Department of the Treasury

Internal Revenue Service

# 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)

▶ 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.

OMB No 1545-1150

2017

Open to Public Inspection

7	A F	or the	2017 calendar year, or tax year	r beginning	July 1	, 2017, a	nd ending	Jui	ne 30	, 20	18
Ī	B C	heck if ap	olicable C Name of organiza	tion				D Employ	er identification i	numbe	r
[	_ A	ddress c	dress change Alabama Association of Insurance and Financial Advisors				63-0383099				
j [	□ N										
	_] Ir	nitial retur	P.O. Box 43067					Į.	205-568-5610	)	
ļ	= -		City or town, state or	r province, country, and ZIP	or foreign postal code		۸/	F Group	Exemption		
L	==	mended : pplication	eturn		• ,		06	Numb			
Ļ				ccrual Other (specify)	<u> </u>	_			✓ If the organi	zation	us not
ì		ebsite	<b>-</b>	cordar outer (opcomy)	·		<del></del>  "		n the organi o attach Schedu		13 1100
			pt status (check only one) - 5	01/0/2)	) 4 (neart no.) 1 404	7/2\/1\ or		-	), 990-EZ, or 990		
-		_				Other		(1 01111 000	, 000 <u>L</u> E, <u>0</u> , 00	,	
			organization			_	ore or if tota	al accete			
			mn (B) below) are \$500,000 or r			,000 01 111	ore, or ir tota	11 assets •			
, I	•					Dalamaa	- (a a a +la a	imaturat	S Dort		<u> 259.83</u>
	۲٤	art I	Revenue, Expenses, a								
J.			Check if the organization						<u> </u>		
$\mathcal{U}$	'	1	Contributions, gifts, grants,					_	1		<u>62,517</u>
		2	Program service revenue inc					· · · · -	2		0
		3	Membership dues and asse						3		400
		4	Investment income						4		3,922
		5a	Gross amount from sale of a	assets other than inve	entory	5a		0			
		b	Less: cost or other basis an	d sales expenses .		5b	_	0	ti litico		
		С	Gain or (loss) from sale of as		ntory (Subtract line 5t	b from lin	ne 5a)		5c		0
		6 Gaming and fundraising events						any			
		а	Gross income from gamil	ng (attach Schedule	e G if greater than	١ <sub>.</sub> .					
_	ğ		\$15,000)			6a		0			
SI07 , T	CHNN Revenue	b	Gross income from fundrais				contributio	ns 🏻			
ק ל	<b>@</b>		from fundraising events rep	orted on line 1) (atta-	ch Schedule G if the	•					
-	2		sum of such gross income a	and contributions exc	eeds \$15,000) .   .	6b		o			
<b></b>	Z	С	Less direct expenses from	gamıng and fundraisii	ng events	6c		0			
۲		d	Net income or (loss) from g	gaming and fundraisi	ng events (add lines	6a and	6b and su	btract	<i>(</i> • • • • • • • • • • • • • • • • • • •		
<b>うもし</b> 鳴 ひにし	l		line 6c)					. 7	6d		0
₹	7	7a	Gross sales of inventory, les	s returns and allowar	nces	7a		o 🎚			
⊋	E E	j b				7b		0			
<b>U</b>	-		Gross profit or (loss) from sa			e 7a) .			7c		0
Ú	ਦ		Other revenue (describe in S	•					8	-	15,421
J	7	3 9	Total revenue. Add lines 1,					_	9		82,260
<b>1</b>	ਰੋ	3 3 3 30	Grants and similar amounts						10		6,000
V		11	Benefits paid to or for memi				RES	🗀	11		0
₹ 3	اي	12	Salaries, other compensation	n. and employee ben	efits	114 001 180 - 18			12	-	17,579
	se	13	Professional fees and other	payments to indepen	dent contractors				13		0
	ě	14	Occupancy, rent, utilities, ar						14		
	ŭ∣	15	Printing publications posta	ige and shipping	· · · · · · · · · · · · · · · · · · ·	g. <b>g</b> . 2013			15		887
7	_	16	Other expenses (describe in	. Schedule (1)		•		· · ·	16		45,53 <u>1</u>
~		17	Total expenses Add lines:	10 through 16	ÖĞDE	N, UTA	H	· •	17		69, <u>997</u>
<i>/</i>	$\dashv$	18	Printing, publications, posta Other expenses (describe in Total expenses. Add lines Excess or (deficit) for the ye	ar (Subtract line 17 fr	om line 9)	· · ·	· · · ·		18		12,263
7	ets	19	Net assets or fund balance	s at beginning of ver	ar (from line 27, colu	 ımn (A)) (	 (must agre	e with			. 2,203
11	SS		end-of-year figure reported						19	2-	71,684
	Ĭ,	20	Other changes in net assets						20		
2	Ž	21	Net assets or fund balances			 20			21		<u>10,889</u> 82.573
		Z I	DEL GOSELO UL TUTTO DATATICES	acena oi veal, comi	JILE BILES TO UTIVICULE	<b>2</b> U		1			az.a/ \$

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990-EZ** (2017)

Cat No 10642I

Par						
	Check if the organization used Schedule	e O to respond to a	iny question in this		<u> </u>	_ <u></u> . 🗆
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			371,684	22	382,573
23	Land and buildings		[		23	
24	Other assets (describe in Schedule O)		[	0	24	
25	Total assets		[	371,684	25	382,57
26	Total liabilities (describe in Schedule O) .		[	391	26	39
27	Net assets or fund balances (line 27 of column	n (B) <b>must</b> agree wit	th line 21)	371,294	27	382,183
Part	III Statement of Program Service Accom	n <mark>plishments</mark> (see t	he instructions for	Part III)		
	Check if the organization used Schedule	e O to resp <u>ond</u> to a	iny question in this	Part III		Expenses
What	is the organization's primary exempt purpose?					uired for section c)(3) and 501(c)(4)
Desc	ribe the organization's program service accompl	lishments for each o	of its three largest in	program services.		nizations, optional for
as m	easured by expenses. In a clear and concise n	manner, describe th	e services provide	d, the number of	othe	<i>'s</i> )
perso	ons benefited, and other relevant information for e	ach program title.	<u> </u>			
28						
	(Grants \$ ) If this amount	t includes foreign gr	ants, check here .	<u> ▶ □</u>	28a	
29			•••••			
	(Grants \$ ) If this amount	t includes foreign gr	ants, check here .	<u></u> ▶ 🔲	29a	
30						
	(Grants \$ ) If this amount				30a	
31	Other program services (describe in Schedule O)					
		t includes foreign gr			31a	
32	Total program service expenses (add lines 28a				32	
Part						
	Check if the organization used Schedule	e O to respond to a			·, ·	<u> </u>
		(b) Average	(c) Reportable compensation	(d) Health benefits, contributions to employe	e (e) F	-stimated amount of
	(a) Name and title	hours per week devoted to position	(Forms W-2/1099-MISC	benefit plans, and	ot	her compensation
			(if not paid, enter -0-)	deferred compensation		
Matth	ew Wilson					
Presi		2	o		<u> </u>	0
David	Cranfield					
Past-	President	1	0	<u> </u>	)	0
John	W. Stubbs					
<u>Fırst</u>	Vice-President	1	0		<u> </u>	0
	el Duffey					
Seco	nd Vice President	11	0		<u> </u>	0
Greg	D. Turner					
Natio	nal Committeeperson	11	0		<u> </u>	0
	Bryant				ľ	
Exec	utive Director	25	18,000		<u> </u>	0
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		-				
			<u> </u>			
			<del> </del>			
					1	
		<b>_</b>			<u> </u>	
	•	_1	•		1	
	•	{				
		i	i	i		

Part	Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			L.
	, instructions for Part v.) Check if the organization used Schedule O to respond to any question in this	Pari		<u> </u>
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	33	Yes	No
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)	34		./
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)?	35a		_ <u>▼</u>
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		1
С	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	35c		<b>\</b>
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	36		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 8,750			NA.
Ь	Did the organization file Form 1120-POL for this year?	37b		✓
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?	38a		<b>√</b>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:	776		5.4
a	Initiation fees and capital contributions included on line 9			
b 40-	Gross receipts, included on line 9, for public use of club facilities	200		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶			
_ <b>b</b>	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	40b		
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed	<b>400</b>		4//577477
C	on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		1	
е	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	40e		<b>√</b>
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ► Sallie Bryant  Telephone no. ► 2	05-68	8-5610	)
		35243	-4202	
b	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	Yes	No 🗸
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Lin
С	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		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year		. I	► □
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	Yes	No ✓
þ	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		<b>√</b>
С	Did the organization receive any payments for indoor tanning services during the year?	44c		<b>√</b>
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	44d		#####################################
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		_ <
b	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)	45h		

									Tes	NO
46	,Did tl	ne organization engage, directly or in	idirectly, in political c	ampaign activities	on behalf	of or in op	positio	on 🔭		_
		ndidates for public office? If "Yes," of		, Part I	• • •		<u>·</u>	46	; <u>√</u>	<u>'</u>
Part \		Section 501(c)(3) organizations		otions 17, 10h or	. d E0	ما مصممام	ta tha	+= = ==	Anu lin	
		All section 501(c)(3) organization 50 and 51.	s must answer que	suons 47–49b ar	iu 52, an	a comple	te trie	lables	tor lin	es
		Check if the organization used Sch	nedule O to respond	I to any question i	n this Par	t \/I				
		Check if the organization used con	reduic o to respond	to any question	11 (1113 1 (1	· · · ·	<u> </u>	<u> </u>	Yes	No
47	Did t	he organization engage in lobbying	activities or have a	section 501(h) elec	ction in ef	ect during	the ta	ax 🗍		1
	year?	If "Yes," complete Schedule C, Part	described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . 48 y transfers to an exempt non-charitable related organization?							
48	Is the	organization a school as described in	section 170(b)(1)(A)(i	i)? If "Yes," comple	te Schedu	le E .		48	3	
		=	,	_	anızatıon?					<u> </u>
										<u> </u>
50	emnl	ovees) who each received more than	\$100,000 of compen	sated employees (	otner tnan ganization	Officers, C	IIrectoi	rs, trust: " enter "	ees, an 'None "	ia key
	CITIPI	Sycco, who each received more than						CITICI	110110	
	(a)	Name and title of each employee	(b) Average hours per week	(c) Reportable compensation	contribu	itions to emp	loyee			
			devoted to position	(Forms W-2/1099-MIS		olans, and de ompensation	ierrea	other CC	ompensat	uon
							$\neg$			
			<del> </del>							
					_					
f	Total	number of other employees paid over	er \$100,000	. ▶	•		-			
		plete this table for the organization's			ent contra	ctors who	each	receive	d more	thar
	\$100,	000 of compensation from the orga	nization. If there is no	one, enter "None."		T ·				•
	(a)	Name and business address of each independ	ent contractor	(b) Type of	service		(c) (	Compensa	ition	
						_   _				-
••										
					-					
	·									
		<del></del>								
			•••							
d	Total	number of other independent contra	ctors each receiving	over \$100.000	. •					
		he organization complete Schedu	•		ganization	s must a	ttach	а	<del></del>	_
		leted Schedule A			•			► ☐ Ye	s 🗌 t	No
		of perjury, I declare that I have examined this re					my kno	wledge ar	nd belief,	ıt ıs
true, corr	ect, and	d complete Declaration of preparer (other than	officer) is based on all info	rmation of which prepai	er has any ki	<del>-</del> -	<u> </u>	_		
Sian		Signature of officer				1 V - [ VV	3/10	1		
Sign Here		Sallie Propert Executive Director				Date <b>V</b>	,			
1616		Sallie Bryant, Executive Director Type or print name and title								
Da!=!		Print/Type preparer's name	Preparer's signature		Date			PTIN		
Paid Prepa	ror	CANE Expense a value					ck 🔲 ı employe			
Prepa Use C		Firm's name				Fırm's EIN				
	, iiiy	Firm's address ▶		· · ·		Phone no				
May the	e IRS	discuss this return with the preparer	shown above? See i	nstructions			. •	□ Ye	s 🗔	Vo.

### **SCHEDULE C** (Form 990 or 990-EZ)

## **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

Department of the Treasury Internal Revenue Service

► 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

coperate mondonome, a	1011			
ion 501(c)(4), (5), or (6) orga	inizations Complete Part III			
organization	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Employer ider	ntification number
				63-0383099
A Complete if the	e organization is exempt und	er section 501(d	c) or is a section 527	organization.
		direct political ca	mpaign activities in Part	IV. (see instructions for
olunteer hours for politic	cal campaign activities (see instruc	tions)		
inter the amount of any of the organization incurred vas a correction made?  "Yes," describe in Part  Complete if the inter the amount directly ctivities	excise tax incurred by the organization and a section 4955 tax, did it file Form.  IV.  e organization is exempt under the expended by the filing organization is exempt under the expended by the filing organization is funds contributives.  expenditures. Add lines 1 and 2.  In file Form 1120-POL for this year the expenditure is and employer identification numbers. For each organization listed, contributions received that were producted.	er section 501(cation for section of this year section 501(cation for section	n 4955	Yes No Yes No Yes No Yes No  (c)(3).  Yes V No zations to which the filing ization's funds. Also enter political organization, such
(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-
		<u> </u>		
	Association of Insurance A Complete if the Provide a description of refinition of "political campaign activity Political campaign activity Pol	Complete if the organization is exempt under incomplete if the organization is exempt under incomplete if the organization is exempt under incomplete in the organization is direct and incomplete incomplete in the organization is exempt under the incomplete if the organization is exempt under the amount of any excise tax incurred by the organization in the organization incurred a section 4955 tax, did it file Forwas a correction made?  "Yes," describe in Part IV.  Complete if the organization is exempt under the amount directly expended by the filing organization inter the amount directly expended by the filing organization inter the amount of the filing organization's funds contributed exempt function activities	Association of Insurance and Financial Advisors  A Complete if the organization is exempt under section 501(a provide a description of the organization's direct and indirect political carbinition of "political campaign activities") solution a comparing activities (see instructions) columner hours for political campaign activities (see instructions).  B Complete if the organization is exempt under section 501(a inter the amount of any excise tax incurred by the organization under section inter the amount of any excise tax incurred by organization managers under the organization incurred a section 4955 tax, did it file Form 4720 for this years a correction made?  "Yes," describe in Part IV.  C Complete if the organization is exempt under section 501(a inter the amount directly expended by the filing organization for section ctivities.  Inter the amount of the filing organization's funds contributed to other organization activities.  Inter the amount of the filing organization's funds contributed to other organization made payments. For each organization number (EIN) of all singularization made payments. For each organization listed, enter the amount he amount of political contributions received that were promptly and directly is a separate segregated fund or a political action committee (PAC). If addition (a) Name (b) Address (c) EIN	Association of Insurance and Financial Advisors  A Complete if the organization is exempt under section 501(c) or is a section 527 or a description of the organization's direct and indirect political campaign activities in Para effinition of "political campaign activities") (olitical campaign activities (see instructions) oblitical campaign activities (see instructions)  B Complete if the organization is exempt under section 501(c)(3).  Inter the amount of any excise tax incurred by the organization under section 4955 . \$ 3 the organization incurred a section 4955 tax, did it file Form 4720 for this year?  Vas a correction made? . "Yes," describe in Part IV.  C Complete if the organization is exempt under section 501(c), except section 501 there is amount of the filing organization is exempt under section 501(c), except section 501 there is a correction made? . "Yes," describe in Part IV.  Complete if the organization is exempt under section 501(c), except section 501 there is a correction made? . "Yes," describe in Part IV.  Complete if the organization is exempt under section 501(c), except section 501 there is a correction made? . "Yes," describe in Part IV.  Complete if the organization is exempt under section 501(c), except section 501 there is a correction made? . "Yes," describe in Part IV.  Complete if the organization is exempt under section 501(c), except section 501 there is a section 501 the organization for section 501 there is a section 501 the organization for section 501 there is a section 501 the organization for section 501 there is a section 501 there is a section 501 the organization file Form 1120-POL for this year?  Inter the amount of political contributions received that were promptly and directly delivered to a separate para section made payments. For each organization listed, enter the amount paid from the filing organization is section 502 for mile form the filing organization is funds if none, enter organization is funds. If none, enter organization is funds. If none, enter organizat

							, age <b>=</b>		
Par	t II-A	Complete if the organizat section 501(h)).	ion is exempt ι	ınder section 50	01(c)(3) and file	d Form 5768 (ele	ection under		
A	Check ► ☐ If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
ВС	Check >	I if the filing organization che	cked box A and "	filmited control" pr	ovisions apply.				
		Limits on Lo	bbying Expendite	ures		(a) Filing organization's totals	(b) Affiliated		
	(The term "expenditures" means amounts paid or incurred.)						group totals		
1a	Total lo	obbying expenditures to influen	ce public opinion	(grass roots lobby	ring)				
b	Total lo	obbying expenditures to influen	ce a legislative bo	dy (direct lobbying	g)				
C	Total lo	bbying expenditures (add lines	1a and 1b) .						
d		exempt purpose expenditures							
е	Total e	xempt purpose expenditures (a	dd lines 1c and 1	d)					
f	Lobbyi columr	ng nontaxable amount. Ente ns	r the amount fr	om the following	table in both				
	If the an	nount on line 1e, column (a) or (b)	ıs: The lobbying	nontaxable amoun	t is:		(数据 <b>以</b> 2/10/10/10/10		
	Not over	r \$500,000	20% of the am	ount on line 1e					
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000		The state of the s		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	\$175,000 plus 10% of the excess over \$1,000,000			ing a state of the		
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or					
		7,000,000	\$1,000,000	. <u> </u>		tillities of the Same of a Millerton Sur	and the second		
g	· · · · · · · · · · · · · · · · · · ·								
h		ct line 1g from line 1a. If zero o	•						
i		ct line 1f from line 1c. If zero or	,				· <del></del>		
j		e is an amount other than ze			•		¬v □ м		
	reportii	ng section 4911 tax for this yea			· · · · · ·		Yes No		
· -	(Som	e organizations that made a s	section 501(h) ele	Period Under sec ection do not have uctions for lines	e to complete all	of the five colum	ns below.		
		Lobbyi	ng Expenditures	During 4-Year Av	veraging Period				
	Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	( <b>c)</b> 2016	(d) 2017	(e) Total		
2a	Lobbyı	ng nontaxable amount							
b	_	ng ceiling amount of line 2a, column (e))	The second secon	Levins at 18 Sho					
C	Total Ic	obbying expenditures							
d	Grassr	oots nontaxable amount							
е		oots ceiling amount of line 2d, column (e))							
f	Grassro	oots lobbying expenditures							

or e	(election under section 501(h)). each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed		a)		(b)	
	iption of the lobbying activity.	Yes	No	Aı	noun	t
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:					
а	Volunteers?			· 管理	- ;	- 5,00
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1,54f24 1548-5	,	
С	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	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	in the state of th	in Man			
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					
С	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) 501(c)(6).	;)(5),	or se	ction		
	30 I(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		17
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	1	<del>                                     </del>
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					1
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," Canswered "Yes."		Part		line	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	s of				
а	Current year	•	2a			
b	Carryover from last year	•	2b			
С	Total	•	2c	_		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying				
-	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)	•	5		_	
Part						
	le the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Par	t II-A, II	nes 1	I and
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chedule C (Form 990 or 990-EZ) 2017 Page 4							
Part IV	Supplemental Information (continued)						
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### SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization		Employer identification number
Alabama Association of Insurance and Financial Advi	sors	63-0383099
Part I - Revenue #8 Other Expenses		
Dissolved local affiliate deposits- Coffee County/ Gen	eva - \$1,153 16	
Dissolved local affiliate deposits- Tuscaloosa	\$14,268 07	
Total Dissolved local affiliate deposits	\$15,421 23	
Part I Expenses #16 Other Expenses		
Awards to members	\$1,275 82	
Casualty/ liability insurance	\$1,788 00	
Miscellaneous	\$ 917 41	
Office Supplies	\$ 905 19	
Annual Conference Expenses -		
Speakers	\$3,178 18	
Meeting space and meals	\$13,676 90	
Other	\$ 979 67	
National Conference Expenses-		
Registration fees	\$ 150 00	
Member travel	\$3,669 62	
Staff travel	\$1,844 54	
Board Meeting expense	\$ 234 24	
Continuing Education fees	\$ 881 10	
Storage rental	\$ 665 00	
District meeting expenses-		
Speakers	\$5,577 34	
Meeting rooms/meals	\$1,338 90	
Website	\$3,795 65	
Member travel- National Congressional Conference	\$3,307 52	
Young Advisor meeting	\$ 250 00	

Schedule O (Form 990 or 990-EZ) (2017)				Page 2
Name of the organization	•	_		Employer identification number
Alabama Association of Insurance and Fina	ancial Advisors			63-0383099
Part I - Expenses- #16 Other Expenses (con	ntınued)			
Charitable donations	\$ 75 00			
Bank fees	\$ 16 57			
Lobbyist registration fee	\$ 104 00	••••		
Telephone	\$ 900 44			
Total Other Expenses	\$45,531 09			
Part III - The organization's primary exemp	t purpose is to cond	uct educational seminars	s and classes for n	nembers
		•••••		
		•••••		
	······	••••		
	••••••			