Department of the Treasury

Return of Organization Exempt From Income Tax

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

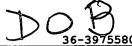
2017

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

Open to Public Inconstian

	Interna	il Reveni	ue Service	Go to www.irs.gov/rorm990 for instructions and the latest inform	iation.	inspection	
	A F	or the	2017 calend	ar year, or tax year beginning, 2017, and end	ding	, 20	
	B	heck if a	applicable	C Name of organization AMERICANS FOR LIMITED GOVERNMENT INC.		D Employer Identification	n no
		ddress c	hange	Doing business as		36-3975580	
	□ ハ	lame cha	ange	Number and street (or PO box if mail is not delivered to street address)	Room/suite	E Telephone number	
	n i	nitial retu	•	10332 MAIN STREET	326		
	鬲		rn/terminated	City or town, state or province, country, and ZIP or foreign postal code	·	G Gross receipts	
	Ā Ā	mended	return	Fairfax, VA 22030		\$ 808,22	8
	声		n pending	F Name and address of principal officer	H(a) Is this a group return	for subordinates? Yes	No
	_	•		A1.	H(b) Are all subordinat	es included? Yes] No
<u>\$</u>		ах-өхөл	pt status	501(c)(3)	If "No," attach	a list (see instructions)	
20	J V	/ebsite:		liberty.org	H(c) Group exemption	number 🕨	
9				Corporation ☐ Trust ☐ Association ☐ Other ▶	94 M State of leg	al domicile DE	
_	Pai		Summar		<u>-</u>		_
200		1		be the organization's mission or most significant activities TO ADVOCATE FOR	VARIOUS ISSUE	S RELATING TO	
FEB	45		•	GOVERNMENT.			
	٤		<u> </u>				
Ω	Ē						
岁	Š	2	Check this b	ox ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of	its net assets		
SCANNED	Activities & Governance	3		oting members of the governing body (Part VI, line 1a)	3		5
X	ජේ ග	4		dependent voting members of the governing body (Part VI, line 1b)	4		
જ	ij	5		of individuals employed in calendar year 2017 (Part V, line 2a)	5		5
	Ę	6		of volunteers (estimate if necessary)	6		
	Ă	1		ed business revenue from Part VIII, column (C), line 12	7a	5	271
8				business taxable income from Form 990-T, line 34	7t		271
2018		<u> </u>			Prior Year	Current Year	
ලා		8	Contributions	and grants (Part VIII, line 1h)	-		
63	Revenue	9		vice revenue (Part VIII, line 2g)	2,502,83	4 808,	228
\geq		10	•	ncome (Part VIII, column (A), lines 3, 4, and 7d)		1	0
2		11					
1		12	Total revenue	e - add lines 8 through 11 (must equal Part VIII, column (A), lines 5, 6d, 8c, 9e, 10c, and 1e, 10c, 10c, 10c, 10c, 10c, 10c, 10c, 10c	2,502,83	4 808,	228
ďΥ		13		imilar amounts paid (Part IX, column (A) Jines 1-3)	1,031,40		0
⋽⋇		14	Benefits naid	to or for members (Part IX, column (A), (24) NOV. 2.9. 2018			
POSTMARK DATE NOV		15	Salanes other	er compensation, employee benefits (Part 1X column (A), lines 5-10)	210,97	7 340,	916
3.5	es		Professional	fundraising fees (Part IX, column (A), line 11e) OGDEN; UT···			0
ĕ	eus	l "h	Total fundras	sing expenses (Part IX, column (D), line 26) 87,590			
-	Expenses	17		ses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,458,83	7 545,	736
	ш	18		es Add lines 13-17 (must equal Part IX, column (A), line 25)	2,701,21		
		19	•	s expenses Subtract line 18 from line 12	(198,38		
		+	TACTORIGO ICO		eginning of Current Year		 ,
	25 E	20	Total assets	(Part X, line 16)	31,38	-	956
	SS Bac	21		s (Part X, line 26)	50,00		
	Net Assets or Fund Balances	22		r fund balances Subtract line 21 from line 20	(18,61		
		rt II		re Block	(10,01		<u>033</u> ,
					nowledge and belief, it is		
	true,	correct, a	and complete De	clare that I have examined this return, including accompanying schedules and statements, and to the best of my kr Laration of preparer (other than officer) is based on all information of which prepares that any providing in			
			\ (<i>\(\(\)</i>	Mani 8		10/9/18	
	Sigi	ո	Signatur	e of officer Supering OCT 1 5 2018	Da	te	
	Her			e of officer ARD MANNING, PRESIDENT Continuame and title			
				ornit name and title		<u> </u>	
				L. USIFN beta	Check f	PTIN	
	Paid	1	Print/Type pre	parer's name Preparer's signature	self-employed		
		a parer	Frank	>	Firm's EIN		—
		Only			Phone no		
	JJC	U iii)	Firm's addres		, nano no		
	Marri	he IDC	S dincress this	return with the preparer shown above? (see instructions)		· · · · Yes I	No
	iviay i	ine int	ouscuss this	ieturii wiiti tile hieharer stiowii anove, (see ilistractions)		ال ۱۰۰۰ ت	<u></u>

	1 990 (2017) AMERICANS FOR LIMITED GOVERNMENT INC. 36-3975580 Page
Pa	rt 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
	TO ADVOCATE FOR VARIOUS ISSUES RELATING TO LIMITED GOVERNMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
	pnor Form 990 or 990-EZ?
	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?
	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 \$534,705 including grants of \$) (Revenue \$802,957)
	TO ADVOCATE FOR VARIOUS ISSUES RELATING TO LIMITED GOVERNMENT.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)
7.0	TOUCH
	<u> </u>
	
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 534,705
EEA	Form 990 (2017



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

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?

X

19

Form 990 (2017)
Part IV 7) AMERICANS FOR LIMITED GOVERNMENT INC.
Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ
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		X
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		X
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		X
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	i		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Χ
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		Χ
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M · · · · · · · · · · · · · · · · · ·	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			3.7
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	_		W
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	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,			v
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	255		v
	Controlled Childy Within the Medianing of Section 512(5)(15)	35b		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable	,,		
	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,			v
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	,,	Ţ	
	19? Note. All Form 990 filers are required to complete Schedule O		X _	2047

	Check if Schedule O contains a response or note to any line in this Part V	<u></u> .		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
þ	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	<u> </u>		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and	l		
	reportable gaming (gambling) winnings to prize winners?	1c	X	L
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	<u> </u>		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	
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	Χ	<u> </u>
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		X
b	If "Yes," enter the name of the foreign country	l		
	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		X
þ	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
С	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 chantable contributions?	6a	Х	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	X	
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7¢		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
0	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Х
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_		X
9	Sponsoring organizations maintaining donor advised funds.			-,,-
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		X
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		X
10	Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12			1
b 14	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	}		
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
a		}		•
b	Gross income from other sources (Do not net amounts due or paid to other sources			
l2a	against amounts due or received from them)	12a		
		IZa		
ь 13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O	- va		
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			
С	Enter the amount of reserves on hand		l	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Pa	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7	'b below, and for a	"No"		
•	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule C	See instructions			_
	Check if Schedule O contains a response or note to any line in this Part VI	• • • • • • • • • • • • • • • • • • • •		· · ·	. 🛛
Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 5]		
	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		ľ		
b	Enter the number of voting members included in line 1a, above, who are independent	1b 5			
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		X
3	Did the organization delegate control over management duties customanly 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 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		Х
6	Did the organization have members or stockholders?		6		Х
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		Χ
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
	stockholders, or persons other than the governing body?		7b		Χ
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1		
•	the year by the following			'	
а	The governing body?		8a	\overline{X}	
b	Each committee with authority to act on behalf of the governing body?		8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		"		
•			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code				
	B. F Grid GG (This Section & requests information about policies not required by the internal November Cour			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a	165	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				
U	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	1	
14.	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing t	ho form?	11a	X	
l1a L		ne lonni	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		420	X	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	to conflicted	12a		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give use	to conflicts?	12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			.,	
	describe in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	<u>X</u>	
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		X
b	Other officers or key employees of the organization		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)				
l6a	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	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			ļ	
	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?	<u></u>	16b		
Sec [*]	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed Virginia				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501	(c)(3)s only)			
	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)				
9	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	t 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 record	ls 🕨			
	THE ORGANIZATION (703)383-0880, 10332 MAIN STREET 326, FAIRFAX, VA 22	030			
			_		

Form 990 (201	AMERICANS FOR LIMITED GOVERNMENT INC.	36-3975580	Page
	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com		
	Independent Contractors		
`.	Check if Schedule O contains a response or note to any line in this Part VII		· · · 🛮
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		

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

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

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

EEA

Check this box if neither the organization nor any related	d organization	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)							(E) Reportable compensation from related organizations	
(A) Name and Title	(B) Average hours per week (list any hours for							(D) Reportable compensation from the		(F) Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) RICHARD MANNING PRESIDENT	40.00	Х		Х				0	0	0
(2) DAVID VANDERVEEN DIRECTOR	5.00_	Х						0	0	0
(3) PETER Conlin	5.00	Х		Х				0	0	0
(4) DAVE RENSIN DIRECTOR	5.00	Х						0	0	0
(5) GLEN DOWNS DIRECTOR	5.00	Χ_						0	0	0
<u>(6)</u>										
(7)										
<u>(8)</u>								<u> </u>		
<u>(9)</u>										
(10)										
(11)										
(12)										
(13)										
(14)										

Form 990 (2017)

Part	VII Section A. Officers, Directors, Trustees,	Key Employ	ees, a	nd l	ligh	est	Comp	ensa	ated Employees (continued)			
` ` `	• (A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box,	unless er and	Posi eck mes s pers a din	ore the	e an e) Highest compensated on both true employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	cor	(F) stimated mount of other other npensati from the ganization d relate ganizatio	on on on
<u>(15)</u>											_		_
<u>(16)</u>		-									 		
<u>(17)</u>													
<u>(18)</u>		- 										_	
<u>(19)</u>													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)											<u> </u>		
c	Sub-total	n A					• • •	•		0			0
2	Total number of individuals (including but not limited reportable compensation from the organization	to those liste	d abov	/e) w	/ho r	ece	ved m	ore t	han \$100,000 of	0			
	Did the organization list any former officer, director,											Yes	No
4	employee on line 1a? If "Yes," complete Schedule J For any individual listed on line 1a, is the sum of reportant organization and related organizations greater than sindividual	ortable comp \$150,000? <i>If</i>	ensatı "Yes,"	on a	nd o	ther e Sc	compe chedule	ensa e <i>J f</i> o	or such		3		X
	Did any person listed on line 1a receive or accrue co for services rendered to the organization? If "Yes," or	•		-			-		on or individual		5		X
Section	on B. Independent Contractors												
	Complete this table for your five highest compensate compensation from the organization. Report compensation year.											<u>.</u>	
	(A) Name and business address								(B) Description of	services		(C) ensation	n
DGSR	LLC, 18532 Partlow Road, Beaverda	um, VA 23	025		-				consultin			114	
	Total number of independent contractors (including b received more than \$100,000 of compensation from			se l⊫	sted	abo	ve) wt	10		1			

Form 990 (2017) 36-3<u>97</u>5580 Page 9 AMERICANS FOR LIMITED GOVERNMENT INC. Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) (D) Rolated or exempt function Revenue excluded from tax under sections 512-514 Total rovonuo Unrolated revenue Federated campaigns 1a , Gifts, Grants nilar Amounts 1b 1c d Related organizations · · · · · · · 1d Contributions, and Other Simi 1e e Government grants (contributions) · · All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f \$ **Business Code** Program Service Revenue 802,957 900099 802,957 2a CONTRIBUTIONS 5,271 900099 b INTEREST INCOME 5,271 f All other program service revenue · · · · · · g Total. Add lines 2a-2f · · · · · · · · · · · · ▶ 808,228 Investment income (including dividends, interest, Income from investment of tax-exempt bond proceeds (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) · · · · · · · · · · · · · · · ▶ Other Revenue 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 · · · · · · · ▶ **Business Code** Miscellaneous Revenue 11a

5,271

.

808,228

802,957

e Total. Add lines 11a-11d

Total revenue. See instructions

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 (A) Total expenses Do not include amounts reported on lines 6b, 7b, Program service Management and general expenses Fundraising 8b, 9b, and 10b of Part VIII. expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV. lines 15 and 16 Compensation of current officers, directors, trustees, and key employees 137,500 82,500 41,250 13,750 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 171,867 103,120 51,560 17,187 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 6,000 3,600 1,800 600 10 25,549 15,329 7,665 2,555 11 Fees for services (non-employees) а 2,354 1.177 392 3,923 C 2,300 1,380 690 230 d Professional fundraising services See Part IV, line 17 . f Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 4,067 2,440 1,220 407 12 63,164 37,899 18,949 6,316 13 3,027 1,816 908 303 14 39,530 23,718 11,859 3,953 15 36,022 16 18,011 6,004 60,037 17 12,793 7,676 3,838 1,279 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 20 21 22 Depreciation, depletion, and amortization 1,494 1,494 23 46,977 28,186 14,093 4,698 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) 1,932 Telephone 3,220 966 322 82,729 275,763 Consultants 165,458 27,576 Postage & Printing 5,916 3,549 1,775 592 d Membership & Registration 4,382 4,382 All other expenses 19,143 11,850 5,867 1,426 25 Total functional expenses. Add lines 1 through 24e 264,357 886,652 534,705 87,590 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 following SOP 98-2 (ASC 958-720)

•		Check if Schedule O contains a response or note to any line in this Part X		• • •	
	•		` (A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	31,389	1	86,956
	2	Savings and temporary cash investments		2	33,333
	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	
Assets	8	Inventones for sale or use		8	
188	9	Prepaid expenses and deferred charges		9	
,	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 25, 382			
	b	Less accumulated depreciation		10c	
	11	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	Intangible assets		14	
	15	Other assets See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	31,389	16	86,9 <u>56</u>
	17	Accounts payable and accrued expenses		17	3,991
	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	
es	22	Loans and other payables to current and former officers, directors,			
iliti		trustees, key employees, highest compensated employees, and			
Liabilities		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	50,000	24	180,000
	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	50,000	26	183,991
w		Organizations that follow SFAS 117 (ASC 958), check here ► 🗓 and			
. S		complete lines 27 through 29, and lines 33 and 34.			40- 00-
alar	27	Unrestricted net assets	(18,611)	27	(97,035)
ä	28	Temporarily restricted net assets		28	
Ĕ	29	Permanently restricted net assets		29	
L.		Organizations that do not follow SFAS 117 (ASC 958), check here			
<u>8</u>		complete lines 30 through 34.		-30	
sel	30	Capital stock or trust principal, or current funds		30 31	
¥ Y	31	Paid-in or capital surplus, or land, building, or equipment fund		32	_
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	/10 (11)	33	/07.025
-	33	Total net assets or fund balances	(18,611)		(97,035)
	34	Total liabilities and net assets/fund balances	<u>31,389</u>	34	86,956

Form		36-39755 <u>8</u>	30	P	age 12
Pa	rt XI Reconciliation of Net Assets				_
$\overline{}$	Check if Schedule O contains a response or note to any line in this Part XI		<u> </u>		<u>.□</u> _
1	`Total revenue (must equal Part VIII, column (A), line 12)	1		308,	228
2	Total expenses (must equal Part IX, column (A), line 25)	2	8	<u>886, </u>	652_
3	Revenue less expenses Subtract line 2 from line 1	3		(78,	424)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		(18,	611)
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			_0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		(97,	035)
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII	· · · · · <u>· ·</u>	• • •		$\cdot \square$
				Yes	No
1	Accounting method used to prepare the Form 990		Ĺ		
	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		X
	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		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		į		
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	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		ļ
	If the organization changed either its oversight process or selection process during the tax year, explain in		ŀ		· [
	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		X
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		<u> </u>
EEA			Form	990 (2017)

SCHEDULE D (Form 990)

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.

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2017

Open to Public Inspection

Name	of the organization	Employer identification number
AM:	ERICANS FOR LIMITED GOVERNMENT INC.	36-3975580
Pa	rt I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Acco	ounts.
	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 (dunng 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?	· · · · · · · · · · · · · · · · · · ·
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
Pa	rt 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)	illy important land area
	Protection of natural habitat Preservation of a certified	
	Preservation of open space	Thorno ou dotate
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a co	onservation
•	easement on the last day of the tax year	Held at the End of the Tax Year
а	Total number of conservation easements	···
b	Total acreage restricted by conservation easements	
	Number of conservation easements on a certified historic structure included in (a)	
c d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a	. 20
u		. 2d
•		
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the orga	riization during the
	tax year Number of states where associate subject to consequation associated in legited.	
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
e	violations, and enforcement of the conservation easements it holds?	
6	Stan and volunteer nours devoted to monitoring, inspecting, nanding or violations, and emorcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ea	ecoments during the year
′		asements during the year
	Description and approximate according to the 2(d) share activity the recovery activity (70/b)(4)	(D)(:)
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)	
	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense state	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements the	at describes the
Pa	organization's accounting for conservation easements rt III Organizations Maintaining Collections of Art, Historical Treasures, or O	ther Similar Assets
Fai		thei Sillilai Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	and believes about
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement a	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fi	
	public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these ite	
þ	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and be	
	works of art, historical treasures, or other similar assets held for public exhibition, education, or research in fi	urtnerance 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	
а	Revenue included on Form 990, Part VIII, line 1	
b	Assets included in Form 990, Part X	· · · · · · ▶ \$

	tule D (Form 990) 2017 AMERICANS FOR							75580		Page 2	
Pa	rt III Organizations Maintaining (ssets (contin	ued)	
٠3	Using the organization's acquisition, accession,	and other records, c	heck any o	f the follow	ving that are	a significa	int use of its				
	collection items (check all that apply)	_									
а	Public exhibition		an or excha	nge progra	ams						
b	b Scholarly research e Other										
C	c Preservation for future generations										
4	Provide a description of the organization's collection	ctions and explain ho	w they furth	ner the org	janization's e	xempt pu	rpose in Part				
	XIII										
5											
	assets to be sold to raise funds rather than to be maintained as part of the organization's collection?										
Pa	rt IV Escrow and Custodial Arran								_		
	Complete if the organization at	nswered "Yes" o	n Form s	990, Par	t IV, line 9	, or rep	orted an am	ount on	Form		
	990, Part X, line 21										
1a	Is the organization an agent, trustee, custodian							_	-	_	
_					• • • • • •			· · · L	Yes	∐ No	
b	If "Yes," explain the arrangement in Part XIII and	I complete the follow	ing table			_					
						-		Amount	<u>_</u>		
C	Beginning balance					<u> </u>					
d	Additions during the year										
0							+				
7	Ending balance								1		
2a	Did the organization include an amount on Form					-	• • • • •	_	-	∐ No	
	If "Yes," explain the arrangement in Part XIII Chrt V Endowment Funds.	eck nere if the expla	nation nas	been provi	ided on Part	<u> </u>				<u> </u>	
	Complete if the organization ar	nswered "Yes" o	n Form 9	90 Par	t IV line 1	n					
	Complete in the organization at	(a) Current year	(b) Prii		(c) Two year		(d) There were be	- (a) F			
1a	Beginning of year balance	(a) Current year	(0) Pili	у уөаг	(c) Iwo year	S Dack	(d) Three years ba	CX (8) F	our years	Dack	
h	Contributions										
-	Net investment earnings, gains, and				-			-			
•	losses · · · · · · · · · · · · · · · · · ·							ŀ			
d	Grants or scholarships										
	Other expenditures for facilities and					+					
_	programs										
f	Administrative expenses				ļ		-				
g	End of year balance										
2	Provide the estimated percentage of the current	year end balance (lii	ne 1g, colui	nn (a)) he	id as	<u>'</u>		l .			
а	Board designated or quasi-endowment	%	O.	` '/'							
b	Permanent endowment > %										
С	Temporanty restricted endowment	%									
	The percentages on lines 2a, 2b, and 2c should	equal 100%									
3a	Are there endowment funds not in the possession		that are he	eld and ad	ministered fo	r 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 lis	ited as required on S	chedule R?	•				3t	0		
4	Describe in Part XIII the intended uses of the org		ent funds								
Pai	t VI Land, Buildings, and Equipm		_				_	_			
	Complete if the organization ar	<u>nswered "Yes" o</u>	n Form 9	90, Par	t IV, line 1	1a See	Form 990, I	Part X, I	<u>ne 10</u>		
	Description of property	(a) Cost or oth	I	(b) Cost of	r other basis		ccumulated	(d) B	Book value		
		(investme	ent)	(0	other)	de	preciation				
1a	Land	• • •				ļ					
b	Buildings	• • •									
C	Leasehold improvements	• • •	_								
d	Equipment	• • •			25,382		25,382				
θ	Other · · · · · · · STMD1I					_					
Total	. Add lines 1a through 1e (Column (d) must equ	al Form 990, Part X,	column (B)	, line 10c ,)		▶				

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 o					
• •	eld equity interests				
(3) Other	•				
(A)	- 				
(B)					
(C)					
(D)					
(E)					
(F)			-		
(G)					
(H)					
	must equal Form 990, Part X, ∞l (B) line 12)			•	
Part VIII	Investments - Program Related. Complete if the organization answe	red "Yes" on Form 990, Pa	rt 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 v		
(1)					
(2)				,_	
(3)					
(4)					
(5)					
(6)					
(7)					
(8)			<u> </u>		
(9)					
Part IX	must equal Form 990, Part X, col (B) line 13) Other Assets.	rod "Voo" on Form 000. Po	t IV line 11d See Form 000	Dort V line 45	
	Complete if the organization answer		rt IV, line 11d. See Form 990,		
	(a)	Description		(b) Book value	
(1)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)	· ····		+		
(9)					
	n (b) must equal Form 990, Part X, col (B) line 1	5)			
Part X	Part X Other Liabilities.				
	Complete if the organization answelline 25.	red "Yes" on Form 990, Par	rt IV, line 11e or 11f See Form	n 990, Part X,	
1.	(a) Description of liability	(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
_(4)					
(5)			_		
(6)			4		
_(7)					
(8)			4		
(9)	······································		4		
Total. (Column (b)	must equal Form 990, Part X, col (B) line 25)	1.			
2 Liability for i	incortain tay nocitions. In Part XIII, provide the to	and of the feetnets to the emanagety	on's financial statements that reports th		

P,a	MINIST Decembration of Devenue was Audited Financial Otstons and With De	7 36-39/5580	
	Reconciliation of Revenue per Audited Financial Statements With Re Complete if the organization answered "Yes" on Form 990, Part IV, line 12	•	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	· · · · · · · · · · · · · · · · · · ·	
a			
b			
С			
d	Other (Describe in Part XIII)		
0	· · · · · · · · · · · · · · · · · · ·		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	,		
C			
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		
ra.	Reconciliation of Expenses per Audited Financial Statements With E Complete if the organization answered "Yes" on Form 990, Part IV, line 1.		
1	Total expenses and losses per audited financial statements	<u> </u>	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	-
a	Donated services and use of facilities		
b			
c	Other losses · · · · · · · · · · · · · · · · · ·	<u> </u>	
d			
θ	Add lines 2a through 2d · · · · · · · · · · · · · · · · · ·		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · 4a .		
þ	Other (Describe in Part XIII)		
C	Add lines 4a and 4b · · · · · · · · · · · · · · · · · ·		
5 Doi	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	<u></u>
	rt:XIII] Supplemental Information.	When 4 Dort V has	
	ride the descnptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part art XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional informa		
., га	art Ar, lines 2d and 4b, and Fart Ar, lines 2d and 4b. Also complete this part to provide any additional informa		
			_ _
			
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Schedule D (Form 990) 2017

EEA

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/Form990 for the latest information.

OMB No 1545-0047 2017 Openito Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

AMERICANS FOR LIMITED GOVERNMENT INC.	36-3975580
01. Governing body decisions (Part VI, line 7b)	
Once a grant has been awarded to an organization, we do not normally requi	re formal
written updates on the progress of the project. We do, however, reserve t	the right to
request updates if we feel it is necessary.	
02. Committee meeting documentation (Part VI, line 8b)	
An executive committee exists and will hold periodic meeting between board	l meetings.
03. Form 990 governing body review (Part VI, line 11)	
ALG SENDS THE DRAFT FORM 990 TO THE DIRECTORS AND LEGAL COUNSEL FOR REVIEW	AND COMMENT
BEFORE IT IS FILED.	
04. Conflict of interest policy compliance (Part VI, line 12c)	
ALL DIRECTORS ARE REQUIRED ANNUALLY SUBMIT A FORM TO THE ORGANIZATION ANSW	ERING QUESTIONS
PERTAINING TO THEIR RELATIONSHIP WITH THE ORGANIZATION.	
· · · · · · · · · · · · · · · · · · ·	
05. Governing documents, etc, available to public (Part VI, line 19)	
ANNUAL TAX FILINGS ARE AVAILABLE BY FILING A WRITTEN REQUEST WITH THE ORGA	NIZATION.
	