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Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

2017Open to Public
InspectionDepartment 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/Form990EZ for instructions and the latest information.**A** For the 2017 calendar year, or tax year beginning , and ending**B** Check if applicable

- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organizationNEBRASKA AVIATION TRADES ASSOC.
c/o JUDY MCDOWELL

Number and street (or P O box, if mail is not delivered to street address)

192 WEST LAKESHORE DRIVE

Room/suite

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

LINCOLN

NE 68528

06

D Employer identification number

47-0555338

E Telephone number

402-475-6282

F Group Exemption
Number ▶**G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶ www.gonata.net**H** Check ☒ if the organization is not
required to attach Schedule B
(Form 990, 990-EZ, or 990-PF)**J** Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c)(6) (insert no) ☐ 4947(a)(1) or ☐ 527**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other**L** Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ

▶ \$ 128,238

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

☒

		1	2	3	4	5a	5b	5c	6a	6b	6c	6d	7a	7b	7c	8	9	10	11	12	13	14	15	16	17	18	19	20	21			
Revenue	1	Contributions, gifts, grants, and similar amounts received															1															
	2	Program service revenue including government fees and contracts															2	84,536														
	3	Membership dues and assessments															3	31,024														
	4	Investment income															4	1,276														
	5a	Gross amount from sale of assets other than inventory															5a															
	b	Less cost or other basis and sales expenses															5b															
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)															5c															
	6	Gaming and fundraising events																														
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)															6a															
	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)															6b															
c	Less direct expenses from gaming and fundraising events															6c																
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)															6d																
7a	Gross sales of inventory, less returns and allowances															7a																
b	Less cost of goods sold															7b																
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)															7c																
8	Other revenue (describe in Schedule O)															8	11,402															
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8															9	128,238															
Expenses	10	Grants and similar amounts paid (list in Schedule O)															10	1,500														
	11	Benefits paid to or for members															11															
	12	Salaries, other compensation, and employee benefits															12															
	13	Professional fees and other payments to independent contractors															13	8,350														
	14	Occupancy, rent, utilities, and maintenance															14															
	15	Printing, publications, postage, and shipping															15	2,166														
	16	Other expenses (describe in Schedule O)															16	98,828														
	17	Total expenses. Add lines 10 through 16															17	110,844														
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)															18	17,394														
	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)															19	213,358														
	20	Other changes in net assets or fund balances (explain in Schedule O)															20															
	21	Net assets or fund balances at end of year. Combine lines 18 through 20															21	230,752														

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2017)

Part II Balance Sheets (see the instructions for Part II)Check if the organization used Schedule O to respond to any question in this Part II ☒

	(A) Beginning of year		(B) End of year
22 Cash, savings, and investments	259,796	22	279,489
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	2,337	24	2,222
25 Total assets	262,133	25	281,711
26 Total liabilities (describe in Schedule O)	48,775	26	50,959
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	213,358	27	230,752

Part III Statement of Program Service Accomplishments (see the instructions for Part III)Check if the organization used Schedule O to respond to any question in this Part III ☒

What is the organization's primary exempt purpose?

AVIATION TRADE ASSOCIATION

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others.)

28 See Schedule O

(Grants \$) If this amount includes foreign grants, check here ☐ 28a

29

(Grants \$) If this amount includes foreign grants, check here ☐ 29a

30

(Grants \$) If this amount includes foreign grants, check here ☐ 30a

31 Other program services (describe in Schedule O)

(Grants \$) If this amount includes foreign grants, check here ☐ 31a32 Total program service expenses (add lines 28a through 31a) ☐ 32**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated — see the instructions for Part IV)Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
JUDITH MCDOWELL EXECUTIVE DIRECTOR	26.00	28,000	0	0
LUKE JOHNSON PRESIDENT	12.00	0	0	0
ALLISON DONNER VICE PRESIDENT	1.00	0	0	0
BRENT VOGT SECRETARY	1.00	0	0	0
SCOTT DELONG TREASURER	5.00	0	0	0
MIKE CAVANAUGH REGISTERED AGENT	1.00	0	0	0
TOM MAY NAAA REPRESENTATIVE	5.00	0	0	0
ALAN CORR EDUCATION DIRECTOR	10.00	0	0	0
DENISE BALL ALLIED REPRESENT.	1.00	0	0	0
JARED GILLMORE ALT. ALL. REPRESENT.	1.00	0	0	0
CASEY WILLIAMS DIRECTOR	1.00	0	0	0
RICK BOARDMAN DIRECTOR	1.00	0	0	0

Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year	
22 Cash, savings, and investments	0	22	
23 Land and buildings	0	23	
24 Other assets (describe in Schedule O)	0	24	
25 Total assets	0	25	0
26 Total liabilities (describe in Schedule O)	0	26	0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	0	27	0

Part III **Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose?

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

(Required for section 501(c)(3) and 501(c)(4) organizations, optional for others.)

28		
(Grants \$) If this amount includes foreign grants, check here	▶ ☐	28a
29		
(Grants \$) If this amount includes foreign grants, check here	▶ ☐	29a
30		
(Grants \$) If this amount includes foreign grants, check here	▶ ☐	30a
31 Other program services (describe in Schedule O)		
(Grants \$) If this amount includes foreign grants, check here	▶ ☐	31a
32 Total program service expenses (add lines 28a through 31a)	▶	32

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated — see the instructions for Part IV)	
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Check if the organization used Schedule O to respond to any question in this Part IV ☐

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
CHAD WALVOORD DIRECTOR	1.00	0	0	0
CHAD HENDRICKS DIRECTOR	1.00	0	0	0
TONY SCHMID DIRECTOR	1.00	0	0	0
JARED STORM DIRECTOR	1.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V ☐

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		X
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		X
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	X	
35b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	X	
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	X	
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a		
37b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		X
38b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations Enter		
39a Initiation fees and capital contributions included on line 9 39a		
39b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 40a		
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Enter amount of tax on line 40c reimbursed by the organization		
40e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		X
41 List the states with which a copy of this return is filed None		
42a The organization's books are in care of JUDY MCDOWELL Telephone no 402-475-6282 192 W LAKESHORE DR Located at LINCOLN NE ZIP + 4 68528		
42b 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)? If "Yes," enter the name of the foreign country 42b		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)		
42c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country 42c		X
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		X
44c Did the organization receive any payments for indoor tanning services during the year?		X
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		X

- 46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

	Yes	No
46		X

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI ☐

- 47** 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
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E
- 49a** Did the organization make any transfers to an exempt non-charitable related organization?
- b** If "Yes," was the related organization a section 527 organization?
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

	Yes	No
47		
48		
49a		
49b		

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

f Total number of other employees paid over \$100,000 ▶

- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None"

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

d Total number of other independent contractors each receiving over \$100,000 ▶

- 52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A ▶ ☐ Yes ☐ No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here 5-8-18
 Signature of officer Date
JUDITH MCDOWELL **EXECUTIVE DIRECTOR**
 Type or print name and title

Paid Preparer Use Only

Pnnr/Type preparer's name THOMAS E. GRAFTON	Preparer's signature 	Date 05/07/18	Check ☐ if self-employed	PTIN P00282660
Firm's name ▶ GRAFTON & ASSOCIATES, P.C.	Firm's EIN ▶ 82-3725220			
Firm's address ▶ 5935 S. 56TH ST., SUITE A LINCOLN, NE 68516	Phone no 402-486-3600			

May the IRS discuss this return with the preparer shown above? See instructions ▶ ☐ Yes ☐ No

SCHEDULE C
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Political Campaign and Lobbying Activities****For Organizations Exempt From Income Tax Under section 501(c) and section 527**

OMB No 1545-0047

2017**Open to Public
Inspection**▶ **Complete if the organization is described below.**▶ **Attach to Form 990 or Form 990-EZ.**▶ **Go to www.irs.gov/Form990 for instructions and the latest information.****If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then**

- Section 501(c)(3) organizations Complete Parts I-A and B. Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of organization **NEBRASKA AVIATION TRADES ASSOC.**
c/o JUDY MCDOWELLEmployer identification number
47-0555338**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If "Yes," describe in Part IV

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file Form 1120-POL for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2017

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

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

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	32,085
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	7,500
b Carryover from last year	2b	3,382
c Total	2c	10,882
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	9,626
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	1,256
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information.

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.

OMB No 1545-0047

2017**Open to Public
Inspection**Name of the organization **NEBRASKA AVIATION TRADES ASSOC.**
c/o JUDY MCDOWELLEmployer identification number
47-0555338**Form 990-EZ, Part I, Line 8 - Other Revenue**

Description	Amount
NEWSLETTER ADVERTISING	\$ 5,415
DIRECTORY ADVERTISING	\$ 3,186
FUEL REBATE	\$ 2,354
MISCELLANEOUS	\$ 447
Total	\$ 11,402

Form 990-EZ, Part I, Line 16 - Other Expenses

Description	Amount
DIRECTORY ADVERTISING	
DIRECT - CONTRACT SERVICE	\$ 1,635
DIRECT - PRINT & PUBLISHI	\$ 595
Readership Costs	\$ 7,999
NEWSLETTER ADVERTISING	
DIRECT - CONTRACT SERVICE	\$ 1,512
DIRECT - PUBLISHING	\$ 3
Readership Costs	\$ 7,500
Expenses	
OFFICE	\$ 3,969
WEBSITE	\$ 4,500
MEETINGS & CONVENTIONS	\$ 27,755
NAA MEETINGS	\$ 7,913
INSURANCE	\$ 575
OPERATION SAFE	\$ 3,028

Name of the organization

Employer identification number

NEBRASKA AVIATION TRADES ASSOC.

47-0555338

BOARD EXPENSES	\$	364
DUES	\$	840
MISCELLANEOUS	\$	776
NAAREF	\$	11,170
CONTRACT LABOR	\$	24,853
LESS: READERSHIP COSTS	\$	-15,499
SPECIAL PROJECTS	\$	5,305
NWSC EXPENSE	\$	3,920
Non-investment Depreciation	\$	115
Total	\$	98,828

Form 990-EZ, Part II, Line 24 - Other Assets

Description	Beg. of Year	End of Year
LAND, BUILDINGS, EQUIPMENT	\$ 27,182	\$ 23,803
Less Accumulated Depreciation	\$ 24,845	\$ 21,581
Total	\$ 2,337	\$ 2,222

Form 990-EZ, Part II, Line 26 - Other Liabilities

Description	Beg. of Year	End of Year
UNEARNED REVENUE	\$ 48,775	\$ 50,959

Form 990-EZ, Part III, Line 28 - First Accomplishment

TO COORDINATE AND GENERALLY DIRECT THE EFFORTS OF AVIATION BUSINESS
 COMPRISED OF THOSE GENERALLY KNOWN IN AVIATION AS FIXED BASE OPERATORS AND
 AS AGRICULTURAL AVIATION OPERATORS, AND FOR THE MUTUAL BENEFIT DERIVED
 THEREFROM FOR ALL OF ITS MEMBERS.