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Form 990 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/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2018 calendar year, or tax year beginning , 2018, and ending , 20

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/terminated
- ☐ Amended return
- ☐ Application pending

C Name of organization: Arkansas Archeological Society

Doing business as:

Number and street (or P O box if mail is not delivered to street address): 2475 N Hatch Ave

Room/suite:

City or town, state or province, country, and ZIP or foreign postal code: Fayetteville, AR 72704

D Employer identification number: 71-0439179

E Telephone number: 479-575-3557

G Gross receipts $ 270,598.

F Name and address of principal officer: Jannette Akridge

H(a) Is this a group return for subordinates? ☐ Yes ☒ No

H(b) Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ arkarch.org

K Form of organization: ☐ Corporation ☐ Trust ☒ Association ☐ Other ▶

L Year of formation: 1960

M State of legal domicile: Arkansas

03/10

Part I Summary

1 Briefly describe the organization's mission or most significant activities: The society was formed for the purpose of uniting all persons interested in the archeology of Arkansas for the recognition & preservation of our cultural heritage & prehistory and to foster public interest.

2 Check this box ▶ ☒ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	12
4	Number of independent voting members of the governing body (Part VI, line	4	12
5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	500
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 38	7b	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	20,760	220,393
9	Program service revenue (Part VIII, line 2g)	18,973	20,642
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	23,884	28,562
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,000
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	63,517	270,598
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	4,300	4,825
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	43,197	38,688
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	47,497	43,513
19	Revenue less expenses. Subtract line 18 from line 12	16,020	227,085

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	700,123	842,305
21	Total liabilities (Part X, line 26)		
22	Net assets or fund balances. Subtract line 21 from line 20	700,123	842,305

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Part II Signature Block

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		
	Signature of officer	Date: 11/15/19
	Jannette Akridge Type or print name and title	

Paid Preparer Use Only					
	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	Firm's name ▶			Firm's EIN ▶	
	Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☐ No

A

17

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . . ☑

1 Briefly describe the organization's mission:
The society was formed for the purpose of uniting all persons interested in the archeology of Arkansas for the recognition & preservation of our cultural heritage & prehistory and to foster public interest.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 7,686 including grants of $ 288) (Revenue $ 11,613)
Summer Training Program
Each Summer the society volunteers are taught the basic skills they will need during the year for their volunteer activities with professional Archeologists. The volunteers participate in an actual archeological Dig that is run by the Arkansas Archeological Survey (the professional organization supported by the Society volunteers)

4b (Code:) (Expenses $ 13,809 including grants of $) (Revenue $)
Publications
The society publishes an annual Bulletin that provides its membership with Arkansas relevant professional research papers.
The society all publishes a monthly newsletter that provides the membership with details on current volunteer activities and orther programs

4c (Code:) (Expenses $ 6,960 including grants of $ —) (Revenue $ 9,030)
Annual Meeting
The society members get together annually to hear presentations from professionals and amateures on the work accomplished.
The meeting is also where the membership hears from the executive committee and votes on new officers

4d Other program services (Describe in Schedule O.)
(Expenses $ 0 including grants of $ 5010) (Revenue $ 0)

4e Total program service expenses ▶ 33,465