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<b>Form 990</b>   Department of the Treasury Internal Revenue Service	<b>Return of Organization Exempt From Income Tax</b>  <b>Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)</b>  ▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at <a href="http://www.irs.gov/form990">www.irs.gov/form990</a>	OMB No 1545-0047  <b>2015</b>  <b>Open to Public Inspection</b>
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<b>A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015</b>			
<b>B</b> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization NATIONAL ASSOCIATION OF CONVENIENCE STORES		<b>D</b> Employer identification number  95-2237749
	Doing business as NACS		<b>E</b> Telephone number  (703) 518-4225
	Number and street (or P.O. box if mail is not delivered to street address) 1600 DUKE STREET No 7TH FL	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code ALEXANDRIA, VA 223143436		<b>G</b> Gross receipts \$ 38,229,741
	<b>F</b> Name and address of principal officer Henry O Armour 1600 DUKE STREET No 7TH FL ALEXANDRIA, VA 223143436		<b>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>I</b> Tax-exempt status <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c)(6) <input type="checkbox"/> (insert no ) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list (see instructions)	
<b>J</b> Website: ► WWW.NACSONLINE.COM		<b>H(c)</b> Group exemption number ►	
<b>K</b> Form of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ►		<b>L</b> Year of formation 1961	<b>M</b> State of legal domicile VA

## Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities To serve as an ADVOCATE FOR THE CONVENIENCE RETAILING INDUSTRY			
	2 Check this box <input type="checkbox"/> If the organization discontinued its operations or disposed of more than 25% of its net assets			
Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	32	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	32	
	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	68	
	6	Total number of volunteers (estimate if necessary)	269	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	1,993,156	
	7b	Net unrelated business taxable income from Form 990-T, line 34	89,698	
Revenue			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	235,000	175,000
	9	Program service revenue (Part VIII, line 2g)	30,082,872	32,097,626
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,446,135	1,558,552
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-283,562	-440,284
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	32,480,445	33,390,894
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	235,000	247,500
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	12,612,281	13,410,218
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) $\blacktriangleright$ 0		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	16,946,365	18,315,927
	18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	29,793,646	31,973,645
	19	Revenue less expenses Subtract line 18 from line 12	2,686,799	1,417,249
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	55,291,022	53,812,060
	21	Total liabilities (Part X, line 26)	8,684,797	7,859,820
	22	Net assets or fund balances Subtract line 21 from line 20	46,606,225	45,952,240

<b>Part II</b>	<b>Signature Block</b>
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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	*****			2016-11-11	
	Signature of officer			Date	
	Henry O Armour President & CEO Type or print name and title				
<b>Paid Preparer Use Only</b>	Pnnt/Type preparer's name Fredenck Longwood		Preparer's signature Fredenck Longwood		Date
	Check <input type="checkbox"/> if self-employed			PTIN P00439715	
	Firm's name ▶ Tate and Tryon			Firm's EIN ▶ 52-1855942	
Firm's address ▶ 2021 L Street NW Suite 400 Washington, DC 20036			Phone no (202) 293-2200		

Part III

Statement of Program Service Accomplishments

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

☐

☒

1

Briefly describe the organization's mission

THE MISSION OF NACS IS TO REPRESENT THE CONVENIENCE AND PETROLEUM RETAILING INDUSTRY AND TO PROVIDE THE KNOWLEDGE, CONNECTIONS, AND ADVOCACY NECESSARY TO ASSIST OUR MEMBERS IN MAXIMIZING THEIR EFFECTIVENESS AND PROFITABILITY

2

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

☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3

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

☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4

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

4a

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

NACS HOLDS SEVERAL CONFERENCES AND EXHIBITS TO HELP ADVANCE THE CONVENIENCE STORE INDUSTRY. THE NACS SHOW IS THE PREMIER EXPO AND CONVENTION FOR THE CONVENIENCE STORE AND fuels MARKETING INDUSTRY, PRESENTING NUMEROUS EXHIBITS, WORKSHOPS, AND NETWORKING OPPORTUNITIES. THE NACS STATE OF THE INDUSTRY SUMMIT PROVIDES AN OPPORTUNITY FOR ATTENDEES TO LEARN THE LATEST AND BEST OPERATIONAL AND FINANCIAL PERFORMANCE STRATEGIES. OTHER CONFERENCES AND SEMINARS ARE HELD THROUGHOUT THE YEAR ON VARIOUS EDUCATIONAL TOPICS.

4b

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

NACS' GOVERNMENT RELATIONS DEPARTMENT REPRESENTS THE ADVOCACY ARM OF NACS, LOBBYING THE FEDERAL GOVERNMENT AND REGULATORY AGENCIES WITH REGARD TO ISSUES RELATED TO THE CONVENIENCE STORE AND PETROLEUM MARKETING INDUSTRY. NACS ALSO CONDUCTS LEGISLATIVE SURVEYS, AND KEEPS MEMBERS AND OTHER INTERESTED PARTIES UPDATED ON IMPORTANT LEGISLATIVE ISSUES.

4c

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

NACS' RESEARCH AND TECHNOLOGY ACTIVITY REPRESENTS ACTIVITIES RELATED TO THE ONGOING COMPETITIVE VIABILITY OF THE CONVENIENCE STORE INDUSTRY. PROJECTS INCLUDE INDUSTRY BENCHMARKS, TECHNOLOGY IMPLEMENTATIONS, PRODUCTS THAT ENHANCE THE EFFICIENCY OF CHANNEL OPERATIONS, CUSTOMER METRICS, and consumer shopping behavior.

See Additional Data

4d

















Other program services (Describe in Schedule O )

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

4e

Total program service expenses ▶

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A . . . . .	<b>1</b>	No
<b>2</b> Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 	<b>2</b> Yes	
<b>3</b> 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 <i>Schedule C, Part I</i> 	<b>3</b>	No
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete <i>Schedule C, Part II</i> . . . . .	<b>4</b>	
<b>5</b> 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 <i>Schedule C, Part III</i> 	<b>5</b> Yes	
<b>6</b> 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 <i>Schedule D, Part I</i> 	<b>6</b>	No
<b>7</b> 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 <i>Schedule D, Part II</i> 	<b>7</b>	No
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete <i>Schedule D, Part III</i> 	<b>8</b>	No
<b>9</b> 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 <i>Schedule D, Part IV</i> 	<b>9</b>	No
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete <i>Schedule D, Part V</i> 	<b>10</b>	No
<b>11</b> 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		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete <i>Schedule D, Part VI</i> 	<b>11a</b> Yes	
<b>b</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 <i>Schedule D, Part VII</i> 	<b>11b</b>	No
<b>c</b> 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 <i>Schedule D, Part VIII</i> 	<b>11c</b>	No
<b>d</b> 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 <i>Schedule D, Part IX</i> 	<b>11d</b> Yes	
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete <i>Schedule D, Part X</i> 	<b>11e</b>	No
<b>f</b> 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 <i>Schedule D, Part X</i> 	<b>11f</b> Yes	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete <i>Schedule D, Parts XI and XII</i> 	<b>12a</b>	No
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing <i>Schedule D, Parts XI and XII</i> is optional 	<b>12b</b> Yes	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete <i>Schedule E</i>	<b>13</b>	No
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States? . . . . .	<b>14a</b>	No
<b>b</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 <i>Schedule F, Parts I and IV</i> . . . . .	<b>14b</b>	No
<b>15</b> 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 <i>Schedule F, Parts II and IV</i> . . . . .	<b>15</b>	No
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete <i>Schedule F, Parts III and IV</i> . . . . .	<b>16</b>	No
<b>17</b> 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 <i>Schedule G, Part I</i> (see instructions) . . . . .	<b>17</b>	No
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete <i>Schedule G, Part II</i> . . . . .	<b>18</b>	No
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete <i>Schedule G, Part III</i> . . . . .	<b>19</b>	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete <i>Schedule H</i> . . . . .	<b>20a</b>	No
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	

Part IV Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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? If "Yes," complete Schedule J . . . . .	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a . . . . .	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . .	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? . . . . .	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . .	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . . . .			
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 . . . . .	25a		
		25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II . . . . .	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? 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)			
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV . . . . .	28b		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		No
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	Yes	
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		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . . .	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 . . . . .	36		
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? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a71		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.	2a68		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: <u>UK</u> See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes	
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	<b>Section 501(c)(7) organizations.</b> Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b		
11	<b>Section 501(c)(12) organizations.</b> Enter			
a	Gross income from members or shareholders.	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
a	Is the organization licensed to issue qualified health plans in more than one state? <b>Note.</b> See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b		
c	Enter the amount of reserves on hand.	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		

**Part VI Governance, Management, and Disclosure**

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

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	<b>1a</b> 32		
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b> 32		
<b>2</b> 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?	<b>2</b>		No
<b>3</b> 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?	<b>3</b>		No
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		No
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		No
<b>6</b> Did the organization have members or stockholders?	<b>6</b>	Yes	
<b>7a</b> 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?	<b>7a</b>	Yes	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>	Yes	
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
<b>a</b> The governing body?	<b>8a</b>	Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	Yes	
<b>9</b> 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	<b>9</b>		No

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>	No
<b>b</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?	<b>10b</b>	
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	Yes
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	Yes
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	Yes
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	Yes
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	Yes
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	Yes
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	Yes
<b>b</b> Other officers or key employees of the organization	<b>15b</b>	Yes
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>	No
<b>b</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?	<b>16b</b>	

**Section C. Disclosure**

**17** List the States with which a copy of this Form 990 is required to be filed ►

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**18** Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

**20** State the name, address, and telephone number of the person who possesses the organization's books and records  
 ►BRIAN KIMMEL 1600 DUKE STREET ALEXANDRIA, VA 223143436 (703) 684-3600

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

**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 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

[illegible]



## Part VII

[illegible]

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	5,849,731	44,018	605,759

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 13

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

## **Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
Steptoe & Johnson  1330 Connecticut Ave NW Washington, DC 20036	Legal Services	1,156,003
Penn Schoen & Berland Assoc  PO Box 758827 Baltimore, MD 21275	Public Affairs Services	780,603
Kushner & Assoc  3444 Cloudcroft Drive Malibu, CA 90265	Transportation Svcs	218,226
Theresa Moore Consulting LLC  1023 Park Avenue Richmond, VA 23220	Consulting	122,754
Rackspace Managed Hosting  PO Box 730759 Dallas, TX 753730759	Web hosting	120,936

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 ► 7

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues . . . .	1b					
	c	Fundraising events . . . .	1c					
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	175,000				
	g	Noncash contributions included in lines 1a-1f \$						
	h	Total. Add lines 1a-1f . . . . .			175,000			
Program Service Revenue	2a	CONVENTIONS & EXPOS	Business Code 900099	19,391,412	19,078,299	313,113		
	b	MEMBERSHIP DUES	900099	7,263,594	7,263,594			
	c	COMMITTEE REVENUE	900099	3,762,577	3,762,577			
	d	PUBLICATIONS	511120	1,680,043		1,680,043		
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .			32,097,626			
	Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . .		994,325			994,325
4		Income from investment of tax-exempt bond proceeds . . .						
5		Royalties . . . . .		32,538			32,538	
6a		(i) Real						
		1,700,934						
		(ii) Personal						
b		Less rental expenses						
c		Rental income or (loss)						
d		Net rental income or (loss) . . . . .		-472,822			-472,822	
7a		(i) Securities						
		3,229,318						
		(ii) Other						
b		Less cost or other basis and sales expenses						
c		Gain or (loss)						
d		Net gain or (loss) . . . . .		564,227			564,227	
8a		Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . .						
		a						
		b						
b		Less direct expenses . . . .						
c		Net income or (loss) from fundraising events . . .						
9a	Gross income from gaming activities See Part IV, line 19 . . . .							
	a							
	b							
b	Less direct expenses . . . .							
c	Net income or (loss) from gaming activities . . . .							
10a	Gross sales of inventory, less returns and allowances . . . .							
	a							
	b							
b	Less cost of goods sold . . . .							
c	Net income or (loss) from sales of inventory . . .							
Miscellaneous Revenue			Business Code					
11a								
b								
c								
d	All other revenue . . . .							
e	Total. Add lines 11a-11d . . . . .							
12	Total revenue. See Instructions . . . . .			33,390,894	30,104,470	1,993,156	1,118,268	

Part IX Statement of Functional Expenses

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

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

☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	247,500			
2	Grants and other assistance to domestic individuals. See Part IV, line 22.				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	5,334,159			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).				
7	Other salaries and wages.	6,392,591			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	541,590			
9	Other employee benefits.	581,056			
10	Payroll taxes.	560,822			
11	Fees for services (non-employees):				
a	Management.	120,000			
b	Legal.	224,897			
c	Accounting.	60,970			
d	Lobbying.	1,663,395			
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	153,278			
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	460,170			
12	Advertising and promotion.	445,631			
13	Office expenses.	1,044,126			
14	Information technology.	836,949			
15	Royalties.				
16	Occupancy.	27,221			
17	Travel.	2,911,952			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	5,519,562			
20	Interest.				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization.	266,352			
23	Insurance.	205,650			
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	UBIT.	21,075			
b	contributions.	2,033,347			
c	Printing/publications.	1,678,955			
d	Credit card/bank charge.	558,468			
e	All other expenses.	83,929			
25	Total functional expenses. Add lines 1 through 24e.	31,973,645			
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X

Balance Sheet

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

				(A)		(B)	
				Beginning of year		End of year	
Assets	1	Cash—non-interest-bearing		6,505,976	1	3,166,164	
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net			3		
	4	Accounts receivable, net		851,681	4	693,995	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L			5		
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			6		
	7	Notes and loans receivable, net			7		
	8	Inventories for sale or use			8		
	9	Prepaid expenses and deferred charges		665,118	9	760,534	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	20,566,006			
	b	Less: accumulated depreciation	10b	9,507,343	11,317,392	10c	11,058,663
	11	Investments—publicly traded securities		32,556,432	11	34,738,281	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		3,394,423	15	3,394,423	
16	Total assets. Add lines 1 through 15 (must equal line 34)		55,291,022	16	53,812,060		
Liabilities	17	Accounts payable and accrued expenses		5,234,217	17	5,306,115	
	18	Grants payable			18		
	19	Deferred revenue		3,450,580	19	2,553,705	
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21		
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22		
	23	Secured mortgages and notes payable to unrelated third parties			23		
	24	Unsecured notes and loans payable to unrelated third parties			24		
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			25		
	26	Total liabilities. Add lines 17 through 25		8,684,797	26	7,859,820	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets		46,606,225	27	45,952,240	
	28	Temporarily restricted net assets			28		
	29	Permanently restricted net assets			29		
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds			30		
	31	Paid-in or capital surplus, or land, building or equipment fund			31		
	32	Retained earnings, endowment, accumulated income, or other funds			32		
	33	Total net assets or fund balances		46,606,225	33	45,952,240	
34	Total liabilities and net assets/fund balances		55,291,022	34	53,812,060		

**Part XI**   **Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12) . . . . .	<b>1</b>	33,390,894
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25) . . . . .	<b>2</b>	31,973,645
<b>3</b>	Revenue less expenses Subtract line 2 from line 1 . . . . .	<b>3</b>	1,417,249
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	<b>4</b>	46,606,225
<b>5</b>	Net unrealized gains (losses) on investments . . . . .	<b>5</b>	-2,071,234
<b>6</b>	Donated services and use of facilities . . . . .	<b>6</b>	
<b>7</b>	Investment expenses . . . . .	<b>7</b>	
<b>8</b>	Prior period adjustments . . . . .	<b>8</b>	
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>9</b>	0
<b>10</b>	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	45,952,240

**Part XII**   **Financial Statements and Reporting**

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

		Yes	No
<b>1</b>	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
<b>2a</b>	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		No
<b>b</b>	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	Yes	
<b>c</b>	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
<b>3a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
<b>b</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		

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 95-2237749  
**Name:** NATIONAL ASSOCIATION OF CONVENIENCE  
STORES

**Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)**

(Code	) (Expenses \$	including grants of \$	) (Revenue \$	)
NACS' MEMBER SERVICES SEGMENT REPRESENTS ACTIVITIES TO LEAD THE STRATEGIC DIRECTION OF MEMBERSHIP DEVELOPMENT, CUSTOMER INVOLVEMENT AND SATISFACTION, INDUSTRY IMAGE, AND THE IMPACT OF THESE ON INDUSTRY PERFORMANCE AND THE ADVANCEMENT OF THE CONVENIENCE STORE INDUSTRY				

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Henry Armour ..... President & CEO	40 00 .....	X		X				2,380,988	0	59,404
jack kofdarali ..... chairman	1 00 .....	X		X				0	0	0
Stephen D Loehr ..... Past Chairman	1 00 .....	X		X				0	0	0
brad call ..... Past Chairman	1 00 .....	X		X				0	0	0
Anthony R Kenney ..... Vice Chairman	1 00 .....	X		X				0	0	0
Frank Gleeson ..... Vice Chairman, Internation	1 00 .....	X		X				0	0	0
Kevin Smartt ..... Vice Chairman, Research	1 00 .....	X		X				0	0	0
Rahim Budhwani ..... Vice Chairman, Member Serv	1 00 .....	X		X				0	0	0
Peter D Tedeschi ..... Vice Chairman, treasurer	1 00 .....	X		X				0	0	0
joseph s sheetz ..... Vice Chairman, legislative	1 00 .....	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Wendy Chronister ..... Vice Chairman, Convention	1 00 .....	X		X				0	0	0
Leocadio Antunes Filho ..... board member	1 00 .....	X						0	0	0
Anthony Bartys ..... board member	1 00 .....	X						0	0	0
lisa dell'alba ..... board member	1 00 .....	X						0	0	0
bhagdeep s dhaliwal ..... board member	1 00 .....	X						0	0	0
chrstopher gheysens ..... board member	1 00 .....	X						0	0	0
an haseotes ..... board member	1 00 .....	X						0	0	0
sam hirbod ..... board member	1 00 .....	X						0	0	0
julie jackowski ..... board member	1 00 .....	X						0	0	0
anderson b jones ..... board member	1 00 .....	X						0	0	0



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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
william b kent ..... board member	1 00 .....	X						0	0	0
kyle mckeen ..... board member	1 00 .....	X						0	0	0
allison moran ..... board member	1 00 .....	X						0	0	0
Ken Parent ..... board member	1 00 .....	X						0	0	0
Jeffrey Parker ..... board member	1 00 .....	X						0	0	0
Richard Parry ..... board member	1 00 .....	X						0	0	0
jose victor paterno ..... board member	1 00 .....	X						0	0	0
Donald Rhoads ..... board member	1 00 .....	X						0	0	0
Jared Scheeler ..... board member	1 00 .....	X						0	0	0
stephen chrstopher spinks ..... board member	1 00 .....	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
leo m vercollone ..... board member	1 00 .....	X						0	0	
Lyle Beckwith ..... Sr VP, Gov't Relations	40 00 .....				X			631,608	0	47,249
Brian Kimmel ..... Sr VP & CFO	40 00 .....				X			451,963	0	46,292
Michael Davis ..... VP, Member Services	40 00 .....				X			314,653	0	56,954
Robert Hughes ..... VP, Supplier Relations & Expos	40 00 .....				X			306,440	0	53,404
Dae Kim ..... VP, Research	40 00 .....				X			329,978	0	45,863
Jeff Lenard ..... VP, Strategic Ind Initiatives	40 00 .....				X			232,502	0	55,270
Doug Reed ..... VP, Marketing	40 00 .....				X			234,384	0	37,360
John Eichberger ..... VP, Govt Relations	33 40 ..... 6 60					X		270,397	44,018	42,254
Jack Loder ..... VP, Info Technology	40 00 .....					X		201,661	0	59,659

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brian Rutter ..... Director, Research & Statistics	40 00 .....					X		167,134	0	20,957
Erin Pressley ..... VP, Publishing	40 00 .....					X		164,185	0	32,725
Bob Swanson ..... Dir, Research & Stats	40 00 .....					X		163,838	0	48,368

**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](http://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 (Lobbying Activities), then

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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization NATIONAL ASSOCIATION OF CONVENIENCE STORES	Employer identification number 95-2237749
--	--

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$
3	Volunteer hours	

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4a	Was a correction made?	<input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," describe in Part IV	

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$
4	Did the filing organization file Form 1120-POL for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) NACS PAC	1600 DUKE STREET 7th Floor Alexandria, VA 223143436	26-0047011		17,500
2				
3				
4				
5				
6				

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												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount Enter the amount from the following table in both columns														
<table><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></table>		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		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a If zero or less, enter -0-														
i	Subtract line 1f from line 1c If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

☐ Yes

☐ No

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					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

**Part II-B**

**Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity		(a)		(b)
		Yes	No	Amount
<b>1</b>	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
<b>a</b>	Volunteers?			
<b>b</b>	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b>	Media advertisements?			
<b>d</b>	Mailings to members, legislators, or the public?			
<b>e</b>	Publications, or published or broadcast statements?			
<b>f</b>	Grants to other organizations for lobbying purposes?			
<b>g</b>	Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b>	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b>	Other activities?			
<b>j</b>	Total. Add lines 1c through 1i.			
<b>2a</b>	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b>	If "Yes," enter the amount of any tax incurred under section 4912.			
<b>c</b>	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
<b>d</b>	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

**Part III-A**

**Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b>		No
<b>2</b>		No
<b>3</b>	Yes	

**Part III-B**

**Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b>	Dues, assessments and similar amounts from members	<b>1</b>	7,263,594
<b>2</b>	Section 162(e) nondeductible lobbying and political expenditures <b>(do not include amounts of political expenses for which the section 527(f) tax was paid).</b>		
<b>a</b>	Current year	<b>2a</b>	5,351,158
<b>b</b>	Carryover from last year	<b>2b</b>	-1,294,052
<b>c</b>	Total	<b>2c</b>	4,057,106
<b>3</b>	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	4,358,156
<b>4</b>	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b>	Taxable amount of lobbying and political expenditures (see instructions)	<b>5</b>	-301,050

**Part IV**

**Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

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

Name of the organization NATIONAL ASSOCIATION OF CONVENIENCE STORES	Employer identification number 95-2237749
--	--

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><div><input type="checkbox"/> Preservation of land for public use (e g , recreation or education) <input type="checkbox"/> Protection of natural habitat <input type="checkbox"/> Preservation of open space</div><div><input type="checkbox"/> Preservation of an historically important land area <input type="checkbox"/> Preservation of a certified historic structure</div></div>	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year	
a	Total number of conservation easements	Held at the End of the Year
b	Total acreage restricted by conservation easements	2a
c	Number of conservation easements on a certified historic structure included in (a)	2b
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2c
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►	2d
4	Number of states where property subject to conservation easement is located ►	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►	
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements	

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items	
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items	
(i)	Revenue included on Form 990, Part VIII, line 1	► \$
(ii)	Assets included in Form 990, Part X	► \$
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
a	Revenue included on Form 990, Part VIII, line 1	► \$
b	Assets included in Form 990, Part X	► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

(continued)

3

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

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

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

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

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

1a

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

☐ Yes

☐ No

b

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

Amount

1c

1d

1e

1f

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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

☐

Part V

Endowment Funds.

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

	(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

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

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

3a(i)

3a(ii)

Yes

No

b

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

3b

Yes

No

4

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

Part VI

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d) Book value
1a Land		3,513,200		3,513,200
b Buildings		12,212,793	5,500,231	6,712,562
c Leasehold improvements		2,850,398	2,276,402	573,996
d Equipment		538,646	466,009	72,637
e Other		1,450,969	1,264,701	186,268
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				11,058,663





**Part XI**

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

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .	<b>1</b>	31,879,173
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12	<b>2e</b>	
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	-2,071,237
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	712,794
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	-1,358,443
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	33,237,616
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>	<b>4c</b>	153,278
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	153,278
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	153,278
<b>5</b>	Total revenue Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12 ) . . . . .	<b>5</b>	33,390,894

**Part XII**

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

<b>1</b>	Total expenses and losses per audited financial statements . . . . .	<b>1</b>	32,533,161
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25	<b>2e</b>	712,794
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	
<b>c</b>	Other losses . . . . .	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII ) . . . . .	<b>2d</b>	712,794
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .	<b>2e</b>	712,794
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .	<b>3</b>	31,820,367
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line <b>1</b> :	<b>4c</b>	153,278
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	153,278
<b>b</b>	Other (Describe in Part XIII ) . . . . .	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .	<b>4c</b>	153,278
<b>5</b>	Total expenses Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18 ) . . . . .	<b>5</b>	31,973,645

**Part XIII**

**Supplemental Information**

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

Return Reference	Explanation
Part X, Line 2	NACS has adopted the accounting standard related to uncertain income tax positions. The standard requires that an uncertain income tax position must be more likely than not (greater than 50% likelihood of realization) before it is recognized in the financial statements. Furthermore, the standard requires that the amount recognized be the same as that which would be determined as a result of review by tax authorities having all relevant information. During the year ended December 31, 2013, management did not identify any uncertain income tax positions. At a minimum, the December 31, 2012 through 2015 tax years are open for examination by taxing authorities.

**Part XIII**    **Supplemental Information** *(continued)*

Return Reference	Explanation
Part XII, Line 2d - Other Adjustments	Imputed Rental expense 712,794

# 2015

**Open to Public  
Inspection**

95-2237749

☒ Yes      ☐ No[illegible]

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

Part III

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV

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

Return Reference	Explanation
Part I, Line 2	Grants are made to persons and organizations on need and merit based criteria

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 95-2237749  
**Name:** NATIONAL ASSOCIATION OF CONVENIENCE  
STORES

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
The Fuels Institute 1600 Duke Street alexandria,VA 22314	46-2083021	501(c)(4)	240,000				program support
Foundation to Eradicate Duchenne PO Box 2371 alexandria,VA 22301	71-0874241	501(c)(3)	5,000				program support
Hoops for Youth Foundation 3930 Walnut Street Fairfax,VA 22030	26-1525269	501(c)(3)	2,500				program support

Schedule J  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees  
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
▶ Attach to Form 990.  
▶ Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization  
NATIONAL ASSOCIATION OF CONVENIENCE STORES

Employer identification number  
95-2237749

Part I Questions Regarding Compensation

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input checked="" type="checkbox"/> Tax indemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
<b>b</b> If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	Yes	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
<b>3</b> Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input checked="" type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
<b>4</b> During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: <b>a</b> Receive a severance payment or change-of-control payment?		No
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan?		No
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		No
<b>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <b>a</b> The organization?		
<b>b</b> Any related organization? If "Yes," on line 5a or 5b, describe in Part III		
<b>6</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <b>a</b> The organization?		
<b>b</b> Any related organization? If "Yes," on line 6a or 6b, describe in Part III		
<b>7</b> For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III		
<b>8</b> Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		
<b>9</b> If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

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

For each individual whose compensation must be reported 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 of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							



**Part III**   **Supplemental Information**

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

Return Reference	Explanation
Part I, Line 1a	First class travel is permitted on long-duration flights in accordance with the terms of written employment contracts. In certain instances, companion travel is permitted and treated as a taxable benefit. Certain club dues are paid by NACS in accordance with the terms of written employment contracts.

Additional Data

Software ID:

Software Version:

EIN: 95-2237749

Name: NATIONAL ASSOCIATION OF CONVENIENCE STORES

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1Henry Armour President & CEO	(i)	2,380,988	0	0	35,000	32,923	2,448,911	0
	(ii)	0	0	0	0	0	0	0
1Lyle Beckwith Sr VP, Gov't Relations	(i)	631,608	0	0	35,000	18,768	685,376	0
	(ii)	0	0	0	0	0	0	0
2Bnan KimmelSr VP & CFO	(i)	451,963	0	0	27,804	24,877	504,644	0
	(ii)	0	0	0	0	0	0	0
3Michael Davis VP, Member Services	(i)	314,653	0	0	41,832	21,185	377,670	0
	(ii)	0	0	0	0	0	0	0
4Robert Hughes VP, Supplier Relations & Expos	(i)	306,440	0	0	35,000	24,373	365,813	0
	(ii)	0	0	0	0	0	0	0
5Dae KimVP, Research	(i)	329,978	0	0	27,375	24,693	382,046	0
	(ii)	0	0	0	0	0	0	0
6Jeff Lenard VP, Strategic Ind Initiatives	(i)	232,502	0	0	36,782	22,935	292,219	0
	(ii)	0	0	0	0	0	0	0
7Doug ReedVP, Marketing	(i)	234,384	0	0	18,872	24,226	277,482	0
	(ii)	0	0	0	0	0	0	0
8John Eichberger VP, Govt Relations	(i)	270,397	0	0	20,511	21,061	311,969	0
	(ii)	44,018	0	0	3,339	3,429	50,786	0
9Jack Loder VP, Info Technology	(i)	201,661	0	0	53,000	10,295	264,956	0
	(ii)	0	0	0	0	0	0	0
10Brian Rutter Director, Research & Statistics	(i)	167,134	0	0	14,298	9,968	191,400	0
	(ii)	0	0	0	0	0	0	0
11Enn PressleyVP, Publishing	(i)	164,185	0	0	14,321	24,548	203,054	0
	(ii)	0	0	0	0	0	0	0
12Bob Swanson Dir, Research & Stats	(i)	163,838	0	0	41,793	9,838	215,469	0
	(ii)	0	0	0	0	0	0	0

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

Department of the  
Treasury  
Internal Revenue  
Service

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

Complete to provide information for responses to specific questions on  
Form 990 or 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](http://www.irs.gov/form990).

OMB No 1545-0047

**2015**

**Open to Public  
Inspection**

Name of the organization  
NATIONAL ASSOCIATION OF CONVENIENCE  
STORES

**Employer identification number**

95-2237749

Return Reference	Explanation
Form 990, Part VI, Section A, line 6	<p>Membership in the Association shall be six classes retail member, supplier member, honorary member, life member, individual member, and allied member A Retail Member An individual or corporation with one or more operating convenience stores may apply for membership in the Association by filing with the Association office an application together with a check to cover appropriate dues All representatives of a retail member may participate in any regular or special meeting of the Association, but each retail member shall have only one vote A Supplier Member Companies dealing with the convenience store industry may apply for participation as a "supplier member " Supplier members will have no voting powers No supplier member or its representative may serve as an officer Supplier members will be represented by a Supplier Board The Chairman and Chairman-elect of the Supplier Board shall be voting members of the NACS Board of Directors Supplier members will have no obligation other than their annual dues and shall not be held legally responsible for actions of the National Association of Convenience Stores Honorary Membership For recognition of meritorious service to the retail convenience store industry, an honorary membership in the Association, without voting or office-holding powers, may be granted to any person upon the recommendation of any member of the Board of Directors and approval of the Board of Directors at any regular Board meeting Such honorary membership shall be for one year unless extended by vote of the Board of Directors at any regular Board meeting Life Member Any past president or past chairman of the Board of Directors of the Association will be an individual member of the Association for life Such membership is non-assignable, non-transferable, and personal in nature For recognition of long-term, meritorious service to the convenience store industry, a life membership in the Association, without voting or office-holding powers, may be granted to any person upon the recommendation of the Executive Committee and approval of the Board of Directors at any regular Board meeting Individual Member An individual who is engaged in the convenience or convenience and petroleum retailing industry as an owner, employee, franchisee, supplier, consultant, or any reasonable affiliation with the industry, including the spouse, partner, or guest of any such individual is eligible for "individual membership " Benefits of "individual membership" shall be determined by the NACS Board of Directors Allied Member Petroleum marketing companies that market through other companies may apply for "allied membership" A company that may qualify to apply both as a retail member and as an allied member shall be classified as a retail member, and the greater of the dues schedules shall apply Benefits for this category of membership shall include and be limited to access to NACS meetings, exhibiting at the NACS Show , and the purchase of NACS products and services at the NACS member rates</p>

Return Reference	Explanation
Form 990, Part VI, Section A, line 7a	Retail Members All representatives of a retail member may participate in any regular or special meeting of the Association, but each retail member shall have only one (1) vote

Return Reference	Explanation
Form 990, Part VI, Section A, line 7b	Retail Member All representatives of a retail member may participate in any regular or special meeting of the Association, but each retail member shall have only one (1) vote

Return Reference	Explanation
Form 990, Part VI, Section B, line 11	The Form 990 is reviewed by NACS' CFO and CEO before it is filed. In addition, the audit committee and the Board of Directors are provided a copy of the form before the final version is filed.

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	<p>By accepting the opportunity to serve NACS as a member of its Board of Directors or Supplier Board, a NACS committee or task force, staff, counsel or other provider of services, an individual acknowledges that the central interest upon which NACS' efforts are focused is that of retail convenience store operators as a class. Under any circumstances in which an individual, serving in the previously described capacities is 1) obliged, by employment, investment, or other duty, to protect or promote an interest other than the interests of retail convenience store operators, as a class or NACS, and 2) involved in the development of a position or policy to be advocated by NACS, then, that individual shall a) promptly disclose his or her actual or potential conflict of interest, and b) recuse himself or herself from voting or other action which can result in the formulation of that policy or position. Upon the disclosure of an actual or potential conflict, the other members of the Board, committee or task force shall determine whether that individual may participate in any relevant exchange of views relating to the issue which gives rise to that conflict.</p>

Return Reference	Explanation
Form 990, Part VI, Section B, line 15	<p>This Policy on the Process for Determining Compensation applies to the compensation of the following persons employed by NACS</p> <p>A) The President &amp; CEO The process includes all of these elements</p> <ol style="list-style-type: none"> <li>1 Review and approval The compensation of the person is based upon an employment contract that has been reviewed and approved by the Executive committee of the Organization</li> <li>2 Use of data as to comparable compensation The employment contract is based upon data as to comparable compensation for similarly qualified persons in functionally comparable positions at similarly situated organizations</li> <li>3 Incentive compensation A substantial portion of the person's total compensation is based upon achievement of performance benchmarks set by the Compensation committee which includes achievement of annual financial goals and the results of an annual CEO performance assessment survey of the board of directors The Compensation committee conducts an annual performance appraisal session with the person to review performance, the resulting performance based compensation and any modifications of go forward performance benchmarks</li> <li>4 Contemporaneous documentation and recordkeeping There is contemporaneous documentation and recordkeeping with respect to the deliberations and decisions regarding the compensation arrangement</li> </ol> <p>B) Other Officers or Key Employees of NACS</p> <ol style="list-style-type: none"> <li>1 Review and approval The incoming chairman and treasurer of the organization review the compensation of all officers and key employees of NACS The board of directors approves the total compensation budget of the organization</li> </ol>



Return Reference	Explanation
Form 990, Part VI, Section C, line 19	The organizations governing documents, conflict of interest policy and financial statements are made available to the public upon request

Return Reference	Explanation
FORM 990, PART XI, LINE 2c	The process for selecting an independent accountant has not changed

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	<p>ANY INDIVIDUAL MAY FILE A WRITTEN COMPLAINT, ON A CONFIDENTIAL BASIS, USING A COMPLAINT FORM UPON RECEIPT OF A COMPLAINT FORM, THE COMPLAINT ADMINISTRATOR WILL (i) DATE STAMP THE COMPLAINT FORM, (ii) DETERMINE WHETHER THE COMPLAINT PERTAINS TO A CONFLICT OF INTEREST, AND (iii) ACKNOWLEDGE RECEIPT OF THE COMPLAINT FORM TO THE COMPLAINANT AND SET A DATE FOR A HEARING USING THE ACKNOWLEDGEMENT OF COMPLAINT FORM. A HEARING WILL THEN TAKE PLACE VIA CONFERENCE CALL TO EVALUATE THE NATURE AND VALIDITY OF THE COMPLAINT. PARTIES INVOLVED IN THE HEARING ARE LIMITED TO THE COMMITTEE, ITS STAFF AND COUNSEL, THE COMPLAINANT AND HIS/HER COUNSEL. THE COMMITTEE WILL ASK THE COMPLAINANT QUESTIONS TO DETERMINE WHETHER, BASED ON THE PREPONDERANCE OF THE EVIDENCE, IT IS MORE LIKELY THAN NOT THAT THE NACS CONFLICTS OF INTEREST POLICY HAS BEEN VIOLATED. WITHIN TEN CALENDAR DAYS FOLLOWING THE CONCLUSION OF THE COMPLAINANT'S HEARING, THE COMPLAINT ADMINISTRATOR WILL SEND NOTICE TO THE SUBJECT OF THE COMPLAINT INVITING HIM/HER TO RESPOND TO THE ACCUSATION EITHER AT A HEARING OR IN WRITING. WITHIN TEN BUSINESS DAYS OF THE EARLIER TO OCCUR OF:</p> <ul style="list-style-type: none"> <li>a) THE RESPONDENT'S INFORMING THE COMPLAINT ADMINISTRATOR OF HIS/HER DECISION TO HAVE A HEARING,</li> <li>b) RESPONDENT'S DELIVERY OF A WRITTEN RESPONSE, OR</li> <li>c) ELEVEN DAYS FOLLOWING THE DATE LISTED ON THE NOTICE OF COMPLAINT FILED.</li> </ul> <p>THE COMPLAINT ADMINISTRATOR WILL SEND NOTICE TO THE RESPONDENT USING THE RESPONSE LETTER FORM. IF A RESPONSE IS RECEIVED, THEN THE FULL COMMITTEE WILL CONDUCT A HEARING ON THE DATE SET FORTH ON THE RESPONSE LETTER, EITHER IN PERSON OR VIA CONFERENCE CALL TO EVALUATE THE RESPONSE. THIS HEARING WILL BE LIMITED TO THE COMMITTEE, ITS STAFF AND COUNSEL, AND THE RESPONDENT AND HIS/HER COUNSEL. THE RESPONDENT WILL HAVE THE OPPORTUNITY TO PRESENT RELEVANT EVIDENCE VERBALLY AND IN WRITING TO THE COMMITTEE. THE COMMITTEE WILL ASK THE RESPONDENT QUESTIONS TO DETERMINE WHETHER, BASED ON THE PREPONDERANCE OF THE EVIDENCE, IT IS MORE LIKELY THAN NOT, THAT A VIOLATION OF THE NACS CONFLICTS OF INTEREST POLICY HAS OCCURRED. THE COMMITTEE WILL WEIGH ALL OF THE EVIDENCE PRESENTED EQUALLY AND WILL MAKE A DETERMINATION BASED ON THE PREPONDERANCE OF THE EVIDENCE THAT IT IS MORE LIKELY THAN NOT A CONFLICT OF INTEREST EXISTS AND THE INDIVIDUAL DID NOT PROPERLY AND TIMELY DISCLOSE THE CONFLICT. IF IT IS DETERMINED THERE IS SUFFICIENT EVIDENCE, A REPORT DRAFTED BY THE COMMITTEE WILL BE SUBMITTED TO THE ENTIRE BOARD OF DIRECTORS. ALL PARTIES WILL HAVE THE RIGHT TO PRESENT EVIDENCE AND TESTIMONY RELEVANT TO THE BOARD OF DIRECTORS IN ITS DELIBERATION OF THE COMPLAINT. IF IT IS DETERMINED THAT A VIOLATION HAS OCCURRED, THEN THE BOARD OF DIRECTORS WILL DIRECT THE APPROPRIATE OFFICERS OF NACS TO IMPLEMENT REMEDIAL MEASURES SELECTED BY THE BOARD OF DIRECTORS. SUCH MEASURES MAY INCLUDE, TERMINATION OF RESPONDENT'S EMPLOYMENT, TERMINATION OF RESPONDENT'S PARTICIPATION IN NACS' GOVERNANCE ACTIVITIES, AND/OR TERMINATION OF RESPONDENT'S PROVISION OF SERVICES TO NACS. THE BOARD OF DIRECTORS IS THE ONLY AND FINAL AUTHORITY ON THE DISPOSITION OF A COMPLAINT WITH RESPECT TO VIOLATIONS OF THE NACS CONFLICTS OF INTEREST POLICY.</p>

SCHEDULE R  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Name of the organization  
NATIONAL ASSOCIATION OF CONVENIENCE  
STORES

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 [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No 1545-0047

2015

Open to Public Inspection

Employer identification number

95-2237749

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) C-STORE MATRIXCOM (inactive) 1600 DUKE STREET ALEXANDRIA, VA 22314 51-0402828		VA			NACS
(2) CSX LLC 1600 DUKE STREET ALEXANDRIA, VA 65201 20-0433402	ON-LINE SOFTWARE & DATABASE TOOLS FOR COMPARABILITY IN CONVENIENCE STORES	VA	260,050	198,679	NACS

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1)CONVENIENCE STORE FOUNDATION FOR EDUCATION AND RESEARCH 1600 DUKE STREET  ALEXANDRIA, VA 22314 54-1723339	EDUCATION AND RESEARCH	VA	501 (C){3}	Line 7	NACS		No
(2)NACSPAC 1600 DUKE STREET  ALEXANDRIA, VA 22314 26-0047011	REPRESENTS THE INTERESTS OF CONVENIENCE STORES AND PETROLEUM MARKETING	VA	527	N/A	NACS		No
(3)Conexxus 1600 DUKE STREET  ALEXANDRIA, VA 22314 80-0078994	mEMBERSHIP ORGANIZATION	VA	501 (C){6}	N/A	NACS		No
(4)The Fuels Institute 1600 DUKE STREET  ALEXANDRIA, VA 22314 46-2083021	Social Welfare Organization	VA	501(c){4}	N/A	NACS		No

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

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

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

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

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

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

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

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

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

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

**d** Loans or loan guarantees to or for related organization(s) . . . . .

**e** Loans or loan guarantees by related organization(s) . . . . .

**f** Dividends from related organization(s) . . . . .

**g** Sale of assets to related organization(s) . . . . .

**h** Purchase of assets from related organization(s) . . . . .

**i** Exchange of assets with related organization(s) . . . . .

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

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

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

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

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

**o** Sharing of paid employees with related organization(s) . . . . .

**p** Reimbursement paid to related organization(s) for expenses . . . . .

**q** Reimbursement paid by related organization(s) for expenses . . . . .

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

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

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

<b>2</b> If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)conexus	P	210,000	FMV
(2)Fuel Institute	B	240,000	FMV

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

[illegible]

**Part VII**   **Supplemental Information**

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

Return Reference	Explanation
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