efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Department of the

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.

2018 Open to Public

DLN: 93493197021410 OMB No. 1545-0047

Interna		enue Service							Inspection	
A F	or th	e 2019 c		ning 07-01-2018 , and ending 06-	-30-20	019				
		pplicable:	C Name of organization Association of The United States Arm	ny			D Employ	er identifi	cation number	
☐ Ad ☐ Na		change		•			53-0193	3361		
□ Na		-	Doing business as							
_		n/terminated					E Telephon	o number		
		d return	2425 Wilcon Blvd	ail is not delivered to street address) Room/	/suite					
⊔ Ар	plicati	on pending		the said ZID as foreign as the land	(703) 8	41-4300				
			City or town, state or province, coun Arlington, VA 22201	try, and ZIP or foreign postal code			•		202 252	
			E Name and address of universe	1 - 65:	1		G Gross re		,302,258	
			F Name and address of principa Carter F Ham	officer:	H		a group re	turn for		
			2425 Wilson Blvd		н		linates? subordinat	es	□Yes ☑No	
	x-exel	mpt status:	Arlington, VA 22201		⊢"	` í include	ed?		☐ Yes ☑No	
		·	☑ 501(c)(3) ☐ 501(c)() ◀(insert no.)	⅃ "				instructions)	
J W	ebsit	te:▶ ww	w.ausa.org		""	(C) Group	exemption	number	•	
K Form	n of o	rganization	: 🗹 Corporation 🗌 Trust 🔲 Asso	ciation Other	LY	ear of forma	tion: 1950	M State o	of legal domicile: VA	
	11 01 0	rgamzation	. La corporation La mase La Assor	order P						
Pa	art I		mary							
			scribe the organization's mission or conprofit educational, professional (· most significant activities: development association, provides a vo	oice fo	r the Armv				
Governance	:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	enpromo cuacuman, promosionar	The second secon			·			
na L	-									
Ver	_ `	Charles Hall	:-	continued its operations or disposed of	c	H 250/	-¢:1			
G G				g body (Part VI, line 1a)			or its net a	3 3	30	
≈ 5	4	Number (of independent voting members of	the governing body (Part VI, line 1b)				4	29	
Activities &	1		· -	endar year 2018 (Part V, line 2a)				5	130	
5	6	Total nur	nber of volunteers (estimate if nec	essary)				6	1,298	
Ac	7a	7a Total unrelated business revenue from Part VIII, column (C), line 12								
	Ь	Net unre	lated business taxable income fron	n Form 990-T, line 34				7b		
							r Year		Current Year	
0.	8	Contribut	tions and grants (Part VIII, line 1h)		İ		1,396,8	364	5,245,350	
Ravenue	9	Program	service revenue (Part VIII, line 2g)		İ		11,063,9	963	28,704,184	
ðΛċ	10	Investme	ent income (Part VIII, column (A), li	nes 3, 4, and 7d)	İ		870,8	362	2,224,460	
<u> </u>	11	Other rev	venue (Part VIII, column (A), lines !		701,8	359	547,435			
	12	Total rev	enue—add lines 8 through 11 (mu:	st equal Part VIII, column (A), line 12)	•	14,033,548			36,721,429	
	13	Grants ar	nd similar amounts paid (Part IX, c	olumn (A), lines 1–3)		2,949,8	306	7,540,982		
	14	Benefits	paid to or for members (Part IX, co	lumn (A), line 4)	Ī				0	
88	15	Salaries,	other compensation, employee be	nefits (Part IX, column (A), lines 5-10)) [4,852,3	342	8,886,220	
us(16a	Profession	onal fundraising fees (Part IX, colun	nn (A), line 11e)					0	
Expenses	Ь	Total fund	raising expenses (Part IX, column (D), I	ine 25) ▶46,080						
ū	17	Other ex	penses (Part IX, column (A), lines :	l1a-11d, 11f-24e)			10,601,7	704	20,757,966	
	18	Total exp	enses. Add lines 13–17 (must equ	al Part IX, column (A), line 25)			18,403,8	352	37,185,168	
	19	Revenue	less expenses. Subtract line 18 fro	om line 12			-4,370,3	304	-463,739	
% & € &						Beginning of	of Current Y	ear	End of Year	
alan	20	Total aco	ets (Part X, line 16)		-		86,206,7	71.0	89,380,944	
AB	1		ets (Part X, line 16)		-		20,620,8	-	23,932,607	
Net Assets or Fund Balances	1		ts or fund balances. Subtract line 2				65,585,8		65,448,337	
	rt II		ature Block	11 110111 11111 20 1 1 1 1 1			03,303,0	,,,,,	03,440,337	
				ned this return, including accompanyir	ng sch	edules and	statements	, and to	the best of my	
know any k			f, it is true, correct, and complete.	Declaration of preparer (other than of	fficer)	is based or	all informa	ation of w	hich preparer has	
urry K		L.								
		*****	* ure of officer			2020 Date)-07-15			
Sign		Sigilati	ure or officer			Date				
Here	•		F Ham President & CEO							
			r print name and title	I Duran and a sing t	ls:		1.	TTN.		
			rint/Type preparer's name	Preparer's signature	Date	Chec		PTIN P00444822		
Paid			irm's name TrimnerBeckham PLLC				employed 's EIN ► 84-	2953567		
Pre	-	EI	mm 3 name 🕝 Hilliner Deckildrii PLLC		J LIIN P 04-					
Use	Un	ııy F	irm's address ► 1750 Tysons Blvd Ste 1	500		Phor	ne no. (703)	663-1756		
			McLean, VA 22102420	0						
May t	he IR	S discuss	this return with the preparer show	n above? (see instructions)				✓ Y	es 🗆 No	
			duction Act Notice, see the sep			Cat. No. 1	1282Y		Form 990 (2018)	

	990 (2018)					Page 2						
Pa	Statement	of Program Servi	e Accomplis	hments								
	Check if Sched	dule O contains a resp	onse or note to a	any line in this Part III .		🗹						
1		rganization's mission:										
Ame Mem profe	rica's Army Regular Arr bers. AUSA is a voice f essional education and	my, Army National Gua or all components of A information programs.	ird, US Army Re merica's Army, f Our mission and	serve, Government Civili fostering public support of d purpose is to provide e	nization that represents Ame ans, Private Citizens, Retired of the Army's role in national ducational, literary, and scie nponents of the Armed Force	Military, Veterans, and Family security, and providing ntific programs, foster esprit						
2	-	, ,		vices during the year wh	ich were not listed on							
	'	r 990-EZ?				☐ Yes 🗹 No						
		se new services on Sc										
3	Did the organization cease conducting, or make significant changes in how it conducts, any program											
	services?					. 🗌 Yes 🗹 No						
	If "Yes," describe the											
4	Section 501(c)(3) and		ons are required	to report the amount of	argest program services, as r grants and allocations to oth							
4a	(Code:) (Expenses \$	13,376,688	including grants of \$	00 000) (0							
	See Additional Data	, , ,			80,000) (Revenue \$	23,380,358 }						
					80,000) (Revenue \$	23,380,358)						
4b	(Code:) (Expenses \$	6,894,466	including grants of \$	80,000) (Revenue \$ 6,894,466) (Revenue \$	23,380,358)						
4b	(Code: See Additional Data) (Expenses \$	6,894,466	including grants of \$								
4b 4c	() (Expenses \$) (Expenses \$	6,894,466 6,487,671	including grants of \$ including grants of \$								
	See Additional Data		. ,		6,894,466) (Revenue \$)						
	See Additional Data (Code: See Additional Data Other program service) (Expenses \$	6,487,671 ule O.)	including grants of \$	6,894,466) (Revenue \$ 409,020) (Revenue \$	4,245,822)						
4c	See Additional Data (Code: See Additional Data) (Expenses \$	6,487,671	including grants of \$	6,894,466) (Revenue \$)						

Par	tiv Checklist of Required Schedules			
			Yes	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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
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		No
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	Yes	
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, Part III	5		No
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
8	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II "Did the organization maintain collections of works of art, historical treasures, or other similar assets?	7		No
	If "Yes," complete Schedule D, Part III 📆	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
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	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	-10
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, 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	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
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	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,	22	Yes	

orm 9	990 (2018)			Page 4
Part	Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	Yes	
	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .	31		No
	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	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		
	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		No
	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		No
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	Yes	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			\sqcup

1a

1b

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a.*Enter -0-* if not applicable .

Yes

110

1c

No

No Porm **990** (2018)

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by

9a Did the sponsoring organization make any taxable distributions under section 4966? .

b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities

Gross income from other sources (Do not net amounts due or paid to other sources

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year.

Is the organization licensed to issue qualified health plans in more than one state?

which the organization is licensed to issue qualified health plans

Enter the amount of reserves the organization is required to maintain by the states in

14a Did the organization receive any payments for indoor tanning services during the tax year? .

Initiation fees and capital contributions included on Part VIII, line 12 .

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter:

Section 501(c)(12) organizations. Enter: Gross income from members or shareholders .

Enter the amount of reserves on hand .

If "Yes," complete Form 4720, Schedule O .

against amounts due or received from them.) .

Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O.

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?

.

2b

8

9a

9b

12a

13a

14a

14b

15

Nο

No

Nο

Nο

Nο

No

Nο

Form 990 (2018)

Page 5

	Nicke 76 the same of the end of the most of the end of			_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		l	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
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	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country: ▶OC			
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b		
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	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7 b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			

2a

10a

10b

11a

11b

12b

13b

13c

b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		No
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during			

	990 (2018)			
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No	" respo	onse to i	lines
	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			✓
Se	ction A. Governing Body and Management			
	•		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 30			
	1a 30			
	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.			
L	,			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6	Yes	110
		•	165	
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	Yes	
		124	165	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?			
C		12b	Yes	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in			
12	Schedule O how this was done	12c	Yes	
13	Schedule O how this was done	12c 13	Yes Yes	
14	Schedule O how this was done	12c	Yes	
14 15	Schedule O how this was done	12c 13 14	Yes Yes Yes	
14 15 a	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official	12c 13 14	Yes Yes Yes	
14 15 a	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	12c 13 14	Yes Yes Yes	
14 15 a	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official	12c 13 14	Yes Yes Yes	
14 15 a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	12c 13 14	Yes Yes Yes	No
14 15 a b	Schedule O how this was done	12c 13 14 15a 15b	Yes Yes Yes	No
14 15 a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	12c 13 14 15a 15b	Yes Yes Yes	No
14 15 a b 16a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	12c 13 14 15a 15b	Yes Yes Yes	No
14 15 a b 16a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? Ction C. Disclosure	12c 13 14 15a 15b	Yes Yes Yes	No
14 15 a b 16a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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?	12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	A , MA NV , NY
14 15 a b 16a b	Schedule O how this was done	12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	A , MA NV , NY
14 15 a b 16a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? Ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AK , AL , AR , CA , CO , CT , FL , GA , HI , ,MD , ME , MI , MN , MO , MS , NC , ND , ,OH , OK , OR , PA , RI , SC , TN , TX , UT Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	A , MA NV , NY
14 15 a b 16a b	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? Ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AK , AL , AR , CA , CO , CT , FL , GA , HI , MD , ME , MI , MN , MO , MS , NC , ND , I , OH , OK , OR , PA , RI , SC , TN , TX , UT Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s	12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	A , MA NV , NY
14 15 a b 16a b See 17	Schedule O how this was done Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? Ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AK , AL , AR , CA , CO , CT , FL , GA , HI , ,MD , ME , MI , MN , MO , MS , NC , ND , , OH , OK , OR , PA , RI , SC , TN , TX , UT Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O)	12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	A , MA NV , NY
14 15 a b 16a b See 17	Did the organization have a written whistleblower policy? 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? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 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? Ction C. Disclosure List the States with which a copy of this Form 990 is required to be filed AK , AL , AR , CA , CO , CT , FL , GA , HI , , MD , ME , MI , MN , MO , MS , NC , ND , I , OH , OK , OR , PA , RI , SC , TN , TX , UT Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	12c 13 14 15a 15b 16a 16b	Yes Yes Yes Yes Yes Yes Yes	A , MA NV , NY

Form 990 (2	2018)										Page 7
Part VII	Compensation of Officers and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	e in t	his	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	istees, Key E	mploy	ees,	, an	d F	lighe	st C	Compensated En	nployees	
1a Completo year.	e this table for all persons require	ed to be listed.	Report	comp	ensa	ition	for th	е са	lendar year ending	with or within the o	rganization's tax
	of the organization's current off ation. Enter -0- in columns (D), (als	or organizations), re	gardless of amount	
	of the organization's current key										
who receive	organization's five current highed reportable compensation (Box) and any related organizations.										1
of reportable	of the organization's former office e compensation from the organiz	ation and any r	elated o	rgani	izatio	ons.					
organization	of the organization's former dire , more than \$10,000 of reportab	le compensatio	n from t	he or	ʻgani	izati	on and	any	y related organization	ons.	e
	in the following order: individua d employees; and former such p		ectors;	instit	utior	nal t	rustee	s; of	ficers; key employe	es; highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee.	
(A) Name and Title		(B) Average hours per week (list any hours for related	than o	ne b	ox, u in off tor/t	t che inles ficer rust	and a	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Addition	al Data Table										

Form	990 (2018)													Page 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)														
	(A) Name and Title	(B) Average hours per week (list any hours	than c is b	ne b	οχ, ι n of	t che inles ficer	and a	son	Rep comp fro organi:	(D) portable pensation om the zation (W-	(E) Reportable compensation from related organizations (w-	(F) Estimated amount of other compensation from the	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	2/109	99-MISC)	MISC) 2/1099-MISC)		organization an related organizations	
See A	Additional Data Table						<u> </u>							
	ub-Total				•	<u> </u>	•	ļ			1			
	otal from continuation sheets to Pa otal (add lines 1b and 1c)	•					▶		3,	,244,819				257,966
2	Total number of individuals (including of reportable compensation from the			e liste	ed al	bov€	e) who	rece	eived mo	ore than \$1	00,000			
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k	ey e	mplo	oyee, (or hi	ghest co	mpensated	l employee on		Yes	No
4	For any individual listed on line 1a, is organization and related organization individual	the sum of repo	ortable (n the	3	Yes	No
5	Did any person listed on line 1a receive services rendered to the organization									ation or ind	ividual for	5	163	No No
Se	ction B. Independent Contract	ors												
1	Complete this table for your five higher from the organization. Report comper											mpen	sation	
	Name a	(A) and business addre	ess							Des	(B) cription of services		(C Compen	
Abu D	x 5546									Exhibit Spa	ce		2,	,864,408
AE GES										Exposition	Services			968,767
	x 96174 go, IL 60693									Eyhihit Spo	Ce Ce			853,682
COGES Exhibit Space 65 Rue De Courcelles Paris 75008 FR										033,002				
Cente	•									Annual Mee	ting F&B			790,764
	ivic Center Plaza o, TX 79901 One									Annual Mee	ting AV			475,912
20124	Renard Ct Suite A olis, MD 21401										J			, –
2 T	otal number of independent contractor ompensation from the organization 🕨 :		not lim	ited t	o th	ose	listed	abov	ve) who	received m	ore than \$100,00	00 of		
	-											· ·	Form 99	0 (2018)

Part	VIII	Statement of									
		Check if Schedul	e O contains a	a respo	onse or note to		this Part VIII (A) revenue	R∈ ∈ f	(B) elated or exempt unction	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
	1a	Federated campaig	ns	1a				r	evenue		512 - 514
nts Ints		Membership dues		1 b		_					
Gra not		: Fundraising events		1c	876,39	 92					
₹	,	Related organizatio	ns	1d							
<u>5</u> ia	۱.	Government grants (co	ontributions)	1e		<u> </u>					
ns,	l f	All other contributions,	, gifts, grants,			<u> </u>					
ë S	-	and similar amounts no above		1f	4,368,9	58					
Contributions, Gifts, Grants and Other Similar Amounts	٥	Noncash contributio	ons included	25	<u>,727</u>						
ರ ಕ	ı	1 Total. Add lines 1a-	-1f		>		5,245,350				
a)					Busin	ess Code					
ina	2a	Advertising				541800	· ·	78,004		818,72	1 259,283
Re Š	b	Annual Meetings				900099	, i	70,332	14,870,3		
ce	С	Membership Dues				900099	4,2	45,822	4,245,8	22	
ěrvi	d	Symposia & other meeti	ngs			900099	8,5	10,026	8,510,0	26	
<u>د</u>	6										
Program Service Revenue	f	All other program se	rvice revenue								
ď		Fotal. Add lines 2a-2				28,704,184					
		nvestment income (in			interest and oth	ner		1			
	s	imilar amounts) .				· •	1,209,11				1,209,119
		ncome from investme		mpt b	ond proceeds	<u> </u>		0			255 565
	5 F	Royalties	(i) Real	•	(ii) Persona	<u>▶ </u>	355,56	5			355,565
	6a	Gross rents	(I) Real		(II) Persona	' 					
				21,857	320	,893					
	b	Less: rental expenses	1,2	55,242	372	2,602					
	c	Rental income or	3	66,615	-51	.,709					
	_	(loss)									
	d	Net rental income or				>	314,90	6		-51,709	366,615
	73	Gross amount	(i) Securit	ies	(ii) Other						
	<i>,</i> a	from sales of assets other	12,1	03,058							
		than inventory									
	b	Less: cost or other basis and	11.0	87,717							
		sales expenses	·								
		Gain or (loss) Net gain or (loss)		15,341			1,015,34	1			1,015,341
		Gross income from fu				<u> </u>	1,013,34	1			1,013,541
e le		(not including \$	876,392	of							
enr		contributions reporte See Part IV, line 18			668,	540					
Zev	b	Less: direct expenses		ь	831,	675					
er	C	Net income or (loss)	from fundrais	ing ev	ents	<u></u> -	-163,13	5			-163,135
Other Revenue	9a	Gross income from g See Part IV, line 19		es.							
		See Fait IV, line 19		а							
	b	Less: direct expense:	s	b							
	C	Net income or (loss)	from gaming	activit	ies	<u> </u>		0			
	10a	Gross sales of invent returns and allowand									
		retarns and anowane		a	57,	431					
	b	Less: cost of goods s	sold	b	33,	593					
	С	Net income or (loss)		invent	ory	<u> </u>	23,83	8	23,838		
		Miscellaneous	Revenue		Business Cod						
	11	^a Other Income			90	0099	16,26	1	11,377		4,884
	b										
	С										
		All other revenue						_			
		Total. Add lines 11a			,	<u> </u>	16,26	1			
	12	Total revenue. See	Instructions.		1	•	36,721,42	9	27,661,395	767,012	3,047,672
											Form 990 (2018)

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).									
eci	Check if Schedule O contains a response or note to any	-	·	ete column (A).	🗆				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	7,155,168	7,155,168						
2	Grants and other assistance to domestic individuals. See Part IV, line 22	385,814	385,814						
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0							
4	Benefits paid to or for members	0							
5	Compensation of current officers, directors, trustees, and key employees	2,622,414	1,897,499	724,915					
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	0							
7	Other salaries and wages	4,707,834	4,052,957	654,877					
	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	230,080	186,884	43,196					
9	Other employee benefits	793,900	648,428	145,472					
	Payroll taxes	531,992	432,114	99,878					
	Fees for services (non-employees):								
a	Management	0							
	Legal	41,032		41,032					
	Accounting	98,530		98,530					
	Lobbying	14,427	14,427						
	Professional fundraising services. See Part IV, line 17	0	ŕ						
	Investment management fees	266,688		266,688					
	Other (If line 11g amount exceeds 10% of line 25, column	441,905	207,450	234,455					
٤	(A) amount, list line 11g expenses on Schedule O)	441,505	207,430	234,433					
12	Advertising and promotion	730,918	716,344	1,535	13,039				
13	Office expenses	989,204	630,973	325,190	33,041				
	Information technology	1,563,504	1,426,261	137,243					
	Royalties	0							
	Occupancy	1,114,312	634,029	480,283					
	Travel	1,208,484	1,095,018	113,466					
	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	, ,	,					
19	Conferences, conventions, and meetings	9,708,088	9,708,088						
	Interest	14,244	, ,	14,244					
	Payments to affiliates	2,930,310	2,930,310	,					
	Depreciation, depletion, and amortization	421,008	393,120	27,888					
	Insurance	127,941	53,142	74,799					
	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)	227,75.12	33)2.12	, ,,,,,,,					
	a Printing and Publications	510,016	510,016						
	b Credit Card Fees	223,511	223,511						
	c Taxes	159,218	50	159,168					
	d Dues and Subscriptions	93,100	82,368	10,732					
	e All other expenses	101,526	69,715	31,811					
	Total functional expenses. Add lines 1 through 24e	37,185,168	33,453,686	3,685,402	46,080				
	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.			· ·	·				
	Check here ► ☐ if following SOP 98-2 (ASC 958-720).								

Part II of Schedule L

Notes and loans receivable, net

Prepaid expenses and deferred charges

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties

Organizations that do not follow SFAS 117 (ASC 958), check here \triangleright \square and complete lines 30 through 34.

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Investments-program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Inventories for sale or use .

Less: accumulated depreciation

Intangible assets . . .

Grants payable . .

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Deferred revenue . .

Tax-exempt bond liabilities . .

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

persons. Complete Part II of Schedule L .

Form 990 (2018)

Assets

11

12

13

14

15

16

17

18

19

20

21

Liabilities

Assets or Fund Balan

Net

27

28

29

30

31

32

33

34

Page **11**

565.292

0

0

0

0

629.293

89.380.944

3,357,272

18.295.524

64.958.861

65,448,337

89,380,944

Form **990** (2018)

489,476

694,466

61.310

2.581.539

14,263,748

50,783,972

7

8

9

10c

11

12

13

14

15

16

17

18

19

20

21

22

27

28

29

30

31 32

33

34

61.422

4.235.459

14,233,305

44,514,946

637.687

86.206.719

4,170,678

16.348.804

65,115,703

65,585,866

86,206,719

470,163

Check if Schedule O contains a response or note to any line in this Part IX \cdot			<u> </u>
	(A) Beginning of year		(B) End of year
1 Cash-non-interest-bearing	15,844,300	1	15,855,513
2 Savings and temporary cash investments	4 558 842	7	3 360 781

1	Cash–non-interest-bearing	15,844,300	1	15,855,513
2	Savings and temporary cash investments	4,558,842	2	3,360,781
3	Pledges and grants receivable, net		3	0
4	Accounts receivable, net	1,520,758	4	1,279,496
5	Loans and other receivables from current and former officers, directors,			

29,085,755

14,822,007

4	Accounts receivable, net	1,520,756	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	600,000	5	
6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary organizations (see instructions) Complete		6	

10a

10b

ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.			
	26	Total liabilities. Add lines 17 through 25	20,620,853	26	23,932,607
	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	101,371	25	1,585,345
	24	Unsecured notes and loans payable to unrelated third parties		24	

3a

3h

Nο

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Audit Act and OMB Circular A-133?

Additional Data

Software ID: 18007218

Software Version: 2018v3.1

EIN: 53-0193361

Name: Association of The United States Army

Form 990 (2018)

Form 990, Part III, Line 4a:

AUSA MEETINGS: AUSA hosts many educational and professional development forums throughout the year, including a Breakfast Series with keynotes from senior Army and other government leaders, our day-long Hot Topics for in-depth exploration of Army requirements and challenges, and topical sessions for focused discussion of Army future needs and strategies. In addition, we organize several domestic and international symposia and expositions, including: - AUSA ANNUAL MEETING & EXPOSITION - A Professional Development Forum: Held every October at the Walter E. Washington Convention Center in Washington, DC, the AUSA Annual Meeting & Exposition is the largest land power exposition and professional development forum in North America. This event consists of informative and relevant presentations, panel discussions on pertinent military and national security subjects, workshops and important business meetings. Key leaders from the Army, Department of Defense, Department of Homeland Security and other governmental agencies see this event as a key forum to present information about Army current and future readiness to perform their many missions. In 2018, more than 30,000 people participated in this event, with 650 exhibitors from around the world displaying the latest technologies, products and services. Exhibit space is sold to members of AUSA, with some exceptions. Attendance is free, but restricted to AUSA members and those with an identifiable relationship to our organization, or the United States Army. This includes all military and government personnel.- IDEX (INTERNATIONAL DEFENSE EXHIBITION AND CONFERENCE)- USA Security and Defense Pavilion: Held every other year at the Abu Dhabi National Exhibition Centre (ADNEC) in Abu Dhabi, UAE, IDEX is one of the largest defense expositions in the world. In 2019, 100,000 people participated in this event, including more than 1,000 exhibitors. AUSA is the official agent for the USA Security and Defense Pavilion, which is supported by the U.S. Government, officially certified by the U.S. Department of Commerce and endorsed by the U.S. Department of Defense and American Embassy. AUSA sells exhibit space to interested businesses and manages the program content of the USA Security and Defense Pavilion. In 2019, the pavilion included more than 100 U.S. companies occupying 4,000 square meters of space. - AUSA GLOBAL FORCE SYMPOSIUM & EXPOSITION - A Professional Development Forum: Held each year at the Von Braun Center in Huntsville, Alabama, the AUSA Global Force Symposium is a three-day educational and professional development forum. Exhibit space and sponsorships are sold to members and non-members of AUSA. On average, 6,000 people from around the world participate in this event each year, including key leaders from the Army, DoD, Academia, allied nations, and the worldwide defense industry. - AUSA LANPAC SYMPOSIUM & EXPOSITION - A Professional Development Forum: Held each year at Sheraton Waikiki, in Honolulu, HI, the AUSA LANPAC Symposium is a three-day educational and professional development forum, focusing on the Army mission in the Indo-Pacific region. Exhibit space and sponsorships are sold to members and non-members of AUSA. On average, 1,500 people from around the world participate in this event each year, including key leaders from the Army, DoD, Academia, allied nations, and the worldwide defense industry.

Form 990, Part III, Line 4b: Strategic industry donations represent significant contributions made to promote the mission of the Association, such as the construction of the National Museum of the United States Army and the National Veterans Memorial and Museum

Form 990, Part III, Line 4c:

Membership and regional activities: AUSA EXECUTES MEMBERSHIP SUPPORT AT NATIONAL, REGIONAL, AND LOCAL LEVELS THROUGH DEDICATED, ENGAGED VOLUNTEER ORGANIZATIONS IN 9 REGIONS AND 122 CHAPTERS LOCATED ACROSS THE UNITED STATES AND WHERE SOLDIERS ARE STATIONED AROUND THE WORLD. ADDITIONAL

SUPPORT THE CONCEPTS OF LIFETIME SERVICE AND SOLDIER-FOR-LIFE OUTCOMES THROUGH MEMBERSHIP AND OUTREACH EFFORTS. MEMBERSHIP IS OPEN TO ALL

TO A VERY BUSY AND ENGAGED ARMY. CHAPTERS PROVIDE A SERIES OF YEAR-ROUND EVENTS INCLUDING STAFF RIDES, YOUNG PROFESSIONAL MENTORING AND

COMMUNITIES TO THEIR ARMY AND PROVIDE PROGRAMS THAT LEAD TO BETTER UNDERSTANDING OF THE COMPLEX AND DIFFICULT ISSUES AND CHOICES OUR ARMY

FACES IN DEFENDING OUR NATION. SCHEDULED EVENTS AT THE NATIONAL. REGION. AND LOCAL LEVELS KEEP SOLDIERS AND THOSE WHO SUPPORT THEM CONNECTED

NETWORKING EVENTS, BOOK AND MOVIE REVIEW PROGRAMS HIGHLIGHTING LEADERSHIP ATTRIBUTES, SUBJECTMATTER EXPERT SPEAKERS, PROFESSIONAL DEVELOPMENT SYMPOSIA. FAMILY FORUMS, SOCIAL EVENTS THAT FOSTER ESPRIT AND GOODWILL, AND COMMUNITY PROJECTS THAT TARGET NEEDS AT LOCAL LEVELS. OUR CHAPTERS AND REGIONS ALSO PROMOTE EDUCATION AND RECOGNITION OF EXCELLENCE THROUGH SCHOLARSHIPS, CONTRIBUTIONS, AND AWARDS VALUED AT MORE THAN \$1 MILLION, ANNUALLY. AUSA NATIONAL HEADQUARTERS PROVIDES ANNUAL TRAINING, RESOURCES, AND TOOLS FOR CHAPTER VOLUNTEER LEADERS, A ROBUST MEMBER BENEFITS PROGRAM, SUPPORT TO JUNIOR AND SENIOR RESERVE OFFICER TRAINING CORPS PROGRAMS AT MILITARY AND CIVILIAN UNIVERSITIES, A HIGHLY ACCLAIMED GUIDE FOR SOLDIERS TRANSITIONING OUT OF THE MILITARY, AND SUPPORT TO SOLDIER RETIREMENT AND VETERANS HOMES, WE ALSO ADMINISTER SCHOLARSHIP PROGRAMS AT NATIONAL LEVEL TO ENCOURAGE LIFELONG LEARNING AND KEEPING PACE WITH CHANGING REQUIREMENTS.

VOLUNTEERS ALSO SERVE AS STATE PRESIDENTS TO HELP INTEGRATE EFFORTS ACROSS STATEWIDE PROGRAMS AND WITH ELECTED OFFICIALS, OUR PROGRAMS

WHO SUPPORT OUR MISSION AND VALUES, MEMBERS INCLUDE INDIVIDUALS AND LIFE MEMBERS, INDUSTRY MEMBERS AT NATIONAL AND COMMUNITY LEVELS, AND

OTHER ASSOCIATIONS WITH COMMON GOALS AND OBJECTIVES. WE HELP CONNECT CIVIC LEADERS, ACADEMIA, LARGE AND SMALL BUSINESSES. AND LOCAL

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	arry floars	una	u un	CCCC	,, с	ascec,	,	(14, 2,4,000		1 110111 tile
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Carter F Ham	38.00	Х		х				767,347	0	25,090
President & CEO	0.00									
Phebe N Novakovic	1.00	Х						0	0	0
Chairman	0.00									
Thomas W Rabaut Deputy Chairman	1.00	Х		х				0	0	0
bepacy chairman	0.00		I	ı	ı	1	l	1		I

Х

0

0

0

0

0

0

0

Phebe N Novakovic	1.00	X			0	
Chairman	0.00					
Thomas W Rabaut	1.00					
		X	Х		0	
Deputy Chairman	0.00					
Jack L Tilley	1.00					
Jack Lilley		X	l x		0	

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00

.

.......

......

Χ

Χ

Х

Χ

Χ

Χ

and Independent Contractors

Committee Chair

Committee Chair

Philip E Sakowitz

Committee Chair

William M Brown

Leanne Caret

Rudy deLeon

Trustee

Trustee

Trustee

Trustee

Thomas Arseneault

David H Ohle

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) organizations any hours organization from the

	any nours	and	a dir	ecto		ustee)		organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Ann E Dunwoody	1.00	Х						0	0	0
Trustee	0.00									
Steven R England Trustee	1.00	Х						0	0	0
John D Harris II	1.00							0	0	0
Trustee	0.00									
Patricia P Hickerson	1.00	×						0	0	0
Trustee	0.00									

0

0

0

0

0

0

Larry R Jordan Trustee

Leroy A Petry

Dennis J Reimer

Frank A St John

Jack C Stultz

Carl E Vuono

Trustee

Trustee

Trustee

Trustee

Trustee

and Independent Contractors

1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00

.

......

......

Χ

Χ

Х

Χ

Χ

Χ

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer compensation week (list from the from related

	any hours	and	ı a dir	recto	r/trد	rustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
Phyllis J Wilson Trustee	0.00	Х						0	0	0
Dennis J Dougherty Reg. President	0.00	Х						0	0	0
W Douglas Gibbens	1.00	X						0	0	0

0

0

0

0

0

0

0

Phyllis J Wilson	1.00		
		Χ	
Trustee	0.00		
Dennis J Dougherty	1.00		
· '		Χ	
Reg. President	0.00		
W Douglas Gibbens	1.00		
5 - 4 9 14 - 6 14 14 14 14 14 14 14 14 14 14 14 14 14		Х	
Reg. President	0.00		
Kris McBride	1.00		

......

.

......

......

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00 1.00

0.00

Χ

Χ

Χ

Х

Χ

Χ

Χ

and Independent Contractors

Reg. President

Reg. President

Reg. President

Richard P Stage

.......

Reg. President

LaVoy Thiessen

Reg. President

Reg. President

Reg. President

Bejamin Lukefahr

Anthony Rae Williams

Rick Morris

Gustavo J Rodriguez Jr

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation week (list person is both an officer from the compensation from related any hours and a director/trustee) organization organizations from the

	for related		a un	ecto	•	usice)		(M 2/1000	/M/ 2/1000	organization and
	organizations below dotted line)	Highest compensated employee Key employee Officer Institutional Trustee Individual trustee or director		Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	related organizations			
Ann Belyea Corp. Secretary	38.00			х				180,374	0	19,686
Manisha Patel	38.00			х				167,711	0	25,046
Treasurer	0.00									
Patricia E McQuistion	38.00				х			497,065	0	24,880

Χ

Χ

Х

Х

Χ

Х

25,634

15,929

44,321

27,361

14,709

22,051

13,259

0

0

0

0

0

0

0

262,127

202,634

194,992

179,782

162,874

157,261

			l I	ΧΙ			180,374	
Corp. Secretary	0.00							
Manisha Patel	38.00							
				Χ			167,711	
Treasurer	0.00						,	
Patricia E McQuistion	38.00							
,					Х		497,065	
VP, Membership & Meetings	0.00							
Guy C Swan	38.00							
Guy C Swaii					Х		472,652	
		ı	ı I			1		

0.00 38.00

0.00 38.00

0.00 38.00

0.00 38.00

0.00 38.00

0.00 38.00

0.00

.

and Independent Contractors

VP, Education

VP, NCO

Kenneth O Preston

Harry Rothmann

Chief Tech Officer

Editor-In-Chief

Dir, Govt Affairs

Michael Scanlan

Sr Dir, Meetings

Dir Nat Sec Study

Daniel Roper

John Gifford

Richard Maze

efile	e GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493197021410			
SCI		ULE A	- Dublic :	Charity Statu	e and Dul	alic Supp	ort	OMB No. 1545-0047			
	m 99			CHAILLY Statu rganization is a sect				2018			
90E	ZZ)		-	4947(a)(1) nonexe	mpt charitable	trust.		2010			
Depart	ment of	the Treasury	► Go to	► Attach to Form ! www.irs.gov/Form!				Open to Public			
nterna	l Reven	ue Service ne organiza	tion				Employer identific	Inspection ation number			
		The United St									
Pai	rt I	Reason	for Public Charity Stat	us (All organization	s must comple	te this part.) S	53-0193361 See instructions.				
he o	rganiz		a private foundation because								
1		A church, c	onvention of churches, or as	ssociation of churches	described in sec	tion 170(b)(1)	(A)(i).				
2		A school de	scribed in section 170(b)(1)(A)(ii). (Attach Sch	nedule E (Form 9	90 or 990-EZ).)					
3		A hospital o	or a cooperative hospital ser	vice organization desc	ribed in section	170(b)(1)(A)(iii).				
4		A medical r name, city,	esearch organization operat and state:	ed in conjunction with	a hospital descri	bed in section 1	170(b)(1)(A)(iii). E	nter the hospital's			
5		(b)(1)(A)	ation operated for the benefi (iv). (Complete Part II.)	-	,			bed in section 170			
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	ı)(v).				
7		section 17	ation that normally receives $\mathbf{0(b)(1)(A)(vi)}$. (Complete	Part II.)			nit or from the gener	al public described in			
8			ty trust described in sectio		,	•					
9		An agricultural research organization described in 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 university:									
.0	✓	from activit investment	ation that normally receives: ies related to its exempt fur income and unrelated busin iee section 509(a)(2). (Co	nctions—subject to cer less taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross			
1		•	ation organized and operated		r public safety. S	ee section 509	(a)(4).				
2		more public	ation organized and operated ly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2)). See <mark>section 509(</mark> a				
a		Type I. A so	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B	ated, supervised, or coappoint or elect a majo	ontrolled by its s	upported organiz	zation(s), typically by				
b		manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	ation vested in the sar							
c			unctionally integrated. A sorganization(s) (see instruct					ted with, its			
d		Type III n functionally	on-functionally integrate integrated. The organizatio). You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wit requirement and	th its supported orgar	. '.',			
е			box if the organization recei or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally			
f	Enter	the number	of supported organizations				<u> </u>				
g		de the follow lame of supp	ing information about the su orted (ii) EIN	upported organization((iii) Type of		anization listed	(v) Amount of	(vi) Amount of			
	(1) N	organization organization (described on lines 1- 10 above (see instructions)) in your governing document? monetary support (see instructions) other support instructions)									
					Yes	No					
			<u>'</u>								
Γotal		work Dod	tion Act Notice, see the I	actructions for	Cat. No. 11285	<u> </u>	Schedule A (Form 9	00 000 F7) 2010			

Page 2

III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	Section A. Public Support										
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total				
	(or fiscal year beginning in) ▶	(4) 2017	(B) 2013	(6) 2010	(4) 2017	(0) 2010	(1) Total				
1	Gifts, grants, contributions, and										
	membership fees received. (Do not										
_	include any "unusual grant.") .										
2	Tax revenues levied for the										
	organization's benefit and either paid										
_	to or expended on its behalf The value of services or facilities										
3	furnished by a governmental unit to										
	the organization without charge										
4	Total. Add lines 1 through 3										
5	The portion of total contributions by 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.										
9	ection B. Total Support						1				
	Calendar year										
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c)2016	(d)2017	(e) 2018	(f)Total				
7	Amounts from line 4										
8	Gross income from interest,										
٠	dividends, payments received on	1									
	securities loans, rents, royalties and	1									
	income from similar sources	1									
9	Net income from unrelated business										
-	activities, whether or not the	1									
	business is regularly carried on	1									
10	Other income. Do not include gain or										
	loss from the sale of capital assets	1									
	(Explain in Part VI.)										
11	Total support. Add lines 7 through										
	10					<u> </u>					
12	Gross receipts from related activities, e	tc. (see instructio	ons)			12					
13	First five years. If the Form 990 is for	the organization	's first, second, th	ird, fourth, or fifth	tax vear as a sec	tion 501(c)(3) or	anization.				
	check this box and stop here	_		, ,	,	` ' ' ' '	,				
	check this box and stop here	C D									
	ection C. Computation of Public										
	Public support percentage for 2018 (line					14					
15	Public support percentage for 2017 Sch	edule A, Part II, l	ine 14			15					
16a	33 1/3% support test—2018. If the	organization did r	not check the box	on line 13, and lin	e 14 is 33 1/3% oı	more, check this	box				
	and stop here. The organization qualifies as a publicly supported organization										
b	b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this										
17a	box and stop here. The organization qualifies as a publicly supported organization										
b	organization	: —2017. If the or	acts-and-circumst	ances" test, check	this box and sto	p here.	▶□				

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Part III

121,310,711

134,777,376

15,305,714

15,313,159

2,201,180

152,296,599

79.650 %

84.960 %

10.050 %

10.990 %

4,884

7,445

(f) Total

	the organization fails	to qualify under	the tests listed l	pelow, please co	omplete Part II.	.)	
S	Section A. Public Support						
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .	1,063,879	1,249,383	3,555,834	1,396,864	5,245,349	12,511,309
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	26,792,603	29,999,300	26,815,412	10,704,481	27,694,988	122,006,784
3	Gross receipts from activities that are not an unrelated trade or business under section 513					259,283	259,283
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
5	The value of services or facilities furnished by a governmental unit to the organization without charge						0
6	Total. Add lines 1 through 5	27,856,482	31,248,683	30,371,246	12,101,345	33,199,620	134,777,376
78	Amounts included on lines 1, 2, and 3 received from disqualified persons			15,971	307	21,583	37,861
ı	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.			2,028,547	846,434	10,553,823	13,428,804
	c Add lines 7a and 7b			2,044,518	846,741	10,575,406	13,466,665

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If

Support Schedule for Organizations Described in Section 509(a)(2)

Se	ction B. Total Support
8	Public support. (Subtract linfrom line 6.)
C	Add lines /a and /b

10a

C

14

15

16

17

18

20

1975.

Calendar year

(or fiscal year beginning in) ▶

dividends, payments received on

securities loans, rents, royalties

and income from similar sources Unrelated business taxable income (less section 511 taxes) from

businesses acquired after June 30,

Amounts from line 6. . . Gross income from interest,

Add lines 10a and 10b.

11, and 12.). .

Net income from unrelated business activities not included in

line 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital

assets (Explain in Part VI.) . Total support. (Add lines 9, 10c,

ne 7c

check this box and stop here. Section C. Computation of Public Support Percentage

Section D. Computation of Investment Income Percentage

(b) 2015

31,248,683

3.636.034

3,636,034

826,795

35,711,512

19a 331/3% support tests-2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 🕨 🗹 b 33 1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions 🕨 📙

First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization,

(a) 2014

27,856,482

3.799.809

3,799,809

603,856

32,260,147

Public support percentage for 2018 (line 8, column (f) divided by line 13, column (f))

Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))

Public support percentage from 2017 Schedule A, Part III, line 15

Investment income percentage from **2017** Schedule A, Part III, line 17

(c) 2016

30,371,246

3,268,896

7,445

3,276,341

479,854

34,127,441

(d) 2017

12,101,345

1.414.434

1,414,434

290,675

13,806,454

(e) 2018

33,199,620

3,186,541

3,186,541

4,884

36,391,045

Schedule A (Form 990 or 990-EZ) 2018

15

16

17

(Complete only if you checked a box on line 12 of 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 Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1

If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509

1 (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 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and 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

Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you

3с checked 12a or 12b in Part I, answer (b) and (c) below. 4a 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 despite being controlled or 4b supervised by or in connection with its supported organizations.

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 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 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 5a amendment to the organizing document). Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the 5b

organization's organizing document? 5c Substitutions only. Was the substitution the result of an event beyond the organization's control?

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 benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

6 organization's supported organizations? If "Yes," provide detail in Part VI. 6 7

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ). Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

7 complete Part I of Schedule L (Form 990 or 990-EZ). 8

8 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 in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

9a 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

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

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

answer line 10b below. 10a 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

Schedule A (Form 990 or 990-EZ) 2018

	leddie A (Point 990 01 990-EZ) 2016		- F	age 3
₽}	Supporting Organizations (continued)			
			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?	<u> </u>		<u> </u>
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?			
	governing body of a supported organization:	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11 c		
S	Section B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting	2		
	organization.	-		ĺ
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
_	Section D. All Type III Supporting Organizations		<u> </u>	
	,,,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
_	Section E. Type III Functionally-Integrated Supporting Organizations		<u> </u>	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct)	ions):		
_	a The organization satisfied the Activities Test. Complete line 2 below.	00		
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's			
	involvement.	2b		<u> </u>
3	Parent of Supported Organizations. Answer (a) and (b) below.	<u> </u>		<u> </u>
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3h		_

Sched	dule A (Form 990 or 990-EZ) 2018			Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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			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		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7	Chack have if the surrent year is the organization's first as a non-functionally in	toarst.	ad Type III supporting or	raprization (coo

Schedule A (Form 990 or 990-EZ) (2018)

b Applied to 2018 distributable amount
c Remainder. Subtract lines 4a and 4b from 4.
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

a Excess from 2014. **b** Excess from 2015. **c** Excess from 2016.

Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.
 Excess distributions carryover to 2019. Add lines

See instructions.

d Excess from 2017.e Excess from 2018.

3j and 4c.

8 Breakdown of line 7:

Additional Data

Software ID: 18007218 **Software Version:** 2018v3.1

EIN: 53-0193361

Name: Association of The United States Army

Page 8

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 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 Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

instructions).

Facts And Circumstances Test

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

DLN: 93493197021410

Open to Public Inspection

Department of the Treasury Internal Revenue Service

EZ)

SCHEDULE C (Form 990 or 990-

> ▶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.

	ne of the organization ociation of The United States Army			Employer idei	ntification num	iber
				53-0193361		
Par	t I-A Complete if the orga	nization is exempt under sectio	n 501(c) or is	a section 527 organi	zation.	
1	Provide a description of the orga "political campaign activities")	nization's direct and indirect political cam	npaign activities in	Part IV (see instructions	for definition of	
2	Political campaign activity expen	ditures (see instructions)		>	\$	
3	Volunteer hours for political cam	paign activities (see instructions)				
Par	t I-B Complete if the orga	nization is exempt under sectio	n 501(c)(3).			
1	Enter the amount of any excise t	ax incurred by the organization under se	ction 4955	>	\$	
2	Enter the amount of any excise t	ax incurred by organization managers ur	nder section 4955	>	\$	
3	If the organization incurred a sec	tion 4955 tax, did it file Form 4720 for t	his year?		☐ Yes	☑ No
4a	Was a correction made?				☐ Yes	☑ No
b	If "Yes," describe in Part IV.					
Par	t I-C Complete if the orga	nization is exempt under sectio	n 501(c), exce	pt section 501(c)(3))-	
1	Enter the amount directly expen	ded by the filing organization for section	527 exempt functi	ion activities 🕨	\$	
2		ganization's funds contributed to other or			\$	
3	Total exempt function expenditu	res. Add lines 1 and 2. Enter here and on	Form 1120-POL,	line 17b ▶	\$	
4	Did the filing organization file Fo	rm 1120-POL for this year?			☐ Yes	□ No
5	organization made payments. For of political contributions received	employer identification number (EIN) of r each organization listed, enter the amo that were promptly and directly delivere see (PAC). If additional space is needed,	unt paid from the ed to a separate po	filing organization's funds olitical organization, such	. Also enter the	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of contributions and prompt directly delives a separate of the contributions of the contributions are also as a separate of the contributions a	received otly and vered to a

fund or a political action committe	ee (PAC). If additional space is needed, p	provide informatio	on 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				
5	_			
or Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 990-EZ.	Cat.	No. 50084S Schedule C (Form 990 or 990-EZ) 2018

Page 2

Schedule C (Form 990 or 990-EZ) 2018

Calendar year (or fiscal year

beginning in)

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

2a

	expenses, and share of excess lobbying	g expenditures).		
	Check \blacktriangleright \square if the filing organization checked box A	A and "limited control" provisions apply.		
	Limits on Lobbying (The term "expenditures" means		(a) Filing organization's totals	(b) Affiliated group totals
a	Total lobbying expenditures to influence public opinion	on (grass roots lobbying)		
)	Total lobbying expenditures to influence a legislative	body (direct lobbying)	14,427	
С	Total lobbying expenditures (add lines 1a and 1b)		14,427	
t	Other exempt purpose expenditures		37,909,240	
е	Total exempt purpose expenditures (add lines 1c and	d 1d)	37,923,667	
f	Lobbying nontaxable amount. Enter the amount from columns.	n the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,000	\$1,000,000.		

	4-Year	Averaging Period Under section 501(h)		
j 	If there is an amount other than zero on either lin section 4911 tax for this year?	, ,		☐ Yes ☑ No
i	Subtract line 1f from line 1c. If zero or less, enter	-0		
h	Subtract line 1g from line 1a. If zero or less, ente	r -0		
g	Grassroots nontaxable amount (enter 25% of line	1f)	250,0	00
	Over \$17,000,000	\$1,000,000.		
	Over \$17,000,000	\$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Not over \$500,000	20% of the amount on line 1e.		

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period**

(a) 2015

1,000,000

3,965

250,000

(b) 2016

1,000,000

1,659

250,000

(c) 2017

1,000,000

2,506

250,000

(d) 2018

1,000,000

14,427

250,000

Schedule C (Form 990 or 990-EZ) 2018

(e) Total

4,000,000

6,000,000

22,557

1,000,000

1,500,000

	ich "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	(b)	
ctivi	, , , , , , , , , , , , , , , , , , , ,	Yes	No	Amour	nt
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?				
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				
a	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?				
		7-1			
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), 0	r sectio	n	
ar	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), 0	r sectio	n	
	501(c)(6).			Yes	N
	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?			Yes	N
L 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			Yes	N
1 2 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year?		3	Yes	No
l <u>e</u>	Were substantially all (90% or more) dues received nondeductible by members?	 (5), o	3	Yes 2 2 3 3 501(c)	
l 2 3 Part	Were substantially all (90% or more) dues received nondeductible by members?	 (5), o	3	Yes 2 2 3 3 501(c)	
ar	Were substantially all (90% or more) dues received nondeductible by members?	(5), o	3	Yes 2 2 3 3 501(c)	
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	(5), o III-A	3	Yes 2 2 3 3 501(c)	
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization make only in-house lobbying and political expenditures answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	(5), o III-A	3	Yes 2 2 3 3 501(c)	
art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	(5), o III-A, 1 2a 2b 2c	3	Yes 2 2 3 3 501(c)	
l 2 3 Part l 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? TIII-B Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .	(5), o III-A	3	Yes 2 2 3 3 501(c)	
1 2 3 Part 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . 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	(5), o III-A, land 2a 2b 2c 3	3	Yes 2 2 3 3 501(c)	
1 2 2 3 2 2 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures answered "No" OR (b) Part answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does	(5), o III-A, 1 2a 2b 2c	3	Yes 2 2 3 3 501(c)	

Explanation

instructions), and Part II-B, line 1. Also, complete this part for any additional information.

Return Reference

SCHEDULE D

(Form 990)

Department of the Treasury

DLN: 93493197021410

OMB No. 1545-0047

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990.

Open to Public

ern	al Revenue Service F do to www.ms.g	ov/10/11/990 for the latest information.			spection
	me of the organization ociation of The United States Army		-	ployer identification	n number
				0193361	
Pa	Organizations Maintaining Donor Advis Complete if the organization answered "Ye		r Acc	counts.	
		(a) Donor advised funds		(b)Funds and other	accounts
	Total number at end of year				
	Aggregate value of contributions to (during year)				
i	Aggregate value of grants from (during year)				
	Aggregate value at end of year				
	Did the organization inform all donors and donor adviso organization's property, subject to the organization's ex				Yes 🗌 No
•	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor private benefit?	or donor advisor, or for any other purpose of		ed only for] Yes □ No
Pa	rt III Conservation Easements. Complete if the	e organization answered "Yes" on Forn	n 990), Part IV, line 7.	
	Purpose(s) of conservation easements held by the organ	nization (check all that apply).			
	Preservation of land for public use (e.g., recreation	n or education)	histor	rically important land	area
	Protection of natural habitat	Preservation of a c	ertifie	d historic structure	
	Preservation of open space				
!	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the for	m of a	a conservation	
	easement on the last day of the tax year.	,		Held at the End	of the Year
а	Total number of conservation easements		2a		
b	Total acreage restricted by conservation easements		2b		
C	Number of conservation easements on a certified histori	c structure included in (a)	2c		
d	Number of conservation easements included in (c) acqui structure listed in the National Register	red after 7/25/06, and not on a historic	2d		
	Number of conservation easements modified, transferre tax year ▶	d, released, extinguished, or terminated by	the or	ganization during the	
	Number of states where property subject to conservation	n easement is located >		<u> </u>	
	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		of viola	ations,	□ No
,	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing co	onserv	ation easements duri	ng the year
,	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violations, and enforcing conser	vation	easements during th	e year
	Does each conservation easement reported on line 2(d) and section 170(h)(4)(B)(ii)?		70(h)((4)(B)(i) ☐ Yes	□ No
١	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the	ervation easements in its revenue and expe		atement, and	□ NO
ar	the organization's accounting for conservation easemen t III Organizations Maintaining Collections		er Si	milar Assets.	
a	Complete if the organization answered "Ye If the organization elected, as permitted under SFAS 11	•	temer	at and halance sheet	works of
d	art, historical treasures, or other similar assets held for provide, in Part XIII, the text of the footnote to its finan	public exhibition, education, or research in ficial statements that describes these items.	urther	ance of public service	2,
b	If the organization elected, as permitted under SFAS 11 historical treasures, or other similar assets held for publifollowing amounts relating to these items:				
((i) Revenue included on Form 990, Part VIII, line 1			> \$	
(ii) Assets included in Form 990, Part X \ldots \ldots \ldots			. > \$	
!	If the organization received or held works of art, historic following amounts required to be reported under SFAS		ncial g	gain, provide the	
а	Revenue included on Form 990, Part VIII, line 1			. > \$	
h	Accets included in Form 990 Part V			▶ ¢	

Par	t III	Organizations Maintaining C	ollections of Art	, Histori	cal T	reası	ures, or	Other	Similar As	sets (d	ontinu	ed)	
3		g the organization's acquisition, access s (check all that apply):	ion, and other record	ds, check	any of	the fo	ollowing t	hat are a	significant u	ise of its	collect	tion	
а		Public exhibition		d		Loan	or excha	inge prog	rams				
b		Scholarly research		е		Othe	er						
С		Preservation for future generations											
4		ide a description of the organization's o	collections and expla	in how the	ey furtl	ner th	e organiz	ation's ex	empt purpo	se in			
5		ng the year, did the organization solicit its to be sold to raise funds rather than								☐ Ye	s [_ N•	o
Pa	rt IV	Escrow and Custodial Arrang Complete if the organization and X, line 21.		orm 990	, Part	IV, I	ine 9, or	reporte	d an amou	ınt on F	orm 9	90,	Part
1a		ne organization an agent, trustee, custo ided on Form 990, Part X?								☐ Ye	s [· · · · · ·
b	If "Y	es," explain the arrangement in Part XI	III and complete the	followina	table:		Г		A	mount			-
c		nning balance						1c					-
d	_	tions during the year						1d					-
е		ributions during the year					The state of the s	1e					-
f	Endi	ng balance						1f					_
2a		the organization include an amount on						ssoupt li-	hility (2				_
_											S L	IN 0	•
b		es," explain the arrangement in Part XI											
Pe	rt V	Endowment Funds. Complete	(a)Current year		rior yea		(c)Two ye		(d)Three year		(e)Fou	rvoor	c back
1a	Regin	ning of year balance	17,575,28		28,434			3,820,379		274,803	(e)rou		99,877
	_	ibutions				,200		3,390		374,106			52,623
		vestment earnings, gains, and losses				,388		2,158,357	·	795,151			36,559
		s or scholarships				_							
		expenditures for facilities				+							
٠		rograms	17,575,28	38	11,540	,712		7,525,325	2,	605,513		2,5	15,191
f	Admir	nistrative expenses			37	7,992		22,397		18,168			20,701
g	End of	f year balance			17,575	,288	2	8,434,404	33,	820,379		31,2	74,803
2	Prov	ide the estimated percentage of the cu	rrent vear end balan	ce (line 1	a. colu	mn (a	a)) held as	s:					
a		d designated or quasi-endowment >	100.000 %		5 ,	(-	.,,						
b	Perm	nanent endowment >											
		porarily restricted endowment >											
С		percentages on lines 2a, 2b, and 2c sho	ould equal 100%										
За		there endowment funds not in the poss		zation tha	t are h	eld ar	nd admini	stered for	r the				
		nization by:									1	/es	No
	(i) u	ınrelated organizations								3a	ı(i)		No
	(ii)	related organizations				•				3a	(ii)		No
b		es" on 3a(ii), are the related organizati				?.				_ 3	3b		No
4	Desc	cribe in Part XIII the intended uses of th		dowment '	funds.								
Pa	rt VI				Dt	TV / 1		C 5	000 D-	ort V - Do-	- 10		
	Docci	Complete if the organization and ription of property (a) Cost or a		ost or other	•				m 990, Pa		d) Book	value	
	Desci	(investi	` '	ost or other	busis (i	other)	(c) Acci	arrialatea e	epreciation	`	a y Book	Vulue	
1 a	Land				45	55,285							455,285
b	Buildii	ngs			20,03	32,943			8,439,718			11	,593,225
c	Lease	hold improvements											
d	Equip	ment			1,82	26,775	i		1,161,101				665,674
е	Other				6,77	70,752	:		5,221,188			1	,549,564
Tota	al. Add	l lines 1a through 1e.(Column (d) must	equal Form 990, Pa	rt X, colui	mn (B)	, line	10(c).) .		>			14	,263,748

Part VII Investments—Other Securities. Complete if the or	rganization an	swered "Yes" on	Form 990, Part IV, line 11b.
See Form 990, Part X, line 12. (a) Description of security or category (including name of security)	(b) Book value	Cost	(c) Method of valuation: t or end-of-year market value
(1) Financial derivatives		-	
(2) Closely-held equity interests	· ·		
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments—Program Related.	•		
Complete if the organization answered 'Yes' on Form (a) Description of investment	990, Part IV,		orm 990, Part X, line 13.
	(b) Book van		t or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6) (7)			
(8) (9)			
Part IX Other Assets. Complete if the organization answered 'Yes	▶ s' on Form 990,	Part IV, line 11d. S	
(1) Description			(b) Book valu
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)			•
Part X Other Liabilities. Complete if the organization answ See Form 990, Part X, line 25.	ered 'Yes' on	Form 990, Part I	V, line 11e or 11f.
 (a) Description of liability (1) Federal income taxes 	(b)	Book value	
Accrued Pension Cost		1,489,954	
Tenant Deposits (3)		95,391	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the	footnote to the	1,585,345 organization's fina	ncial statements that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 740).			

2

1

2

C

d

е 3

b

Part XIII

4

5

Schedule D (Form 990) 2018

Page 4

1,544,955

35,167,039

1,554,390

36,721,429

35,710,782

3,040,665

32,670,117

4,515,051

37.185.168

Schedule D (Form 990) 2018

а Net unrealized gains (losses) on investments Donated services and use of facilities b

Other (Describe in Part XIII.) Subtract line **2e** from line **1**

3

4 b

Donated services and use of facilities . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Add lines **4a** and **4b** C 5

Total expenses and losses per audited financial statements

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

Part XII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

4a 4b

2a 2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

266,688 1,287,702

3,040,665

266,688

4.248.363

1,652,148

-107.193

4c 5

2e

3

4c

5

2e

3

Return Reference See Additional Data Table

Page 5		chedule D (Form 990) 2018
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2018

Additional Data

Software ID: 18007218 Software Version: 2018v3.1

EIN: 53-0193361

Name: Association of The United States Army

The Board of Directors voted to remove all restrictions from the Quasi-Endowment. The funds are now

Supplemental Information		
Return Reference	Explanation	

Part V, Line 4: Intended uses of

the endowment fund.

unrestricted.

Supplemental Information	
Return Reference	Explanation
Part X : FIN48 Footnote	The Association is exempt from federal income taxes under Section 501(c)(3) of the Interna I Revenue Code (IRC), except for income from activities not related to its tax-exempt purp ose, which primarily includes the Association's advertising activities. An immaterial prov ision for income taxes was recorded during the year ended June 30, 2019, related to the As sociation's advertising and qualified transportation benefits. The Association is not a pr ivate foundation pursuant to section 509(a)(3) of the IRC.The Association's income tax ret urns are subject to review and examination by federal and state authorities. Management has a evaluated the Association's tax positions and has concluded that the Association has tak en no material uncertain tax positions that require adjustment to the financial statements to comply with the provisions of this guidance.

Supplemental Information	
Return Reference	Explanation
Part XI, Line 4b: Other revenue amounts included on 990 but not included in F/S	Revenue from Unaudited Divisions \$3780814 Special Event Expenses \$-831675 Rental Expenses \$-1627844 Cost of Goods Sold \$-33593

Supplemental Information	
Return Reference	Explanation
Part XII, Line 2d: Other expenses and losses per audited F/S	Cost of Goods Sold \$33593 Special Event Expenses \$831675 Rental Expense \$1627844 Local Org anization Support \$543823 Chapter Travel Exp \$3730

È

Supplemental Information	
Return Reference	Explanation
Part XII, Line 4b: Other revenue amounts included on 990 but not included in F/S	Expenses from Unaudited Divisions \$4141170 Loss on Disposal of Fixed Assets \$107193

efile GRAPHIC print - DO NOT PROCESS		As Filed Data			DLN:	93493197021410
SCHEDULE F	Statement o	f Activities Outside the United States				OMB No. 1545-0047
(Form 990) Department of the Treasury Internal Revenue Service	,	► Attach t	Yes" to Form 990, Part IV, I to Form 990. nstructions and the latest in	2010		
Name of the organization				Er	nployer iden	tification number
Association of The United Sta	ates Army			53	3-0193361	
	ormation on Activiti ort IV, line 14b.	es Outside the l	Jnited States. Comple	ete if the or	ganization ar	nswered "Yes" to
_	grantees' eligibility for		substantiate the amount stance, and the selection	-		☐ Yes ☐ No
2 For grantmakers. I outside the United St		rganization's proce	dures for monitoring the	use of its g	rants and oth	ner assistance
3 Activites per Region. (The following Part I, line	3 table can be dupli	cated if additional space is	s needed.)		
(a) Region	(b) Number offices in the region		(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	program ser specific	listed in (d) is a vice, describe c type of) in region	(f) Total expenditures for and investments in region
See Add'l Data						
						245 202
3a Sub-total b Total from continuation Part I	sheets to	61				245,382
c Totals (add lines 3a ar	nd 3b)	61				245,382
c Totals (add lines 3a ar	nd 3b)	61	1	<u> </u>		245,:

chedule F (Form 990) 2018							Page 3
				ed States. Complete if	f the organization ar	nswered "Yes" to Form S	990, Part IV, line 16.
a) Type of grant or assistance	duplicated if addit (b) Region	(c) Number of recipients	eeded. (d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Sche	dule F (Form 990) 2018		Page 4
Par	t IV Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)		
		∐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)	_	_
		☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621).	☐Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships		
	(see Instructions for Form 8865)	Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).	✓ Yes	□No

Schedule F ((Form 990) 2018	Page
Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to any additional information (see instructions). ReturnReference Explanation		
	ReturnReference	Explanation
·		
•		

Additional Data

Europe

Software ID: 18007218 **Software Version:** 2018v3.1 **EIN:** 53-0193361

Name: Association of The United States Army

67,208

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
Europe	0	39	Program Services	local support programs	35,956

0 Investments

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Fast Asia & the Pacific 6 linvestments 9.635 Central America & Caribbean 4 Program Services local support programs 8,863

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region region services, grants to recipients located in the reaion) Central America & Caribbean 5.016 0 lInvestments Middle East & North Africa 12 Program Services local support programs 96,098

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region fundraising, program describe specific type of reaion agents in service(s) in region services, grants to reaion recipients located in the reaion) Middle East & North Africa 22,606 0 linvestments

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493197021410 OMB No. 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. **Employer identification number** Name of the organization Association of The United States Army 53-0193361 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. Mail solicitations e Solicitation of non-government grants Internet and email solicitations ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☑ No If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col. (i) contributions? Yes No 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Sche	dule G (Form 990 or 990-EZ) 2018						Page 3
11	Does the organization conduct ga	ming activities with nonmembers	5?		☐ Yes	Пио	
12	Is the organization a grantor, ber formed to administer charitable g		member of a partnership or other entity		□Yes		
13	Indicate the percentage of gamin	g activity conducted in:					
а	The organization's facility .			13a			%
b	An outside facility			13b			%
14	Enter the name and address of th	e person who prepares the organ	nization's gaming/special events books and r	ecords:			
	Name						
	Address >	,					
	revenue?		om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gam amount of gaming revenue retain		anization ▶ \$ and tl 	ne			
С	If "Yes," enter name and address	of the third party:					
	Name ►						
	Address►						
16	Gaming manager information:						
	Name ►						
	Gaming manager compensation	• \$					
	Description of services provided	·					
	☐ Director/officer	☐ Employee	☐ Independent contractor				
17	Mandatory distributions:						
а	Is the organization required unde retain the state gaming license?		stributions from the gaming proceeds to		☐Yes	□No	
b	Enter the amount of distributions in the organization's own exempt		Ited to other exempt organizations or spent \$				
Pai			ions required by Part I, line 2b, column licable. Also provide any additional info				 s.
	Return Reference		Explanation				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

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.

OMB No. 1545-0047

DLN: 93493197021410

Open to Public Inspection

lame of the organization						Employer identific	cation number
Association of The United States	Army					53-0193361	
Part I General Inform	ation on Grants	and Assistance				•	
Does the organization main the selection criteria used					for the grants or assistanc	e, and	☑ Yes ☐ N
2 Describe in Part IV the org	anization's procedu	res for monitoring the u	se of grant funds in the U	nited States.			
Part II Grants and Other that received more			and Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, line	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
9)							
10)							
11)							
12)							
Enter total number of sectionEnter total number of othe	. , . ,	-					17 0
- B			<u> </u>	N- F00FI			dl T (F 000) 2010

(Form 990)

Department of the

Treasury

Schedule I (Form 990) 2018

Additional Data

Army Historical Foundation

11700 Preston Rd Ste 660-301

1775 Liberty Dr Suite 400

Fort Belvoir, VA 22060 Army Scholarship Foundation

Dallas, TX 75230

52-1367225

74-2996331

Software ID: 18007218 **Software Version:** 2018v3.1

EIN: 53-0193361

Name: Association of The United States Army

6,000,000

8,400

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domesti	ic Governments.
(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation

organization	(-,	if applicable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

organization	, ,	if applicable	grant	cash	(book, FMV, appraisal,	
or government				assistance	other)	

501(c)(3)

501(c)(3)

(g) Description of non-cash assistance

(h) Purpose of grant or assistance

support National

Army College

Scholarships

Museum of US Army

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

Army War College Foundation 122 Forbes Avenue Carlisle, PA 17013	23-2034407	501(c)(3)	17,500	0		Support for academic programs
CGSC Foundation	20-4254979	501(c)(3)	7,500	0		Operating Grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

100 Stimson Ave Ste 1149 Ft Leavenworth, KS 66027

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government TC academic bowl nsorship

115 Lloyd Avenue Tyrone, GA 30290		, , , ,	·			sponso
College Options Foundation	03-0566869	501(c)(3)	28,000	0	1	JROTC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Rockville, MD 20850

Support for Wounded 11-3158401 95.0001 Fisher House Foundation 501(c)(3)| 111 Rockville Pike Ste 420 Warriors & Vets

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government

dogs

Fort Drum MWR 10783 Chapel Drive Fort Drum, NY 13603		DoD	20,483	0		Support for community events
GAMSD	27-2667123	501(c)(3)	63,145	0		Donation for service

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3251 NF 180th Avenue

Williston, FL 32696

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government Natl Vets Memorial & Museum 80-0516830 501(c)(3) 894.466 Support for museum

123 S Main Street Germantown, OH 45327

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Dallas, TX 75379

Operation Once in a Lifetime 20-8948979 501(c)(3) 7.500 l | Wounded Warrior PO Box 797052 Support

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government

Army Ball

Some Gave All PO Box 1215 Discovery Bay, CA 94505	26-1316213	501(c)(3)	6,000	0		help raise funds for servicemembers
US Army Family MWR		D₀D	12.500	0		Sponsorship of the

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

2455 Revnolds Rd Fort Sam

Houston, TX 78234

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government

Support for the current

war wounded

US Army MEDCoE	DoD	6,312	0		Sponsorship of Holiday
3630 Stanley Road					Ball
San Antonio, TX 78234					

16,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

DoD

VA Palo Alto Healthcare Syste

3801 Miranda Avenue

Palo Alto, CA 94304

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government rship of Valero

Support of the Faculty

Research

Valero Energy Foundation PO Box 690330 San Antonio, TX 78269	74-2904514	501(c)(3)	6,000	0		Sponsorship o Texas Open

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(c)(3)

West Point Assc of Graduates

West Point, NY 10996

698 Mills Road

14-1260763

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable arant cash non-cash assistance or assistance assistance other) or government

Wounded Warrior AST 27-3628041 501(c)(3) 25.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Norfolk, VA 23508

Donation for kids camp 6110 Powhattan Avenue expenses

Leon Van Autreve Scholarship

8

50,000

College Debt

3

6,000

(d)Amount of

(e) Method of valuation (book,

(f)Description of non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

(b)Number of

(c)Amount of

20,000

15,000

10,000

(a)Type of grant or assistance

Joseph P. and Helen T. Cribbins Sch

Nicholas D. Chabraja Scholarship

GEN Jack N, Merritt Scholarship

(a)Type of grant or assistance
(b)Number of recipients
(c)Amount of cash grant
(d)Amount of non-cash assistance
(e)Method of valuation (book, FMV, appraisal, other)

(f)Description of non-cash assistance

Form 990, Schedule I, Part III, Grants and Other Assistance to Domestic Individuals.

260

Army Scholarships - Admin by AUSA

AUSA Chapter Scholarships

Professional Development	4	8,000		
ROTC Scholarship	2	8,000		

16,000

252,814

efil	e GRAPHIC	print - DO NOT PROCESS	As Filed Dat	ca -	DLN: 934	9319	7021	.410
Sch	edule J	C	ompensat	ion Information	ОМ	B No.	1545-0	0047
(Forr	n 990)		Compensa ganization answ	Trustees, Key Employees, and Hig ated Employees vered "Yes" on Form 990, Part IV, h to Form 990.	hest line 23.	20	18	3
•	tment of the Treasu			r instructions and the latest inform	nation. O		o Pul	
Nar	al Revenue Service ne of the orgar	ization			Employer identificat			
Asso	ociation of The Ur	ited States Army			53-0193361			
Pa	rt I Ques	tions Regarding Compens	ation					
							Yes	No
1a				of the following to or for a person listed by relevant information regarding thes				
	_	ass or charter travel		Housing allowance or residence for	·			
		or companions		Payments for business use of person				
		mnification and gross-up paymer	nts 🔽	Health or social club dues or initiation				
	□ Discret	onary spending account		Personal services (e.g., maid, chauf	reur, cner)			
b		poxes in line 1a are checked, did f all of the expenses described a		follow a written policy regarding paym nplete Part III to explain	ent or reimbursement	1 b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?					2	Yes	
	un ectors, trus	stees, officers, including the CEO,	Executive Directo	n, regarding the items checked in line	: La: .			
3				ed to establish the compensation of th	ne			
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III.			
	✓ Compe			Model and the second				
		nsation committee Indent compensation consultant		Written employment contract Compensation survey or study				
		90 of other organizations	7	Approval by the board or compensa	tion committee			
		-	_					
4	During the ye related organ		n 990, Part VII, Se	ection A, line 1a, with respect to the fi	ling organization or a			
а	Receive a sev	erance payment or change-of-co	ntrol payment? .			4a		No
b	•		•	lified retirement plan?		4b		No
С	•	' ' '		nsation arrangement?		4c		No
	II TES LO AII	y or lines 4a-c, list the persons a	nd provide the app	plicable amounts for each item in Part	. 111.			
	Only 501(c)	(3), 501(c)(4), and 501(c)(29)) organizations	must complete lines 5-9.				
5	For persons li	sted on Form 990, Part VII, Sect	ion A, line 1a, did	the organization pay or accrue any				
	compensation	contingent on the revenues of:						
а	The organizat	ion?				5a		No
b	•	_				5b		No
_	•	ne 5a or 5b, describe in Part III.						
6		sted on Form 990, Part VII, Sect contingent on the net earnings		the organization pay or accrue any				
а	-	ion?				6a		No
b	•	•				6b		No
_	· ·	ne 6a or 6b, describe in Part III.			1			
7	payments not	described in lines 5 and 6? If "Y	es," describe in Pa	the organization provide any nonfixed art III		7	Yes	
8	subject to the	initial contract exception describ	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de		8		No
9				presumption procedure described in		9		No
For F	Paperwork Re	duction Act Notice, see the In	structions for Fo	orm 990. Cat. No. 5	0053T Schedule J		990)	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

]	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	(B)(i)-(D)	column (B)
	1	<u></u>				reported as deferred on prior Form 990
_						1
+						
+						
+						
+						
+						
+						
+						
\perp						1
\perp						
						1

Fage 5						
Part III Supplemental Information						
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.						
Return Reference	Explanation					
Part I, Line 1a: Relevant information in	GUY C. SWAN RECEIVED HEALTH OR SOCIAL CLUB DUES/INITIATION FEES TOTALING\$7,884. GUY C. SWAN RECEIVED ALSO RECEIVED TAX INDEMNIFICATION					

AND GROSS-UP PAYMENTS TOTALING \$2,602. THESE PAYMENTS WERE INCLUDED IN TAXABLE COMPENSATION.

Schedule 1 (Form 990) 2018

regards to selections on 1a.

Return Reference	Explanation
art I, Line 7: Non-Fixed payments not	The President & CEO, Vice Presidents, Corporate Secretary, Treasurer/Controller, Chief Technical Officer, Editor-In-Chief, Director of Government Affairs, Senior
ted above	Director of Meetings, and Director of National Security Studies received bonuses based on performance.

Part liste I (Form 990) 2018

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

(i)

(ii)

Ann Belyea

Corp. Secretary

Carter F Ham

Daniel Roper

Guy C Swan

John Gifford

VP, NCO

Manisha Patel

Michael Scanlan

Sr Dir, Meetings

Richard Maze

Editor-In-Chief

Patricia E McQuistion

VP, Membership & Meetings

Treasurer

VP, Education

Harry Rothmann

Dir, Govt Affairs

Kenneth O Preston

Chief Tech Officer

Dir Nat Sec Study

President & CEO

_ _ _ ___

104,708

489,747

134,589

269,139

173,474

152,762

164,904

151,090

139,014

274,616

159,453

Software ID: 18007218

Software Version: 2018v3.1

73,741

275,000

20,890

190,000

28,220

22,580

95,000

15,800

21,661

220,000

33,100

EIN: 53-0193361

Name: Association of The United States Army

Form 990, Schedule J,	Part II - Officers, D	irectors, Trustees, K	Key Employees, and	Highest Compensate	d Employees		
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	(i) Base Compensation	` '	(iii)	other deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on
		Bonus & incentive compensation	Other reportable compensation	Compensation			prior Form 990

1,925

2,600

1,782

13,513

940

4,440

2,223

821

2,199

2,449

2,439

8,459

22,000

10,770

21,581

14,570

12,224

13,195

12,175

11,124

21,974

12,973

11,227

3,090

2,489

4,053

29,751

2,485

2,734

12,871

10,927

2,906

14,388

200,060

792,437

170,520

498,286

246,955

194,491

278,056

192,757

184,925

521,945

222,353

efile GRAPHI	C print - DO NO	OT PROCES	S As Fi	led Data -					DI	LN: 93	349319	702141
Schedule L (Form 990 or 990	·:	Transactions with Interested Persons Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26,								MB No. 1	545-0047	
			► Attac	h to Form 99	0 or Form 99	, line 38a or 4 0-EZ. st information					20	18
Department of the Tre nternal Revenue Serv	• 1				_						Open to Inspe	Public ction
Name of the org Association of The	janization United States Army								yer id 3361	entifica	ation nu	mber
	ess Benefit Tra											
1 (a) Name of disqualified pe			red "Yes" on Form 990, Part IV, line 25a or 25b, or Fo (b) Relationship between disqualified perso organization							tion of		Corrected No
							+					
reported ar	(b) Relationship	if the organization answered an amount on Form 990, Part Relationship (c) Purpose organization of loan		5, 6, or 22	(e)Original principal amount	(f)Balance due	(g) In (h) default? Approved board c		h) ved by rd or	(i)Written by agreement?		
			То	From			Yes	No	Yes	No	Yes	No
1) Gordon R Gullivan	former pres	Life Ins		X	600,000	565,292		No	Yes		Yes	
otal .				<u> Þ</u>	\$	565,292						
	nts or Assista		_			li 22						
(a) Name of interested person (b) Re		nization answered "Yes" on Form Relationship between erested person and the organization (c) Amount		of assistance (d) Type of		of assis	assistance (e)			Purpose of assistance		
									_			
or Paperwork Re	duction Act Notice,	see the Instru	ctions for For	rm 990 or 990-l	Z. Ca	<u>l</u> at. No. 50056A		Sch	hedule	I (Forn	1 990 or 9	90-EZ) 20

Part V	Supplemental Information		

Return Reference

Schedule I. (Form 990 or 990-F7) 2018.

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493197021410 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2018 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** Association of The United States Army 53-0193361 **Types of Property** (c) (d) (a) (b) Method of determining Check if Number of contributions or Noncash contribution applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests Books and publications Χ 816 FMV Clothing and household goods Cars and other vehicles Boats and planes . . Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock . Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . Qualified conservation contribution-Historic structures 14 Qualified conservation contribution—Other . Real estate—Residential 15 Real estate—Commercial . 17 Real estate—Other . . Collectibles 18 2,040 FMV 19 Food inventory . . . 20 Drugs and medical supplies . Taxidermy 21 22 Historical artifacts . . . 23 Scientific specimens . . 24 Archeological artifacts . . 22,871 FMV Χ 61 25 Other ▶ (Auction Items) 26 Other ▶ (_ 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . 30a Nο **b** If "Yes," describe the arrangement in Part II. 31 No Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2018)		
Part III Supplemental Info		
Provide the informat	ion required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part	
I, column (b), the nu	ımber of contributions, the number of items received, or a combination of both. Also complete	
this part for any add	itional information.	
Return Reference	Explanation	
	Schedule M (Form 990) (2018)	

efile GRAPH	IC print	- DO NOT PROCESS	As Filed Data -		DLN:	93493197021410
(Form 990 or 990- EZ) Complete Form		Complete to pro Form 990 o	vide information for r 990-EZ or to prov ▶ Attach to Forn	on to Form 990 or 9 r responses to specific questi ide any additional informatio n 990 or 990-EZ. 90 for the latest information.	ons on n.	OMB No. 1545-0047 2018 Open to Public Inspection
ฟลกาย Betherofg Association of The		s Army			Employer identi 53-0193361	fication number
990 Schedule	e O, Supp	plemental Informatio	n		33-0193301	
Return Reference				Explanation		
Form 990, Part III, Line 4d: Other Program Services Description	ARMY MANAMED A' AWARDA' ND PROF WEEKLY S. AUSA' ING INSIG O) AND S TIONAL M NATIONA MY TO S AL, LEAD ISTED LE FOR THE A MONTH ICS RELE RIALS NE ERVE SU PECIALIT MANY DE CO AND NEEDED GANIZAT FOCUSE DUCTED	AGAZINE - AND TWO WEIT PROVIDING ARMY-SPEWINNING MAGAZINE INCESSIONAL DEVELOPMENEWSPAPER COVERING SEIVE THINGS IS A WEEGHT INTO ARMY-RELATE SOLDIER PROGRAMSNOOF AS POOLDIER PROPERSIONAL AS A SEADERS OF AMERICAS AS MONTHLY MAGAZINE AND THE ENLISTED EDED BY TODAYS PROFICES NCO AND SOLDIER ECADES WORTH OF HAN SOLDIER PROGRAM PUEFOR PROFESSIONAL DEFONS DEPLOYED GLOBAD ON NCOS AND SOLDIER	EKLY DIGITAL PUBL CIFIC AND AUSA-RE LUDES FEATURE AF NT, A CORE MISSIO B NEWS RELATED T KLY FORWARD-LOC D NEWS. OTHER PR O AND SOLDIER PRO MYS ENLISTED FOR Y RESERVE CONSIS D PERIOD OF SERVI ND PROFESSIONAL RMY. THESE MATEF ND NEWSPAPER, A TLED SOLDIER TOD D FORCE. NCO AND FESSIONAL SOLDIEI DNS OF INCREASES PROGRAMS ADDS PROGRAMS ADDS PROGRAMS ADDS PROGRAMS ADDS CONSIDER TOD OS-ON LEADERSHIF SLICATIONS PROVICE CILLY. NCO AND SOL RS THROUGHOUT A	HE ASSOCIATION PUBLISHED ICATIONS - AUSA'S FIVE THIN ELATED INFORMATION TO ASSETICLES AND COMMENTARIE: N OF THE ASSOCIATION'S CHOOTH ARMY, AUSA EVENTS & CROGRAM SERVICES 5: NON-COGRAM SERVICES PROFESSION OF ENLISTED VOLUNTEER CE. NCO AND SOLDIER PROGRAM PROVIDER PROGRAMS PROVIDER TO SENIOR NCO LECTURIS OF CURRENT DOCTRINAL PURE TO CURRENT DOCTRINAL PURE SENIOR AND ALLIED LEADER SENIOR AND ALLIED LEADER OF TO CURRENT DOCTRINAL PURE SENIOR AND ALLIED LEADER OF YOUNG NCO LEADER PROGRAMS ENABLE PROGRAM SERVICES 6: OTHER PROGRAM SERVIC	IGS AND AUSA EX SOCIATION MEMINS FOCUSING ON IARTER. AUSA EX AND AUSA CHAPE INTO MEMBER OMMISSIONED OF THE REGULAR AND EXEMPLE SERIES FOCUS DES THE EDUCATION AUTOCAPPLE SERIES THE NECESSADERS IN THEIR FORESSIONAL DE AS PRINCIPLE ME	KTRA - BERS. THE EDUCATION A KTRA IS A TER ACTIVITIE S PROVID FFICER (NC MENT AND EDUCA ARMY, ARMY NTO THE AR EDUCATION YOUNG ENL S PUBLISHED R TODAY, HING ON TOP FIONAL MATE ENT AND TO S ATIONAL S WISDOM OF DS. ALL THE N SARY TOOLS RESPECTIVE OR VELOP EVENTS EETINGS CON

Return Reference	Explanation
Form 990, Part VI, Line 1a: Explanation of Delegated Broad Authority to Committee	THE COUNCIL OF TRUSTEES DURING PERIODS BETWEEN MEETINGS OF THE COUNCIL OF TRUSTEES SHALL A CT THROUGH AN EXECUTIVE COMMITTEE WHICH MAY EXERCISE THE AUTHORITY OF THE COUNCIL OF TRUST EES EXCEPT AS SPECIFICALLY LIMITED BY THE COUNCIL. THE EXECUTIVE COMMITTEE SHALL CONSIST O F THE CHAIRMAN OF THE COUNCIL OF TRUSTEES. DEPUTY CHAIRMAN AND OTHER COUNCIL MEMBERS NOMIN ATED BY THE CHAIRMAN OF THE COUNCIL OF TRUSTEES AND APPROVED BY THE FULL COUNCIL. A MAJORI TY OF THE COMMITTEE SHALL CONSTITUTE A QUORUM.MINUTES OF ALL MEETINGS OF THE COMMITTEE SHALL BE PROVIDED TO EACH COUNCIL MEMBER AND PRESENTED AT THE FOLLOWING COUNCIL OF TRUSTEES M EETING AND APPROVED BY THE FULL COUNCIL.

Return Reference	Explanation
Form 990, Part VI, Line	Three membership classes: individual, community and industry partner, and association membership.
6:	
Explanation	
of Classes of	
Members or	
Shareholder	

Return Reference	Explanation
Form 990, Part VI, Line 7a: How Members or Shareholders Elect Governing Body	THE CHAIRMAN APPOINTS A 3 MEMBER NOMINATING COMMITTEE FROM AMONG THE COUNCIL OF TRUSTEES F OR THE PURPOSE OF PROVIDING A SLATE OF NOMINEES FOR VACANT POSITIONS ON THE COUNCIL. THE N OMINATING COMMITTEE SUBMITS A SLATE SELECTED FROM MEMBERSHIP OF AT LEAST ONE NOMINEE FOR E ACH VACANT POSITION. AFTER PUBLICATION OF THE SLATE, ADDITIONAL CANDIDATES MAY BE NOMINATE D. BALLOTS WILL BE COUNTED UNDER THE DIRECTION OF THE COUNCIL OF TRUSTEES.

Return Reference	Explanation
Form 990, Part VI, Line 7b: Describe Decisions of Governing Body Approval by Members or Shareholders	INDIVIDUAL MEMBERS HAVE THE RIGHT TO VOTE IN ELECTIONS AND CHANGES TO THE BYLAWS.

Return Explanation

Process

Form 990, Part VI, Line 11b: Form 990 is prepared by an outside accounting firm and then reviewed by The Treasurer/Cont roller and President/CEO of AUSA. A complete copy of the draft return is sent to the entire board prior to filing with IRS.

Return Reference	Explanation
Form 990, Part VI, Line 12c: Explanation of Monitoring and Enforcement of Conflicts	All employees are expected to conduct themselves and the affairs of AUSA in a manner that reflects the highest standards of ethical conduct, and in accordance with all federal, sta te, and local laws and regulations. This includes avoiding real and potential conflicts of interest. When employees are unsure whether a certain transaction activity, or relationsh ip constitutes a conflict of interest, they are directed to discuss the situation with the ir supervisor or a member of management for clarification. Failure to adhere to the policy, including failure to disclose any conflict or seek an exception to the policy, may result in disciplinary action, up to and including termination.

Return Reference	Explanation
Form 990, Part VI, Line 15a: Compensation Review & Approval Process - CEO, Top Management	The Compensation Committee, chaired by the Chairman of the Council of Trustees determines the CEO & key employees' salaries. A compensation study performed by an executive compensa tion consultant was used for comparability data. The decision is documented in the minutes . THE MOST RECENT YEAR IN WHICH THE PROCESS INCLUDED REVIEW AND APPROVAL BY INDEPENDENT PE RSONS, COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATION AND DECI SION WAS DECEMBER 2018.

Return Reference	Explanation
Form 990, Part VI, Line 15b: Compensation Review and Approval Process for Officers and Key Employees	The President/CEO determines the salaries of the Treasurer/Controller and the Corporate Se cretary. A compensation study on all staff, reviewed by a consultant was used for comparab ility data. THE MOST RECENT YEAR IN WHICH THE PROCESS INCLUDED REVIEW AND APPROVAL BY INDE PENDENT PERSONS, COMPARABILITY DATA, AND CONTEMPORANEOUS SUBSTANTIATION OF THE DELIBERATIO N AND DECISION WAS APRIL 2019.

Return Reference	Explanation
Form 990, Part VI, Line 19: Other Organization Documents Publicly Available	The Bylaws are posted on the AUSA website and the conflict of interest policy is in the employee handbook on the website.

990 Schedule O, Supplemental Information

Return
Reference

Explanation

Other	Decrease in Pension Liability = -\$1312779
Changes In	
Net Assets	
Or Fund	
Balances -	
Other	
Decreases	