rthent of the Treasury al 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.

Go to www.irs.gov/Form990for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

=A=	For t	he 2017 calend	dar year, or tax	year begini	ning		,	2017, and	d endin	g		,		
В	Check	ıf applıcable	С								D Employ	er identifi	cation number	
	Address change ACADEMY OF MARKETING SCIENCE FOUNDATION  Name change P.O. BOX 3072												57	
	$\square_{N}$	ame change									E Telepho			
	$\vdash$	ital return	RUSTON, L	A 71272	-3072						318	-257-	2612	
	$\vdash$	nal return/terminated	1								- 510			
	$\vdash$	mended return	ł								G Gross re	eceints \$	640	096.
	$\vdash$	pplication pending	F Name and addr	ess of principal	officer					H(a) Is this	a group return			X No
	ШП	pplication pending	SAME AS C					P	$\sim$	• •	l subordinates attach a list		⊢1.02	No
	Tav	exempt status	X 501(c)(3)	501(c) (	) ◄ (।	nsert no )	1917(2	a)(1) or	J.52Z	If 'No,	attach a list	(see instri	uctions)	ليا
<u>'</u>			IS-WEB.ORG	301(0) (	) ' (1	113611110)	4347(2	1)(1) (1	1020	Max Crown	avemation au	ımbar 🛌		
<del>K</del>			Corporation	T		0#		I V	of formati		exemption nu		nal damenta T 7	
	rt I	n of organization		Trust X	Association	Other ►		L rear	or formati	on 197	T IN S	tate or leg	gal domicile <u>LA</u>	
Pe	ırı ı .	Summar	<b>y</b> be the organiza	tion's missi	on or most	cionificant	activities	יים כנו	ימסממו	מוא א יו	ENCOUR	ACE T	יטר	
	' '		ENT OF MAR						PPOR	T WIND	FINCOOK	AGE 1	<u>.ur</u>	
ခွ		YD A YN C FW	ENT OF WAR	WETTING	TUFOKI	WIND FOR	TATIC							
Governance												- <b>-</b> -		
Ver	2	Check this bo	nx ► Lifthe	organization	n discontinu	ed its oper	ations o	r dispose	d of mo	re than 2	25% of its	net ass	ets	
ၓ	3		oting members of									3		13
∞	4		dependent votir					/I, line 1b	)			4		10
; ;ë	5	Total number	of individuals e	mployed in	calendar y	ear 2017 (F	Part V, Iı	ne 2a)				5		0
Activities	6		of volunteers (									6		0
			ed business rev									7a		0.
د ن	b	Net unrelated	business taxab	ole income t	from Form S	990-T, line	34					7b		0.
SCANNEL Revenue	_	0		//// .	11.3						Prior Year	-	Current Ye	
Z = -	8		and grants (Pa		•					<b></b>	85,5			815.
EC:	9	-	vice revenue (Pa			1 7 - 1					654,7			<u>168.</u>
્ર્કું હ	10		ncome (Part VIII ie (Part VIII, col				and 11a	`			43,4		44,	113.
-	11		e – add lines 8						12\	ļ	784,5	21.	640	096.
	13		imilar amounts					(/-), III16	12)	+		344.		117.
	14		to or for memb				· 3)				/, 3	44.	13,	11/.
	15	·	er compensation	=			umn (A)	lines 5	10)	<u> </u>	7 /	104.	2.4	003.
S	l			_			umm (A)	, 111165 5-	10)		1,4	.04.		003.
Expenses	ľ		fundraising fees		, ,	=				<u> </u>			<del></del>	
ă	l .		sıng expenses (							ļ	· · · · · · · · · · · · · · · · · · ·			<u>` - i</u>
ш	17	•	ses (Part IX, col								653,7	15.	426,	761.
	18	Total expense	es Add lines 13	8-17 (must e	equal Part I	X, column	(A), lıne	25)			668,4	63.	465,	881.
	19	Revenue less	s expenses Sub	tract line 1	8 from line	12					116,1	.07.		215.
٥ <u>و</u>		_									ing of Currer		End of Yea	
Net Assets Fund Balanc	20		(Part X, line 16)								3,989,9		4,164,	
A P	21	Total Irabilitie	es (Part X, line 2	26)								0.		<u> </u>
ž.	22	Net assets or	r fund balances	Subtract III	ne 21 from	line 20					3,989,9	83.	4,164,	198.
Pa	art II,	🎉 Signatur	re Block											
Und	r penal	ties of perjury, il decl	lare that I have examinated (other than office	ed this return, in	ncluding accomp	anying schedule	es and state	ments, and t	to the best	of my knowle	edge and belief	it is true,	correct, and	
com	piete L	Peciaration-oi-prepa	aren (omer man office	r) is based on a	an information (	or which prepar	er nas any				1	-1-		
			Marolal	V. Bu	kmar						5000	0/18		
	j'n∐	do Signatu	ire of officer							- L	ate			
He	re≥		OLD W. BER	KMAN						EXEC	UTIVE	VP		
	[11]		r_print name and title		1-				<del></del>		· · · · · ·	<del></del>		
	()	; - , <sup>-</sup>	preparer's name		Preparer s sig	inature	_	10:	ate /2	Jix	Check	<b>」"</b>	PTIN	
Pa		ROGER	<del></del>		1				<u> </u>	[ " V	self-employ	ed E	201062555	
Pr	épar	er Firm's name	JI	GOTTLIE				BOS &	CO		4			
Uş	e Oi		ess 11440	N KENDA		STE 20	3				Firm's EIN		2981507	
		678-33	MIAMI,		176-1024						Phone no	(305	) 275-012	
Ma	v the	IRS discuss th	ns return with th	ne preparer	shown abo	ve? (see in	struction	ns)					X Yes	No

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2017)

Form 990 (2017) ACADEMY OF MARKETING SCIENCE FOUNDATION	11-262	3857	F	age <b>2</b>
Randlik Statement of Program Service Accomplishments				G-1
Check if Schedule O contains a response or note to any line in this Part III	<del></del>			X
1 Briefly describe the organization's mission.	AND DDUGART	.011		
TO SUPPORT AND ENCOURAGE THE ADVANCEMENT OF MARKETING THEORY	AND EDUCATI	<u>ON</u>		
~		<del>_</del>		
2 Did the organization undertake any significant program services during the year which were not lis	ted on the prior			
Form 990 or 990-EZ?	a p	Yes	X	No
If 'Yes,' describe these new services on Schedule O.			نت	
3 Did the organization cease conducting, or make significant changes in how it conducts, any progra	m services?	Yes	X	No
If 'Yes,' describe these changes on Schedule O.		_		
4 Describe the organization's program service accomplishments for each of its three largest program Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocand revenue, if any, for each program service reported.	n services, as mea cations to others,	asured by the total e	expen expens	ses ses,
4a (Code ) (Expenses \$ 201,291. including grants of \$ THE ANNUAL CONFERENCE INCLUDES PROCEEDINGS, PRESENTATION OF CODOCTORAL DISSERTATIONS, AND STUDENT PAPER AWARDS.	)(Revenue \$		/6,1: /	25.)
				. <b>–</b> – –
		<del>-</del>		
		<del>-</del>		
		<b>-</b>		
THE WORLD MARKETING CONGRESS IS AN INTERNATIONAL CONFERENCE WINDER PRESENT THEIR RESEARCH FINDINGS AND THEORETICAL VIEWS SPECIAL SESSIONS AND PANEL DISCUSSIONS IN THE FIELD OF MARKET PROCEEDINGS ARE PUBLISHED.	, AND PARTI	CIPATE		
		<del>-</del> -		
4c (Code: ) (Expenses \$ 57,567. Including grants of \$ THE JOURNAL OF THE ACADEMY OF MARKETING SCIENCE (JAMS) AND THE OFFICIAL JOURNALS OF THE ACADEMY OF MARKETING SCIENCE. BOTH OFFICIAL JOURNALS AND REFEREED. THE OBJECTIVES ARE TO FU MARKETING. JAMS IS PUBLISHED SIX TIMES ANNUALLY. AMS REVIEW ANNUALLY.	JOURNALS ARI URTHER THE :	EW" ARI E SCIENCI	OF	 
"AMS NEWSLETTER" PROVIDES NOTICES OF FORTHCOMING CONFERENCES, AWARDS, CURRENT MARKETING THEORIES AND ACADEMY ACTIVITIES. IT TIMES ANNUALLY.	r is publisi			 
I I MED ANNUALLI.				
4 d Other program services (Describe in Schedule O.)  SEE SCHEDULE O	<del></del>			. <del></del>
(Expenses \$ 15,117. including grants of \$ 15,117.) (Revenue	<b>\$</b>		)	
<b>4e</b> Total program service expenses ► 347, 469.				
BAA TEEA0102L 12/05/17		Form	990 (	2017)

	•		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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		х
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?/f 'Yes,' complete Schedule D, Part III	8		Х
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		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	10		
ŧ	Did the organization report an amount for land, buildings, and equipment in Part X, line 10 <i>?lf 'Yes,' complete Schedule D, Part VI</i>	11 a		Х
ŀ	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		Х
(	: 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	11 c		Х
C	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	11 d		х
•	Did the organization report an amount for other liabilities in Part X, line 25?/f 'Yes,' complete Schedule D, Part X	11 e		Х
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)?/f 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
k	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		Х
13	Is the organization a school described in section $170(b)(1)(A)(II)^2$ if 'Yes,' complete Schedule E	13		Х
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
t	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	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		Х
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		x
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		Х
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		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a7f 'Yes,' complete Schedule G, Part III	19		Х
BAA	TEEA0103L 08/08/17	Form	990 (	2017)

<u> </u>	35.225.4		Yes	No
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a	103	X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		Х
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	Х	
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		Х
24	a 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		х
	<b>b</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		
1	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		ļ
25	a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizationsDid the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
l	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-EZ7f 'Yes,' complete Schedule L, Part I	25b		х
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		Х
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	İ	Х
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)			
i	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ŀ	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
	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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	_	
36	<b>Section 501(c)(3) organizations</b> Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	[	Х
BAA		Form	990 (	2017)

Form 990 (2017) ACADEMY OF MARKETING SCIENCE FOUNDATION

Rant 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

		<del></del>			/	No.
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1 a	<u>ئ</u> ي 9		es	No
	<b>b</b> Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b	0			
	c Did the organization comply with backup withholding rules for reportable payments to vendo (gambling) winnings to prize winners?	rs and reportable gaming	بنسد	1 c	X	
2	a 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	2 a	0		整	
	${f b}$ If at least one is reported on line 2a, did the organization file all required federal employment	nt tax returns?	1	2 b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required toe-file (see ins				4.5	被影響
	a Did the organization have unrelated business gross income of \$1,000 or more during the year	ar?		3 a		X
	<b>b</b> If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		:	3 b		
	a At any time during the calendar year, did the organization have an interest in, or a signature financial account in a foreign country (such as a bank account, securities account, or other to	e or other authority over, a financial account)?		4 a		Х
	b If 'Yes,' enter the name of the foreign country:►				ن وَانْ	1.00
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and F	, ,				Arrest.
	a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	•	-	5 a		X
	<b>b</b> Did any taxable party notify the organization that it was or is a party to a prohibited tax shell	ter transaction?		5 b		X
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		-	5 с		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	and did the organization		6 a		Х
	b If 'Yes,' did the organization include with every solicitation an express statement that such c not tax deductible?	ontributions or gifts were		6 b		
7	Organizations that may receive deductible contributions under section 170(c).					20 m
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	partly for goods and		7 a		( m 1)
	<b>b</b> If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7	7 b		
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for w Form 8282?	hich it was required to file		7 c		
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d	36	2	المراقة ا	,1'.
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?		7 e		
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber	nefit contract?		7 f		
	g If the organization received a contribution of qualified intellectual property, did the organizat as required?	ion file Form 8899		7 g		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	· ·		7 h	İ	
8	Sponsoring organizations maintaining donor advised funds Did a donor advised fund maint organization have excess business holdings at any time during the year?	ained by the sponsoring	<u></u>	B	12.1	- <del></del>
9	Sponsoring organizations maintaining donor advised funds.		3.00 y	- 1	7.4	
	a Did the sponsoring organization make any taxable distributions under section 4966?			9 a		1202
	<b>b</b> Did the sponsoring organization make a distribution to a donor, donor advisor, or related per	son?	9	9 b		
10	Section 501(c)(7) organizations.Enter:		350			
	a Initiation fees and capital contributions included on Part VIII, line 12	10 a				
i	<b>b</b> Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b				
11	Section 501(c)(12) organizations.Enter:					
	a Gross income from members or shareholders .	11a				
1	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
	a Section 4947(a)(1) non-exempt charitable trustsIs the organization filing Form 990 in lieu of	Form 1041?	12	2a		
1	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b	3			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			透透		
i	a Is the organization licensed to issue qualified health plans in more than one state?		13	3a	Augus 1	11 Jr. 8-
	Note. See the instructions for additional information the organization must report on Schedul	e O				
ı	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			7	
14	a Did the organization receive any payments for indoor tanning services during the tax year?		14	1 a		Х
	b if 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	chedule O	14			
BAA	TEEA0105L 08/08/17		Fo	rm 9	90 (2	2017

X

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

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

Sec	ction A. Governing Body and Management			
			Yes	No
1 :	a Enter the number of voting members of the governing body at the end of the tax year .			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad			
	authority to an executive committee or similar committee, explain in Schedule O.			
ļ	b Enter the number of voting members included in line 1a, above, who are independent 1b 10			
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?	-		<u> </u>
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		х
4	Did the organization make any significant changes to its governing documents	1		<del></del>
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7 8	a 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?	7 a		х
i	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			12. s
	a The governing body?	8 a	Χ	
ı	b Each committee with authority to act on behalf of the governing body?	8ь	Х	
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		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	<u>enue</u>		
10	Dud the everenization have lead charters because as affiliates?	[ 10 -	Yes	No X
	a Did the organization have local chapters, branches, or affiliates?  of tyes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	10 a		
ı	operations are consistent with the organization's exempt purposes?	10ь		
11 a	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
Ł	Describe in Schedule O the process, if any, used by the organization to review this Form 990 SEE SCHEDULE O	190		<u> </u>
12 a	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a		X
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done.	12 c		
13	Did the organization have a written whistleblower policy?	13		<u>X</u>
14	Did the organization have a written document retention and destruction policy?	14	ka-23F. X	X
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?			
	The organization's CEO, Executive Director, or top management official	15a		<u>X</u>
t	Other officers or key employees of the organization	15b	3 K. S.	X
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).			
Іба	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		X
b	olf '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			
Sec	organization's exempt status with respect to such arrangements? tion C. Disclosure	16b		
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s for public inspection. Indicate how you made these available. Check all that apply.	only)	avaıla	 ble
	Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available the public during the tax year SEE SCHEDULE O	le to		
20	State the name, address, and telephone number of the person who possesses the organization's books and records>			
	HAROLD W. BERKMAN P.O. BOX 3072 RUSTON LA 71272-3072 318-257-2612			
BAA	TEEA0106L 08/08/17	Form	990 (2	2017)

6

## Part VIIS 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

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

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

Check this box if neither the organization nor any	related or	ganız	atio	n c	omp	ensated	d any current office	er, director, or truste	ee
				(C)	)				
(A) Name and Title	(B) Average hours per	than	one both	box, an c	unies fficer /truste		(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	<b>(F)</b> Estmated amount of other compensation
	week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Former Highest compensated employee	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) HAROLD W. BERKMAN	4								
EXECUTIVE VP	0	Х		Χ	Ĺ	1	0.	0.	0.
(2) BARRY J. BABIN	4								
CHAIRMAN	0	Х		X			0.	0.	<u>9,286.</u>
(3) ADILSON BORGES	11								
PRESIDENT	0			X			0.	0.	0.
(4) O.C. FERRELL	1								
PRESIDENT-ELECT	0			Χ			0.	0.	0.
(5) JAMES S. BOLES	2								
VP PUBLICATIONS	0			X			0.	0.	495.
(6) LINDA FERRELL	1								
PAST PRESIDENT	0			Х			0.	0.	0.
(7) D. TODD DONOVAN	1					}			
VP-MEMBERSHIP	0			Х			0.	0.	0.
(8) NINA KREY	1								
SEC/TREASURER	0			X			2,000.	0.	525.
(9) JULIE G. MOULARD	1								
VP-PROGRAMS	0			X			0.	0.	538.
(10) NICHOLAS PAPAROIDAMIS	1_1_	1		-					
VP-MEMBERSHIP	0			X			0.	0.	0.
(11) ANGELINE CLOSE	_0.5_	ļ		}					
VP-DEVELOPMENT	0			X			0.	0.	385.
(12) JANNA PARKER	1	ł							
DIR - SOC MEDIA	0			X			0.	0.	0.
(13) JOSEPH F. HAIR	4	1		ĺ					
CHAIRMAN	0			X			0.	0.	0.
(14)									
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Form 990 (2017)

Part VII   Section A. Officers, Directors, Tru	ıstees,	Key	En	ıple	oye	es,	an	d Highest Con	npensated Emp	oloyees (continued
•	(B)			•	C)					
(A)	Average	(do	not c	Po: heck	sition more	e than	one	(D)	(E)	(F)
Name and title	hours per	box,	unle er ar	ess pe	erson direct	ıs bot or/trus	han tee)	Reportable compensation from	Reportable compensation from	Estimated amount of other
	week (list any	9 5	ਡ	Q	क्र	8 E	ਰਾ		related organizations (W-2/1099-MISC)	compensation from the
	hours	Individual or director	it it	Officer	y en	Highest co	Former	,	,	organization and related
	related organiza • tions	[한 편	igno igno	,	Key employee	8 8				organizations
	below dotted	Individual trustee or director	nstitutionaj trustee		/ee	bea				
	line)	Ä	(e			Highest compensated employee	-			
(15)						<u> </u>	-	ļ		
<u>(15)</u>										
(16)					$\vdash$		$\vdash$			
							ļ.			
(17)							<del>                                     </del>	<del>                                     </del>		
		1					l			
(18)	<del></del>		$\dashv$							<del> </del>
(19)										
							<u> </u>			
(20)	 									
							ļ			
(21)										
(22)			_							
(22)										
(23)							$\vdash$			<u> </u>
		f								
(24)								l		
<u></u>						}				
(25)			ı							
							<u> </u>			
1 b Sub-total							<b>&gt;</b>	2,000.	0.	11,229.
c Total from continuation sheets to Part VII, Section	on A							0.	0.	0.
d Total (add lines 1b and 1c)		1						2,000.	0.	11,229.
2 Total number of individuals (including but not limit from the organization ► 0	ited to the	se ii:	sied	abo	ove	WIIC	re	ceived more than	\$100,000 of report	able compensation
from the organization 0								<del></del>		Yes No
3 Did the organization list anyformer officer, directe					-1		<b>.</b>		ad amanlayaa	[18] 165 (17]
3 Did the organization list anyformer officer, directed on line 1a? If 'Yes,' complete Schedule J for such	or, or trus I <i>individua</i>	iee, i a/	key	emp	эгоу	ee, o	Pr FII	ignest compensate	ed employee	3 X
4 For any individual listed on line 1a, is the sum of	renortable	e cor	nnei	nsat	hon	and	oth	er compensation t	from	78. S. J. W.
the organization and related organizations greate	r than \$15	50,00	0?//	'Ye	es, '	comp	lete	e Schedule J for		
such individual						• •				4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes,	compens complete	satior e <i>Sch</i>	n fra nedu	om a ile il	any I for	unrel suct	late h ne	ed organization or erson	individual	5 X
Section B. Independent Contractors	00///		, , , ,							
1 Complete this table for your five highest compens	ated inde	pend	lent	con	trac	tors	tha	it received more th	nan \$100,000 of	
compensation from the organization. Report comp	pensation	for t	ne c	aler	ndar	yea	r er		т	
( <b>A)</b> Name and business addr	ess							( <b>B)</b> Description of	of services	(C) Compensation
								•		·
	· · · · · · · · · · · · · · · · · · ·								<u> </u>	
	•									····
2 Total number of independent contractors (including	-	limit	ed t	o th	ose	liste	d a	bove) who receive	ed more than	
\$100,000 of compensation from the organization	0								de Land	(第278年)
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		Check if Schedule O	contains	a respo	nse or note to an	y line in this Part V	/ui		
医影						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1 a	Federated campaigns		1 a				<b>建立建立</b>	
E J	ſ	Membership dues	f	1 b	78,815.				7 7
ဇ် ဠ	١ .	Fundraising events	ŀ	1 c	70,013.				
\$ ₹		Related organizations	1	1 d	<del></del>				
<u>i</u> g <u>e</u>		Government grants (contributi	272)	1 e	<del></del>			***	
Si K	е	Government grants (contributi	ons)	ı e					
a tio	f	All other contributions, gifts, g similar amounts not included	grants, and	]			47.3		
ਤੂੰ ਵੁੱ			L	1 f	4,000.				
뒫	g	Noncash contributions include	d in lines 1a	-1f \$					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f				82,815.			
ne					Business Code	THE STATE OF THE S			
ᅙ	2 a	PUBLICATIONS				255,433.	<u> </u>	<u> </u>	255,433.
Re		ANNUAL CONFERENCE				176,125.		_	176,125.
ë	c					81,610.			81,610.
er.	d	1101.110 1111 1111 1111 1111 1111 1111	TOTALD -			02/020			<u> </u>
n S	A								
Tar	f	All other program service		<u></u>		<del>                                     </del>	<del></del>		
Program Service Revenue	'	• =	oc revenue	' L		F12 160	CES ARRAGINE NO YOU	Membrone 1851 CR	B. 1913年 1813年11日日
		Total. Add lines 2a-2f				513,168.		A STREET, STRE	は少時を明日の北京 選り
	3	Investment income (incother similar amounts)	luding divi	dends,	interest and	44,113.	44,113.		
	4	Income from investmen	t of tay ay	empt t	ond proceeds >	44,113.	44,113.		<u> </u>
			t of tax-ex	(empt r	oong proceeds 4		<del> </del>		<del></del>
	5	Royalties	() ()		(3.5	Carren en la la la la la la la la la la la la la	Proceedings of Process of August 1	There is a resident and the	A TRANSPORTE DA CE SANSFORM
	_		(i) Re	aı 	(II) Personal				
		Gross rents							
		Less: rental expenses						STATE OF THE	
	C	Rental income or (loss)			<u> </u>				
	d	Net rental income or (lo	ss)		<b>•</b>				
	7 a	Gross amount from sales of	(ı) Secur	ities	(II) Other				
	-	assets other than inventory					* 3		
	<b>.</b>	Less: cost or other basis							
		and sales expenses			1			3.34	
	С	Gain or (loss)			<del></del>				
	d Net gain or (loss)				<b>▶</b>			31.00	
		. ,						START THE PARTY	
ğ	8 a	Gross income from fund (not including \$	iraising ev	ents					
ē		of contributions reported	d on line 1	<u> c)</u>					
Š		See Part IV, line 18	<b>a</b> 511 1111 <b>5</b> 1	- J		- A		15 (15 <b>9</b> )	
<u>.</u>				a					
Other Reven		Less direct expenses		P		the state of the s			
Õ		Net income or (loss) fro			ents	N. AND CHARLES OF CHARLES OF LANSING		Control of the Contro	A SALE TORNE E. WELSE VERT
	9 a	Gross income from gam See Part IV, line 19	iing activit	ies					
				а					
		Less: direct expenses		b					
	C	Net income or (loss) fro	m gamıng	activit	ies 🟲				
	10 a	Gross sales of inventory and allowances	, less retu	ırns		Land Company			1.00
		and allowances		а	_			National Control	
	b	Less: cost of goods sold	1	b					
1	С	Net income or (loss) fro	m sales o	f inven					
		Miscellaneous Revenu	e		Business Code	<b>建铁设置的</b>		"是我们"是一个	HER WENT THE
	11 a	OTHER REVENUE							
	ь		<del>-</del> -					<del></del>	
-	c								
	H	All other revenue						<u> </u>	
		Total, Add lines 11a-11d	1	L-	<del></del>	<del>  </del>		The said of the sa	
		Total revenue. See Instr		•	, <u>, , , , , , , , , , , , , , , , , , </u>				
لبسيب	12	Total revenue. See Instr	uctions			640,096.	44,113.	0.	513, 168. Form <b>990</b> (2017)
BAA					TEEA	0109L 08/08/17			1 OHH 330 (2017)

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 **(B)** (C) (D) (A) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses expenses general expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV, line 22 15,117 15,117 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members. Compensation of current officers, directors, trustees, and key employees 24,003 6,904 17,099 0. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 0 0. Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) Other employee benefits Payroll taxes 10 11 Fees for services (non-employees) a Management **b** Legal c Accounting 2,775 2,775 d Lobbying 3623 163 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 33,163. 33,163. (A) amount, list line 11g expenses on Schedule 0.) Advertising and promotion 2,764. 2,764. 3,560. 3,560. Office expenses 14 Information technology 13,027. 13,027. Royalties 15 16 Occupancy 17 Travel 6,889 6,889 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 284,298 267,881 16,417. interest 21 Payments to affiliates 22 Depreciation, depletion, and amortization 23 Insurance 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 PRINTING AND PUBLICATIONS 62,383 57,567 4,816 b BANK/CREDIT CARD CHARGES 12,754 12,754 LICENSES AND REGISTRATIONS 2,338 2,338 1,654 1,654 d POSTAGE AND SHIPPING 1,156 1,156. e All other expenses 0. 347,469. 118,412 25 Total functional expenses. Add lines 1 through 24e 465,881 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)

Total liabilities and net assets/fund balances

BAA

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year (B) End of year Cash - non-interest-bearing 108,363 533,191. 3,881,620 2 3,631,007. Savings and temporary cash investments. 3 3 Pledges and grants receivable, net 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 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 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10 a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10 c 10b b Less: accumulated depreciation Investments -- publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 15 Other assets. See Part IV, line 11 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 3,989,983 4,164,198 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable Deferred revenue 19 19 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 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 24 Unsecured notes and loans payable to unrelated third parties 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 Organizations that follow SFAS 117 (ASC 958), check here Balances lines 27 through 29, and lines 33 and 34. 3,989,983 27 3,811,393. Unrestricted net assets 28 352,805 28 Temporarily restricted net assets 29 Permanently restricted net assets. File Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. è Capital stock or trust principal, or current funds 30 Assets 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 Net? 33 33 Total net assets or fund balances 3,989,983 4,164,198

3,989,983

34

4,164,198

Form 990 (2017)

		<u>11-2623857</u>	Par	ge <b>12</b>
Pái	rt XI≰ Reconciliation 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	640,0	196.
2	Total expenses (must equal Part IX, column (A), line 25)	2	465,8	81.
3	Revenue less expenses, Subtract line 2 from line 1	3	174,2	15.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,989,9	83.
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses.	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		<u>0.</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	4,164,1	.98.
Pa	rt XIII 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: X Cash Accrual Other	<del></del>		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.			
2 8	Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a X	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re separate basis, consolidated basis, or both.  X Separate basis Consolidated basis Both consolidated and separate basis	viewed on a		
ŀ	Were the organization's financial statements audited by an independent accountant?		2 b	X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s basis, consolidated basis, or both'  Separate basis  Consolidated basis  Both consolidated and separate basis	eparate		
(	If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	nt of the audit,	2 c X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in Audit Act and OMB Circular A-133?		3 a	X
_ !	o if 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	3 b	L
BAA			Form <b>990</b> (2	2017)

# SCHEDULE A (Form 990 or 990-EZ)

### **Public Charity Status and Public Support**

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

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990for instructions and the latest information. OMB No 1545-0047



Name of the organization						Employer identifica	tion number
		IENCE FOUNDAT				11-262385	
			anizations must co				ns.
Ť	•		For lines 1 through 12,				_
		·	of churches described i ach Schedule E (Form 9			(A)(I).	$^{k}C$
			nization described in <b>sec</b>			i	$\mathcal{O}$
1.1			unction with a hospital				er the hospital's
name, city, a	and state						
5 An organiza section 170(	tion operated fo <b>b)(1)(A)(iv).</b> (Co	r the benefit of a colle emplete Part II)	ege or university owned	or operat	ed by a	governmental unit de	scribed in
_ 🛏 ்		•	ental unit described inse				
7 An organization 17	tion that normal <b>'0(b)(1)(A)(vi).</b> (	ly receives a substant Complete Part II.)	ial part of its support fr	om a gove	ernmenta	al unit or from the gei	neral public described
= '		,	A)(vi). (Complete Part II				
			section 170(bX1XAXix) Ilture (see instructions)				
from activitie investment i	es related to its income and unre	exempt functions-sub	than 33-1/3% of its sup ject to certain exception e income (less section Part III )	ns, and (2	) no moi	re than 33-1/3% of its	s support from gross
11 An organizat	ion organized a	and operated exclusive	ely to test for public saf	ety. See <b>se</b>	ction 50	9(a)(4).	
An organization or more pub	tion organized a licly supported ough 12d that d	and operated exclusive organizations describe lescribes the type of s	ely for the benefit of, to ed insection 509(a)(1) or supporting organization	perform to section 5 and comp	ne functi <b>09(a)(2)</b> lete line	ions of, or to carry ou .See <b>section 509(a)(3</b> s 12e. 12f. and 12g	it the purposes of one 3). Check the box in
a Type I. A sur organization	norting organiz	ation operated, super regularly appoint or	vised, or controlled by elect a majority of the c	ts support	ed orga	nization(s), typically t	ov alving the supported
managemen	pporting organia t of the supporti ete Part IV, Sect	ing organization veste	controlled in connection ed in the same persons	with its su that contr	upported of or ma	organization(s), by hage the supported o	naving control or organization(s) <b>You</b>
c Type III func	tionally integra	ted. A supporting orga	nization operated in co	nnection v	vith, and	functionally integrate	ed with, its supported
d Type III non- functionally instructions)	functionally int ntegrated. The	egrated A supporting organization generally uplete Part IV. Section	organization operated i must satisfy a distribu is <b>A and D, and Part V.</b>	n connect tion requir	ion with ement a	its supported organiz and an attentiveness i	ration(s) that is not requirement (see
e Check this b	ox if the organiz	zation received a writt	en determination from supporting organization	he IRS th			
f Enter the numb	er of supported	organizations	,				
		on about the supporte		,			
(i) Name of supported	organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is to organization in your gov docume	n listed erning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes	No		
(A)							
	······································						
(B)							
(C)							
(D)							
(E)							
Total							
BAA For Paperwork F	Reduction Act N	lotice, see the Instruc	tions for Form 990 or S TEEA0401L 08/10/17	90-EZ.		Schedule A (For	m 990 or 990-EZ) 2017

Part II: Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

		under the tests if	sted below, preasi	e complete r art in	·/	_	
Sec	tion A. Public Support	· -					
Cale beg	endar year (or fiscal year inning in) ►	(a) 2013	<b>(b)</b> 2014	<b>(c)</b> 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants.')						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	<b>Public support.</b> Subtract line 5 from line 4						
Sec	tion B. Total Support						
Cale begı	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	( <b>d)</b> 2016	<b>(e)</b> 2017	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	<b>Total support.</b> Add lines 7 through 10		4				
12	Gross receipts from related activ	vities, etc. (see in	structions)			12	
13	First five years. If the Form 990 organization, check this box and		ation's first, secor	nd, third, fourth, or	fifth tax year as	a section 501(c)(3)	▶ []
	tion C. Computation of Pu						
	Public support percentage for 20	()	•	ne 11, column (f))		14	<u>%</u>
	Public support percentage from					15	<u> </u>
16a	33-1/3% support test-2017. If the and stop here. The organization				line 14 is 33-1/3	% or more, check the	nis box
b	33-1/3% support test-2016. If the and stop here. The organization	e organization dic qualifies as a pu	I not check a box blicly supported o	on line 13 or 16a, rganization	and line 15 is 33	3-1/3% or more, che	eck this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts'	meets the 'facts-:	and-circumstance:	s' test, check this l	oox and <b>stop here</b>	Explain in Part VI	how
	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances'	and-circumstances test. The organiza	s' test, check this t ation qualifies as a	oox andstop here publicly support	e.Explain in Part VI ted organization	how the
18	Private foundation.If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a, (		- · · · · · · · · · · · · · · · · · · ·	
BAA				-	Scl	hedule A (Form 990	or 990-EZ) 2017

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)►	(a) 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants')	60,112.	78,035.	80,863.	85,523.	82,815.	387,348.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						0.
3	Gross receipts from activities that are not an unrelated trade or business under section 513	649,252.	483,976.	528,538.	654,792.	513,168.	2,829,726.
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
5	The value of services or facilities furnished by a governmental unit to the organization without charge						_0.
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1,	709,364.	562,011.	609,401.	740,315.	595,983.	3,217,074.
	2, and 3 received from disqualified persons	0.	0.	0.	0.	0.	0.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		0	0.	0.	0.	0.
c	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.
_	Public support.(Subtract line		0.				
C - ~	7c from line 6)			"一"三流域的		The state of the s	3,217,074.
	tion B. Total Support	(a) 2013	<b>(b)</b> 2014	(c) 2015	<b>(d)</b> 2016	<b>(e)</b> 2017	<b>(f)</b> Total
	dar year (or fiscal year beginning in)  Amounts from line 6	709,364.	562,011.	609,401.	740,315.	595,983.	3,217,074.
	Gross income from interest, dividends,	709,304.	302,011.	003,401.	740,313.	333,303.	3,21,,0,1.
	payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	22,763.	37,063.	28,929.	43,434.	44,113.	176,302.
_	Add lines 10a and 10b.	22,763.	37,063.	28,929.	43,434.	44,113.	176,302.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	345.	11,046.	12,865.	821.		25,077.
13	Total support. (Add lines 9, 10c, 11, and 12.)	732,472.	610,120.	651,195.	784,570.	640,096.	3,418,453.
14	First five years. If the Form 990 organization, check this box and	s for the organiza	tion's first, secon	d, third, fourth, or			
Sec	tion C. Computation of Pul	blic Support P	ercentage				
15	Public support percentage for 20	117 (line 8, column	(f) divided by lin	e 13, column (f))		15	94.11 %
	Public support percentage from 2					16	94.12 %
Sec	tion D. Computation of Inv					1 1	
17	Investment income percentage for				nn (f))	17	5.16 %
	Investment income percentage fi				1.5	18	5.13 %
	<b>33-1/3% support tests-2017.</b> If the support tests that is not more than 33-1/3%, check	this box andstop	here. The organiz	ation qualifies as	s a publicly suppor	rted organization	, ► X
b	33-1/3% support tests-2016. If the	ne organization did	i not check a box	on line 14 or line	e 19a, and line 16	is more than 33-	1/3%, and

line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

No

Yes

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

1	Are all of the organization's supported organizations listed by name in the organization's governing documents?
	If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe
	the designation If historic and continuing relationship, explain

- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)7f 'Yes,' answer (b) and (c) below
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?If 'Yes,' describe in **Part VI** when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes.' explain in **Part VI** what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ('foreign supported organization') If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)?If 'Yes,' explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year?If 'Yes,' answer (b) and (c) below (if applicable) Also, provide detail in**Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filling organization's supported organizations? If 'Yes,' provide detail in **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 77f 'Yes, complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations) if 'Yes,' answer 10b below
  - **b** Did the organization have any excess business holdings in the tax year?(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

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	10b		
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Pá	大政党 Supporting Organizations <i>(continued)</i>	<del></del>
11	Has the organization accepted a gift or contribution from any of the following persons?	Yes No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a
	b A family member of a person described in (a) above?	11b
	C A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c
	tion B. Type I Supporting Organizations	1
	aton b. Type i Supporting Organizations	Yes No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities if the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the taxyear.	1
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization	2
Sec	tion C. Type II Supporting Organizations	
		Yes No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1
Sec	tion D. All Type III Supporting Organizations	
		Yes No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3
Sec	tion E. Type III Functionally Integrated Supporting Organizations	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea <b>fsee instruct</b>	ionsl
		<i></i>
•	32	
ı	The organization is the parent of each of its supported organizations. Complete line 3 below	
•	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	structions)
2	Activities Test Answer (a) and (b) below.	Yes No
á	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in <b>Part Vi identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a
ŀ	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain inPart VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b
3	Parent of Supported Organizations. Answer (a) and (b) below.	
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in <b>Part VI.</b></i>	3a
k	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in <b>Part VI</b> the role played by the organization in this regard	3b
BAA	TECANOSI 09/10/17 Schedule A (Form 99	0 or 990 E7) 2017

Pa	でいる Type III Non-Functionally Integrated 509(a)(3) Supporting Organiz	ation	ıs	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	st on I	Nov 20, 1970 (explain in ist complete Sections A	Part VI <b>)See</b> hrough E
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
8	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1с		
	Total (add lines 1a, 1b, and 1c)	1d		
· ·	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
	Recoveries of prior-year distributions	7		
8_	Minimum Asset Amount(add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions)	grate	d Type III supporting org	anization
BAA			Schedule A (Fo	rm 990 or 990-EZ) 2017

	rt V: Type III Non-Functionally Integrated 509(a)(3) Supp	orting Organization	s (continued)	
Sec	tion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes		
2	Amounts paid to perform activity that directly furthers exempt purpoin excess of income from activity	oses of supported organ	zations,	
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)		<del></del>	
6	Other distributions (describe in Part VI) See instructions.			
7	Total annual distributions. Add lines 1 through 6			
8	Distributions to attentive supported organizations to which the orga in <b>Part VI</b> ). See instructions.	inization is responsive (p	rovide details	
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		<u> </u>	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6		<b>建筑型型型型</b>	
	Underdistributions, if any, for years prior to 2017 (reasonable cause required – explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2017		<b>C</b> ALL PROPERTY AND	
	MARKET STATE OF THE STATE OF TH			
	From 2013			
	From 2014			
	From 2015			
	From 2016			
1	f <b>Total</b> of lines 3a through e	Trace (A. C. Lander (Mark) Control of the Control o		
<u>ç</u>	Applied to underdistributions of prior years		Action 19 / Walter and American Street	
ŀ	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)	West by the state of the state		
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
C	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2018.Add lines 3j and 4c			WASTE SAFE
8	Breakdown of line 7:			
а	Excess from 2013			SECOND CONTRACTOR
	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			<b>18.</b> 11. 11. 11. 11. 11. 11. 11. 11. 11. 1
BAA		(many 200 and	Schedule A (Fo	rm 990 or 990-EZ) 2017

Schedule A (Form 990 or 990-EZ) 2017 ACADEMY OF MARKETING SCIENCE FOUNDATION 11-2623857 Part VI. Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

#### PART III, LINE 12 - OTHER INCOME

NATURE AND SOURCE	2017	2016	2015	2014	2013
TOTAL	\$ 0.	821. 821.	\$ 12,865. \$ 12,865.	\$ 11,046. \$ 11,046.	\$ 345. \$ 345.

## SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

2017

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990for instructions and the latest information

ivame of the c	ACADEM	Y OF MARKET:	ING SCIENCE	FOUNDATION	Employer Identifi	
DEERIE	Canaval Informatio	n on Activities	Outoide the Un	ited States. Complete if the	11-26238	
Harens	on Form 990, Pa	rt IV, line 14b.	Outside the Un	iited States. Complete ii the	e organization answer	eu res
	grantmakers.Does the	e organization mai		substantiate the amount of its of selection criteria used to award		
2 For		•	•	dures for monitoring the use of	-	□ ~
3 A atu	utica nas Bagian (The	fallacena Dant I	l 2 dahla asa b	diminanted if additional appara	o to mooded \	
3 Activ	<del> </del>	T	l	pe duplicated if additional space		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
-				WORLD MARKETING		
(1) NEW 2	ZEALAND			CONGRESS	CONFERENCE	73,494.
(2)						
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	s to Part I			·····································		

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

c Totals (add lines 3a and 3b)

0

Schedule F (Form 990) 2017

73,494.

Schedule F (Form 990) 2017 ACADEMY OF MARKETING SCIENCE FOUNDATION

11-2623857

Partill Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
( <u>6)</u>								
(0)								
( <u>G</u> )								
(0)								
( <u>@</u> )								
(8)								
(6)								
(GID)								
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the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2017

3 Enter total number of other organizations or entities BAA

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Page 3'	•	(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2017
11-2623857	n 990,	(g) Description of noncash assistance																			Schedule F
11-	swered 'Yes' on Forr	(f) Amount of noncash assistance														!					
	organization ans	(e) Manner of cash disbursement																			
ATION	<b>tes.</b> Complete if the is needed.	(d) Amount of cash grant																			
CIENCE FOUND	e the United Sta ditional space	(c) Number of recipients																			
ACADEMY OF MARKETING SCIENCE FOUNDATION	to Individuals Outsid	<b>(b)</b> Region																			
Schedule F (Form 990) 2017 ACADEMY	Partills Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.	(a) Type of grant or assistance	(1)	(2)	(3)	(4)	(5)	(9)	0	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(t)	(18)	ВАА

	Corporation (see Instructions for Form 926)	Yes	X 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 Receip of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)		X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year?!f 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certai Foreign Corporations (see Instructions for Form 5471)	n Yes	X 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)	d Yes	X 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	X 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, do not file with Form 990)	Yes	X No
BAA	TEEA3505L 08/10/17	Schedule F (F	orm 990) 2017

TEEA3505L 08/10/17

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.

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

OMB No 1545 0047

► Go to www.irs.gov/Form990for the latest information

ACADEMY OF MARKETING SCIENCE FOUNDATION

Parity General Information on Grants and Assistance

Employer identification numbi 11-2623857

<u>ء</u> \_\_\_

XYes

सिवैद्याशि Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered 'Yes' on

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?

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

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1 (a) Name and address of organization (b) EIN	(c) IRC section	(d) Amount of cash grant	(e) Amount of non cash	(A Method of valuation	· Jo Description of ·	/h/ Duroco of great
(2)	(if applicable)	(a)	(e) Amount of flor cash assistance	(book, FMV, appraisal, other)	(g) Description of roncash assistance	(h) Purpose of grant or assistance
1						
-						
1						
I						
1	•					
1						
Enter total number of section 501(c)(3) and government organization		is listed in the line 1 table				0
Enter total number of other organizations listed in the line 1 table	1 table				•	0
RAA For Danonwork Doduction Act Notice cas the Instructions for Four						

Schedule   (Form 990) (2017) ACADEMY OF MARKETING SCIENCE FOUNDATION	ARKETING SCIEN	CE FOUNDATION	,		11-2623857 Page 2'
Parising 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.	<b>Domestic Individu</b> sace is needed.	ials. Complete if the	ne organization an	swered 'Yes' on Form	I
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 AWARDS AND GRANTS	20	15,117.			
2					
R				3	
4					
5					
9					
7					
Partive Supplemental Information. Provide the informati	ide the information	required in Part I,	line 2; Part III, co	lumn (b); and any other	on required in Part I, line 2; Part III, column (b); and any other additional information.

Page 2

1

BAA

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

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

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

> Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990for the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

11-2623857

ACADEMY OF MARKETING SCIENCE FOUNDATION

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

VARIOUS ACCOMPLISHMENT AWARDS

SHARED EXPENSES

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

NO OTHER DOCUMENTS AVAILABLE TO THE PUBLIC.