For	 990
(Re	v. January 2020)
	artment of the Tr mal Revenue Ser
A	For the 2019
В	Check if applica
	Address change
	Name change
	Initial return
	Final return/term
	Amended return
	Application pen

Return of	Organization	Exempt	From	Income	Tax
	-	•			

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

OMB No. 1545-0047

		f the Treasury nue Service		ov/Form990 for instru			-			2001	Inspect	
A			dar year, or tax year beginning	August 1		2019, and				iy 31	, 20 20	-
В	· · · · · · · · · · · · · · · · · · ·	applicable.	C Name of organization The Tau E		ضحت						oyer identification	number
	Address	• •	Doing business as	eta Fi Association, III	icorp	Oraced				1	62-0479545	
H	Name ch	•									hone number	
Н		•	90								865-546-4578	
H	Initial return P.O. Box 2697 City or town, state or province, country, and ZIP or foreign postal code									1	000 0 10 1070	
H	Amende		Knoxville, Tennessee 37901-2		,000	0000				G Gross	receipts \$	4,605,279
H		on pending	F Name and address of principal offi		ski			Н	(a) is this a		or subordinates? V	
	Applicati		P.O. Box 2697, Knoxville, TN 3				. 1				es included? Y	
$\overline{}$	Tax-exe	mpt status	√ 501(c)(3) 501(c) (4947((a)(1) or	327	7			st. (see instructions	
		: ► www.tb	_=		1	* ::- *		Н	(c) Group	exemption	number ▶	
K			Corporation Trust Associa	tion ☐ Other ►		L Year	r of form	nation:	1885	M State	of legal domicile	TN
Р	art I	Summa										
	1		cribe the organization's missi	on or most significar	nt ac	tivities:	Foster	ring ex	cellence	in engin	eering education	n for
ě	1	more than		Ü		•						
au	ł		***************************************									
e.	2	Check this	box ▶ ☐ if the organization	discontinued its ope	ratio	ns or dis	spose	d of m	ore tha	n 25% of	its net assets.	
Š	3		f voting members of the gove							3		9
Activities & Governance	4	Number of	findependent voting member	s of the governing bo	ody (Part VI,	line 1	b) .		4		9
ë	5	Total numb	ber of individuals employed in	calendar year 2019	(Par	t V, line	2a)			5		16
Ξ	6		ber of volunteers (estimate if r					. :	<u></u> .	6		102
P	7a				line	BEC	E1\/	ΕD		7a		0
	Ь	Net unrelat	ated business revenue from fitted business taxable income	from Form 990-T, in	e <u>39</u>	REC	L.I V		<u> -01.</u>	7b		0
	1			· · ·	ol				Fyib Y	ear	Current Ye	ar
a)	8	Contributio	ons and grants (Part VIII, line	1h) 🤤	۷.	JUN :	1 5. 2	ZDZT	9	2,170,783		2,990,191
Ž	9		ervice revenue (Part VIII, line	I f	기.				ď	493,661		404,758
Revenue	10	Investment	t income (Part VIII, column (A)	, lines 3, 4, and 7d		000	EN	LIT		2,860,538		1,378,781
Œ	11	Other reve	t income (Part VIII, column (A) nue (Part VIII, column (A), line	s 5, 6d, 8c, 9c, 10d	and	H&D	L 1 V,			17,626		(16,051)
	12	Total reven	nue-add lines 8 through 11 (m	nust equal Part VIII, co	olum	n (A), line	e 12)			5,542,608		4,757,679
	13		d sımılar amounts paid (Part I)							964,601		890,905
	14	Benefits pa	aid to or for members (Part IX	, column (A), line 4)						883		883
ģ	15	Salaries, ot	other compensation, employee benefits (Part IX, column (A), lines 5-10)						996,721		982,180	
Expenses	16a	Profession	al fundraising fees (Part IX, co	olumn (A), line 11e)						7,500		7,500
ŝ	Ь	Total fundr	raising expenses (Part IX, colu	ımn (D), line 25) 🕨 _		42	5,494					
ũ	17	Other expe	enses (Part IX, column (A), line	es 11a-11d, 11f-24e) .					1,479,412		1,247,478
	18		nses. Add lines 13-17 (must o					L		3,449,117		3,128,946
	19	Revenue le	ess expenses. Subtract line 1	8 from line 12	<u></u>		<u> </u>	<u> </u>		2,093,491		1,628,733
Net Assets or Fund Balances								Begin	ning of C	urrent Year	End of Ye	
Sets	20	Total asset	ts (Part X, line 16)							0,671,655	33	<u>3,183,941</u>
A P	21		ities (Part X, line 26)					<u> </u>		2,590,43 7		2,766,619
žZ	22		or fund balances. Subtract li	ne 21 from line 20			·•	1	2	8,081,218	30	0,417,332
	art II		ire Block									
Ur	der pena	ties of perjury	r, I declare that I have examined this re te Declaration of proparer (other than	etum, including accompan	ying s	schedules on of which	and sta h prepa	tements	s, and to t anv know	he best of r ledae	ny knowledge and	belief, it is
	e, conec	1, 210 00 110 1			-						1/2021	
e:		June	o D. Sambel							ite	1/2021	
Sig	_	, , –	ure of officer	utiva Director					U	iic		
HE	ere		tis D. Gomulinski, Execu	inve Director							 	
		<u> </u>	or print name and title	Desperario granatura			- 1	Date		10	□ d PTIN	
Pa	id	Printriype	preparer's name	Preparer's signature			- 1	Dait		Check self-em	₩"	
Pr	epare	r		<u> </u>					T		· · ·	
	e Onl	V Firm's nan		· · · · · · · · · · · · · · · · · · ·						n's EIN ▶		
840	v tha IF	Firm's add	_ 	hown shove? (see in	netri :	ctions)			Pne	one no	. Yes	□No
			this return with the preparer s		ioti U	Cuoris)		No. 11	2027	- : - : -		90 (2019)
ror	raperv	vork Heauct	tion Act Notice, see the separat	e instructions.			uat	No 11	4041		rom a	/ ~~ (2013)

2,553,973

Total program service expenses ▶

Part	IV 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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
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		1
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		1
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		1
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		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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.			
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		✓
11	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	✓	
а	VII, VIII, IX, or X as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
b	complete Schedule D, Part VI	11a	√	
С	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
d	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
e	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d 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		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	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		1
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		1
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		1
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		1
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		√
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
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	/	

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	1	
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		1
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
c	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		1
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		✓
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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		√
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) 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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		✓
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? 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		1
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		1
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	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		✓
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? Note: All Form 990 filers are required to complete Schedule O.	38	1	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
-			Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	_	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2 a	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 19			
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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		✓
ь	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
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 ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
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		✓
C	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		1
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]		
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		,
	required to file Form 8282?	7c		✓
ď	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 7f	-	√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	\vdash		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	''' 		1
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 the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
э a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:		1	
а	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)]	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	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.			
b	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		✓
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on 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.	16		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes." complete Form 4720, Schedule O.	10		V
	n res. Complete futil 4720, Joheane U.	. 1	1	

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Se									
Sect	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	•	. 🗸						
0000	IOI 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	,								
	If there are material differences in voting rights among members of the governing body, or	1								
	if the governing body delegated broad authority to an executive committee or similar									
	committee, explain on Schedule O.]								
b	Enter the number of voting members included on line 1a, above, who are independent . 1b s	1								
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	<u> </u>	1						
3	Did the organization delegate control over management duties customarily performed by or under the direct	i	ľ	1						
	supervision of officers, directors, trustees, or key employees to a management company or other person? .	3	ļ	✓						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	ļ	1						
5	Did the organization become aware during the year of a significant diversion of the organization'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 elect or appoint									
_	one or more members of the governing body?	7a	✓	 						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	ĺ _{⊸⊾} ∣								
_	stockholders, or persons other than the governing body?	7b	-	 						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		}							
а	The governing body?	8a	1							
b	Each committee with authority to act on behalf of the governing body?	8b	1							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	<u> </u>	Ť							
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		1						
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)							
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a	\							
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								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	✓							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	✓							
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"									
	describe in Schedule O how this was done	12c	√							
13	Did the organization have a written whistleblower policy?	13	V							
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 and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ľ						
а	The organization's CEO, Executive Director, or top management official	15a	1							
b	Other officers or key employees of the organization	15b	1							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	.00								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement									
	with a taxable entity during the year?	16a		\						
b	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?	16b								
Secti	on C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ▶ Please see Schedule O for complete list	sting.								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T		tion 5	01(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 on Schedule O)									
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict or	f inter	est p	olicy,						
	and financial statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords	▶							

Michael A. Brown - 1512 Middle Drive, 508 Dougherty Engineering Bldg., UTK, Knoxville, TN 37996 - (865) 546-4578

Form	ggn	(2019)	

	-
Page	? /

Part VII	Compensation of Officers, Directors, Trustees, Key Emplo	oyees, 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 employee."
- 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. See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization no	r any relate	d org	anız	atio	n c	ompe	nsa	ted any current	officer, director,	or trustee.
	Ī			(6	C)					
(A)	(B)	l			ition			(D)	(E)	(F)
Name and title	Average					than o is both		Reportable	Reportable	Estimated amount
	hours					or/trus		compensation	compensation	of other
	per week (list any	익	Ę	Q	8	3 %	ु मु	from the organization	from related organizations	compensation from the
	hours for	a d	훒	Officer	ě	D 35	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related lorganizations	용률	Š	'	Key employee	9 8				related organizations
	below	Individual trustee or director	효		yea	를				
	dotted line)	8	Institutional trustee			Highest compensated employee	l			
•			•			<u> </u>	L			
(1) C. Craig Smtih	5					}				
President, Executive Councillor	ļ	✓		✓	_	ļ				
(2) George J. Morales	5				Ì					
Vice President, Executive Councillor	<u></u>	✓	_	✓		-	L	ļ <u>.</u>		
(3) Rachel K. Alexander	5									
Secretary, Executive Councillor	ļ	/	<u> </u>	✓	<u> </u>	<u> </u>	L			
(4) Scott E. Fable	5		1			1				
Treasurer, Executive Councillor		✓		✓	_		L			
(5) Stephan L. King-Monroe	5									
Executive Councillor		✓	_				ļ			
(6) Michael L. Peterson	5					1				
Executive Councillor		✓	L	L.,	ļ		L_			
(7) Russ W. Pierce	5						l			
Executive Councillor		✓	L	ļ	L.		_			
(8) George Youssef	5									
Executive Councillor		✓	_			ļ				
(9) Menna Youssef	5									
Executive Councillor		✓		L					·-·-	
(10) PNC Bank	1					Ì				
Trustee			1	_			L_			
(11) Curtis D. Gomulinski	50					l				
Executive Director				✓			<u> </u>	96364	0	12604
(12) Wayne Paugh	5	ļ	1							
President, Executive Councillor		✓		✓	<u> </u>		✓			
(13)	ļ		1			İ				
	ļ	<u> </u>		<u> </u>	<u> </u>		<u> </u>	ļ		
(14)	ļ									
	L				<u> </u>			1		

Part	VII Section A. Officers, Directors, 1	Trustees,	Key l	Emi	plo	yee	s, an	ıd I	Highest Compe	nsated Empl	oyees (continued)
	(A) Name and title	(B) Average hours	(do n	ot ch	Pos neck ss pe	c) sition more rson	e than o	one n an	(D) Reportable	(E) Reportable compensation	(F) Estimated amount of other
		per week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	→ from the	from related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15)											
(16)								T			
(17)											
(18)											
(19)					-						
(20)							[
(21)			ļ <u></u>								
(22)											
(23)											
(24)											
(25)							_				
1b	Subtotal		<u> </u>		•	•		▶	96364		0 12604
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)			•	•			>	96364		0 0 0 12604
2	Total number of individuals (including but reportable compensation from the organi	not limited					above	e) w			
											Yes No
3	Did the organization list any former of employee on line 1a? If "Yes," complete s	Schedule J	for su	ıch	indi	ividu	ıal				3 1
4	For any individual listed on line 1a, is the organization and related organizations individual										
5	Did any person listed on line 1a receive of for services rendered to the organization?									tion or individua	al
Secti	on B. Independent Contractors										
1	Complete this table for your five high compensation from the organization. Report	nest compo ort compen	ensation	ed n for	inde r the	eper e ca	ndent lenda	r ye	ontractors that rear ending with or	eceived more within the orga	than \$100,000 of inization's tax year.
	(A) Name and business add	ress	•						(B) Description of sen	/ices	(C) Compensation
LSC C	ommunications; P.O. Box 730216, Dallas, TX	75373-0216						_	inting of publication	on	115,632
Newpo	ort One; 33 Railroad Avenue, Duxbury, MA 02	332						Ma	ailing to alumni		120,568
2	Total number of independent contractor received more than \$100,000 of compens) th	hose listed abov	e) who	

۰	990 (2011 t VIII	9) Statement of Revenue						Page 9
		Check if Schedule O contains	respor	ise or note to an	y line in this Pa	rt VIII		🗆
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
হ হ	1a	Federated campaigns	1a	652			· ····	
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues		245,821		•		
a, È	С	Fundraising events		0				
ifts ar A	d	Related organizations		0				
e, E	e	Government grants (contribution		O				
Contributions, and Other Sim	f	All other contributions, gifts, grar and similar amounts not included about						
E E	_	Noncash contributions included		2,743,718				
E 9	9	lines 1a-1f		\$ 13,869				
a S	h	Total. Add lines 1a-1f			2,990,191			
				Business Code				
8	2a	Employment advertisements		541800	8,350	8,350	0	0
<u> </u>	b	Split interest agreement		525920	(1,801)	(1,801)	0	0
S	C	Annual Convention		611600	256,054	256,054	0	0
yram Ser Revenue	đ	Member publications		541800	98,325	98,325	0	0
Program Service Revenue	е							
<u>a</u>	f	All other program service revenu		541900	43,920	43,920	•	
	9	Total. Add lines 2a-2f			404,758			
	3	Investment income (including of other similar amounts)			4 270 226	1 270 226	o	_
	4	Income from investment of tax-ex			1,379,236 0		0	
	5	Royalties	-		0		0	
			Real	(ii) Personal				Ī
	6a	Gross rents 6a	(o				
	b	Less: rental expenses 6b		0				
	С	Rental income or (loss) 6c	(0				
	ď			,	0	0	0	0
	7a	Gloss amount nom	unties	(ii) Other				
		sales of assets						
•		other than inventory 7a	13,869	(455)				
enne	b	Less: cost or other basis and sales expenses . 7b	(13,869)	اه				
»Xe	С	Gain or (loss) 7c	(13,663)					·
æ	ď	Net gain or (loss)		•	(455)	(455)	0	0
Other Rev	8a	Gross income from fundraisir	a [
δ		events (not including \$	<u>o</u>					
		of contributions reported on lir		1				
		1c). See Part IV, line 18		0				
	b	Less: direct expenses		0				
	С	Net income or (loss) from fundra	7	ents ▶	0		0	<u>0</u>
	9a	Gross income from gamir activities. See Part IV, line 19	- 1					
	ь	Less: direct expenses	9b	- 3				
	c	Net income or (loss) from gaming		es >	0	0	0	0
		Gross sales of inventory, les						
		returns and allowances		122,480				
	b	Less: cost of goods sold	10b	(138,531)				
	С	Net income or (loss) from sales of	finvento	ory ▶	(16,051)	(16,051)	0	0
Sn				Business Code				[
ne ne	11a							
scellaneo Revenue	b			ļ				
Re.	C	All other revenue						<u> </u>
Miscellaneous Revenue	de	All other revenue			0			
	12	Total revenue. See instructions			4,757,679		0	0

	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must comp				mn (A).
	Check if Schedule O contains a response				<u> L</u>
	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .	6,450	6,450		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	884,455	884,455		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	o	0		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	883 131,894	883 93,505	38,389	0
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	33,303	0	
7	Other salaries and wages	708,426	515,256	0	193,170
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	25,403	18,087	0	7,316
9	Other employee benefits	53,698	39,205	0	144,94
10	Payroll taxes	62,759	45,465	2,620	14,674
11 a	Fees for services (nonemployees): Management	0	0	0,020	
_	,		3,417	48	385
b	Legal	3,850	13,135	185	1,480
C	Accounting	14,800		165	1,460
d	Lobbying	0	·	U	<u>_</u>
e	Professional fundraising services. See Part IV, line 17	7,500		47 774	7,500
f	Investment management fees	17,774	<u>0</u>	17,774	<u></u>
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	27,423	26903	100	420
12	Advertising and promotion	31,919	1974	202	29,742
13	Office expenses	108,857	67861	28,611	12,385
14	Information technology	21,015	14928	727	5,360
15	Royalties	0	0	0	0
16	Occupancy	27,518	23364	297	3,857
17	Travel	222,522	190641	19,244	12,637
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	o	O
19	Conferences, conventions, and meetings .	340,499	332,837	7,662	0
20	Interest	0	0	0	O
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	7,851	5,031	2,275	546
23	Insurance	4,969	4,221	68	680
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If	1,000	,,==-		
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
_	Insignia & certificates for new members	00700	00720	0	0
a b	Awards & Recognition	99728 1303	99728 1295		8
C	Magazine printing and mailing	165335	165335	0	0
d	Alumni giving program printing and mailing	117454	163339	0	117454
	All other expenses		0	31275	3388
е 25	Total functional expenses. Add lines 1 through 24e	34662 3128946	2553973	149479	425494
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)	3128946	25539/3	1434/3	423434

Do					Page 11
Ρa	irt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par	tX	· · ·	<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	594,512	1	627,090
	2	Savings and temporary cash investments	238	2	1,932
	3	Pledges and grants receivable, net	393,171	3	378,642
	4	Accounts receivable, net	106,169	4	60,970
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	 0	5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	
2	7	Notes and loans receivable, net	18,071	7	18,647
Assets	8	Inventories for sale or use	60,819	8	92,311
AS	9	Prepaid expenses and deferred charges	42,109	9	61,726
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 12,2571			
	b	Less: accumulated depreciation 10b 8,4230	29,665	10c	38,341
	11	Investments—publicly traded securities	28,543,095	11	31,022,384
	12	Investments—other securities. See Part IV, line 11	0	12	
	13	Investments—program-related. See Part IV, line 11	883,806	13	882,005
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11	0	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	30,671,655		33,183,948
ľ	17	Accounts payable and accrued expenses	233,270		337,998
	18	Grants payable			893,300
	19	Deferred revenue	335,500		296,196
ŀ	20	Tax-exempt bond liabilities	0	20	
- 1	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0	21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0		
į	22	Secured mortgages and notes payable to unrelated third parties	0	23	185,700
1 '	23 24	Unsecured notes and loans payable to unrelated third parties	0	24	163,700
1		Other liabilities (including federal income tax, payables to related third	<u>_</u>		
	25	parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	1,070,507	25	1,053,425
	26	-	2,590,437		2,766,619
$\overline{}$	20	Total liabilities. Add lines 17 through 25			£, 100,013
ğ		and complete lines 27, 28, 32, and 33.			
<u>a</u>	27	Net assets without donor restrictions	8,528,703	27	15,999,726
8	 28	Net assets with donor restrictions	19,552,508		14,417,603
or Fund Balances		Organizations that do not follow FASB ASC 958, check here ▶ ☐ and complete lines 29 through 33.			
ا ة	29	Capital stock or trust principal, or current funds		29	

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

Total liabilities and net assets/fund balances .

Retained earnings, endowment, accumulated income, or other funds . . .

31

32

Form **990** (2019)

30,417,329

33,183,948

30

31

32

28,081,211 30,671,648 33

Par	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>	<u>. 🛚</u>
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4,7	57,679
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,1	28,946
3	Revenue less expenses. Subtract line 2 from line 1	3		1,6	28,733
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		28,0	81,21 <u>1</u>
5	Net unrealized gains (losses) on investments	5		6	70,306
6	Donated services and use of facilities	6			<u> 37,079</u>
7	Investment expenses	7			0
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line	[]		-	-
	32, column (B))	10		30,4	17,329
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	<u>. П</u>
				Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other				1 1
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	in	-	1
	Schedule O.			_	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	1	✓
	If "Yes," check a box below to indicate whether the financial statements for the year were cor	npiled	or		
	reviewed on a separate basis, consolidated basis, or both:		- 1		
	Separate basis Consolidated basis Both consolidated and separate basis		<u> </u>	_	
b	Were the organization's financial statements audited by an independent accountant?		. 21) \	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted or	ı a	1	
	separate basis, consolidated basis, or both:			1	
	☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			_	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for over			1	
	the audit, review, or compilation of its financial statements and selection of an independent accounts			: 🗸	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, ex	kplain	on		
	Schedule O.		<u> </u>	_	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fo	rth in 1			
	Single Audit Act and OMB Circular A-133?		38	Ц	✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	lergo t	he		
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a	udits .			<u></u>
				aa ((2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2019
Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

The 1	au E	3eta		ssoci																	479545
Pa	rt I		Rea	son	for	Pub	lic	Cha	rity	State	us (All	orgai	nizati	ons mu	ıst c	comple	te this	par	t.) See i	nstructi	ons.
The	orga	niz	ation	is no	tap	rivat	te fo	unda	ation	beca	use it	is: (Fo	rlines	1 throu	gh 1	12, chec	k only c	ne	box.)		
1		Αc	hurc	n, co	nver	ntion	of c	hurc	hes,	or as	sociat	ion of	churc	hes des	crib	ed in se	ection 1	70(b)(1)(A)(i).	
2		A s	choc	l des	crib	ed in	sec	tion	170	(b)(1)	(A)(ii).	(Attac	h Sch	edule E	(Fo	m 990	or 990-E	ΞΖ).)	(\mathcal{A}
3																					ノし
4																				D(b)(1)(A)(iii). Enter the
•	_						-			,		•			-						
5		An	orga	or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Lical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the al's name, city, and state: Lanization operated for the benefit of a college or university owned or operated by a governmental unit described in 170(b)(1)(A)(iv). (Complete Part II.)																	
6 7		An	orga	nizati	on 1	hat i	norn	nally	rece	eives		stantial	part	describe of its su						it or fro	m the general public
8		Αc	omn	unity	trus	st de	scrit	oed i	n se	ction	170(b)(1)(A)	(vi). (C	Complet	te Pa	art II.)					
9		or i uni	unive versi	rsity (:y:	or a	non-	-lanc	d-gra	int c	ollege	of ag	ricultur	re (see	e instruc	tion	s). Ente	r the na	me,	city, and	d state c	land-grant college of the college or
10		rec sur acc	eipts port juire	from from I by t	act gro he c	ivitie ss in orgar	s rel vest uzat	ated men ion a	to it t inc ifter	s exe ome a June	mpt fu and un 30, 19	inction related 75. Se	s—su d busi e sec	ibject to ness tax tion 509	cer xabl 9(a) (tain exc e incom (2). (Cor	eptions e (less : nplete F	, an sect	d (2) no ion 511 III.)	more that tax) fron	ip fees, and gross an 331/3% of its businesses
11																			1 509(a)(
12		An	orga	nizati	on c	rgan	ized	and	ope	erated	exclu	sively 1	for the	e benefit	of,	to perfe	orm the	fund	ctions of	or to ca	arry out the purposes
		Ch	eck t	ne bo	x in	lines	12a	thro	ough	12d t	hat de	scribe	s the t	type of s	supp	orting o	rganizat	tion	and con	nplete lin	ee section 509(a)(3) es 12e, 12f, and 12g
а	[the s	uppo	rtec	dorg	anız	atior	n(s) ti	he po	wer to	regula	arly ap	d, or cor opoint or Sectior	r ele	ct a ma	jority of	orte the	d organı dırector	zation(s) s or trus	, typically by giving tees of the
b	[cont	rol or	ma	nage	mer	nt of	the s	suppo	orting o	organiz	ation	olled in ovested in a second contract of the c	in th	nection ne same	with its person	sup s th	ported of at contro	organizat ol or mar	tion(s), by having nage the supported
C	[Тур	e III fi	ınc	iona	ılly i	nteg	rate	d. A s	suppor	ting o	rganiz	ation op	oera	ted in c te Part	onnection IV, Sec	on v tior	vith, and is A, D, a	function and E.	nally integrated with,
d	[Typo that	III n	on-	func ction	tion nally	ally inte	i nte g	g rate ed. Th	d. A su ne orga	upporti anizatio	ing or	ganizatı	on o nust	perated satisfy	d ın coni a distrib	nect outio	tion with on requir	its supp	orted organization(s nd an attentiveness
е	(Che func	ck thi tional	s bo ly in	x if t	he c	rgar , or	nizati Type	on re	ceived n-func	a writ	ten de ly inte	etermina grated s	ation supp	from the	ne IRS tl organiza	hat itior	it is a Ty	ре І, Тур	e II, Type III
f	Er	nte	the	numt	er c	f su	opor	ted (orga	nizatio	ons .										
g	Pi	rovi	de th	e foli	owii	ng in	form	natio	n ab	out th	e supp	oorted	orgar	nization((s).						
				pporte						(ii) Ei		(iii) Ty (desc	pe of c	organizatio n lines 1-1 nstructions	on (sted in you	rganization ur governin ment?		Amount o suppor instruc	t (see	(vi) Amount of other support (see instructions)
																Yes	No	1			
(A)										··				•							
(B)														···		**************************************					
(C)															7			1			
(D)															1			1			
(E)	,,										<u> </u>				1			†			

Total

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

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

Secti	ion A. Public Support						
	idar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	2,046,889	2,636,089	2,138,656	2,170,783	2,990,191	11,982,608
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	482,825	475,808	469,660	493,661	404,758	2,326,712
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	o	0	0	o	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	o	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	o	0	o	0	0	0
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	2,529,714	3,111,897	2,608,316	2,664,444	3,394,949	14,309,320
_	•	0	0			 9	0
b	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						
	·	0	0	0		0	0
8 8	Add lines 7a and 7b	0	0	0	0	0	14,309,320
Secti	on B. Total Support	. <u> </u>					14,000,020
Calen	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6	2,529,714	3,111,897	2,608,316	2,664,444	3,394,949	14,309,320
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	420,692	352,433	465,277	385,420	529,389	2,153,211
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	o	0	o	0	. 0
C	Add lines 10a and 10b	420,692	352,433	465,277	385,420	529,389	2,153,211
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income. Do not include gain or loss from the sale of capital assets	0					
40	(Explain in Part VI.)	196,495	183,769	184,877	185,875	122,480	873,496
13	Total support. (Add lines 9, 10c, 11, and 12.)	3,146,901	3,648,099	3,258,470	3,235,739	4,046,818	17,336,028
14	organization, check this box and stop her	<u>e</u>	· · ·		-		
	on C. Computation of Public Suppor			0 (0)		TagT	00 = 0/
15	Public support percentage for 2019 (line 8					15	82.5 %
16 Sooti	Public support percentage from 2018 Sch			· · · · · · · ·	· · · · · ·	1 10	82.0 %
-	on D. Computation of Investment Inc Investment income percentage for 2019 (I			v line 12 colum	on (fl)	17	12.4 %
17 18	Investment income percentage for 2019 (investment income percentage from 2018			-		18	12.4 %
19a	331/3% support tests—2019. If the organi						
.90	17 is not more than 331/3%, check this box a						
b	331/29% support tests—2018. If the organization 18 is not more than 331/29%, check this b	ation did not ch	eck a box on I	ine 14 or line 19	9a, and line 16	is more than 33	31/3%, and
20	Private foundation. If the organization did		_				

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.)
Part III, Lin	e 12: Includes gross sales of inventory, less returns and allowances.
·	

SCHEDULE D (Form 990)

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.

2019

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury

▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Employer identification number Name of the organization The Tau Beta Pi Association, Incorporated 62-0479545 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate value of contributions to (during year) . Aggregate value of grants from (during year) . . . 3 Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No **Conservation Easements.** Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) ☐ Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

Assets included in Form 990, Part X .

Part	Organizations Maintaining Office (Inc.)	Collections of A	Art, Historical 1	reasures	, or Ot	<u>her Similar A</u>	sse	ts (cont	inu	ed)
3	Using the organization's acquisition, accollection items (check all that apply):	ccession, and oth	ner records, chec	k any of th	e follow	ing that make	sign	ificant u	se c	of its
а	☐ Public exhibition		d 🗌 Loan	or exchang	je progr	am				
b	☐ Scholarly research		e 🗌 Other	•						
С	☐ Preservation for future generations									
4	Provide a description of the organization XIII.	on's collections a	nd explain how t	hey further	the org	anization's exe	mpt	purpose	in	Part
5	During the year, did the organization sassets to be sold to raise funds rather t						lar	☐ Yes		No
Part										
	Complete if the organization a 990, Part X, line 21.	answered "Yes"	on Form 990, I	Part IV, lin	e 9, or	reported an a	moı	ınt on F	orn	٦
1a	Is the organization an agent, trustee, included on Form 990, Part X?						ot	☐ Yes		No
b	If "Yes," explain the arrangement in Par	rt XIII and comple	te the following to	able:			A			
					-		Amo	unt		
C	Beginning balance				10					
d	Additions during the year				1d					
е	Distributions during the year				1e					
f	Ending balance				1f				_	 -
2 a	Did the organization include an amount								닏	No
Ь	If "Yes," explain the arrangement in Par	t XIII. Check here	if the explanatio	n has been	provide	ed on Part XIII	•	• • •	<u>Ц</u>	
Pari										
	Complete if the organization a						·			
	_	(a) Current year	(b) Pnor year	(c) Two yea	rs back	(d) Three years ba	ck	(e) Four ye	ars b	ack
1a	Beginning of year balance	27,706,278	28,499,059	26,	175,719	22,171,9	_			,294
b	Contributions	1,797,764	1,132,116	1,	117,699	1,547,5	37	1	,068	3,885
C	Net investment earnings, gains, and				i					
	losses	1,941,352	(103,688)	2,	759,750	4,054,8	02	(295	135)
d	Grants or scholarships	(775,345)	(858,093)		89,561)	(729,4	52)		618,	,297)
е	Other expenditures for facilities and				ľ					
	programs	(736,748)	(946,113)		47,089)	(854,1	72)		760	,672)
f	Administrative expenses	(17,196)	(17,003)		(17,459)	(14,9	54)		(13,	,117)
g	End of year balance	29,916,105	27,706,278		499,059	26,175,7	19	22	,171	,958
2	Provide the estimated percentage of the	e current year end	d balance (line 1g	j, column (a	i)) held a	as:				
а	Board designated or quasi-endowment	▶ 51.8	!%							
b		<u>.8</u> %								
C	Term endowment ► 6.4%									
	The percentages on lines 2a, 2b, and 2d	c should equal 10	0%.							
3a	Are there endowment funds not in the	possession of the	e organization tha	at are held	and adı	ministered for t	he			
	organization by:							\Y(es	No
	(i) Unrelated organizations							3a(i) v	4	
	(ii) Related organizations							3a(ii)		✓
b	If "Yes" on line 3a(ii), are the related org		•					3b		
4	Describe in Part XIII the intended uses	of the organization	n's endowment f	unds.						
Part							_			_
	Complete if the organization a	answered "Yes"	on Form 990, F	Part IV, line	e 11a. S	See Form 990	, Pa	ırt X, lin	<u>e 1(</u>	<u>).</u>
	Description of property	(a) Cost or oth (investme		or other basis other)		Accumulated epreciation		(d) Book v	alue	
1a	Land									
b	Buildings									
С	Leasehold improvements									
d	Equipment			122,571		84,230			38	3,341
е	Other									
Γotal.	Add lines 1a through 1e. (Column (d) mu	ıst equal Form 99	0, Part X, column	(B), line 10	Oc.)	▶			38	3,341

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" or	n Form 990. Part IV. line	e 11b. See Form	990. Part X. line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Meth	hod of valuation: -of-year market value
(1) Financia	derivatives			
• •	neld equity interests			
(3) Other				
(A)				
(F)			<u> </u>	
(G) (H)				
Total, (Colu	mn (b) must equal Form 990, Part X, col. (B) line 12.)	>		
Part VIII	Investments – Program Related. Complete if the organization answered "Yes" or		e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Meth	nod of valuation. of-year market value
(1)				
(2)				
(3)				
(4)			 	
(5)				
(6)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 11d. See Form	990, Part X, line 15.
	(a) Description			(b) Book value
(1)				
(2)		<u></u>		
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
	mn (b) must equal Form 990, Part X, col. (B) line 15.)			
Part X	Other Liabilities.		<u></u>	
	Complete if the organization answered "Yes" or line 25.	n Form 990, Part IV, line	e 11e or 11f. See	Form 990, Part X,
1.	(a) Description of liability			(b) Book value
(1) Federal in	ncome taxes			
(2) Lifetime	Subscriptions to The Bent Publication			1,053,42
(3)				
(4)				
(5)				
(6)				
_(7)				
(8)				<u> </u>
(9)	mn (b) must equal Form 990, Part X, col. (B) line 25.)			1,053,425
	r uncertain tax positions. In Part XIII, provide the text of the			
organization'	s liability for uncertain tax positions under FASB ASC 740.	Check here if the text of the	footnote has been p	provided in Part XIII .

Part	Reconciliation of Revenue per Audited Financial Statem Complete if the organization answered "Yes" on Form 990,			Return.	
1	Total revenue, gains, and other support per audited financial statements			1	5,585,812
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			- * 	3,363,012
a	Net unrealized gains (losses) on investments	2a	670,306		
ь	Donated services and use of facilities		37,079		
c	Recoveries of prior year grants		37,075		
d	Other (Describe in Part XIII.)		120,748		
e	Add lines 2a through 2d			2e	828,133
3	Subtract line 2e from line 1			3	4,757,679
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	i i			4,131,013
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b	L14		4c	0
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	4,757,679
Part					
, art	Complete if the organization answered "Yes" on Form 990,				
1	Total expenses and losses per audited financial statements			1	3,249,702
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	· · ·		· -	3,243,702
a	Donated services and use of facilities	2a	n		
b	Prior year adjustments		0		
C	Other losses	2c	0		
d	Other (Describe in Part XIII.)		120,756	1	
e	Add lines 2a through 2d				120,756
3	Subtract line 2e from line 1			3	3,128,946
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	i i			3,120,340
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII.)				
C	Add lines 4a and 4b			4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin			5	3,128,946
	Supplemental Information.	, .			3,120,040
2; Part Part V, studen	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part Line 4: Endowment funds are used for undergraduate scholarships and gradus, quarterly magazine publication, and student programs such as MindSET, (comment, and Engineering Futures.	to provid uate fellov Greater Int	le any additional info vships, annual Conv terest in Governmen	formation. rention atte	ndance by
	Line 2d: Cost of goods sold (\$138,531) during tax year 2019; trustee fees (\$1				
	ween audit and prepared financial statements.				
Part XII	Line 2d: Cost of goods sold (\$138,531) during tax year 2019; trustee fees (\$1	17,774) rep	oorted as negative re	evenue and	not an expense.
		-			

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

▶ Attach to Form 990.

2019

Employer identification number

▶ Go to www.irs.gov/Form990 for the latest Information.

Open to Public Inspection

OMB No 1545-0047

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Engineering scholarships ° E (h) Purpose of grant or assistance 62-0479545 ✓ Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and noncash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. ¥ (f) Method of valuation (book, FMV, appraisal, other) Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ON/A (e) Amount of noncash assistance Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 6,450 (d) Amount of cash grant Enter total number of other organizations listed in the line 1 table (c) IRC section (if applicable) the selection criteria used to award the grants or assistance? General Information on Grants and Assistance 501(c)(3) 25-1494402 (b) EIN The Tau Beta Pi Association, Incorporated SAE Foundation (9) 1 (a) Name and address of organization or government Warrendale, PA Part II Part I € ପ ପ (12) Ε 9 **©** <u></u>

Schedule I (Form 990) (2019)

Cat No 50055P

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

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Gradua	1 Graduate Fellowships	30	\$10,000		0 N/A	N/A
2 Underg	2 Undergraduate Scholarships	282	\$1,000/\$2,000/\$3,000	0	ON/A	N/A
3 Chapte	3 Chapter Scholarships	14	\$500		0 N/A	N/A
4 Laureate Awards	ite Awards	2	\$2,500	0	0 N/A	N/A
5 Alumn	5 Alumnus Awards	2	\$1,000	0	0N/A	N/A
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information	required in Part I, lin	e 2; Part III, columr	ι (b); and any other addit	ional information.

Part 1, Line 2: Grant funds are given to recipients who are members of Tau Beta Pi. Recipients are chosen by committees or boards named by the Executive Council (Board of Directors). Monetary grants are issued directly to members, chapters, or schools in the United States. Certain grants require annual reports by recipients, and IRS forms are filed for recipients whom receive grants where the funds are considered income.

Schedule I (Form 990) (2019)

SCHEDULE O (Form 990 or 990-EZ)

Name of the organization

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.

2019

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Solution Service Service Solution Servi

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Employer identification number

The Tau Beta Pi Association, Incorporated 62-0479545 Part III, Line 4d: Members elected and initated by college chapters received material to denote their lifetime affiliation with Tau Beta Pi. Various national awards were presented to selected members and chapter for outstanding service and achievements. (See Schedule I) Part VI, Section A, Lines 6, 7a, 7b: The Association has members. Delegates to the Convention elect three members of the governing body (Executive Council) each year for three-year terms. The Board has nine voting members, and its decisions are subject to review by the Convention. Part VI, Section B, Line 11b: The 990 is prepared by the Director of Finance and Operations and reviewed and approved by the Executive Director. The Executive Council (governing body) received a copy and is reviwed by the Audit Committee. Part VI, Section B, Line 12c: The signed disclosures are maintained by the Executive Council in the office of the Executive Director. Each individual subject to the conflict of interest policy must update their record annually. Any conflicts of interest are reviewed by the Executive Part VI, Section 15a, 15b: The salary program is reviewed periodically by a national compensation consultant who compares Tau Beta PI salaries with data reported by similar organizations. Salaries are indexed periodically by the CPI-W. Recommendations are made annually by the Executive Director for all other employees. The Executive Council approves the compensation for the Executive Director and the budget for compensation of other employees. Part VI, Section C, Line 17 A copy of the 990 is required in AK, CA, CO, CT, GA, HI, IL, IN, KY, MA, MI, NH, NJ, NM, NC, PA, SC, TN, WA, WI Part VI, Section C, Line 19: The Constitution & Bylaws, financial statements, and 990 are published at www.tbp.org. The conflict of interest policy is published internally on our Association Officials website. Financial statements and the Executive Director's annual report are published each Fall in our quarterly magazine, The Bent. Part XII, Line 2c: The Association has an Audit Committee. Our oversight and selection process has not changed this year.