# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2018

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: **Open to Public** Department of the Treasury Inspection ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service 2018, and ending **20**19 For the 2018 calendar year, or tax year beginning Jul 1 Jun D Employer identification number Check if applicable C Name of organization International Association of Lions Address change Doing business as 41442 Odessa Westside 75-2243510 E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite Name change (432)661-8930Initial return PO Box 69407 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated Odessa, TX 79769-0407 **G** Gross receipts \$ 1,081,939. Amended return H(a) Is this a group return for subordinates? Yes X No Application pending F Name and address of principal officer PO Box 69407, Odessa, TX 79769-0407 H(b) Are all subordinates included? Yes No Diane Furlow, If "No," attach a list (see instructions) **区** 501(c) ( Tax-exempt status Website: ▶ H(c) Group exemption number ► 0.2.3.9 Form of organization X Corporation ☐ Trust ☐ Association ☐ Other ▶ 1960 M State of legal domicile TX L Year of formation Part I Briefly describe the organization's mission or most significant activities: To encourage service-minded people to serve their community without personal financial reward, and to encourage efficiency and promote high ethical standards in Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . . . . 5 Number of independent voting members of the governing body (Part VI, line 1b) 4 5 12 Total number of individuals employed in calendar year 2018 (Part V, line 2a) Total number of volunteers (estimate if necessary) . . . . . . . . 6 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 33,485. 7b Net unrelated business taxable income from Form 990-T, line 38 -4,064.Prior Year Current Year Contributions and grants (Part VIII, line 1h) . . . 2,525 1,811. 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 19,724. 33,485. 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 22,249 35,296 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 13 7,733 37,549 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Professional fundraising fees (Part IX, column (A), line 11e) . . . 16a

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

-223

SEP. 0.3.2019.

Sign Here

17

18

19

20

21

22

Part II

Signature of officer

Treasurer

Net assets or fund balances. Subtract line 21 from line 2

Total fundraising expenses (Part IX, column (D), line 25) ▶

Revenue less expenses. Subtract line 18 from line 1

Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)

Total expenses. Add lines 13–17 (must equal Part IX, columnated ED

Date

452.

8,185.

14,064.

66,063.

7,911.

58,152.

nning of Current Year

Diane Furlow, Type or print name and title Print/Type preparer's name

Total assets (Part X, line 16)

Signature Block

Total liabilities (Part X, line 26) .

Paid David Hettler Preparer **Use Only** 

Firm's name ▶ David L Hettler PC

Date

Check ☐ if

Phone no (806) 780-7700

08/14/2019 self-employed P00200670 Firm's EIN ▶ 75-2684616

Firm's address ▶ 4216 102nd St, Lubbock, TX 79423 May the IRS discuss this return with the preparer shown above? (see instructions)

X Yes No

Form **990** (2018)

1,040.

38,589.

-3,293.

65,521.

10,661.

54,860.

**End of Year** 

For Paperwork Reduction Act Notice, see the separate instructions. BAA





Part			
1	Briefly describe the organization's mission:	any line in this Part III	
1	m		
		personal financial reward,	
		nigh ethical standards in	
	and to encourage efficiency and promote in	ilgii etiildal Standalus iii	
2		ces during the year which were not listed on the	No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make signification		
	services?		No
4	Describe the organization's program service accomplishment	nts for each of its three largest program services, as measured required to report the amount of grants and allocations to oth ruice reported.	
4a	(Code: ) (Expenses \$ 38,589. including gra	ants of \$ 0.) (Revenue \$ 35,296.)	
	To raise funds to help the needy in our c	ommunity	
	•		
4b	(Code: ) (Expenses \$ including gra	ente of \$\\/\Devenue \$\\\	
70			
			<b>-</b>
4c	(Code: including gra	ants of \$) (Revenue \$)	
			··
			·
	•••••••••••••••••••••••••••••••••••••••	·,	
•			
		,	
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ including grants of \$	) (Revenue \$	
4e	Total program service expenses ► 38,589.		

(60)

Part	Checklist of Required Schedules			1
•			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		×
2	complete Schedule A	2	<u> </u>	×
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		×
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		
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	×	
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		×
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		×
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		×
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		×
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		×
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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		×
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		×
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		×
d	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	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
	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		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a b	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
4-	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		×
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		_×
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		×
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		×
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		×
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	×	_
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		×
ь 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b	-+	
	domestic government on Part IX, column (A), line 1? #E'\'a\'a\'a\'i \column assistance to any domestic organization of	21	1	×

Part	Checklist of Required Schedules (continued)			
•			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		×
23	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		×
24a	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		×
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defeate any tax exempt bands?	24b 24c		_
ď	to defease any tax-exempt bonds?	24d	<del> </del>	<del> </del>
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		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	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		×
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	×
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		×
	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		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<del>  -</del>	<del>  ^</del>
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		×
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		×
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		×
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		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36	_	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		×
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	×	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- If not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
-	reportable gaming (gambling) winnings to prize winners?	1c	×	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
•			Yes	No			
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 this return 2a 12	<u> </u>	<u></u>	<u> </u>			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b_	×				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<u></u>					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?						
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	×	<u></u>			
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		×			
b	If "Yes," enter the name of the foreign country: ▶	<u>l</u> .		[_			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	<u> </u>					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	_	×			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		×			
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c_		ļ			
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?	<u>6a</u>		×			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or						
_	gifts were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		<u> </u>				
	and services provided to the payor?	7a		×			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.					
	required to file Form 8282?	7c		×			
	If "Yes," indicate the number of Forms 8282 filed during the year	70					
e •	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		×			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7g	_	×			
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?  If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	79 7h					
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8					
9	Sponsoring organizations maintaining donor advised funds.	۲		54			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:	-					
	Initiation fees and capital contributions included on Part VIII, line 12			. <b>-</b>			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1.					
	Section 501(c)(12) organizations. Enter:	1					
	Gross income from members or shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources			•			
	against amounts due or received from them.)	<u> </u>					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year   12b						
	Section 501(c)(29) qualified nonprofit health insurance issuers.	[ [	_				
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note. See the instructions for additional information the organization must report on Schedule O.		1				
ь	Enter the amount of reserves the organization is required to maintain by the states in which						
	the organization is licensed to issue qualified health plans		}				
С	Enter the amount of reserves on hand			,			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O .	14b					
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15		×			
	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?	16	]	×			
	If "Yes," complete Form 4720, Schedule O.	· T					

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 the response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change				
	Check if Schedule O contains a response or note to any line in this Part VI				
Sect	ion 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	<b>1a</b> 5			
	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.	46 -			
ь 2	Enter the number of voting members included in line 1a, above, who are independent .	1b 5			
2	Did any officer, director, trustee, or key employee have a family relationship or a business any other officer, director, trustee, or key employee?		2		×
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other	er person? .	3		×
4	Did the organization make any significant changes to its governing documents since the prior Form 9		4		×
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?.	5		×
6	Did the organization have members or stockholders?		6	<u></u>	
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a		_×
b	Are any governance decisions of the organization reserved to (or subject to approva stockholders, or persons other than the governing body?		7b		×
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	dertaken during			4
а	The governing body?		8a	×	
b	Each committee with authority to act on behalf of the governing body?		8b		×
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule C		9		×
Secti	on B. Policies (This Section B requests information about policies not required by th			ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		_ <u>×</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of affiliates, and branches to ensure their operations are consistent with the organization's exemple.		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	-	11a	×	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40-		
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	e rise to conflicts?	12a 12b	-+	_X
C	Did the organization regularly and consistently monitor and enforce compliance with the p		120	$\rightarrow$	
·	describe in Schedule O how this was done	· · · · ·	12c		
13	Did the organization have a written whistleblower policy?		13		_x
14	Did the organization have a written document retention and destruction policy?		14		_×_
15	Did the process for determining compensation of the following persons include a review a independent persons, comparability data, and contemporaneous substantiation of the deliberation				
а	The organization's CEO, Executive Director, or top management official		15a		×
b	Other officers or key employees of the organization		15b		×
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				1
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simi with a taxable entity during the year?	•	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization				
	participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	o safeguard the	16b		
Secti	on C. Disclosure	<del></del>	100	1	
17	List the states with which a copy of this Form 990 is required to be filed ▶			_	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable (3)s only) available for public inspection. Indicate how you made these available. Check all tha   Own website Another's website Upon request Other (explain in Sch	), 990, and 990-T t apply.			01(c)
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year.	•	erest p	olicy	, and
20	State the name, address, and telephone number of the person who possesses the organization		ords	<b>&gt;</b>	
	Diane Furlow, 9372 W. University Blvd, Odessa, TX 79764 (432)66	1-8930			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	office of directo	unles er an	Pos neck ss pe	rson Irect	than of the state	an tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Diane Furlow Sec / Treas	12.00	×		×				5,555.	0.	0.
(2) Lorraine Wilson Pres	10.00	×		×		_		5,168.	0.	0.
(3) Linda Baer V-P	<u> </u>	×		×				0.	0.	0.
(4) Irene Goheen Director		×						0.	0.	0.
(5) Shelly Owens Director		×						4,591.	0.	0.
										<del> </del>
(8)	<u> </u>							_		
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										

∘Par	VII Section A. Officers, Directors, Trus	tees, Key E	mplo	/ees	s, aı	nd F	lighe	st C	ompensated E	mployees (c	ontinu	red)	
•	(A) (B) Position (D) (E)					(E)		(F)					
	Name and title	Average hours per	20X, 2000 percers to 20					h an Reportable		Reportable compensation		Estimated amount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organization (W-2/1099-Mi		other compensation from the organization and related organizations	1
(15)				ě			ited						
(16)													
(17)													
(18)											_	<u></u>	
(19)											$\top$		
(20)							_						
(21)													
(22)					-								
(23)													
(24)			_										
(25)													
1b c d	Sub-total  Total from continuation sheets to Part Total (add lines 1b and 1c)	VII, Section	n A					<b>▼ ▼</b>	15,314.		0.		0.
2	Total number of individuals (including but reportable compensation from the organi	not limited	to th	ose	list	ed a	above	) wl		ore than \$10		of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete S							mp	loyee, or high	est compen	sated	Yes 3	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	ortat	ole c	com	per	satio						×
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indi	vidual		×
Section	on B. Independent Contractors												
1	Complete this table for your five highest of compensation from the organization. Replyear.												ıx
	(A) Name and business addi	ress							(B) Description of se	ervices		(C) Compensation	
													_
			_										<u> </u>
2	Total number of independent contractor received more than \$100,000 of compensations.							the	ose listed abo	ove) who	,		-7-

Par	t VIII	Statement of Revenue  Check if Schedule O contains a response or note to any line in this Part VIII								
		Official in Confedence of Confedence	ns a response of note (	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514			
levenue Contributions, Gifts, Grants and Other Similar Amounts	2a	Federated campaigns Membership dues Fundraising events Related organizations	1b 1,811.  1c 1d    1d    1s, ve 1f    1a-1f \$  Business Code	1,811.						
Program Service Revenue	b c d e	All other program service rev								
Pro	3 4	Total. Add lines 2a–2f  Investment income (including and other similar amounts)  Income from investment of tax-e	ng dividends, interest,				· ·			
	5 6a b	Royalties								
	c d 7a	Rental income or (loss)  Net rental income or (loss)	urities (ii) Other							
	b c	Less: cost or other basis and sales expenses Gain or (loss)				? ———	······································			
Other Revenue	d 8a	Net gain or (loss)	 e 1c).							
	С	Less: direct expenses Net income or (loss) from fund Gross income from gaming at See Part IV, line 19	draising events . ▶							
	С	Less: direct expenses Net income or (loss) from gan Gross sales of inventory returns and allowances	. <b>b</b> 1,046,643. ning activities . ▶ less	33,485.	0.	33,485.	0.			
	С	Less: cost of goods sold . Net income or (loss) from sale Miscellaneous Revenue	b							
	11a b c d	All other revenue								
	e 12	Total. Add lines 11a-11d.  Total revenue. See instruction		35,296.	0.	33,485.	0.			

	33 (23, 3)			<del></del>	
	t IX Statement of Functional Expenses		<del></del>		
Section	on 501(c)(3) and 501(c)(4) organizations must con				
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX .		
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1 2	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21.  Grants and other assistance to domestic	37,549.	37,549.		
	ındıvıduals. See Part IV, line 22				<del> </del>
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	_			
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal				<del></del>
C	Accounting				
d	Lobbying				<del></del>
e f	Professional fundraising services See Part IV, line 17 Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 20	Conferences, conventions, and meetings . Interest				
21	Payments to affiliates				
22 23	Depreciation, depletion, and amortization . Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column			7	
_	(A) amount, list line 24e expenses on Schedule O)	1 242	1 242		<del></del>
a b	Dues and subs	1,040.	1,040.	0.	0.
C					-
d		<del></del>			
e	All other expenses	_			
25	All other expenses  Total functional expenses. Add lines 1 through 24e	38,589.	38,589.	0.	0.
26	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 X Balance Sheet Beginning of year End of year 66,063. 65,521. 1 2 2 Savings and temporary cash investments . . . . . . . . . 3 3 4 4 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees. 5 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 Part II of Schedule L.... 6 7 8 Inventories for sale or use . . . . . . . Prepaid expenses and deferred charges . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10c Less: accumulated depreciation . . . . 10b 11 Investments—publicly traded securities 11 12 12 Investments—other securities. See Part IV, line 11 . . . . . Investments -- program-related. See Part IV, line 11 . . . . . 13 13 14 14 15 15 66,063. 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . . 16 65,521. 17 Accounts payable and accrued expenses . . . . . . 7,911. 17 10,661. 18 18 19 19 20 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . . . 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . Unsecured notes and loans payable to unrelated third parties . . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 . 7,911. 10,661. 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ **Assets or Fund Balances** complete lines 27 through 29, and lines 33 and 34. 27 58,152. 27 54,860. 28 28 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 32 Retained earnings, endowment, accumulated income, or other funds . Net / 58,152. 54,860. 33 33 66,063. 65,521. Total liabilities and net assets/fund balances . . . . . . . . . . . 34

•	•				
Form 9	90 (2018)			Pa	age <b>1</b> 2
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>	<u>.</u>	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		35,2	96.
2	Total expenses (must equal Part IX, column (A), line 25)	2		38,5	89.
3	Revenue less expenses. Subtract line 2 from line 1	3		-3,2	293.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		58,1	52.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			1.
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		54,8	860.
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	· · ·		
				Yes	No
1	Accounting method used to prepare the Form 990: 🗵 Cash 🔲 Accrual 🔲 Other		'	'	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	] .'		a
	Schedule O.		<u> </u>		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		×
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or	<b>.</b> [	٠. ا	,
	reviewed on a separate basis, consolidated basis, or both:		3 ,		•
	Separate basis Consolidated basis Both consolidated and separate basis				•
b	Were the organization's financial statements audited by an independent accountant?		2b		×
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on a		, 1	
	separate basis, consolidated basis, or both:		'		
	Separate basis Consolidated basis Both consolidated and separate basis		ļ		
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent account	ntant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in	[ · [	, ,	,*

**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.

Schedule O.

Form **990** (2018)

За

3b

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

## **Political Campaign and Lobbying Activities**

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► 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) (s	see separate instructions),	then			
• S	ection 501(c)(4), (5), or (6) org	anizations Complete Part III			
Name	of organization			Employer ide	ntification number
	ernational Associa			75-2243	
Part	I-A Complete if the	e organization is exempt u	nder section 501	(c) or is a section 527	organization.
1	definition of "political ca		·	· -	t IV. (see instructions fo
2	Political campaign activ	ty expenditures (see instructions	s)		\$
3		ical campaign activities (see inst			
Part	I-B Complete if the	e organization is exempt u	nder section 501	(c)(3).	
1	Enter the amount of any	excise tax incurred by the organ	nization under section	on 4955 🕨 🤄	\$
2	Enter the amount of any	excise tax incurred by organizat	tion managers unde	r section 4955 🕨 🧐	\$
3	If the organization incurr	ed a section 4955 tax, did it file	Form 4720 for this y	/ear?	
4a		'			LYes LNo
<u>b</u>	If "Yes," describe in Par				
Part		e organization is exempt u			I(c)(3)
1	activities	tly expended by the filing orga			<b>5</b>
2	527 exempt function act	e filing organization's funds consisting		ganizations for section ...... \$	
3	line 17b	expenditures. Add lines 1 and			Yes No
<b>4</b> <b>5</b>	Enter the names, address organization made paym the amount of political controls.	In file Form 1120-POL for this yearses and employer identification sents. For each organization lister contributions received that were put fund or a political action committed.	number (EIN) of all s d, enter the amount promptly and directly	section 527 political organ paid from the filing organ y delivered to a separate p	izations to which the filing ization's funds. Also ente political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Pa	art II-A	Complete if the organizatio section 501(h)).	n is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Check ▶						er's name,
В	Check ▶	theck ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.					
		Limits on Lobb (The term "expenditures" m			.)	(a) Filing organization's totals	(b) Affiliated group totals
1	ia Total id	obbying expenditures to influence	public opinior	(grass roots lobby	ying)		
	<b>b</b> Total lo	obbying expenditures to influence	a legislative b	ody (direct lobbyin			
	c Total lo	obbying expenditures (add lines 1	a and 1b) .				
	d Other	exempt purpose expenditures .					
	e Total e	Total exempt purpose expenditures (add lines 1c and 1d)					
		Lobbying nontaxable amount. Enter the amount from the following table in both columns.					
	If the ar	nount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not ove	r \$500,000	20% of the a	mount on line 1e			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000		
	Over \$1	Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000			over \$1,000,000		
	Over \$1	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
	Over \$1	Over \$17,000,000 \$1,000,000				<u>.                                    </u>	
	-	· · · · · · · · · · · · · · · · · · ·					
	h Subtract line 1g from line 1a. If zero or less, enter -0						
		Subtract line 1f from line 1c. If zero or less, enter -0					
	If there is an amount other than zero on either line 1h or line 1i, did the organization reporting section 4911 tax for this year?						Yes No
	(Som	e organizations that made a sec	ction 501(h) el	Period Under Sec ection do not hav ructions for lines	e to complete all	of the five columns	s below.
		Lobbying	Expenditures	During 4-Year A	veraging Period		
	Cale	ndar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	( <b>d)</b> 2018	(e) Total
2	a Lobbyı	ng nontaxable amount					
		ng ceiling amount of line 2a, column (e))					
	c Total lo	bbying expenditures					
	<b>d</b> Grassro	oots nontaxable amount					
		oots ceiling amount of line 2d, column (e))					
	f Grassro	pots lobbying expenditures					

1 Were substantially all (90% or more) dues received nondeductible by members?	
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or broadcast statements?  f Grants to other organizations for lobbying purposes?  g Direct contact with legislators, their staffs, government officials, or a legislative body?  h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  i Other activities?  j Total. Add lines 1c through 11  2D bid 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 by organization managers under section 4912  d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Vere substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization make only in-house lobbying and political campaign activity expenditures from the prior year?  1 Were substantially all either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines 1 and 2, are answered "No," OR (b) Part IIII-A, lines 1 and 2 activity expensitures from the prior year?  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  2 Current year  b Carryover from last year	ount .
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:  Volunteers?  Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  Media advertisements?  Mailings to members, legislators, or the public?  Publications, or published or broadcast statements?  Grants to other organizations for lobbying purposes?  Direct contact with legislators, their staffs, government officials, or a legislative body?  Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Total. Add lines 1c through 11  Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  If "Yes," enter the amount of any tax incurred under section 4912  If the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  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 make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?  Were substantially all (90% or more) dues received nondeductible by members?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 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).	
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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 11 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Dues, assessments and similar amounts from members 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year  b Carryover from last year	
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501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?	
1 Were substantially all (90% or more) dues received nondeductible by members?	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	Yes No
Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, lines answered "Yes."  Dues, assessments and similar amounts from members	×
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2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year	ne 3, is
political expenses for which the section 527(f) tax was paid).  a Current year	
b Carryover from last year	
c Total	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	
and political expenditure next year?	
5 Taxable amount of lobbying and political expenditures (see instructions)	
Part IV Supplemental Information  Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.	es 1 and

Schedule C (For	m 990 or 990-EZ) 2018	Page
<sup>5</sup> Part IV	Supplemental Information (continued)	
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		***************************************
		***************************************
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#### SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name	of the organization					Employer identifi	
	ernational Association					75-2243510	
Par	Fundraising Activities. Form 990-EZ filers are r				vered "Yes" on	Form 990, Part IV,	line 17.
1	Indicate whether the organization	n raised funds t	through any	of the follo	owing activities. C	heck all that apply.	
а			e [		ion of non-govern	_	
b	Internet and email solicitatio	ns	f [		ion of governmen	_	
С							
d							
2a Did the organization have a written or oral agreement with any individual (including officers, director or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising se							
b	If "Yes," list the 10 highest paid compensated at least \$5,000 by			draisers) pu	ursuant to agreem	nents under which th	ne fundraiser is to be
_	(i) Native and address of inclinated by (iii) Activity custody or control of (iv) Grow activity (indicated by (inclinated by (or retained by from activity (indicated by indicated by indicated by indicated by (indicated by indicated by indi					(vi) Amount paid to (or retained by) organization	
		<del>-</del>	Yes	No			
1							
2							
3							
4							
5							
6	<del>-</del>						
7							
8							
9							
10		<u> </u>					
Total			<del></del>				
3	List all states in which the organ registration or licensing.	nization is regis	tered or lice	ensed to s	olicit contribution	s or has been notifie	ed it is exempt from
		<del>-</del>	·	<del>-</del>	•		
			· · · · · · · · · · · · · · · · · · ·				
			· · · · · · · · · · · · · · · · · · ·				••
	•••••••••••••••••••••••••••••••••••••••		••				
							_

	edule G	(Form 990 or 990-EZ) 2018  Fundraising Events. Conthan \$15,000 of fundraising	mplete if the organizat	ion answered "Yes" or	n Form 990, Part IV, lir	Page 2 ne 18, or reported more and 6b. List events with
_	<del>-</del>	gross receipts greater that	an \$5,000.		<del>,</del>	
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col (a) through
Revenue			(event type)	(event type)	(total number)	col (c)
		Cross recounts				
	1	Gross receipts				
_	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes				
enses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .				
	10 11	Direct expense summary. Ac Net income summary. Subtra	act line 10 from line 3, c	olumn (d)		
Pa	rt III	Gaming. Complete if th \$15,000 on Form 990-E.		ered "Yes" on Form 9	990, Part IV, line 19, o	or reported more than
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Re	1	Gross revenue	182,581.	897,547.		1,080,128.
Direct Expenses	2	Cash prizes	182,581.	711,409.		893,990.
	3	Noncash prizes				
	4	Rent/facility costs		38,003.		38,003.
	5_	Other direct expenses .		114,650.		114,650.
	6	Volunteer labor	☐ Yes %  ☑ No	☐ Yes       %         ☒ No	☐ Yes % ☐ No	
	7	Direct expense summary. Ad	ld lines 2 through 5 in co	olumn (d)		1,046,643.
	8	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)		33,485.
9		ter the state(s) in which the or				
		the organization licensed to co				
40						
10a		ere any of the organization's g Yes," explain·				

Schedu	ule G (Form 990 or 990-EZ) 2018		Page <b>3</b>			
11	Does the organization conduct gaming activities with nonmembers?	X Yes	☐ No			
12'	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	⊠ No			
13 a	Indicate the percentage of gaming activity conducted in:  The organization's facility		%			
b	An outside facility		<del>%</del>			
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:					
	Name ► Diane Furlow					
	Address ► 9372 W University Blvd Odessa TX 79764					
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	⊠ No			
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$					
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	- · · · · · · · · · · · · · · · · · · ·					
	retain the state gaming license?	⊠ Yes	∐ No			
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$ 37,549.					
Part						
		<del></del> ,				
			·			

#### SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

### Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization	Employer identification number
International Association of Lions	75-2243510
Pt VI, Line 6: The Organization has members from the community.	•••••
Pt VI, Line 8b: No committees.	
Pt VI, Line 11b: The Board approves the Form 990 prior to filing.	
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