2949314600311
Return of Organization Exempt From Income Tax OMB

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

<u>A</u>	Fort	he 2017 calen	dar year, or tax year beginning and ending			
В	Checi	k if applicable	C Name of organization AMERICAN ACADEMY OF ADVERTI	SING	D Emplo	yer identification number
	Addre	ess change	Doing business as		38-22	39287
$\bar{\Pi}$	Name	change	Number and street (or P O box if mail is not delivered to street address) Room/su	ite	E Teleph	one number
Ħ	Initial	return	831 FEARRINGTON POST 831 LANGDON	}	(786)	339-3333
Ħ		eturn/terminated	City or town, state or province, country, and ZIP or foreign postal code		<u> </u>	
\exists		ided return	PITTSBORO, NC 27312	1	G Gross	receipts \$ 231,513.
H			F Name and address of principal officer PAT ROSE	14/2) 1-		turn for subordinates? Yes X No
ليا	Арриса	ition pending				
			831 FEARRINGTON POST 831 LANGDON PITTSBO			finates included? Yes No
			∑ 501(c)(3)	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 		a list (see instructions)
			aaasite.org			tion number
		f organization Summa	Corporation	ation 1986	M	State of legal domicile NC
			ribe the organization's mission or most significant activities	 		
•	('		AA IS MADE UP OF SCHOLARS, PROFESSORS &	ייואיםרווייי	SIN	THE FIELD OF
Š	ł		TISING. THE AAA PUBLISHES THE JOURNAL OF			
Governance						MID HOTIDS CON
Š			oox ► ☐ If the organization discontinued its operations or disposed of more than 25	5% of its net as	i 1	
ŏ	3		oting members of the governing body (Part VI, line 1a)		3	6
රේ ග	4		ndependent voting members of the governing body (Part VI, line 1b)		4	6
ij	5	Total number	er of individuals employed in calendar year 2017 (Part V, line 2a)		5	0
Activities &	6	Total number	er of volunteers (estimate if necessary)		6	0
¥	7a	Total unrelat	ted business revenue from Part VIII, column (C), line 12		7a	0.
	b	Net unrelate	ed business taxable income from Form 990-T, line 34 \		7b	0.
			Ö	Prior Year		Current Year
	8	Contribution	is and grants (Part VIII, line 1h) S MAY 0 2 2018	32,	873.	30,364.
ne	9	Program sei	rvice revenue (Part VIII, line 2g)	212,	271.	192,908.
Revenue	10	Investment i	income (Part VIII, column (A), lines 3,4-and-7d)	5,	669.	8,241.
æ	11	Other reven	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			
	12		ue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	250,	813.	231,513.
	13		similar amounts paid (Part IX, column (A), lines 1-3)		400.	14,340.
	14		d to or for members (Part IX, column (A), line 4)			
	15		ner compensation, employee benefits (Part IX, column (A), lines 5-10)	32,	000.	27,000.
Expenses	1		il fundraising fees (Part IX, column (A), line 11e)			
ē	1		aising expenses (Part IX, column (D), line 25) ▶			
X	i		nses (Part IX, column (A), lines 11a-11d, 11f-24e)	131,	674	165,852.
	18		ses Add lines 13-17 (must equal Part IX, column (A), line 25)	172,		207,192.
	19		ss expenses Subtract line 18 from line 12		739.	24,321.
	T	110101100100		ning of Curre		End of Year
Net Assets or Fund Balance	20	Total accete	s (Part X, line 16)	830,		903,183.
Asse Batt	21		es (Part X, line 26)		142.	58,962.
E E	22		or fund balances Subtract line 21 from line 20	819,		844,221.
100			ure Block	015,	<u> </u>	044,221.
			ry, I declare that I have examined this return, including accompanying schedules and statem	ents, and to the	hest of my	knowledge and belief it is
			lete Declaration of preparer (other than officer) is based on all information of which preparer		-	Knowledge and belief, it is
	e, com	ect, and compl	lete Declaration of preparer forter than officer) is based on all fill officer of which preparer	Tias ally knowled	age	12-110
e:	gn	Signatur	e of officer	Date	-4	125/18
	ere		$A \cdot A = D \cdot E$	+	T	7: -
1.34	516	Type or i	rincia /5_ /03c /0001 hguez h Xc	= <u>- (</u>		liector
			·	ate .	Tobasi.	TV (FTIN
	aid	L.		3/17/18	Check self-em	MON " I
	repa		Keinschleibel, CFA Flank Keinschleibel, CFA	 _		P00288530
U	se O					15-2385459
			address ▶ 523 Plymouth Lane	i i	ne no	
			umburg, IL 60193	(6	30)80	08-6882
May	the I	RS discuss th	his return with the preparer shown above? (see instructions)			X Yes No
For	Pape	rwork Redu	ction Act Notice, see the separate instructions.			Form 990 (2017)

) (Revenue \$

139,035.

Form 990 (2017)

(Expenses \$

UYA

4e Total program service expenses ▶

including grants of \$

			162	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	·	X
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		X
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		ł	
	Part III	5		X
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		<u>x</u>
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		<u>X</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"		. }	
	complete Schedule D, Part III .	8		<u> </u>
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a		İ	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or		ļ	
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<u> </u>
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted		· [
	endowments, permanent endowments, or quas⊩endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is 'Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	-	.	
а			1	
	complete Schedule D, Part VI	11a		<u> </u>
þ				
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	ادمما		v
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	-	X
9	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	445		x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
i2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	12a		x
L	Schedule D, Parts XI and XII	128		
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if	126	1	x
13	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b 13	-	X
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a	-	X
l4a b	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,	140		
U	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		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	.40		
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	1	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	16		X
۱7	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		X
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	İ	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			_=
-	If "Yes," complete Schedule G, Part III	19		X
	<u></u>			

Form 990 (2017) AMERICAN ACADEMY OF ADVERTISING Part IV Checklist of Required Schedules (continued)

			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
þ	If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	1 1		
	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	1 1	. Í	
	organization's current and former officers, directors, trustees, key employees, and highest compensated	1 1		
	employees? If "Yes," complete Schedule J .	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1 1		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b	1 1		
	through 24d and complete Schedule K If "No," go to line 25a	24a		X
þ	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	1		
	to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	1 1		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	[[
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	1 1		
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	1 1		
	current or former officers, directors, trustees, key employees, highest compensated employees, or	1 . 1	. (
	disqualified persons? If "Yes," complete Schedule L, Part II	26		<u> </u>
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			7.
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	1		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			37
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<u>X</u>
D	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	005		v
_	Schedule L, Part IV	28b		<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		x
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29		$\frac{\hat{\mathbf{x}}}{\mathbf{x}}$
29 30	Did the organization receive more than \$25,000 in hon-cash contributions? In res, complete Schedule W	-23		<u> </u>
30	conservation contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1 30		
,	Part I	31		_X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N,	T		
-	Part II	32		_x
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		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes,", complete Schedule R, Part V, line 2	36		_X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		<u>x</u>
			000	

Part				
	Check if Schedule O contains a response or note to any line in this Part V		Yes	No
1 a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . 1a 1		165	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable . 1b 0			İ
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			l
	reportable gaming (gambling) winnings to prize winners?	1c	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 . 2a 0			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		1
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		ļ
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		
4 a	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			İ
	account)?	4a		_X_
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			i
	(FBAR)			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		_x_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		ļ
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			ļ
	gifts were not tax deductible?	6b		
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		
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			l
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	1 1		
9	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			l
^	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
-	against amounts due or received from them)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O			
ь	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		
14 a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		
ь	if "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
UYA		Forn	990	(2017)

Form 990 (2017) AMERICAN_ACADEMY OF ADVERTISING 38-2239287 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management No 1 a Enter the number of voting members of the governing body at the end of the tax year 1a 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 6 1b b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with Х any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct X supervision of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X Did the organization become aware during the year of a significant diversion of the organization's assets? 5 X Did the organization have members or stockholders? 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint X one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X a The governing body? 8a X 8b b Each committee with authority to act on behalf of the governing body? 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 X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No 10a X 10 a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? X 11a 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12 a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," X describe in Schedule O how this was done 12c X 13 Did the organization have a written whistleblower policy? 13 14 X 14 Did the organization have a written document retention and destruction policy? 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? X a The organization's CEO, Executive Director, or top management official 15a X **b** Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16 a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶UT 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Another's website W Upon request Other (explain in Schedule O) Own website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and 19 financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records > (786) 339-3333

PAT ROSE 831 FEARRINGTON POST 831 LANGDON PITTSBORO, NC 27312

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Form 990 (2017)	AMERICAN	ACADEMY	OF	ADVERTISING	38-22392	287 Page 7
	ANTICE CARE	ATOM DELTE	<u> </u>	AD A DIVITO THE	 <u> </u>	<u>. O / Page 1</u>

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definintion 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		ted o	rgar	niza	tion	com	pen	sated any curre	ent officer, direct	or, or trustee
		(C)								
(A)	(B)			Posi	tion			(D)	(E)	(F)
Name and Title	Average	(do n	ot ch	ieck i	more	than o	ne	Reportable	Reportable	Estimated
	hours per		unles	s pe	rson	is both	an	compensation	compensation from	amount of
	week (list any	I OTHICE	er and	d a d	irect	or/truste	ee)	from	related	other
	hours for related	익물	٦	Õ	7	B F	77	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	d is	ž	Officer	e e	탕	Former	(W-2/1099-MISC)	(*** 2 ********************************	organization
	below dotted	g E	ğ		뒃	yee co	"	(11-2 1000-111100)		and related
	line)	Individual trustee or director	Institutional trustee		Key employee	ğ				organizations
	1	ee e	ste		"	ens.	ŀ			
			l °			Highest compensated employee	L			
(1) Michele R Nelson	15									
President	1-13-	1		x						
(2) Tom Reichert	15		-	^	\vdash	├	_	 		
President Elect	15	1		x						
	15			₽	-	 		 		
(3) Harsha Gangadharbatla Vice Preident	13	-		x				1		
	15	 -	-	^	-	 	\vdash			
(4) Shu-Chaun Chu	1 13	-	1	x						
Secretary (5) Combine Monton	15	├	\vdash	≏	╁	-				
(5) Cynthia Morton Treasurer	15	1		x		1				
(6) Patricia Rose	30	├─-	┼	^	\vdash	 				
Executive Director	30	X						27,000.		
(7)			╁	┢	┢╌	\vdash		27,000.		
<u>(1)</u>		1		l	ľ	ľ	1	1		
(8)		\vdash	\vdash	 		├	├			
(0)		1								
(9)	 	-	┼	 	\vdash	 	-			
(3)	-	1								
(10)	+		\vdash	\vdash			\vdash			
(10)	- 	1								
(11)	 	 	+			 	\vdash			<u> </u>
<u>\'''</u>		-								
(12)	 	 	\vdash		-	 	 			
\·~/		1								
(13)			+	 	\vdash	 	\vdash			
<u> </u>	1	1								
(14)			 	 		T	1	1		
3		1	1	l	l		1			
	<u> </u>		4							

Part VII Section A. Officers, Directors, Tr	ustees, Ke	y Em	ploy	yee:		nd H	ighe	est Compensa	ted Employ	ees (continued)	
(A) Name and title	(B) Average hours per week (list any	Position (do not check more than or per box, unless person is both st any officer and a director/truste						(D) Reportable compensation from the	(E) Reportable compensation fro related organizations	0	n	
	related organizations below dotted line)	וח הי	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC	fro orga and	m the nization related nizations	
(15)		-	_		-		-					
(16)				-	-					_		
(17)			_				_		-			
(18)										_		
(19)									<u> </u>			
(20)				-	-		-					
(21)				-	_		-					
(22)					_							
(23)			_	_	_		-					
(24)				_	_		_					
(25)				-	-		-	<u> </u>				
1b Sub-total		<u></u>	ł	<u>L</u> _	Ĺ	 !		27,000.				
c Total from continuation sheets to Pod Total (add lines 1b and 1c)	art VII, Sec	tion /	A				>	27,000.				
Total number of individuals (including reportable compensation from the organization)			tho	se	liste	d abo	ove)		more than \$	100,000 of		
3 Did the organization list any former office		-	ucto	20	kov.	amnl	040	a or highest o	omnensated		Yes	No
employee on line 1a? If "Yes," comple	te Schedule	J for	su	ch II	ndiv	ıdual				3 tha		х
4 For any individual listed on line 1a, is the organization and related organizations g												
individual 5 Did any person listed on line 1a receive							•	-	zation or indi	ı	-	X
for services rendered to the organization Section B. Independent Contractors										5		X
Complete this table for your five highest compensation from the organization. Re tax year.	compensat port compe	ed ind ensation	depo on fo	end or th	ent ne c	contr alend	acto dar y	ors that receive year ending wit	d more than h or within th	\$100,000 o ne organizati	on's	
(A) Name and business address (B) Description of services							(C Compe					
							<u> </u>					
							_					
2 Total number of independent contractors	s (including	but n	ot li	mite	ed t	o tho	se li	sted above) w	no			
received more than \$100,000 of comper								•		Ĺ		

• Form 990 (2017) AMERICAN ACADEMY OF ADVERTISING

Part VIII Statement of Revenue

	,	Check if Schedule O contain	is a response or not	e to any line in this	Part VIII		. 🗆	
					(A)	(B)	(C)	(D)
i de		,			Total revenue	Related or exempt function revenue	Unrelated business	Revenue excluded from tax under
<u> </u>	-(4	<u> </u>	·		j		revenue	sections 512-514
nts nts	1a	Federated campaigns .	1a		[
Gra	b	Membership dues	. <u>1b</u>	<u> 29,364.</u>				l
Arr	С	Fundraising events .	<u>1c</u>					
Contributions, Gifts, Grants and Other Similar Amounts	ď	Related organizations	1 <u>d</u>			}		
	θ	Government grants (contribut			j	j .		
utio er \$	f	All other contributions, gifts, o			ļ			
후		and similar amounts not inclu		1,000.	1			
nd i	g	Noncash contributions includ	ed in lines 1a-1f \$			}		
<u>a</u> C	h	Total. Add lines 1a-1f		<u> </u>	30,364.			
971			_	Business Code	455 555			
9Ve		Annual Confere			133,080.	133,080.		<u> </u>
Š.	b	Journal Revenu	e		59,828.	59,828.		
ıvi	C				 	 		
S	d				<u></u>			
Program Service Revenue	Ð	All other present a series and		·		ļ	······································	
P	† -	All other program service reversed. Add lines 2a-2f	enue		192,908.			
	<u> 9</u>				192,908.			
	3	Investment income (including	dividends, interest,		8,241.	8,241.		
		and other similar amounts)		and a	0,241.	0,241.		
	4	Income from investment of ta	eeas				 	
	5	Royalties	(ı) Real	(II) Personal	 			
	6a	Gross rents	(i) iteal	(II) r ersonar	1			
	b	Less: rental expenses	<u> </u>					
	C	Rental income or (loss)			1	}		
	d	Net rental income or (loss)	L———					
		Gross amount from sales of	(i) Securities	(II) Other				<u> </u>
		assets other than inventory	, , , , , , , , , , , , , , , , , , ,	(7)	1			
	ь	Less cost or other basis			1			
		and sales expenses	ĺ		ĺ	ĺ		
	С	Gain or (loss)						
	d	Net gain or (loss)						
<u>Φ</u>					1			
ž	8a	Gross income from fundraising	ng	1]			
eve		events (not including \$			ļ			
Other Revenu		of contributions reported on li	ne 1c)					
the		See Part IV, line 18	а		<u> </u>			
0	b	Less direct expenses -	b					
		Net income or (loss) from fun	-	>				
	9a	Gross income from gaming a	ctivities		_			
		See Part IV, line 19	a					
	b	Less direct expenses	b				-	
		Net income or (loss) from gar	-		<u> </u>		 	
	10 a	Gross sales of inventory, less	•		ĺ	[
		returns and allowances	а		}			
		Less cost of goods sold	. b					
	_ с	Net income or (loss) from sale		. •	 	ļi		
		Miscellaneous Revenue		Business Code	 	 		
	11a				 	_	<u> </u>	
	b				 		<u> </u>	
	C				 	 		
	d	All other revenue						
	θ 12	Total revenue. See instructi		. 🕨	231 512	201,149.		
	12	TOTAL PROPERTIES. SEE INSTRUCT	LULIS .	~				1

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 a	ny line in this Part IX		·	
Do n	ot include amounts reported on lines 6b, 7b, 8b, 9b,	(A)	(B)	(C)	(D)
and 1	10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	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 .	14,340.	14,340.	İ	
3	Grants and other assistance to foreign organizations,				
	foreign governments, and foreign individuals. See Part IV,	}		J	
	lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees,				
-	and key employees .	27,000.		27,000.	
6	Compensation not included above, to disqualified persons	2.,,000.			<u></u>
-	(as defined under section 4958(f)(1)) and persons	1		}	
	described in section 4958(c)(3)(B)			ļ	
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section	<u> </u>			
•	· · · · · · · · · · · · · · · · · · ·			1	
9	401(k) and 403(b) employer contributions) Other employee benefits	 		·	
10	Other employee benefits Payroll taxes				
11	• • •	<u> </u>			
	Fees for services (non-employees)				
_	Management		 		
	Legal	2 067		2 067	
	Accounting	2,967.		2,967.	
	Lobbying				
	Professional fundraising services See Part IV, line 17		-		
	Investment management fees .	<u> </u>			<u> </u>
g	Other. (If line 11g amount exceeds 10% of line 25, column			ļ	
42	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	C 142		6 143	
13	Office expenses	6,143.		6,143.	
14	Information technology	19,992.		19,992.	
15	Royalties .		 		
16	Occupancy		<u></u>	0.104	
17	Travel	9,104.		9,104.	
18	Payments of travel or entertainment expenses for any	[[
40	federal, state, or local public officials	114 000	114 222		
19	Conferences, conventions, and meetings	114,338.	114,338.		
20	Interest	ļ			
21	Payments to affiliates		 		
22	Depreciation, depletion, and amortization				
23	Insurance	1,119.		1,119.	
24	Other expenses Itemize expenses not covered above	2000年100日	李福 从本门的		
	(List miscellaneous expenses in line 24e If line 24e amount				
	exceeds 10% of line 25, column (A) amount, list line 24e		10年1月高高年2月	ł	
	expenses on Schedule O)		10 000		
a	Journal Expenses	10,357.	10,357.	1 000	
b	Bank Charges & CC Fee	1,832.		1,832.	
C					
d	An	<u> </u>			·· ·····
	All other expenses	007 100	100 000	<u> </u>	
25	Total functional expenses. Add lines 1 through 24e	207,192.	139,035.	68,157.	
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	}		1	
	educational campaign and fundraising solicitation. Check				
	here ▶ ☐ If following SOP 98-2 (ASC 958-720) .	<u> </u>	<u> </u>		5 000 (0047)

	Check if Schedule O contains a response or note to any line in this Part X	· · · · · · · · · · · · · · · · · · ·		
		(A)	}	(B)
┼-		Beginning of year		End of year
1	Cash — non-interest-bearing	178,547.	1	254,461
2	Savings and temporary cash investments	617,064.	2	625,234
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net	<u>-</u> ইন্ড মন্ত্রকাল ক্র	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			
ļ	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)			
l	Complete Part II of Schedule L .		6	
7	,		7	
8	Inventories for sale or use		8	
9	Prepaid expenses and deferred charges	34,431.	9	23,488
10	a Land, buildings, and equipment cost or			
	other basis Complete Part VI of Schedule D . 10a 1,381.		 }-	
	b Less accumulated depreciation 10b 1,381.		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	<u></u>	14	
15	Other assets See Part IV, line 11	000 040	15	000 10
16	Total assets. Add lines 1 through 15 (must equal line 34)	830,042.	16	903,183
17	Accounts payable and accrued expenses	7 105	17	7 10
18	Grants payable	7,125.	18	7,125
19	Deferred revenue	3,017.	19	51,83
20	Tax-exempt bond liabilities	ļ- 	20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees,	<u></u>		
	highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities			
	not included on lines 17-24) Complete Part X of Schedule D	10 140	25	EQ 06
26	Total liabilities. Add lines 17 through 25	10,142.	26	58,962
	Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27	15.5		
	through 29, and lines 33 and 34.	<u></u>		
27	Unrestricted net assets		27	
28	Temporarily restricted net assets		28	
29	<u> </u>		29	
1	Organizations that do not follow SFAS 117 (ASC 958), check here	· · · ;	}	
	lines 30 through 34.			
30	Capital stock or trust principal, or current funds		30	
31	Paid-in or capital surplus, or land, building, or equipment fund	010 000	31	944 00
32	Retained earnings, endowment, accumulated income, or other funds	819,900.	32	844,221
33	Total net assets or fund balances	819,900.	33	844,22
27 28 29 30 31 32 33 34	Total liabilities and net assets/fund balances	830,042.	34	903,183 Form 990 (20

Form 9	90 (2017) AMERICAN ACADEMY OF ADVERTISING 38-	2239287	7 Page 12
Par	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)	231	<u>1,513.</u>
2	Total expenses (must equal Part IX, column (A), line 25)		7,192.
3	Revenue less expenses Subtract line 2 from line 1		<u>4,321.</u>
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	819	9,900 .
5	Net unrealized gains (losses) on investments		
6	Donated services and use of facilities		
7	Investment expenses		
8	Prior period adjustments . 8		
9	Other changes in net assets or fund balances (explain in Schedule O)		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		
	33, column (B))	844	4,221.
Par	XII Financial Statements and Reporting		_
	Check if Schedule O contains a response or note to any line in this Part XII		
		<u> </u>	Yes No
1	Accounting method used to prepare the Form 990 🛣 Cash 🔲 Accrual 🔲 Other		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		- 1
2 8	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		
ı	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 separate basis, consolidate	ited	
	basis, or both		
	Separate basis Consolidated basis Both consolidated and separate basis		
(: If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	
	If the organization changed either its oversight process or selection process during the tax year, explain in		-
	Schedule O		
3 8	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
ı	o 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	
UYA		Form	990 (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. ➤ Attach to Form 990 or Form 990-EZ.

Open to Public

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization Employer Identification number AMERICAN ACADEMY OF ADVERTISING 38-2239287 Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions–subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 \(\sigma\) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (i) Name of supported organization (iii) Type of organization (v) Amount of monetary (iv) is the organization (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see document? instructions) above (see instructions)) instructions) Yes No (A) (B) (C) (D) (E) **Total**

Schedu	e A (Form 990 or 990-EZ) 2017 AMERICAN	ACADEMY	OF ADVER	RTISING		38-223	39287 Page 2
Part	Support Schedule for Organiz (Complete only if you checked the	ations Desc ne box on line	ribed in Sec e 5, 7, or 8 of	tions 170(b) (Part I or if th	e organizatio	d 170(b)(1)(A on failed to qu	.)(vi)
	Part III. If the organization fails t	o qualify und	er the tests li	sted below, p	lease comple	ete Part III)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 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		 	 			
J	furnished by a governmental unit to the organization without charge					1	
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
J	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	Public support. Subtract line 5 from line 4		<u> </u>	/		 	
	on B. Total Support	1		J		·	
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	(4)2010	(2/2011	(0) 20.0	(4) 2010	(6/201/	(1) 10101
8	Gross income from interest, dividends,	}		 		 	
0	payments received on securities loans,)		ļ		1	ļ
	rents, royalties, and income from similar			ļ			
	sources		1	İ	1		
•		<i> </i>	 	 		 	
9	Net income from unrelated business						
	activities, whether or not the business						i
	is regularly carried on	L#	-	 		 	
10	Other income Do not include gain or	/	ļ	1]		
	loss from the sale of capital assets						
	(Explain in Part VI.)	ļ		 		_	
11	Total support. Add lines 7 through 10	L		<u> L</u>	L	 	<u> </u>
12	Gross receipts from related activities, etc	•				12	
13	First five years. If the Form 990 is for the		's first, second	I, third, fourth,	or fifth tax yea	ir as a section	501(c)(3)
	organization, check this box and stop he						▶ □
Secti	on C. Computation of Public Suppo				··- <u>-</u> -		
14	Public support percentage, for 2017 (line			11, column (f))	14	%
15	Public support percentagé from 2016 Sci					15	%
16a	33 1/3 % support test-2017. If the organ	ization did not	check the box	con line 13, an	d line 14 is 33	1/3 % or more	, check this
	box and stop here. The organization qua	alıfies as a pub	licly supported	d organization	•		▶ □
b	33 1/3 % support test-2016. If the organ	nization did not	t check a box of	on line 13 or 16	Sa, and line 15	is 33 1/3 % or	more,
	check this box and stop here. The organ	ization qualifie	es as a publicly	supported org	ganization		▶ 🗌
17a	10%-facts-and-circumstances test-20					, or 16b, and I	ine 14 is
	10% or more, and if the organization me Part VI how the organization meets the "f	eets the "facts-	and-circumsta	inces" test, che	eck this box an	d stop here. E	Explain in upported
	organization,		•				▶ □
b	10%-facts-and-circumstances test-20						
	15 is 10% or more, and if the organization Explain in Part VI how the organization m						
	supported organization			. 40 451 :=		.1 41. 1	· • L
18	Private foundation. If the organization of	lid not check a	box on line 13	s, 16a, 16b, 17	a, or 17b, che	ck this box and	a see
	instructions						
UYA					Sc	nedule A (Form 9)	90 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.)

Section	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants")	34,921.	39,745.	32,620.	31,873.	29.364.	168,523.
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	120 350	189 472	204 361	212 271	192 908	919,362.
3	Gross receipts from activities that are not an	120,330.	203,2,2.			132/300.	220,002.
•	unrelated trade or business under section 513			ĺ		j	
4	Tax revenues levied for the	ļ 			 		
7	organization's benefit and either paid		ļ				
	to or expended on its behalf	1	Ì	Ì			1
5	The value of services or facilities	 	 	 			
J	furnished by a governmental unit to the		<u> </u>	!			
	organization without charge					İ	i
6	-	155 271	220 217	226 001	244,144.	222 272	1 007 005
-	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3	155,211.	229,211.	230,901.	244,144.	222,212.	1,087,885.
7a	received from disqualified persons	}	!	1	}	1	!
L	Amounts included on lines 2 and 3	}	 	}	 	 	
b		ļ	}				
	received from other than disqualified persons that exceed the greater of \$5,000	ł	1	}	ł	ł	l
	-	1		ļ		j	
_	or 1% of the amount on line 13 for the year Add lines 7a and 7b	<u> </u>	 		<u> </u>		
8 8			 	 	ļ		
0	Public support. (Subtract line 7c from line 6)	The figure of		,			
Saati	on B. Total Support	CA-243.	<u> </u>	J	L	l	1,087,885.
	dar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	155 271			244,144.		
-	Gross income from interest, dividends,	155,211.	229,211.	230,301.	244,144.	222,212.	1,007,865.
iva	payments received on securities loans, rents,	ĺ	ł		1	1	1
	royalties, and income from similar sources	3,413.	2,219.	4,689.	5,669.	8,241.	24,231.
_	•		2,219.	4,669.	3,669.	0,241.	24,231.
D	Unrelated business taxable income (less section 511 taxes) from businesses		ŀ	1		1	
	acquired after June 30, 1975	}					
_	Add lines 10a and 10b	2 412	2,219.	4,689.	5,669.	8,241.	24,231.
		3,413.	2,219.	4,009.	3,669.	0,241.	24,231.
11	Net income from unrelated business						
	activities not included in line 10b, whether	[1				
40	or not the business is regularly carried on		 	 	 -		
12	Other income Do not include gain or						
	loss from the sale of capital assets		1			Ì	İ
42	(Explain in Part VI.)		ļ	 	 	 	
13	Total support. (Add lines 9, 10c, 11, and 12)	150 604	021 426	041 670	040 010	020 512	
4.4	and 12.) First five years. If the Form 990 is for th				249,813.		
14	•	•	s tirst, second	ı, ımra, marın,	or militiax yea	i as a section	501(C)(S)
Socti	organization, check this box and stop he on C. Computation of Public Suppo						
15	Public support percentage for 2017 (line			e 13. column	(f))	15	97.82%
16	Public support percentage for 2017 (in a Public support percentage from 2016)				(1))	16	98.13%
	on D. Computation of Investment In			10			96.13/
17	Investment income percentage for 2017			by line 13 co	lumn (fi)	17	02.18%
18	Investment income percentage from 20					18	01.87%
19a	33 1/3 % support test—2017. If the organ				and line 15 is		
. Ja	line 17 is not more than 331/3 %, check this						
b	33 1/3 % support test-2016. If the organi						
v	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization of						
20	Tivate Ioungation. It the organization of	na not oneon a	20X 011 1110 1-	·, ·ou, or ·ou,			

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

ecu	on A. An Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing		163	140
•	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by	1	}	
	class or purpose, describe the designation. If historic and continuing relationship, explain	1		
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).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			i -
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	_		
	organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)		<u> </u>	
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
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	4a	ļi	
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	41-		
_	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	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.	4c		
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	İ		
	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)	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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	İ		
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also	ĺ		
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in	ء]	
7	Part VI. Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		
•	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	ĺ		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
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			
	ın section 509(a)(1) or (2))? If "Yes," provide detail ın Part VI.	9a		
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.	9b		
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.	9c		<u> </u>
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	46-		
L	supporting organizations)? If "Yes," answer 10b below	10a	 	
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)	10b		

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- 33	8-	-2	2	3	9	2	ы	1	Page	Ų

Schedule A (Form 990 or 990-EZ) 2017	AMERICAN	ACADEMY	OF	ADVERTISING

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or			
1 Check here if the organization satisfied the Integral Part Test as a qualifying			
See instructions. All other Type III non-functionally integrated supporting o	rgar	izations must complete S	Sections A through E
Section 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		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)		·	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	<u></u>	
e 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		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount	<u></u>		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	40	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	4	
7 Check here if the current year is the organization's first as a non-functional instructions)	ly in	tegrated Type III support	ing organization (see

d

b Excess from 2014 Excess from 2015 Excess from 2016

Excess from 2017

Schedule A (F Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 1 Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11 lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1	c, Part IV, Section B, es 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 Pa	art V, Section E,
	lines 2, 5, and 6. Also complete this part for 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.

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

Open to Public

OMB No 1545-0047

Inspection

Employer identification number

38-2239287

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, **ջ** □ (h) Purpose of grant or assistance □ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of noncash assistance Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (c) IRC section (d) Amount of cash (e) Amount of non- (book, FMV appraisal, if anolicable) grant cash assistance other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States General Information on Grants and Assistance the selection criteria used to award the grants or assistance? (p) EIN AMERICAN ACADEMY OF ADVERTISING (a) Name and address of organization or government Part II E (12) Ξ 6 3 ල € 3 ම 8 <u>@</u>

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

7

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

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

Schedule I (Form 990) (2017)

Schedule I (Form 990) (2017) AMERICAN ACADEMY OF ADVERTISING

Page 2

Page 2

Page 2

Page 2

Page 1

Page 1

Page 1

Page 1

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance recipients	(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 Reasearch	9	14,340.			
2					
3					
4					
5					
9			ji		
7					
art IV Supplemental Information.	rovide the informatic	on required in Part	I, line 2, Part III, o	Provide the information required in Part I, line 2, Part III, column (b); and any other additional information.	dditional information.
UYA					Schedule I (Form 990) (2017)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest Information.

2017
Open to Public Inspection

Name of the organization Employer identification number AMERICAN ACADEMY OF ADVERTISING 38-2239287 Sec B Line 11b The tax return is initially reviewed by the Executive Director. After the final return is available, _____ it is submitted to the President and Treasurer for review and sigature. Sec B Line 12c The written conflict of interest policy is discussed at the Annual Members' meeting. Sec C Line 19 The Constitution of the Organization is posted on the website. All other information, including the Conflict of Interest and financial data are available upon request. Part 1, Line 1 The AAA is made up of Scholars, Professors & Students in the field of Advertising. The AAA pulishes the Journal of Advertising and holds conferences to report the results of research studies & offer a forum for the exchange of ideas Part III, Line 1 The Academy fosters research that is relevant to the field and provides a forum for the exchange of ideas among its academic and professional members. Through the Journal of Advertising, the Journal of Interactive Advertising and the Annual Conference Proceedings, the Academy disseminates research findings and scholarly contributions to advertising.

Name of the organization	Employer Identification number
AMERICAN ACADEMY OF ADVERTISING	38-2239287
Part VI Line 19	
Available upon request	
valiable upon request	
	·

Schedule O (Form 990 or 990-EZ) (2017)

UYA