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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at *www IRS gov/form990*

OMB No 1545-0047

2016

Open to Public Inspection

A For the 2016 calendar year, or tax year beginning 04-01-2016 , and ending 03-31-2017

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Doing business as

Number and street (or P O box if mail is not delivered to street address) PO BOX 50049 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code
HENDERSON, NV 89016

D Employer identification number
88-0468000

E Telephone number
(702) 812-6932

G Gross receipts $ 1,324,564

F Name and address of principal officer
TOM NIEMAN
PO BOX 50049
HENDERSON, NV 89016

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW AGEM ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 2000

M State of legal domicile NV

Part I Summary

1 Briefly describe the organization's mission or most significant activities
THE ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS (AGEM) IS AN INTERNATIONAL TRADE ASSOCIATION REPRESENTING MANUFACTURERS OF ELECTRONIC GAMING DEVICES, SYSTEMS, AND COMPONENTS FOR THE GAMING INDUSTRY THE ASSOCIATION, AS A GOOD CORPORATE CITIZEN, IDENTIFIES AND ACTS UPON ISSUES RELATING TO EDUCATION, TRADE SHOW REPRESENTATION, REGULATION, MANUFACTURING AND LICENSING STANDARDS, AND PROMOTES THE EXPANSION OF RESPONSIBLE GAMING FOR THE BENEFIT OF ITS MEMBERS AND THE INDUSTRY

2 Check this box ▶ ☐ 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)	**3**	64
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	64
5	Total number of individuals employed in calendar year 2016 (Part V, line 2a)	**5**	0
6	Total number of volunteers (estimate if necessary)	**6**	70
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	

Activities & Governance

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)		0
9	Program service revenue (Part VIII, line 2g)	319,679	347,917
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,465	3,218
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	959,451	973,429
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,281,595	1,324,564

Revenue

13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	376,000	343,234
14	Benefits paid to or for members (Part IX, column (A), line 4)		0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	191,233	207,833
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	873,704	775,219
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	1,440,937	1,326,286
19	Revenue less expenses Subtract line 18 from line 12	-159,342	-1,722

Expenses

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	1,484,786	1,482,823
21	Total liabilities (Part X, line 26)		0
22	Net assets or fund balances Subtract line 21 from line 20	1,484,786	1,482,823

Net Assets or Fund Balances

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 preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2017-05-24
Signature of officer Date

TOM NIEMAN PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
KATIE HAMPTON	KATIE HAMPTON	2017-07-14		P00292787

Firm's name ▶ HOULDSWORTH RUSSO & COMPANY PC — Firm's EIN ▶ 88-0374623

Firm's address ▶ 8675 S EASTERN AVE STE A
LAS VEGAS, NV 891232839 — Phone no (702) 269-9992

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

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 ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS (AGEM) IS AN INTERNATIONAL TRADE ASSOCIATION REPRESENTING MANUFACTURERS OF ELECTRONIC GAMING DEVICES, SYSTEMS, AND COMPONENTS FOR THE GAMING INDUSTRY THE ASSOCIATION, AS A GOOD CORPORATE CITIZEN, IDENTIFIES AND ACTS UPON ISSUES RELATING TO EDUCATION, TRADE SHOW REPRESENTATION, REGULATION, MANUFACTURING AND LICENSING STANDARDS, AND PROMOTES THE EXPANSION OF RESPONSIBLE GAMING FOR THE BENEFIT OF ITS MEMBERS AND THE INDUSTRY

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 $)

TO PROMOTE EXCELLENCE IN THE MANUFACTURE OF GAMING DEVICES AND EQUIPMENT

4b (Code) (Expenses $ including grants of $) (Revenue $)

TO ADVOCATE THE FAIR AND REASONABLE ENFORCEMENT AND IMPOSITION OF STATUTES AND REGULATIONS PERTAINING TO MANUFACTURERS OF GAMING DEVICES AND EQUIPMENT

4c (Code) (Expenses $ including grants of $) (Revenue $)

AID FOR EDUCATIONAL PROGRAMS AND OTHER CHARITABLE ORGANIZATIONS

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

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**		No
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**	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	**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**		
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**		
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**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *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? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V **Statements Regarding Other IRS Filings and Tax Compliance**

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	15		
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	**1c**			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	**2a**	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	**2b**			
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .	**3a**			No
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**			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .	**4a**			No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .	**5a**			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**			No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	**6b**			
7	**Organizations that may receive deductible contributions under section 170(c).**				
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	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	**8**			
9a	Did the sponsoring organization make any taxable distributions under section 4966? . . .	**9a**			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .	**9b**			
10	**Section 501(c)(7) organizations.** 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	**Section 501(c)(12) organizations.** 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	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	**12a**			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O	**13a**			
b	Enter the amount of reserves the organization is required to maintain by the states 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
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	64		
	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	64		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Yes	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6		Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

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

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
▶MARCUS PRATER PO BOX 50049 HENDERSON, NV 89016 (702) 812-6932

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

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

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

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

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

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

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

(A) Name and Title	(B) 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			
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any 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			
See Additional Data Table										

1b Sub-Total ▶			
c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c) ▶	198,733		

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 ▶ 1

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

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 ▶

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			
	g Noncash contributions included in lines 1a-1f $ _____				
	h **Total.** Add lines 1a-1f . . . . . ▶				

Program Service Revenue		Business Code				
	2a MEMBERSHIP DUES	541900	347,917	347,917		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f . . . . ▶		347,917			

Other Revenue					
	3 Investment income (including dividends, interest, and other similar amounts) . . . . . ▶	3,218			3,218
	4 Income from investment of tax-exempt bond proceeds ▶				
	5 Royalties . . . . . ▶	973,429	973,429		
		(i) Real	(ii) Personal		
	6a Gross rents				
	b Less rental expenses				
	c Rental income or (loss)				
	d Net rental income or (loss) . . . . . ▶				
		(i) Securities	(ii) Other		
	7a Gross amount from sales of assets other than inventory				
	b Less cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) . . . . . ▶				
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . a				
	b Less direct expenses . . . b				
	c Net income or (loss) from fundraising events . . ▶				
	9a Gross income from gaming activities See Part IV, line 19 . . . a				
	b Less direct expenses . . . b				
	c Net income or (loss) from gaming activities . . ▶				
	10a Gross sales of inventory, less returns and allowances . . a				
	b Less cost of goods sold . . b				
	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 . . . . . ▶	1,324,564	1,321,346		3,218

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) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	332,688			
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, line 15 and 16	10,546			
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	207,833			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management	112,441			
b Legal	110,754			
c Accounting	9,020			
d Lobbying	50,000			
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	86,016			
13 Office expenses	15,325			
14 Information technology	3,661			
15 Royalties				
16 Occupancy				
17 Travel	29,356			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	176,775			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	384			
23 Insurance	4,197			
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 POLITICAL CONTRIBUTION	106,500			
b DUES AND SUBSCRIPTIONS	52,900			
c MEALS AND ENTERTAINMENT	11,830			
d EDUCATION	3,995			
e All other expenses	2,065			
25 **Total functional expenses.** Add lines 1 through 24e	1,326,286	0	0	0
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	106,956	1	143,061
	2	Savings and temporary cash investments	1,368,405	2	1,339,114
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		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		9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 6,160			
	b	Less accumulated depreciation — 10b: 5,512	1,032	10c	648
	11	Investments—publicly traded securities		11	
	12	Investments—other securities See Part IV, line 11	8,393	12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	1,484,786	16	1,482,823
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	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	0	26	0
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	1,484,786	27	1,482,823
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ 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	1,484,786	33	1,482,823
	34	Total liabilities and net assets/fund balances	1,484,786	34	1,482,823

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,324,564
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,326,286
3	Revenue less expenses Subtract line 2 from line 1	3	-1,722
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,484,786
5	Net unrealized gains (losses) on investments	5	-241
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	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,482,823

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990 ☑ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:

Software Version:

EIN: 88-0468000

Name: ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Form 990 (2016)

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			
TOM NIEMAN PRESIDENT	1 00	X		X				0	0	0
DAN SAVAGE FIRST VICE P	1 00	X		X				0	0	0
DAVE LUCCHESE SECOND VICE	1 00	X		X				0	0	0
STEVE DIMASI VP OF GOV R	1 00	X		X				0	0	0
THOMAS A JINGOLI TREASURER	1 00	X		X				0	0	0
MARK DUNN SECRETARY	1 00	X		X				0	0	0
DARON DORSEY CO-GENERAL C	1 00	X		X				0	0	0
HARPER KO CO-GENERAL C	1 00	X		X				0	0	0
VIC GALLO DIRECTOR	1 00	X						0	0	0
MIKE DREITZER DIRECTOR	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			
LYNN BECKER DIRECTOR	1 00	X						0	0	0
MARIANNA GAUSELEMANN DIRECTOR	1 00	X						0	0	0
RICK MEITZLER DIRECTOR	1 00	X						0	0	0
TAKASHI MACKAWA DIRECTOR	1 00	X						0	0	0
MIKE FIELDS DIRECTOR	1 00	X						0	0	0
ROBERT ZIEMS DIRECTOR	1 00	X						0	0	0
ROY STUDENT DIRECTOR	1 00	X						0	0	0
ERIC FISHER DIRECTOR	1 00	X						0	0	0
GREGORY GRONAU DIRECTOR	1 00	X						0	0	0
MATT DAVEY DIRECTOR	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			
MARCOS TAVARES DIRECTOR	1 00	X						0	0	0
JIM GABRIELE DIRECTOR	1 00	X						0	0	0
TRACY COHEN DIRECTOR	1 00	X						0	0	0
JOHNNY ORTIZ DIRECTOR	1 00	X						0	0	0
GIORGIO ABBIATI DIRECTOR	1 00	X						0	0	0
ALBERT RADMAN DIRECTOR	1 00	X						0	0	0
ANDREAS HOFER DIRECTOR	1 00	X						0	0	0
MAX PESSNEGGER DIRECTOR	1 00	X						0	0	0
SIMON HERBERT DIRECTOR	1 00	X						0	0	0
SERGEY VARDANYAN DIRECTOR	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			
ROVER HUA DIRECTOR	1 00	X						0	0	0
SANDI MARINIC DIRECTOR	1 00	X						0	0	0
RICHARD CAMMEGH DIRECTOR	1 00	X						0	0	0
TIM COGSWELL DIRECTOR	1 00	X						0	0	0
TONYA HENDERSON DIRECTOR	1 00	X						0	0	0
GLENN WICHINSKY DIRECTOR	1 00	X						0	0	0
JOE BERTOLONE DIRECTOR	1 00	X						0	0	0
RADOSTINA GANEVA DIRECTOR	1 00	X						0	0	0
GLEN ROSE DIRECTOR	1 00	X						0	0	0
ROBSON GABRIOTTI DIRECTOR	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			
ROBERT SAUCIER DIRECTOR	1 00	X						0	0	0
ERIC MEYERHOFER DIRECTOR	1 00	X						0	0	0
BLAINE GRABOYES DIRECTOR	1 00	X						0	0	0
JAMAL AZZAM DIRECTOR	1 00	X						0	0	0
DON BAUGH DIRECTOR	1 00	X						0	0	0
THOMAS BARTELT DIRECTOR	1 00	X						0	0	0
EDUARDO RAMIREZ DIRECTOR	1 00	X						0	0	0
MERLE B FRANK DIRECTOR	1 00	X						0	0	0
RICHARD DITTON DIRECTOR	1 00	X						0	0	0
LUCY BUCKLEY DIRECTOR	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			
JOHN CONNELLY DIRECTOR	1 00	X						0	0	0
ISRAEL CASTILLO DIRECTOR	1 00	X						0	0	0
SHANE HARTIGAN DIRECTOR	1 00	X						0	0	0
JOANNE IVERSON DIRECTOR	1 00	X						0	0	0
SIMON LAI DIRECTOR	1 00	X						0	0	0
SHIGEKI MACHIDA DIRECTOR	1 00	X						0	0	0
JOSE FERRAZ SEQUEIROS DIRECTOR	1 00	X						0	0	0
MARK KOMOROWSKI DIRECTOR	1 00	X						0	0	0
AMIT SHARMA DIRECTOR	1 00	X						0	0	0
JEFF CONNORS DIRECTOR	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			
JEFF CARR DIRECTOR	1 00	X						0	0	0
JOSEPH FELDKAMP DIRECTOR	1 00	X						0	0	0
WALLY SA'D DIRECTOR	1 00	X						0	0	0
ERIC BENCHIMOL DIRECTOR	1 00	X						0	0	0
MARCUS PRATER EXECUTIVE DI	30 00			X				198,733	0	0

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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

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

Name of the organization	Employer identification number
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS	88-0468000

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 ▶ $ 106,500
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? ☐ Yes ☐ No
4a Was a correction made? ☐ Yes ☐ 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 ▶ $ 106,500
3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $ 106,500
4 Did the filing organization file **Form 1120-POL** for this year? ☑ Yes ☐ 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 See Additional Data Table				
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		
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-		

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

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)** 2013	**(b)** 2014	**(c)** 2015	**(d)** 2016	**(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) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
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?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
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			
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?			

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
1	Were substantially all (90% or more) dues received nondeductible by members?	1		No
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		No
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		No

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."**

1	Dues, assessments and similar amounts from members	1	347,917
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	50,000
b	Carryover from last year	2b	-363,365
c	Total	2c	-313,365
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	86,979
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	-400,344

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
SCHEDULE C, PART I-A, LINE 1	AGEM WORKS TO FURTHER THE INTERESTS OF GAMING EQUIPMENT SUPPLIERS BY PARTICIPATING IN THE LEGISLATIVE PROCESS TO SOLVE PROBLEMS AND CREATE A BUSINESS ENVIRONMENT WHERE AGEM MEMBERS CAN PROSPER WHILE PROVIDING A STRONG LEVEL OF SUPPORT TO EDUCATION AND RESPONSIBLE GAMING INITIATIVES
SCHEDULE C, PART I-C, LINE 5	CAMPAIGN FOR BRITTNEY MILLER 81-1720889 500 0 2200 S FORT APACHE 2127, LAS VEGAS, NV 89117 CAMPAIGN FOR DINA NEAL 80-0490137 1,000 0 3217 BRAUTIGAN CT, NORTH LAS VEGAS, NV 89032-6030 CAMPAIGN FOR JUSTIN WATKINS 81-1163067 750 0 5337 POLIZZE AVE , LAS VEGAS, NV 89141 CAMPAIGN TO ELECT JULIA RATTI 87-0803736 750 0 P O BOX 4228, SPARKS, NV 89432 COMMITTEE TO ELECT AARON FORD 27-1373046 2,500 0 P O BOX 96003, LAS VEGAS, NV 89193 COMMITTEE TO ELECT ARTEMUS HAM 81-1596890 750 0 400 S 7TH ST 4TH FLOOR, LAS VEGAS, NV 89101 COMMITTEE TO ELECT CHRIS BROOKS 47-4883978 500 0 3540 W SAHARA AVE 188, LAS VEGAS, NV 89102 COMMITTEE TO ELECT DAVID PARKS 88-0466553 1,500 0 P O BOX 71887, LAS VEGAS, NV 89170 COMMITTEE TO ELECT OLIVIA DAIZ 27-1451790 2,000 0 2224 JANSEN AVE , LAS VEGAS, NV 89101 COMMITTEE TO ELECT DON GUSTAVSON 88-0468259 500 0 908 RED FALCON WAY, SPARKS, NV 89441 COMMITTEE TO ELECT ERV NELSON 46-4681871 1,000 0 2809 HIGH SAIL COURT, LAS VEGAS, NV 89117 COMMITTEE TO ELECT GLENN TROWBRIDGE 00-0000000 500 0 7812 RIVERA BEACH, LAS VEGAS, NV 89128 COMMITTEE TO ELECT HEIDI GANSERT 47-5012428 2,000 0 316 CALIFORNIA AVE 519, RENO, NV 89509 COMMITTEE TO ELECT IRA HANSEN 27-2890043 2,000 0 68 AMIGO CT , SPARKS, NV 89441 COMMITTEE TO ELECT IRENE BUSTAMANTE 27-1205008 2,500 0 3800 REFLECTION WAY, LAS VEGAS, NV 89147 COMMITTEE TO ELECT JAMES ONNENPCHAL 27-2303358 2,000 0 P O BOX 97741, LAS VEGAS, NV 89193 COMMITTEE TO ELECT JOHN ELLISON 27-2911360 500 0 P O BOX 683, ELKO, NV 89803 COMMITTEE TO ELECT JOHN HAMBRICK 74-3236685 2,000 0 1930 VILLAGE CENTER CIRCLE, LAS VEGAS, NV 89134 COMMITTEE TO ELECT KEITH PICKARD 47-5412011 750 0 1025 BELLE RIVER CT , HENDERSON, NV 89052 KELVIN ATKINSON ELECTION CAMPAIGN 20-0776115 1,500 0 4165 FUSELIER DR , N LAS VEGAS, NV 89032 COMMITTEE TO ELECT MARK MANENDO 88-0467699 500 0 4030 BEISNER ST , LAS VEGAS, NV 89122 COMMITTEE TO ELECT MOISES DENIS 01-0571159 1,250 0 3204 OSAGE AVE , LAS VEGAS, NV 89101 COMMITTEE TO ELECT NELSON ARAUJO 46-3816746 2,000 0 1524 HELEN BELLE DR , LAS VEGAS, NV 89110 COMMITTEE TO ELECT NICOLE CANNIZZAR 47-4860402 2,000 0 7901 COCOA BEACH CIR , LAS VEGAS, NV 89128 COMMITTEE TO ELECT OZZIE FUMO 47-4627257 750 0 438 E SAHARA AVE , LAS VEGAS, NV 89104 COMMITTEE TO ELECT PATRICIA SPEARMA 45-4833001 1,500 0 431 S 6TH ST , LAS VEGAS, NV 89101 COMMITTEE TO ELECT PETE GOCCOLCHEA 26-2097559 1,000 0 P O BOX 97, EUREKA, NV 89316 COMMITTEE TO ELECT RICHARD CARRILLO 27-1485553 1,250 0 4819 DIZA COURT, LAS VEGAS, NV 89122 COMMITTEE TO ELECT SANDRA JAUREGUI 47-5675506 500 0 7582 LAS VEGAS BLVD 118, LAS VEGAS, NV 89123 COMMITTEE TO ELECT STEVEN YEAGER 46-3708598 2,000 0 10120 W FLAMINGO STE 4162, LAS VEGAS, NV 89147 COMMITTEE TO ELECT TERESA BENITEZ 27-0624442 1,500 0 P O BOX 5730, LAS VEGAS, NV 89513 SEGERBLOM FOR SENATE 20-5494183 4,000 0 701 E BRIDGER AVE , STE 520, LAS VEGAS, NV 89101 COMMITTEE TO ELECT TYRONE THOMPSON 46-3136319 1,500 0 117 FOX CROSSING AVE , NORTH LAS VEGAS, NV 89084 COMMITTEE TO ELECT JAMES OSCARSON 47-5011045 500 0 4780 GIORDANO CT , PAHRUMP, NV 89061 ELLEN SPIEGEL CAMPAIGN 45-3807729 750 0 2764 N GREEN VALLEY PWKY 327, HENDERSON, NV 89014 FIORE FOR NEVADA 45-3159857 500 0 6205 RED PINE CT , LAS VEGAS, NV 89130 FRIENDS FOR DAVID GARNER 46-5432226 2,500 0 756 CONNEX CT , LAS VEGAS, NV 89178 FRIENDS OF DEREK ARMSTRONG 46-5305940 1,500 0 2675 WINDMILL PWKY 2823, HENDERSON, NV 89074 FRIENDS FOR JOE TOLLES 47-4868322 500 0 4790 CAUGHLIN RANCH PWKY 180, RENO, NV 89519 FRIENDS FOR JOYCE WOODHOUSE CAMPAIG 20-5643697 1,500 0 1000 N GREEN VALLEY PWKY , HENDERSON, NV 89074 FRIENDS FOR SCOTT HAMMOND 45-2924552 3,000 0 9101 W SAHARA 105, LAS VEGAS, NV 89117 FRIENDS FOR STEPHEN 45-4831932 1,250 0 2135 FALCON POINTE LN , HENDERSON, NV 89074 FRIENDS OF EDGAR FLORES 46-5056875 1,250 0 P O BOX 42302, LAS VEGAS, NV 89116 FRIENDS OF PK O'NEILL 46-5056875 1,500 0 1216 SONOMA ST , CARSON CITY, NV 89701 GROWTH & OPROTUNITY PAC 46-3721036 5,000 0 7322 S RAINBOW RD 51, LAS VEGAS, NV 89139 LEADERSHIP IN NEVADA 47-4160254 2,000 0 P O BOX 42302, LAS VEGAS, NV 89140 FRIENDS OF LESLEY COHEN 46-1592250 750 0 2657 WINDMILL PWKY 415, HENDERSON, NV 89074 LISA KRASNER FOR NEVADA 46-3235178 500 0 59 DAMONTE RANCH PKWY B-460, RENO, NV 89521 MAGGIE CARLTON FOR ASSEMBLY 88-0467508 1,500 0 5540 CARTWRIGHT AVE , LAS VEGAS, NV 89110 MIKE CARLTON FOR ASSEMBLY 45-4766674 1,000 0 P O BOX 51202, SPARKS, NV 89435 NEVADA LEADERSHIP TEAM 47-5556307 1,500 0 3800 REFLECTION WAY , LAS VEGAS, NV 89147 NEVADA SENATE DEMOCRATS 88-0316606 2,500 0 5540 CARTWRIGHT AVE , LAS VEGAS, NV 89118 NEVADANS FOR BACKGROUND CHECKS 47-1392308 1,000 0 401 S CURRY ST,, CARSON CITY, NV 89703 NEVADANS TO ELLECT ELLIOT ANDERSON 27-0802486 3,000 0 438 E SAHARA AVE , LAS VEGAS, NV 89104 NEVADA'S CULTURE PAC 46-1059290 5,000 0 P O BOX 96003, LAS VEGAS, NV 89193 NV MAJORITY PAC 45-3034231 750 0 748 MEADOWS PKWY A9-253, RENO, NV 89521 REPUBLICAN MAJORITY 47-4771824 3,000 0 8987 W FLAMINGO RD 105, LAS VEGAS, NV 89147 SENATE REPUBLICAN LEADERSHIP CONFER 88-0468043 2,500 0 P O BOX 370672, LAS VEGAS, NV 89137 WHEELER 4 NEVADA 00-0000000 3,000 0 1986 PALOMINO LN , GARDNERVILLE, NV 89410

Additional Data

Software ID:
Software Version:
EIN: 88-0468000
Name: ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Form 990, Schedule C, Part 1-C, Line 5

(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-
A BOULDER NEVADA	PO BOX 60306 BOULDER CITY, NV 89006	453605926	750	
ALL FOR NEVADA PAC	476 MISSION SPRINGS ST LAS VEGAS, NV 89052	813163754	5000	
ASSEMBLY DEMO CAUCUS	2251 N RAMPART 341 LAS VEGAS, NV 89128	880205213	3000	
ASSEMBLY REPUBLICAN CAUCUS	7322 S RAINBOW BLVD LAS VEGAS, NV 89139	880468266	1000	
BATTLE BORN	770 US HWY 395 N GARDNERVILLE, NV 89410	465459957	750	
CAMPAIGN COMMITTEE TO ELECT JASON F	7925 W RUSSELL RD 400187 LAS VEGAS, NV 89140	800520768	3000	
CAMPAIGN FOR BRITTNEY MILLER	2200 S FORT APACHE 2127 LAS VEGAS, NV 89117	811720889	500	
CAMPAIGN FOR DINA NEAL	3217 BRAUTIGAN CT NORTH LAS VEGAS, NV 890326030	800490137	1000	
CAMPAIGN FOR JUSTIN WATKINS	5337 POLIZZE AVE LAS VEGAS, NV 89141	811163067	750	
CAMPAIGN TO ELECT JULIA RATTI	PO BOX 4228 SPARKS, NV 89432	870803736	750	
COMMITTEE TO ELECT AARON FORD	PO BOX 96003 LAS VEGAS, NV 89193	271373046	2500	
COMMITTEE TO ELECT ARTEMUS HAM	400 S 7TH ST 4TH FLOOR LAS VEGAS, NV 89101	811596890	750	
COMMITTEE TO ELECT CHRIS BROOKS	3540 W SAHARA AVE 188 LAS VEGAS, NV 89102	474883978	500	
COMMITTEE TO ELECT DAVID PARKS	PO BOX 71887 LAS VEGAS, NV 89170	880466553	1500	
COMMITTEE TO ELECT OLIVIA DAIZ	2224 JANSEN AVE LAS VEGAS, NV 89101	271451790	2000	
COMMITTEE TO ELECT DON GUSTAVSON	908 RED FALCON WAY SPARKS, NV 89441	880468259	500	
COMMITTEE TO ELECT ERV NELSON	2809 HIGH SAIL COURT LAS VEGAS, NV 89117	464681871	1000	
COMMITTEE TO ELECT GLENN TROWBRIDGE	7812 RIVERA BEACH LAS VEGAS, NV 89128		500	
COMMITTEE TO ELECT HEIDI GANSERT	316 CALIFORNIA AVE 519 RENO, NV 89509	475012428	2000	
COMMITTEE TO ELECT IRA HANSEN	68 AMIGO CT SPARKS, NV 89441	272890043	2000	
COMMITTEE TO ELECT IRENE BUSTAMANTE	3800 REFLECTION WAY LAS VEGAS, NV 89147	271205008	2500	
COMMITTEE TO ELECT JAMES ONNENPCHAL	PO BOX 97741 LAS VEGAS, NV 89193	272303358	2000	
COMMITTEE TO ELECT JOHN ELLISON	PO BOX 683 ELKO, NV 89803	272911360	500	
COMMITTEE TO ELECT JOHN HAMBRICK	1930 VILLAGE CENTER CIRCLE STE 3-419 LAS VEGAS, NV 89134	743236685	2000	
COMMITTEE TO ELECT KEITH PICKARD	1025 BELLE RIVER CT HENDERSON, NV 89052	475412011	750	
KELVIN ATKINSON ELECTION CAMPAIGN	4165 FUSELIER DR N LAS VEGAS, NV 89032	200776115	1500	
COMMITTEE TO ELECT MARK MANENDO	4030 BEISNER ST LAS VEGAS, NV 89122	880467699	500	
COMMITTEE TO ELECT MOISES DENIS	3204 OSAGE AVE LAS VEGAS, NV 89101	010571159	1250	
COMMITTEE TO ELECT NELSON ARAUJO	1524 HELEN BELLE DR LAS VEGAS, NV 89110	463816746	2000	
COMMITTEE TO ELECT NICOLE CANNIZZAR	7901 COCOA BEACH CIR LAS VEGAS, NV 89128	474860402	2000	

Form 990, Schedule C, Part 1-C, Line 5

(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-
COMMITTEE TO ELECT OZZIE FUMO	438 E SAHARA AVE LAS VEGAS, NV 89104	474627257	750	
COMMITTEE TO ELECT PATRICIA SPEARMA	431 S 6TH ST LAS VEGAS, NV 89101	454833001	1500	
COMMITTEE TO ELECT PETE GOCCOLCHEA	PO BOX 97 EUREKA, NV 89316	262097559	1000	
COMMITTEE TO ELECT RICHARD CARRILLO	4819 DIZA COURT LAS VEGAS, NV 89122	271485553	1250	
COMMITTEE TO ELECT SANDRA JAUREGUI	7582 LAS VEGAS BLVD 118 LAS VEGAS, NV 89123	475675506	500	
COMMITTEE TO ELECT STEVEN YEAGER	10120 W FLAMINGO STE 4162 LAS VEGAS, NV 89147	463708598	2000	
COMMITTEE TO ELECT TERESA BENITEZ	PO BOX 5730 LAS VEGAS, NV 89513	270624442	1500	
SEGERBLOM FOR SENATE	701 E BRIDGER AVE STE 520 LAS VEGAS, NV 89101	205494183	4000	
COMMITTEE TO ELECT TYRONE THOMPSON	117 FOX CROSSING AVE NORTH LAS VEGAS, NV 89084	463136319	1500	
COMMITTEE TO ELECT JAMES OSCARSON	4780 GIORDANO CT PAHRUMP, NV 89061	475011045	500	
ELLEN SPIEGEL CAMPAIGN	2764 N GREEN VALLEY PWKY 327 HENDERSON, NV 89014	453807729	750	
FIORE FOR NEVADA	6205 RED PINE CT LAS VEGAS, NV 89130	453159857	500	
FRIENDS FOR DAVID GARNER	756 CONNEX CT LAS VEGAS, NV 89178	465432226	2500	
FRIENDS OF DEREK ARMSTRONG	2675 WINDMILL PWKY 2823 HENDERSON, NV 89074	465305940	1500	
FRIENDS FOR JOE TOLLES	4790 CAUGHLIN RANCH PWKY 180 RENO, NV 89519	474868322	500	
FRIENDS FOR JOYCE WOODHOUSE CAMPAIG	1000 N GREEN VALLEY PWKY STE 440 362 HENDERSON, NV 89074	205643697	1500	
FRIENDS FOR SCOTT HAMMOND	9101 W SAHARA 105 LAS VEGAS, NV 89117	452924552	3000	
FRIENDS FOR STEPHEN	2135 FALCON POINTE LN HENDERSON, NV 89074	454831932	1250	
FRIENDS OF EDGAR FLORES	PO BOX 42302 LAS VEGAS, NV 89116	465056875	1250	
FRIENDS OF PK O'NEILL	1216 SONOMA ST CARSON CITY, NV 89701	465056875	1500	
GROWTH & OPROTUNITY PAC	7322 S RAINBOW RD 51 LAS VEGAS, NV 89139	463721036	5000	
LEADERSHIP IN NEVADA	PO BOX 42302 LAS VEGAS, NV 89140	474160254	2000	
FRIENDS OF LESLEY COHEN	2657 WINDMILL PWKY 415 HENDERSON, NV 89074	461592250	750	
LISA KRASNER FOR NEVADA	59 DAMONTE RANCH PKWY B-460 RENO, NV 89521	463235178	500	
MAGGIE CARLTON FOR ASSEMBLY	5540 CARTWRIGHT AVE LAS VEGAS, NV 89110	880467508	1500	
MIKE CARLTON FOR ASSEMBLY	PO BOX 51202 SPARKS, NV 89435	454766674	1000	
NEVADA LEADERSHIP TEAM	3800 REFLECTION WAY LAS VEGAS, NV 89147	475556307	1500	
NEVADA SENATE DEMOCRATS	5540 CARTWRIGHT AVE LAS VEGAS, NV 89118	880316606	2500	
NEVADANS FOR BACKGROUND CHECKS	401 S CURRY ST CARSON CITY, NV 89703	471392308	1000	
NEVADANS TO ELLECT ELLIOT ANDERSON	438 E SAHARA AVE LAS VEGAS, NV 89104	270802486	3000	

Form 990, Schedule C, Part 1-C, Line 5

(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-
NEVADA'S CULTURE PAC	PO BOX 96003 LAS VEGAS, NV 89193	461059290	5000	
NV MAJORITY PAC	748 MEADOWS PKWY A9-253 RENO, NV 89521	453034231	750	
REPUBLICAN MAJORITY	8987 W FLAMINGO RD 105 LAS VEGAS, NV 89147	474771824	3000	
SENATE REPUBLICAN LEADERSHIP CONFER	PO BOX 370672 LAS VEGAS, NV 89137	880468043	2500	
WHEELER 4 NEVADA	1986 PALOMINO LN GARDNERVILLE, NV 89410		3000	

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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
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Employer identification number
88-0468000

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? ☐ Yes ☐ No

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? ☐ Yes ☐ No

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)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically 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 qualified conservation contribution in the form of a conservation easement on the last day of the tax year

		Held at the End of the Year
a	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
c	Number of conservation easements on a certified historic structure 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, released, extinguished, or terminated by the organization during the tax year ▶ _____

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? ☐ Yes ☐ No

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)? ☐ Yes ☐ No

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a Did the organization include an amount on 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" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(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

	Yes	No
(i) unrelated organizations . . . . . 3a(i)		
(ii) related organizations . . . . . 3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3b		

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' on 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)	(c)Accumulated depreciation	(d)Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		6,160	5,512	648
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				648

Part VII **Investments—Other Securities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

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

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

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.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	

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.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

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 XIII Supplemental Information *(continued)*

Return Reference	Explanation

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SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

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

► Attach to Form 990. ► See separate instructions.

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Employer identification number
88-0468000

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	**(b)** Number of offices in the region	**(c)** Number of employees, agents, and independent contractors in region	**(d)** Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	**(e)** If activity listed in (d) is a program service, describe specific type of service(s) in region	**(f)** Total expenditures for and investments in region
UNITED KINGDOM	1	1	PROGRAM	EDUCATION	29,148
3a Sub-total	1	1			29,148
b Total from continuation sheets to Part I					
c **Totals** (add lines 3a and 3b)	1	1			29,148

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			EDUCATION	10,546				

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . . ▶ 1

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

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

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713)*	☐ Yes	☑ No

Part V **Supplemental Information**

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

Return Reference	Explanation
SCHEDULE F, PAGE 1, PART I, LINE 3	UNITED KINGDOM 29,148 0

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Employer identification number
88-0468000

Part I General Information on Grants and 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 criteria used to award the grants or assistance? . . . . . ☑ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" 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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 7

3 Enter total number of other organizations listed in the line 1 table . . . . . ▶ 2

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

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
SCHEDULE I, PAGE 1, PART I, LINE 2	WHEN A GRANT OR SPONSORSHIP IS MADE, AGEM IS ABLE TO MONITOR ITS USE AS THE ORGANIZATION IS GENERALLY INVOLVED WITH THE EVENT THE MONEY IS EARMARKED FOR AN EXAMPLE OF THIS IS THE JCM/AGA GOLF CLASSIC AS A "TITLE SPONSOR" AGEM IS ABLE TO VIEW ITS LOGO ON THE EVENT'S WEBSITE AS WELL AS MONITOR THEIR IMAGE AND BRAND PLACEMENT AT THE EVENT

Additional Data

Software ID:
Software Version:
EIN: 88-0468000
Name: ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NATIONAL COUNCIL PROB GAMBLING 730 11TH STREET NW WASHINGTON, DC 20001	51-0141872	3	40,000		FMV		CONTRIBUTION
PROBLEM GAMBLING CTR 2330 PASEO DEL PRADO LAS VEGAS, NV 89102	20-1861496	3	50,000		FMV		CONTRIBUTION
NEVADA COUNCIL ON PROBLEM GAMBLING 4340 S VALLEY VIEW BLVD 220 LAS VEGAS, NV 89103	88-0206247	3	15,000		FMV		CONTRIBUTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JCMAGA GOLF CLASSIC 925 PILOT ROAD LAS VEGAS, NV 89119			50,000		FMV		CONTRIBUTION
DREXEL UNIVERSITY 3201 ARCH STREET NO 420 PHILADELPHIA, PA 19104	23-1352630	3	10,000		FMV		CONTRIBUTION
UNLV FOUNDATION 4505 MARYLAND PARKWAY LAS VEGAS, NV 89154	94-2790134	3	125,000		FMV		CONTRIBUTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL GAMING WOMEN 799 9TH STREET NW SUITE 700 WASHINGTON, DC 20001	33-1123741	3	17,500		FMV		CONTRIBUTION

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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*.**

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Employer identification number
88-0468000

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate 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			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax idemnification and gross-up payments	☐ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (e g , maid, chauffeur, chef)		
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	**1b**		
2	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?	**2**		
3	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			
	☐ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☐ Compensation survey or study		
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee		
4	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			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	**4c**		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	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			
a	The organization?	**5a**		
b	Any related organization?	**5b**		
	If "Yes," on line 5a or 5b, describe in Part III			
6	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			
a	The organization?	**6a**		
b	Any related organization?	**6b**		
	If "Yes," on line 6a or 6b, describe in Part III			
7	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	**7**		
8	Were any amounts reported on Form 990, Part VII, paid or accured 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	**8**		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

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

(A) Name and Title		(B) Breakdown 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				
1 MARCUS PRATER EXECUTIVE DIRECTOR	(i)	178,333	20,400				198,733	
	(ii)							
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

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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.

OMB No 1545-0047

2016

Open to Public Inspection

Name of the organization
ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS

Employer identification number
88-0468000

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	THE ASSOCIATION OF GAMING EQUIPMENT MANUFACTURERS (AGEM) IS AN INTERNATIONAL TRADE ASSOCIA TION REPRESENTING MANUFACTURERS OF ELECTRONIC GAMING DEVICES, SYSTEMS, AND COMPONENTS FOR THE GAMING INDUSTRY THE ASSOCIATION, AS A GOOD CORPORATE CITIZEN, IDENTIFIES AND ACTS UPO N ISSUES RELATING TO EDUCATION, TRADE SHOW REPRESENTATION, REGULATION, MANUFACTURING AND L ICENSING STANDARDS, AND PROMOTES THE EXPANSION OF RESPONSIBLE GAMING FOR THE BENEFIT OF IT S MEMBERS AND THE INDUSTRY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 3	MARCUS PRATER IS AN INDEPENDENT CONTRACTOR WHO HANDLES ALL THE ADMINISTRATIVE DUTIES OF THE ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 6	THIS IS A MEMBERSHIP ORGANIZATION

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7A	A "MEMBER" CAN BE DEFINED AS A COMPANY, WHICH THEN OFFERS UP A REPRESENTATIVE TO SIT ON THE BOARD (WHICH IS THE GOVERNING BOARD)

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 7B	ALL MEMBERS HAVE VOTING RIGHTS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	THE FORM 990 IS DISTRIBUTED ELECTRONICALLY TO ALL MEMBERS BEFORE BEING APPROVED, SIGNED, AND FILED WITH THE IRS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	THE CONFLICT OF INTEREST POLICY IS ENFORCED BY REGULAR REMINDERS AND COMMUNICATION AMONG THE BOARD OF DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	THE BOARD OF DIRECTORS VOTE ON THE COMPENSATION PACKAGE FOR THE EXECUTIVE DIRECTOR

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	THE BOARD VOTES ON THE COMPENSATION PACKAGES FOR OFFICERS AND KEY EMPLOYEES, IF ANY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST