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EXTENDED TO NOVEMBER 15, 2017

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047 16 Open to Public

Department of the Treasury

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

Internal Revenue Service ▶ Information about Form 990 and its instructions is at www.irs.gov/form990. Inspection A For the 2016 calendar year, or tax year beginning and ending Check if applicable D Employer identification number C Name of organization Address change AMERICAN UNITY FUND, Name change 46-1707548 Doing business as]Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ 202-750-7230 350 1775 PENNSYLVANIA AVENUE NW 3,842,736. termi atad G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amende WASHINGTON, DC 20006 H(a) Is this a group return F Name and address of principal officer MARGARET HOOVER ∐Yes 🏋 No for subordinates? pendina SAME AS C ABOVE H(b) Are all subordinates included? JYes L I Tax-exempt status ____ 501(c)(3) _X 501(c)(4) **◄** (insert no) L 4947(a)(1) or L If "No," attach a list (see instructions) J Website: ▶ AMERICANUNITYFUND.COM H(c) Group exemption number K Form of organization X Corporation Trust Association Other > Year of formation. 2013 M State of legal domicile. DE Part I Summary Briefly describe the organization's mission or most significant activities DEDICATED TO ENGAGING Governance REPUBLICANS AND REPUBLICAN OFFICEHOLDERS TO ADVANCE THE CAUSE OF Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 Activities & Total number of individuals employed in calendar year 2016 (Part V, line 2a) 5 0 6 Total number of volunteers (estimate if necessary) 7a 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Prior Year 3,841,375. 4,065,801 8 Contributions and grants (Part VIII, line 1h) n Ö. Program service revenue (Part VIII, line 2g) 1,189. 1,361. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 0 0. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 4,066,990 3,842,736. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,748,500 785,500. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 Ō. Benefits paid to or for members (Part IX, column (A), line 4) O n. Salaries, other compensation, employee benefits (Part IX, column (A) thres (510) 74,208. 344,284. 16a Professional fundraising fees (Part IX, column (A), line (1e) b Total fundraising expenses (Part IX, column (D), line 25 2,736,729. 2,457,921. Other expenses (Part IX, column (A), lines 11a-11d, 11f-2(19) 4,559,437. 3,587,705. Total expenses Add lines 13-17 (must equal Part IX, colling) (A) -492,447. 255,031. Revenue less expenses Subtract line 18 from line 12 Beginning of Current Year End of Year 1,089,511. 1,354,542. 20 Total assets (Part X, line 16) O. 21 Total liabilities (Part X, line 26) 1,089,511. 354,542. Net assets or fund balances Subtract line 21 from line 20 Part II | Signature Block 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 prepare/logner/han officer) is based on all information of which preparer has any knowledge. Sign MARGARET HOOVER. PRESIDENT Here Type or print name and title Date Print/Type preparer's name Prepareds signatury 11/13/17 Ferral Paid RENAE DUNCAN P01257722 74-2920819 Firm's name ATCHLEY & ASSOCIATES, LLP Preparer Firm's EIN Firm's address 1005 LA POSADA DRIVE Use Only TX 78752 Phone no. (512)346-2086 AUSTIN, X Yes No May the IRS discuss this return with the preparer shown above? (see instructions)

LHA For Paperwork Reduction Act Notice, see the separate instructions. 632001 11-11-16

Form **990** (2016)

### AMERICAN UNITY FUND IS DEDICATED TO ENGAGING REPUBLICANS AND REPUBLICAN OFFICEHOLDERS TO ADVANCE THE CAUSE OF FREEDOM FOR LIGHTQ AMERICANS. Dut the organization undertake any significant program services during the year which were not listed on the prior form 950 or 950 €2? If 'Yes,' describe these new services on Schedule O Dut the organization rease conducting, or make significant changes in how it conducts, any program services? If 'Yes,' describe these changes on Schedule O Describe the organization's program service exponences? If 'Yes,' describe these changes on Schedule O Describe the organization's program service exponences? If 'Yes,' describe these changes on Schedule O Describe the organization's program service exponences are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, to each program service reported in close in the program service and program service reported in close in the program service and program service are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, to each program service reported in the service in the program service and program services are reported to the program services. The program service are program services are all to the services and the services are reported to the services and the services are reported to the services. The services are reported to the services are reported to the services are reported to the services and the services are reported to the services. The services are reported to the services are report	Par		•	_	_
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Form 990 (2016) AMERICAN UNITY FUND, INC.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			7.7
_	If "Yes," complete Schedule A	1	Х	X
2	Is the organization required to complete Schedule B, Schedule of Contributors	2		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	х	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		
3	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 102 If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X,-line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			7,7
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			ų.
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		х
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	140	 -	
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	j		ļ
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	1	[,,
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			J
	1c and 8a? If "Yes," complete Schedule G, Part II	18	<u> </u>	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"]	_v
	complete Schedule G, Part III	19 Form	990	(2016)
		-om	- JJU	(ZU 10)

Form 990 (2016) AMERICAN UNITY FUND, INC.

[Part IV] Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		l	
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		<u>X</u>
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		1	
	Schedule J	23		<u>X</u>
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		1	
	Schedule K. If "No", go to line 25a	24a		_X
ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	1	X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
-	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	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	. '	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-32 if "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	_36		L
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization]	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	Х	Ĺ
		Form	990	(2016)

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Par	Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				<u> </u>
	sur la part maria de la	a 14		Yes	No_
	F-		!	1	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable.	b U		J	
C	(gambling) winnings to prize winners?	rtable garriing	1c	x	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	,	<u> </u>		
Za	· · · · · · · · · · · · · · · · · · ·	a 0		1	
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	<u> </u>	2b	j	
٠	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a	j	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O		3ь		
	At any time during the calendar year, did the organization have an interest in, or a signature or other au	hority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial acc	=	4a	}	X
b	If "Yes," enter the name of the foreign country	•			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc	ounts (FBAR)		}	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	on?	5b		Х
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	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	s or gifts	} }		
	were not tax deductible?		6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			1	v
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service	es provided to the payor?	7a		<u>X</u>
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	- 	7ь		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was to file Form 8282?	requirea	7c	1	х
ч		a l	\ <u>'</u>		_==_
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit cor		7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract		7f		X
9	If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		
_			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained b				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		1 1		
а	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	Section 501(c)(7) organizations. Enter	1	ł		
		0a	1 1		
		ОЬ]	1 1		
11	Section 501(c)(12) organizations. Enter	4.1			
	 	<u> 1a </u>	1		
D	Gross income from other sources (Do not net amounts due or paid to other sources against	16	[]		
122	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10		12a		
		2b	-26		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		1		
	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note. See the instructions for additional information the organization must report on Schedule O				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	1	36]		
С	Enter the amount of reserves on hand	3c			
	Did the organization receive any payments for indoor tanning services during the tax year?		14a]	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule 0)	14b	لبيا	
			Form	990	(2016)

Form 990 (2016)

AMERICAN UNITY FUND, INC.

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

	Check if Schedule O contains a response or note to any line in this Part VI			X					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year								
	If there are material differences in voting rights among members of the governing body, or if the governing								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O								
b	Enter the number of voting members included in line 1a, above, who are independent 1b 3								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1							
	officer, director, trustee, or key employee?	2		X					
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision								
	of officers, directors, or trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6	X						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or								
	more members of the governing body?	7a		X					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	l							
	persons other than the governing body?	7b		X					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8a	X	L					
b	Each committee with authority to act on behalf of the governing body?	8b	X						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	1 :							
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	 ,							
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		X					
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			l					
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X						
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	_	 					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			х					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	ļ	 ^ _					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		├					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	40-		}					
40	In Schedule O how this was done	12c		X					
13	Did the organization have a written whistleblower policy?	14	X	 ^ -					
14	Did the organization have a written document retention and destruction policy?	14		 					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			1					
		15a		X					
a h	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	15b		X					
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	الم		 					
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	1		ĺ					
·oa	taxable entity during the year?	16a		x					
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	<u> </u>							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	ł		ł					
	exempt status with respect to such arrangements?	16b		j					
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed ► NONE								
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	availab	le .						
	for public inspection. Indicate how you made these available. Check all that apply		-						
	Own website Another's website X 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	d finan	cıal						
	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								
	NATHAN PARSONS-SCHWARZ (ALLEGIANCE STRATEGIES LLC) - 202-674-79	99							
	1775 PENNSYLVANIA AVE. NW, STE. 350, WASHINGTON, DC 20006								
63200	6 11-11-16	Form	990	(2016)					

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B)	any related organization compensation (B) (C)						(D)	(E)	(F)
Name and Title	Average			Pos	osition ok more than one			Reportable	Reportable	Estimated
	hours per	box	ess person is both an			h an	compensation	compensation	amount of	
	week	⊢—	cer an	dad	irecto	r/trus	tee)	from	from related	other
	(list any	ector	ĺ			[the	organizations	compensation
	hours for	or dil	g g			ated		organization	(W-2/1099-MISC)	from the
	related	ustee	trust		8	nedr		(W-2/1099-MISC)		organization and related
	organizations below	ual tr	tonal		yoldu	yee y	_			organizations
	line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Forme		 	o gameanorro
(1) MARGARET HOOVER	10.00							_		
DIRECTOR, PRESIDENT		X	L	Х		<u> </u>		0.	0.	0.
(2) ROB SHEKELL	1.00							_		
DIRECTOR	1 00	X	<u> </u>		_	<u> </u>	Щ	0.	0.	0.
(3) KIRK FORDHAM	1.00	,,								,
DIRECTOR	<u> </u>	Х	-	_	 	-	-	0.	0.	0.
						_				
		_	_	_	_	L	_			
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Page 8
7)
hated

(A)	(B)	pioy		((C)		<u>si C</u>	(D)	(E)	\neg		(F)	
Name and title	Average hours per		not c		more	l than is bot		Reportable compensation	Reportable compensation		Estimated amount of		
	week	offic				or/trus		from	from related	- 1	c	the	r
	(list any hours for	directo				_		the organization	organizations (W-2/1099-MIS)			ens m ti	
	related	tee or	ustee			ensate	l	(W-2/1099-MISC)	(1, 2, 1000 ,		organiz		
	organizations below	al trus	onal tr		oloyee	g es		•				rela	
	line)	Individual trustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	1		ı	orgai	nza	lions
						-							
		-			-	-	-			_			
			-		-	-	-			\dashv			
		-	-	-	-	-	-			\dashv			
		1		_	_	ـ	_			_		-	
			_	<u> </u>	_	_	_		<u> </u>				
		1							 				
1b Sub-total	<u> </u>	Ц	L	<u> </u>	<u> </u>			0.		0.			0.
c Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	0.	000	0.			0.
2 Total number of individuals (including but r compensation from the organization	not limited to ti	nose	IISTE	ed a	DOV	e) wi	no r	eceived more than \$100	,out of reportable	,			0
							-					Yes	No
3 Did the organization list any former officer,			e, ke	ey ei	mpio	oyee	, or	highest compensated e	mployee on				.
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the si			omn	ane	atını	n and	d ot	her compensation from	the organization		3		X
and related organizations greater than \$15									the organization		4		x
5 Did any person listed on line 1a receive or	accrue compe	nsat	tion	from	an	y uni	relai		idual for services				
rendered to the organization? If "Yes," com	nplete Schedu	le J	for s	uch	per	son				لــــ	5	L	X
Section B. Independent Contractors Complete this table for your five highest co	mpopostod in	don				racte		that recoved more than	\$100,000 of com		ation	from	
 Complete this table for your five highest co the organization. Report compensation for 										Peris	ation	110111	
(A) Name and business								(B) Description of s			(Compe	•	00
ALLEGIANCE STRATEGIES LL								MGMT		<u> </u>		11341	
PENNSYLVANIA AVE. NW STE			SH	IN	GT(ON		SERVICES/FUN	DRAISING		65	1,7	731.
NIXON PEABODY LLP, 401 9													
900, WASHINGTON, DC 2000	4							LEGAL SERVIC			13	0,0	35.
DALE CARPENTER	c my 7	につ	10					LEGAL/STRATE CONSULTING	GY	127,625.			:25
3109 DOUGLAS #219, DALLA	5, IA /	34	17				-	CONSOLITING				<u> </u>	145.
	. <u></u>												
2 Total number of independent contractors (\$100,000 of compensation from the organ		not l	ımıte	ed to		se li 3	ste	d above) who received r	nore than				
Tropico or compensation from the organ											Form	990	(2016)

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII Revenue excluded from tax under sections 512 - 514 Total revenue Related or Unrelated exempt function business revenue revenue Gifts, Grants ilar Amounts 1 a Federated campaigns 1a 33,685. 1b **b** Membership dues 1c c Fundraising events 1d d Related organizations e Government grants (contributions) Contributions, and Other Simi 1e f All other contributions, gifts, grants, and 1f 3,807,690 similar amounts not included above g Noncash contributions included in lines 1a-1f \$ 3,841,375. h Total. Add lines 1a-1f Business Code Program Service Revenue f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 1,361 1,361. other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (II) Personal 6 a Gross rents b Less rental expenses c Rental income or (loss) d Net rental income or (loss) (ii) Other 7 a Gross amount from sales of (i) Securities assets other than inventory b Less cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b d All other revenue e Total. Add lines 11a 11d 1,361. 3,842,736. Ō. Total revenue See instructions. Form 990 (2016)

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Fòrm 990 (2016)

AMERICAN UNITY FUND, INC.

Part IX Statement of Functional Expenses

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)										
	Check if Schedule O contains a response or note to any line in this Part IX										
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to domestic organizations	505 500	505 500								
	and domestic governments. See Part IV, line 21	785,500.	785,500.								
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		ì	j							
	individuals See Part IV, lines 15 and 16										
4	Benefits paid to or for members										
5	Compensation of current officers, directors,	1	1								
	trustees, and key employees										
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and		ļ								
,	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages										
8	Pension plan accruals and contributions (include										
	section 401(k) and 403(b) employer contributions)										
9	Other employee benefits										
10	Payroll taxes										
11	Fees for services (non-employees)	014 401	050 056	656 405							
а	Management	914,481.	258,056.	656,425.							
b	Legal	311,037.	301,960.	9,077.							
С	Accounting	28,682.	161 100	28,682.							
d	, ,	161,129.	161,129.		244 204						
е	Professional fundraising services See Part IV, line 17	344,284.			344,284.						
f	Investment management fees										
g	Other (If line 11g amount exceeds 10% of line 25,	02 120	90 500	1 620							
	column (A) amount, list line 11g expenses on Sch 0)	82,128. 40,385.	80,500. 39,215.	1,628.							
12	Advertising and promotion	23,486.	39,413.	23,486.							
13	Office expenses	23,486.		23,486.							
14	Information technology	43,191.		43,191.							
15	Royalties	68,438.	·····	68,438.							
16	Occupancy	182,358.	63,989.	118,369.							
17	Travel	102,330.	03,303.	110,309.							
18	Payments of travel or entertainment expenses										
40	for any federal, state, or local public officials	568,976.	568,687.	289.							
19	Conferences, conventions, and meetings	300,370.	300,007.	209.							
20	Interest										
21 22	Payments to affiliates Depreciation, depletion, and amortization	2,656.		2,656.							
23	Insurance	10,046.		10,046.							
24	Other expenses Itemize expenses not covered			- 20,0201							
24	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 ()										
а	SPONSORSHIP	29,830.	29,830.								
b	TAXES & LICENSE	7,022.	23,0301	7,022.							
C	BANK FEES	2,614.		2,614.							
d	DUES & SUBSCRIPTIONS	856.	856.								
	All other expenses										
25	Total functional expenses Add lines 1 through 24e	3,587,705.	2,289,722.	953,699.	344,284.						
26	Joint costs Complete this line only if the organization										
_0	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation.										
	Check here If following SOP 98-2 (ASC 958-720)										
_											

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 292,767. 77,379. 1 Cash - non-interest-bearing 1,001,189. 1,052,549. 2 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 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 6 employees' beneficiary organizations (see instr) Complete Part II of Sch L 7 Notes and loans receivable, net 8 Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other 13,951 basis Complete Part VI of Schedule D 10a 4.725. 10,943. 9,226. b Less accumulated depreciation 10b 10c 11 Investments - publicly traded securities 11 12 Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 15 Other assets See Part IV, line 11 1,089,511. 1,354,542. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, Liabilities key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of 25 Schedule D O. Ō. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances Unrestricted net assets 27 Temporarily restricted net assets 28 28 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 0. 30 30 Capital stock or trust principal, or current funds 0. 0. 31 31 Paid-in or capital surplus, or land, building, or equipment fund 1,089,511. 1,354,542. 32 32 Retained earnings, endowment, accumulated income, or other funds 1,089,511. 1,354,542. 33 Total net assets or fund balances 1,089,511. 1,354,542.

Form 990 (2016)

Total liabilities and net assets/fund balances

Form	990 (2016) AMERICAN UNITY FUND, INC.	46-17	07548	Pag	_{le} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
			2 24		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,842		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,587		
3	Revenue less expenses Subtract line 2 from line 1	3		5,0	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,089	, 5.	<u> </u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1(),00	<u> </u>
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,			_	
	column (B))	10	1,354	1,54	<u>42.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u></u>
				Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		.		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a		i	
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis		1 [l	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,			_
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch			l	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit		ļ	77
	Act and OMB Circular A-133?		3a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form 9	9 90 (2	2016)

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.

2016

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

Tax) (see separate instructions), then					
•	Section 501(c)(4), (5), or (6) organiza	tions Complete Part III				
Nar	ne of organization				Employ	er identification number
	AMERICA	N UNITY FUND, IN	1C			46-1707548
Pa	art I-A Complete if the org	janization is exempt un	der section 501(c)	or is a section 5	27 org	anization.
2	Provide a description of the organize Political campaign activity expenditively Volunteer hours for political campaign.	ures	cal campaign activities in	n Part IV	▶ \$_	250,531.
Pa	art I-B Complete if the org	ganization is exempt un	der section 501(c)(3).		
1	Enter the amount of any excise tax	incurred by the organization un	ider section 4955		▶ \$ _	
2	Enter the amount of any excise tax	incurred by organization manage	gers under section 4955		▶ \$ _	
3	If the organization incurred a section	n 4955 tax, did it file Form 4720	O for this year?			Yes No
48	a Was a correction made?			•		Yes No
t	o If "Yes," describe in Part IV			·		
P	art I-C Complete if the org	ganization is exempt un	der section 501(c),	except section		
3	Enter the amount directly expended Enter the amount of the filing organization activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and er made payments. For each organization for the total contributions received that were presented to the filing organization file form.	nization's funds contributed to describe a Add lines 1 and 2. Enter here 1120-POL for this year? Imployer identification number (Enter here) Intion listed, enter the amount particular interests.	other organizations for se and on Form 1120-POL, EIN) of all section 527 po aid from the filing organiz	ection 527 litical organizations to ation's funds Also e	► \$ _ ► \$ _ o which inter the	amount of political
	political action committee (PAC) If					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid to filing organization funds If none, ent	n's 🧸	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
						·
						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2016

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Schedule C (Form 990 or 990-EZ) 2016 Part II-A Complete if the org	AMERICAN UN	ITY FUND, I	NC.	46-3 ed Form 5768 (e	1707548 Page 2
section 501(h)).	anization is exer	iipt airaer sectio	on so nono, and me	o 101111 01 00 (c	neotion under
A Check If the filing organization	tion belongs to an affil	lated group (and list i	n Part IV each affiliated	group member's nar	ne, address, EIN,
·	e of excess lobbying of	• •			
Limit	tion checked box A ar	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	litures" means amou	nts paid or incurred	.)	totals	
1a Total lobbying expenditures to influ	ience public opinion (grass roots lobbying)			
b Total lobbying expenditures to influ	ience a legislative bod	ly (direct lobbying)			
c Total lobbying expenditures (add li	·		<u>ļ</u> .		<u> </u>
d Other exempt purpose expenditure	es		<u> </u>		
e Total exempt purpose expenditure	,	•			
f Lobbying nontaxable amount Ente					
If the amount on line 1e, column (a) o		bying nontaxable an			}
Not over \$500,000 Over \$500,000 but not over \$1,000		the amount on line 1e O plus 15% of the ex			1
Over \$1,000,000 but not over \$1,000			cess over \$300,000 cess over \$1,000,000		}
Over \$1,500,000 but not over \$17,		0 plus 5% of the exce			}
Over \$17,000,000	\$1,000,0		1		1
g Grassroots nontaxable amount (en	ter 25% of line 1f)				
h Subtract line 1g from line 1a If zero	o or less, enter -0-				
 Subtract line 1f from line 1c If zero 	or less, enter -0-		Ĺ		<u> </u>
J If there is an amount other than ze	ro on either line 1h or	line 11, did the organiz	ation file Form 4720		
reporting section 4911 tax for this					Yes No
(Some organizations th	nat made a section 5		have to complete all o	of the five columns	below.
	<u> </u>	ate instructions for li	ar Averaging Period		
	Lobbying Exper	latares baring 4-1e	di Averaging i enou		
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount			1		
(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	<u>'</u>		<u> </u>		
				Schedule C (For	m 990 or 990-EZ) 2016

Schedule C (Form 990 or 990 EZ) 2016 AMERICAN UNITY FUND, INC. 46-1707548 Page 3 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	(a)	(b)
of the lobbying activity	Yes	No	Amo	unt
During the year, did the filing organization attempt to influence foreign, national, state or	1			
local legislation, including any attempt to influence public opinion on a legislative matter	į	<u> </u>		
or referendum, through the use of	1	j		
a Volunteers?	<u></u>	<u> </u>		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?	<u> </u>			_
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?		ļ		
h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		<u> </u>		
Other activities?	 	ļ		
j Total Add lines 1c through 1i	 			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			 	
b If "Yes," enter the amount of any tax incurred under section 4912	1	1		
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912		 		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	E01/a	VEV 07 0	L.	
Part III-A Complete if the organization is exempt under section 501(c)(4), sect 501(c)(6).	ion suric)(5), or se	ection	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1	X	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		X
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), sect	the prior yea	ir? 3		X
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes." 1 Dues, assessments and similar amounts from members	d "No," O 	R (b) Par	t III-A, III	ne 3, is
 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political) 	hcal	<u> </u>	 	
expenses for which the section 527(f) tax was paid).			ļ	
a Current year		2a	}	
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the ex	xcess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		ł		
expenditure next year?	•	4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
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 grounstructions), and Part II-B, line 1. Also, complete this part for any additional information PART I-A, LINE 1:	ıp list), Part	II-A, lines 1	and 2 (see	
AMERICAN UNITY FUND COMMUNICATED WITH ITS MEMBERS RE	GARDIN	G POLI	TICAL	
CANDIDATES.			-	_
				
				

Schedule C (Form 990 or 990-EZ) 2016

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No 1545-0047 2016 Open to Public Inspection

Name of the organization

AMERICAN INITY FIND TNC. Employer identification number 46-1707548

Par	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or	Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, Iir	ne 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 t	unds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be use	d only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose con	ferring
	impermissible private benefit?		Yes No
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part	IV, line 7
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a historical	ally important land area
	Protection of natural habitat	Preservation of a certified	historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a	conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the org	ganization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conserv	ation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4	1)(B)(i)
	and section 170(h)(4)(B)(ii)?		L_ Yes
9	In Part XIII, describe how the organization reports conservat	ion easements in its revenue and expense sta	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the	organization's accounting for
	conservation easements		
Par	t III Organizations Maintaining Collections of		er Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue statemen	t and balance sheet works of art,
	historical treasures, or other similar assets held for public ex	hibition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ibes these items	
b	If the organization elected, as permitted under SFAS 116 (A	•	
	treasures, or other similar assets held for public exhibition, e	ducation, 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 tre	easures, or other similar assets for financial ga	
	the following amounts required to be reported under SFAS	16 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
<u>b</u>	Assets included in Form 990, Part X		<u> </u>
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2016

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

632051 08-29-16

Sche	dule D (Form 990) 2016 AMERICA	N UNITY FU	ND,	INC.				46-17	07548	Page 2
Par	t III Organizations Maintaining C	Collections of A	rt, His	torical Tr	easures, c	or Othe	er Simil	ar Asse	ts (contini	ued)
3	Using the organization's acquisition, access	on, and other record	ds, chec	k any of the	following tha	it are a si	gnificant	use of its	collection	rtems
	(check all that apply)									
а	Public exhibition	C			hange progra	ams				
b	Scholarly research	•	• [_]	Other						
С	Preservation for future generations									
4	Provide a description of the organization's of	ollections and expla	ın how tl	hey further tl	he organizati	on's exe	mpt purp	ose in Par	t XIII	
5	During the year, did the organization solicit of	or receive donations	of art, h	istorical trea	sures, or oth	er sımılar	assets		7	
	to be sold to raise funds rather than to be m								Yes	L No_
Par	t IV Escrow and Custodial Arran		ete if the	e organizatio	n answered '	"Yes" on	Form 99	0, Part IV,	line 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod	an or other interme	diary for	contribution	is or other as	sets not	ıncluded	_	٦	<u></u>
	on Form 990, Part X?							Ĺ	Yes	L No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing	table						
	_						<u> </u>		Amount	
	Beginning balance						1c	ļ		
	Additions during the year						1d			
	Distributions during the year						1e			
f n-	Ending balance	Sarra 000 Bart V line	. 01 60-		ustadial assas	الطميا خصييا	1f	<u> </u>	Yes	No
	Did the organization include an amount on F							L	J 162	
Par	If "Yes," explain the arrangement in Part XIII t V Endowment Funds. Complete									
<u> </u>	T Line of the complete	(a) Current year		Prior year	(c) Two year			years back	(a) Four	years back
1 a	Beginning of year balance	(a) Current year	(5)	noi yeai	(C) TWO YOU	5 Back	(4) 111100	yours ouch	(e) our	yours buok
b	Contributions		 		<u> </u>					
	Net investment earnings, gains, and losses				 				 	
	Grants or scholarships	-	 		 				l	
	Other expenditures for facilities									
Ū	and programs		ł		}	1			ł	
f	Administrative expenses				 				<u> </u>	
g	End of year balance		 							
2	Provide the estimated percentage of the cur	rent vear end baland	ce (line 1	a, column (a	a)) held as				<u> </u>	
	Board designated or quasi-endowment	=	%	J, (-	,,					
	Permanent endowment	%								
	Temporarily restricted endowment ▶	%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%								
За	Are there endowment funds not in the posse		ation th	at are held a	ind administe	ered for th	he organi	zation		
	by								[Yes No
	(i) unrelated organizations								3a(ı)	
	(ii) related organizations								3a(iı)	
b	If "Yes" on line 3a(ii), are the related organization	ations listed as requ	ired on S	Schedule R?					3b	
4	Describe in Part XIII the intended uses of the		owment	funds						
Par	t VI Land, Buildings, and Equipn	nent.								
	Complete if the organization answere	d "Yes" on Form 99	0, Part I	V, line 11a S	See Form 990), Part X,	line 10			
	Description of property	(a) Cost or obasis (invest		1 ' '	or other (other)		ccumulat oreciation		(d) Book	value
1a	Land									
b	Buildings									
c	Leasehold improvements									
d	Equipment			$\frac{1}{1}$	3,951.		4,7	25.	9	7,226.
	Other			<u>L</u>		L				
Total	. Add lines 1a through 1e (Column (d) must e	equal Form 990, Pan	X, colui	mn (B), line 1	10c)			▶		,226.

Schedule D (Form 990) 2016

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

2016

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.

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

ZUIOOpen to Public

Inspection

Name of the organization					_	ntification number
AMERICA	N UNITY FUND, INC.	,			46-1707	548
Part I Fundraising Activities required to complete this part	Complete if the organization answert	ered "Y	'es" o	n Form 990, Part IV, I	line 17 Form 990-E2	Z filers are not
Indicate whether the organization rai a	e Solicita f Solicita g X Special or oral agreement with any individua Part VII) or entity in connection with providuals or entities (fundraisers) pursi	tion of tion of fundra I (include profess	non-g gover aising ding o ional l	overnment grants nment grants events fficers, directors, trus fundraising services?	stees, or X Yes	
(i) Name and address of individual or entity (fundraiser)	(II) Activity	fundi fundi have c or cor contrib	ustody itral of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
ALLEGIANCE STRATEGIES LLC - 1775 PENNSYLVANIA AVE. NW	FUNDRAISING	Yes X	No	2,557,310.	255,731.	2,301,579.
BLUEBONNET FUNDRAISING LLC - 610 R STREET NW, WASHINGTON,	FUNDRAISING	,	х	0.	88,553.	-88,553.
Total			>	2,557,310.	344,284.	
List all states in which the organizati or licensing	on is registered or licensed to solicit	contrit	oution	s or has been notified	d it is exempt from r	egistration
						· · · · · · · · · · · · · · · · · · ·
						
						
						

Schedule G (Form 990 or 990-EZ) 2016

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

SEE PART IV FOR CONTINUATIONS

	edu I rt	le G (Form 990 or 990-EZ) 2016 AMERICA	N UNITY FUND	, INC.	46 -	1707548 Page 2
<u>'</u>		of fundraising event contributions and gro				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
<u>o</u>			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	· · · · · · · · · · · · · · · · · · ·			
	2	Less Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
s	5	Noncash prizes				
esued	6	Rent/facility costs				
Direct Expenses	7	Food and beverages			•	
	8	Entertainment				
	9	Other direct expenses				
	l	Direct expense summary Add lines 4 through	` '		>	
Б.	irt	Net income summary Subtract line 10 from lift Gaming. Complete if the organization a	ne 3, column (d)	000 Part IV line 10 or	reported more than	<u> </u>
٠٠٠		\$15,000 on Form 990-EZ, line 6a	answered tes on Form	1990, Partiv, line 19, 01	reported more trial	
	_		/-\ D	(b) Pull tabs/instant	(a) Other	(d) Total gaming (add
Revenue	J		(a) Bingo	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
Še	1					
_	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes			<u> </u>	
Direct	4	Rent/facility costs				
	5_	Other direct expenses				
			Yes %	(<u> </u>	Yes %	
	6	Volunteer labor	L No	No	L No	<u> </u>
	7	Direct expense summary Add lines 2 through	n 5 ın column (d)		•	
	8	Net gaming income summary Subtract line 7	from line 1, column (d)		> .	
		ter the state(s) in which the organization condi				
		the organization licensed to conduct gaming and the conduct gaming gaming and the conduct gaming gami		states?		L Yes L No
•		No," explain				
		ere any of the organization's gaming licenses re 'Yes," explain		-	year?	Yes No
	_			 		
6320	182 N	9.12.16			Schedule G (Fo	rm 990 or 990-EZ) 2016

Schedule G (Form 990 or 990-EZ) 2016 AMERICAN UNITY FUND, INC. 4	6-1707548 Page 3
11 Does the organization conduct gaming activities with nonmembers?	Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	
to administer charitable gaming?	Yes No
13 Indicate the percentage of gaming activity conducted in	11
a The organization's facility	13a %
b An outside facility 14. Enter the name and address of the names who are named to a segment of a segment of the name and address of the named who are named to a segment of the named to a segment of	13b %
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	
Name ▶	
Address >	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes No
b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amoun	t
of gaming revenue retained by the third party > \$	
c If "Yes," enter name and address of the third party	
Name ►	
Address ▶	
16 Gaming manager information	
Name	
Gaming manager compensation > \$	
Description of services provided	
Director/officer Employee Independent contractor	
17 Mandatory distributions	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes No
retain the state gaming license?	
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in organization's own exempt activities during the tax year \$	uie
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (III) and (v), and Part IV	t III, lines 9, 9b, 10b, 15b,
15c, 16, and 17b, as applicable. Also provide any additional information. See instructions	
SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAI	SERS:
(I) NAME OF FUNDRAISER: ALLEGIANCE STRATEGIES LLC	
(1) MAID OF TONDICTION. ADDICANCE DIMERSED DEC	
(I) ADDRESS OF FUNDRAISER:	
1775 PENNSYLVANIA AVE. NW STE. 350, WASHINGTON, DC 20006	
(1) NAME OF FUNDRAISER: BLUEBONNET FUNDRAISING LLC	
(I) ADDRESS OF FUNDRAISER: 610 R STREET NW, WASHINGTON, DC 2	0001
632083 09-12-16 Schedule G	(Form 990 or 990-EZ) 2016

Schedule G (Form 990 or 990-EZ)	AMERICAN UNITY FUND, INC.	46-1707548 Page 4
Part IV Supplemental Info	AMERICAN UNITY FUND, INC. prmation (continued)	
		
		Schedule G (Form 990 or 990-EZ

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047 2016

> Information about Schedule | (Form 990) and its instructions is at www.irs.gov/form990. ▶ Attach to Form 990.

Open to Public Inspection Employer identification number 46-1707548 INC. AMERICAN UNITY FUND, Name of the organization

Part I General Information on Grants and Assistance	nd Assistance							-
1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	o substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assi	stance, and the select	; }	2
criteria used to award the grants or assistance?	tance?			-			√ Yes	<u>e</u>
2 Describe in Part IV the organization's procedures for monitoring	cedures for monit	oring the use of grant f	the use of grant funds in the United States	States				
art II	Jomestic Organi	zations and Domestic	Governments. Co	omplete if the orga	nization answered "Yo	es" on Form 990, Part	IV, line 21, for any	
recipient that received more than \$5,000 Part II can be duplicated if additional space is needed	5,000 Part II can	be duplicated if addition	onal space is need	pa	10 110450			l
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(1) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
SMACHDAMA TIK GOG MONGGGG				-				
1775 PENNSYLVANIA AVE NW, SUITE 350	_		6	-			PROMOTE FREEDOM FOR LGBT	BT
WASHINGTON, DC 20006	47-4156415	501(C)(4)	570,000.				THE COURSE	1
PENNSYLVANIA COMPETES 202 STATE STREET				_			PROMOTE FREEDOM FOR LGBT	3BT
HARRISBURG, PA 17101	47-3008335	501(C)(4)	65,500.	0			AMERICANS	
INDIANA COMPETES COALITION							PROMOTE FREEDOM FOR LGBT	3BT
INDIANAPOLIS, IN 43204	35-0412920	501(C)(4)	.000,00	.0			AMERICANS	
TATE LEAD			000				PROMOTE FREEDOM FOR LGBT AMERICANS	3BT
675 - WASHINGTON, DC 20004	42C2CCO-CO	DOT(C)(#)						
			·					
								ŀ
								•
				-				

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

3 Enter total number of other organizations listed in the line is table LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2016)

46-1707548 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 AMERICAN UNITY FUND, INC. Schedule I (Form 990) (2016) Part III

Page 2

(f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) AMERICAN UNITY FUND OBTAINS GRANT AGREEMENTS FROM GRANTEES LIMITING THE USE STATE THAT IF THE GRANTEE MAKES SUBSEQUENT GRANTS TO CERTAIN ORGANIZATIONS, Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information THE GRANT AGREEMENTS THE GRANTEE WILL OBTAIN A SIMILAR AGREEMENT LIMITING THE USE OF THOSE (d) Amount of non-cash assistance (c) Amount of cash grant IN ADDITION, (b) Number of recipients OF FUNDS TO SOCIAL WELFARE PURPOSES. (a) Type of grant or assistance PART I, LINE FUNDS Schedule I (Form 990) (2016)

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.

2016
Open to Public Inspection

Name of the organization Employer identification number AMERICAN UNITY FUND. 46-1707548 INC. FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION: FREEDOM FOR LGBTQ AMERICANS. FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: IDENTITY/EXPRESSIONS. AUF WORKED TO DEFEAT LEGISLATION THAT WOULD UNDERMINE VARIOUS PROTECTIONS GAY AND TRANSGENDER AMERICANS ALREADY RECEIVE UNDER THE LAW. FORM 990, PART VI, SECTION A, LINE 3: ALLEGIANCE STRATEGIES, LLC HAS AN AGREEMENT WITH AMERICAN UNITY FUND (AUF) TO PROVIDE AUF WITH MANAGEMENT SERVICES. FORM 990, PART VI, SECTION A, LINE 6: THE ORGANIZATION HAS MEMBERS FORM 990, PART VI, SECTION B, LINE 11B: THIS FORM IS REVIEWED BY LEGAL COUNSEL, MANAGEMENT CONSULTANTS, AND DIRECTORS PRIOR TO BEING FILED. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION DOES NOT MAKE ITS GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: REVERSAL OF GRANT EXPENSES 10,000.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)