form990.

2015

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organization. Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, P (a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description organization	tions o Part V ption o	, lıne 4	∙0 b	
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, P (a) Name of disqualified person (b) Relationship between disqualified person and (c) Descrip	Part V ption o	, lıne 4	0 b	
1 (a) Name of disqualified person (b) Relationship between disqualified person and (c) Descrip	ptıon o	_	-UD	
	-	и Ц	(-1) (
Organization transact	LION		(d) Corr	
			Yes	No
		-+		
		-		
		<u> </u>		
2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under sec	ction			
4958	\$ —			
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization	\$			
Part II Loans to and/or From Interested Persons.				
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV	V , line	26,01	r ıf the	
organization reported an amount on Form 990, Part X, line 5, 6, or 22				
(a) Name of (b) Relationship (c) Purpose of (d) Loan to (e)Original (f)Balance (g) In	(h)		(i)Wr	
	Approv		agreer	nent?
	y boar			
	ommit		1	Τ
	Yes	No	Yes	No
	Yes		Yes	
) SULLIVAN POLICY				
			+	
otal \$ \\$ \$ 600,000				
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27.	(e) P	urpos	e of ass	stanc
art III Grants or Assistance Benefiting Interested Persons.	(e) P	urpos	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested (b) Relationship between (c) Amount of assistance (d) Type of assistance	(e) P	urpose	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person interested person and the person (b) Relationship between interested person and the person	(e) P	urposo	e of ass	ıstanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the	(e) P	urpos	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the	(e) P	urpose	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the	(e) P	urpos	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the	(e) P	urpose	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the	(e) P	urposo	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person interested person and the person (b) Relationship between interested person and the person	(e) P	urpos	e of ass	stanc
Grants or Assistance Benefiting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (b) Relationship between interested person and the	(e) P	urpos	e of ass	Istanc

	sactions Involvin					
Complete if the o	organization answe	red "Yes" on Fori	<u>m 990, Part IV, line 2</u>	8a, 28b	, or 28c.	
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sh o organı reven	f zation's	
				Yes	No	
Part V Supplemental						
Provide additional	information for respon	ses to questions or	Schedule L (see instruc	tions)		
Return Reference			Explanation			

Schedule L (Form 990 or 990-EZ) 2015

DLN: 93493182002026

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

SCHEDULE M

(Form 990)

Noncash Contributions

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

► Attach to Form 990.

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

Open to Public Inspection

	e of the organization CIATION OF THE UNITED STATES ARMY				Employer identificat	ion number	
55U	CIATION OF THE UNITED STATES ARMY				53-0193361		
Pa	rt I Types of Property			L	33 0133301		
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of de noncash contrib	etermining	ts
1	Art—Works of art						
2	Art—Historical treasures .						
3	Art—Fractional interests						
	Books and publications						
5	Clothing and household						
6	goods				_		
	Boats and planes						
	Intellectual property						
	Securities—Publicly traded .						
	Securities—Closely held stock .						
	Securities—Partnership, LLC,						
12	or trust interests						
	Qualified conservation contribution—Historic						
14	structures						
15	Real estate—Residential .						
16	Real estate—Commercial						
17	Real estate—O ther						
	Collectibles						
	Food inventory	X	1,280	112,818	FAIR MARKET VAL	UE	
	Drugs and medical supplies .						
	Taxidermy						
	Historical artifacts						
	Scientific specimens Archeological artifacts						
					 		
	Other ► () Other ► ()						
	Other ► ()						
	Other ► ()						
	Number of Forms 8283 received for which the organization comple	, -			29		
						Yes	No
30a	During the year, did the organiza						
	for exempt purposes for the enti	re holding r	period?			30a	No
b	If "Yes," describe the arrangeme						
31	Does the organization have a gif	t acceptan	ce policy that requires the r	eview of any non-standard	contributions?	31	No
32a	Does the organization hire or us contributions?	e third part	ies or related organizations	to solicit, process, or sell	noncash 	32a	No
b	If "Yes," describe in Part II						
	If the organization did not report	: an amount	: in column (c) for a type of	property for which column (a) is checked,		

describe in Part II

Page 2

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	D:	rt				0	7	ın	n	le	'n	n	c

nental Information.

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

Return Reference Explanation

Schedule M (Form 990) (2015)

DLN: 93493182002026

OMB No 1545-0047

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SCHEDULE 0

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

Name of the organization ASSOCIATION OF THE UNITED STATES ARMY	Employer identification number
	53-0193361

Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11B AUSA'S FORM 990 IS REVIEWED BY AUSAS VICE PRESIDENT/FINANCE & ADMIN BEFORE FILING

Return Reference	Explanation
DETERMINING	FORM 990, PART VI, LINE 15 FOR ALL OFFICERS (INCLUDING THE PRESIDENT) COMPENSATION COMMITTEE
COMPENSATION	CHAIRED BY THE CHAIRMAN OF THE COUNCIL OF TRUSTEES DETERMINES THE OFFICERS' COMPENSATION

Return Reference	Explanation
AVAILABILITY OF OTHER DOCUMENTS	FORM 990, PART VI, LINE 19 BY LAWS, TAX RETURN, ORGANIZATION STRUCTURE AND BUDGET ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
ELECTION OF GOVERNING BODY	FORM 990, PART VI, LINE 7A THE CHAIRMAN APPOINTS A 3 MEMBER NOMINATING COMMITTEE FROM AMONG THE COUNCIL OF TRUSTEES FOR THE PURPOSE OF PROVIDING A SLATE OF NOMINEES FOR VACANT POSITIONS ON THE COUNCIL THE NOMINATING COMMITTEE SUBMITS A SLATE SELECTED FROM MEMBERSHIP OF AT LEAST ONE NOMINEE FOR EACH VACANT POSITION AFTER PUBLICATION OF THE SLATE IN AUSA NEWS, ADDITIONAL CANDIDATES MAY BE NOMINATED, IF THEY COMPLIED WITH THE CONDITIONS BALLOTS WILL BE COUNTED UNDER THE DIRECTION OF THE COUNCIL OF TRUSTEES BY OFFICIAL TELLERS

FORM 990, PART III, LINE 4D OTHER PROGRAM SERVICES INCLUDE ARMY MAGAZINE, PUBLIC AFFAIRS, AUSA NEWS, GOVERNMENT AFFAIRS, DATA PROCESSING INSIGNIA & INSURANCE, AND ADVERTISING OTHER PROGRAM EXPENSES \$4,598,091, INCLUDING GRANTS OF \$1,244,874 AND REVENUE OF \$1,993,581 Army Magazine The association published two monthly publications ARMY magazine and AUSA News and two weekly digital publications AUSAs Five Things and AUSA Bulletin aimed at providing ARMY-specific and AUSA-related information to association members. The magazine includes feature articles and commentaries focusing on education and professional development, a core mission of the associations charter AUSA News an award-winning newspaper and the electronic newsletter AUSA Bulletin, include a mixture of association-related news and updates, including coverage of meetings and events. AUSA News AUSA News, the monthly newspaper of the Association of the United States Army (AUSA) is sent to all AUSA members and is read by thousands of men and women of all ranks in the Regular Army, the Army Reserve and the National Guard, civilian employees, industry members, retirees and veterans and all their families. The News also provides timely information on the Army and AUSA to an audience of corporate and industry leaders, senior officials in all branches of the federal government and men and women interested in todays and tomorrows Army, its soldiers and families. Reaching key figures in uniform, industry, Congress, the Pentagon and the White House, AUSA News offers a unique monthly insight into what service leaders are thinking, what Congress is changing and what soldiers and their families, veterans, businessmen and businesswomen are saying and doing in relationship to the world's premer landpower force.	Return Reference	Explanation
	PROGRAM	GOVERNMENT AFFAIRS, DATA PROCESSING INSIGNIA & INSURANCE, AND ADVERTISING OTHER PROGRAM EXPENSES \$4,598,091, INCLUDING GRANTS OF \$1,244,874 AND REVENUE OF \$1,993,581 Army Magazine The association published two monthly publications ARMY magazine and AUSA News and two weekly digital publications AUSAs Five Things and AUSA Bulletin aimed at providing ARMY-specific and AUSA-related information to association members. The magazine includes feature articles and commentaries focusing on education and professional development, a core mission of the associations charter. AUSA News an award-winning newspaper and the electronic newsletter AUSA Bulletin, include a mixture of association-related news and updates, including coverage of meetings and events. AUSAs Five Things is a weekly forward-looking tip sheet for association members providing insight into Army-related news. AUSA News, the monthly newspaper of the Association of the United States Army (AUSA) is sent to all AUSA members and is read by thousands of men and women of all ranks in the Regular Army, the Army Reserve and the National Guard, civilian employees, industry members, retirees and veterans and all their families. The News also provides timely information on the Army and AUSA to an audience of corporate and industry leaders, senior officials in all branches of the federal government and men and women interested in todays and tomorrows Army, its soldiers and families. Reaching key figures in uniform, industry, Congress, the Pentagon and the White House, AUSA News offers a unique monthly insight into what service leaders are thinking, what Congress is changing and

Return Reference	Explanation
OTHER CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9 DECREASE IN PENSION LIABILITY (981,164) AUDIT INVESTMENT VARIANCE (12,790) TOTAL CHANGES IN NET ASSETS (993,954)

Return Reference	Explanation
CONFLICTS OF INTEREST	FORM 990, PART VI, LINE 12C IT IS THE RESPONSIBILITY OF ALL DIRECTORS, OFFICERS AND EMPLOYEES TO REPORT ETHICS VIOLATIONS OR SUSPECTED VIOLATIONS WITHOUT ADVERSE CONSEQUENCES TO THE COMPLIANCE OFFICER OR THEIR SUPERVISOR THE COMPLIANCE OFFICER IS RESPONSIBLE TO INVESTIGATE ALL COMPLAINTS AND ALLEGATIONS AND WILL ADVISE AT HIS/HER DISCRETION TO THE AUSA president OR THE FINANCE/AUDIT COMMITTEE. REPORTS ARE KEPT CONFIDENTIAL TO THE EXTENT POSSIBLE AND ALL REPORTS ARE INVESTIGATED AND CORRECTED IF NEEDED

Return Reference	Explanation
COMMITTEE	FORM 990, PART VI, LINE 1A The Council of Trustees during periods between meetings of the Council of Trustees shall act through an Executive Committee which may exercise the authority of the Council of Trustees except as specifically limited by the council The Executive Committee shall consist of the Chairman of the Council of Trustees, Deputy Chairman and other council members nominated by the Chairman of the Council of Trustees and approved by the full council. A majority of the committee shall constitute a quorum. Minutes of all meetings of the committee shall be provided to each council member and presented at the following Council of Trustees meeting and approved by the full council.

DLN: 93493182002026

2015

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SCHEDULE R Rela

(Form 990)

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

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

pen to Public Inspection

Name of the organization ASSOCIATION OF THE UNITED STATES ARMY	Employer	ident if ic	ation number					
				53-01933	361			
Part I Identification of Disregarded Entities Con	nplete if the organizatior	answered "Yes" on	Form 990, Part	IV, line 33.				
(a) Name, address, and EIN (If applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income Ei	(e) nd-of-year assets	D	(f) Pirect controlling entity		
Part II Identification of Related Tax-Exempt Organizations during		the organization ans	wered "Yes" on	Form 990, Pa	art IV, I	ıne 34 because ıt	had on	е
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	n Public charity (if section 50:	arity status Direct controll		(g) Section 51 (13) contri entity?	
(A)ADAY UVCTODICAL FOLINDATION	ELINIDO ATOTALO		F01(-)(2)	1705 7		ALICA	Yes	No
(1)ARMY HISTORICAL FOUNDATION 2425 WILSON BLVD	FUNDRAISING	VA	501(c)(3)	LINE 7		AUSA	Yes	
ARLINGTON, VA 22201 52-1367225							\perp	<u> </u>
							\bot	

Schedule R (Form 990) 2015												Page 2
Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.										ŀ		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	ile controlling or entity n	(e) Predominant income(related, unrelated, excluded from tax under sections 512-	(f) Share of total income				(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partner?		_
				514)			Yes	No		Yes	No	
												-

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

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

Part V Transactions With Related Organizations Complete if the organization and	swered "Yes" on Form	990, Part IV, line	34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				1	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more	re related organizations lis	sted in Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a \	Yes	
b Gift, grant, or capital contribution to related organization(s)				1b \	Yes	
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c		No
d Loans or loan guarantees to or for related organization(s)				1d		No
e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				1g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k		No
I Performance of services or membership or fundraising solicitations for related organization(s) .				11		No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s) .				1m		No
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No
• Sharing of paid employees with related organization(s)				10		No
p Reimbursement paid to related organization(s) for expenses				1 p		No
q Reimbursement paid by related organization(s) for expenses				1q		No
r Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				1s		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must comp	lete this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount inv	olved	
1)ARMY HISTORICAL FOUNDATION	A	202,875	FMV			
2)ARMY HISTORICAL FOUNDATION	В	725,044	FMV			

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

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

evenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
												1	Ī

Part VII Supplemental Information

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

Explanation

Return Reference

Schedule R (Form 990) 2015